Research Report
May 2016

I. CARE Programme

The Chinese University of Hong Kong

&

City-Youth Empowerment Project

Department of Applied Social Science

City University of Hong Kong

In Collaboration with

Christian Concern for The Homeless Association

Society for Community Organization

St. James' Settlement

The Salvation Army

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1. Overview

1.1. Introduction

"Homeless Outreach Population Estimation Hong Kong 2015" (hereafter: H.O.P.E. HK 2015) was a joint project between five local universities and four social welfare institutions, namely: City University of Hong Kong, Lingnan University, The Chinese University of Hong Kong, The Hong Kong Polytechnic University, The University of Hong Kong, Christian Concern for The Homeless Association, The Salvation Army, Society for Community Organization and St. James' Settlement.

1.2. Background

In 2013, City University of Hong Kong launched the "H.O.P.E. HK 2013" with three social welfare institutions. Inspired by the New York City Homeless Street Count (H.O.P.E. New York), H.O.P.E. HK 2013 conducted a similar overnight city-wide homeless street count. It was the first time in Hong Kong that civil society initiated such a study. The university and community partners hoped that with the updated and accurate statistics, they could give the society a clearer picture and help advocate better government policies. More than 300 volunteers participated in H.O.P.E. HK 2013 and estimated the homeless population of 1,414 individuals in Hong Kong.

1.3. Why We Initiated H.O.P.E. HK 2015?

Two years have passed, yet no significant improvement in housing supply and poverty alleviation has been observed, the problem of homelessness has become indeed more grim. Thus, H.O.P.E. HK 2015 aims to collect the accurate statistics of homeless population and informs the government of its urgency. The social phenomenon of homelessness should not be ignored and structural change in policy-making is earnestly needed. H.O.P.E. HK 2015 aims to help advocate for appropriate and effective resources with this research, to implement concrete solutions and help the homeless people get out of such destitution in the long-run.

Youth volunteers played a curial role in H.O.P.E. HK 2015. Through collaboration of universities, we hope that student volunteers would become concerned about the homelessness issue, to have a full picture of living environment in the society, to be

involved and understand causes of homelessness. Through personal interviews, learning, feeling and reflection, students would enhance their civic engagement and demonstrate the sprite of service learning.

1.4.   **Overview of H.O.P.E. HK 2015**

The research objectives, scale, locations, routes, human resources and logistics involved were discussed between the research bodies and community organizations, before the actual survey in October 2015. The planning started in March 2015, several workshops were hosted in October 2015, for the volunteers to get familiar with the issues of homelessness, learn about attitudes and skills required in conducting the survey. The overnight street-count was conducted on 29 October 2015, participated by more than 300 student-volunteers from six universities (40 of them served the role of team leaders). They were allocated to different districts of Hong Kong as different teams. Each team conducted questionnaire survey with homeless individuals and headcount in its designated area. Each team was led by a leader, who played an important role in facilitation and communication.

2. Research Method

2.1. Sampling Method

Identifying street locations and designing survey routes

The survey routes were mainly planned by the community organizations, as their social workers are familiar with the most populated locations of homeless individuals and thus design the survey routes accordingly. Each organization covered certain districts, including several routes. A team of two to three volunteers and one team leader (or more) was allocated to each route. During the survey, volunteers also conducted street counts outside the designated locations.

Assistance from Community Organizations' Social Workers

Before this survey, community organizations and universities co-organized two training sessions on 4 and 16 October 2015. At these sessions, volunteers learned about the causes of homelessness and the background of H.O.P.E. HK 2015. Social workers of the community organizations taught them the technique to initiate conversations with homeless individuals and introduced the routes to them, to give them the basic knowledge of homeless individuals they would encounter and locations for street counts. It was also a chance for volunteers to get to know the social workers in charge, for future communication.

About one week before the survey, social workers took volunteers out for a night-visit, to get familiar with the rundown of the survey. Social workers accompanied volunteers to visit and talk with homeless individuals whom they knew, which helped build the relationship and prepared the homeless individuals that a survey would follow.

During the street count, each team of volunteers was assisted by at least one social worker from each community organization. Social workers helped handle problems which might arise during the survey, to ensure the safety of volunteers and to guide the flow of interviews.

Estimation of Empty Bed Spaces

On the night of survey, volunteers would record the locations and the number of empty bed spaces after three visits without meeting their occupants. As social workers know most of the homeless individuals who did not show up that night, they could confirm most of the recorded empty bed spaces were recently occupied by homeless individuals.

Verification Procedure

Each team was led by one or two leaders. Volunteers were required to fill their contact information in the questionnaires, so that they and their leaders could be contacted for further verification, in case the statisticians would have any questions regarding the questionnaires or if they would need any clarification from the street count. Such a verification procedure aims to prevent double counting of empty bed spaces.

Temporary Shelters / Urban Hostels Count

After the survey, H.O.P.E. HK 2015 also called or emailed to enquire the numbers of eligible occupants at all temporary shelters and urban hostels on the night of 29 October 2015. Eligible occupants at these shelters are individuals who have no home or face the risk of becoming homeless.

2.2. Research Limitations

Limitations of Time and Human Resources

The survey took place from evening to late night (7 p.m. to 3 a.m.). To cover 240 locations all over Hong Kong in one night, there were simply not enough volunteers. They arrived various locations after the homeless people went to rest, the time limitation and lack of human resources led a relatively high refusal rate.

Failed to Cover All Locations in Hong Kong

Due to the limitations of time and human resources, together with the concerns of safety and distance, volunteers could not visit all locations within the timeframe and not all streets within the designated districts were covered. Furthermore, the routes and locations were designed by the community organizations and they might not be able to

cover the whole homeless population, especially those who newly became homeless. Yet, each organization conducted comprehensive search in the districts it was responsible for, to avoid the above-mentioned loopholes.

The Chance of Double Counting

The interviews indicated that some homeless individuals might sleep in various street locations and this could lead to double counting. However, as most volunteers conducted the head count or interviews at around the same time, the chance of double counting was low.

Some Homeless Individuals Were Unable to Express Themselves Clearly

Some homeless individuals were sleeping, under the influence of drugs or alcohol, suffering from mental health problems and therefore could not express themselves clearly when they were interviewed. Thus, volunteers would record the mental status of the respondents when filling in the questionnaires. If many questions remained unanswered in a questionnaire, it would be marked as invalid.

24-Hour Restaurants and Airport

For interviews conducted in the 24-hour restaurants, volunteers needed to first talk to respondents to verify if they were homeless. Yet, some restaurant managers prohibited volunteers to conduct interviews in their properties. As a result, volunteers could only conduct an observational count of homeless people in the restaurants. Similarly, passengers, airport staff and many others were in the airport, volunteers could not possibly interview each person to identify if they were homeless.

The Issue of Empty Bed Spaces

It was difficult to identify if an empty bed space belonged to a certain homeless person or to a homeless person who was counted in the neighbourhood and therefore, double counting might occur. Thus, the risk of double counting would be pointed out in the results.

2.3. **Weather on the Day of Survey**

According to Hong Kong Observatory, October 2015 was warmer than usual, with an average monthly temperature of 26 degree Celsius. The weather continued to be clear between 27 and 30 October and on the night of survey, no temporary heat or cold shelters were open for homeless people to stay.

For volunteers' safety, they were reminded to bring umbrellas, jackets and drinks to avoid dehydration. The detailed weather conditions in October 2015 could be found at:

http://www.hko.gov.hk/wxinfo/pastwx/mws2015/mws201510c_uc.htm

3. Factor Analysis and Discussion

3.1. Homeless Population in Hong Kong

3.1.1. Homeless Population in Hong Kong and Homeless Nature

H.O.P.E. HK 2015 identified 1,614 homeless individuals in Hong Kong, between the night of 29 October and the dawn of 30 October 2015. 780 individuals, almost half of the total homeless population (48.3%) lived on streets, in parks, under flyovers and other public spaces. Another 256, about one sixth of the homeless population (15.9%) slept in 24-hour restaurants. The rest, 578 homeless individuals, about one third of the homeless population (35.8%) spent that night at temporary shelters and urban hostels. Of all 780 street sleepers, 689 of them were counted by volunteers on the night of survey and 91 empty bed spaces were identified. As social workers of the community organizations confirmed that these empty bed spaces had been used by homeless individuals within one month prior to the survey, they were included in the total homeless population.

Figure 1: Number of Homeless Population and Nature of Homelessness
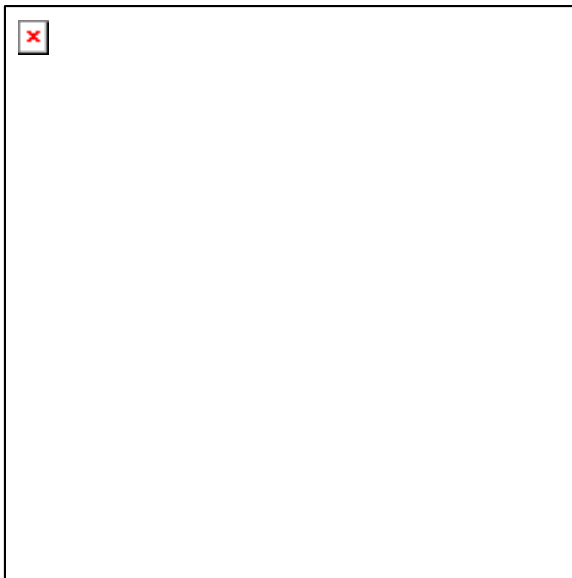
 # Street head count through questionnaires and interviews

* Temporary shelters / urban hostel count on the night of survey, acquired through telephone (and email too?) enquires

H.O.P.E. HK 2015 recorded 780 street sleepers, a decline of 17.2% when compared with the record of H.O.P.E. HK 2013 (942 street sleepers). Homeless individuals stayed in 24-hour restaurants increased from 57 to 256, a dramatic increase of 3.5 times. The number of individuals staying at temporary shelters and urban hostels has increased from 415 to 578, a growth of 39.3%. The total number of homeless individuals increased from 1,414 to 1,614, a growth of 14.1% between 2013 and 2015.

Statistics indicated that some street sleepers moved to live in 24-hour restaurants, temporary shelters and urban hostels. It could be explained by, first, living conditions in those places attracted street sleepers for their more favourable living conditions; second, H.O.P.E. HK 2015 put more focus on interviews at 24-hour restaurants and therefore more homeless people were identified there.

Overall, there is a significant growth of homeless population between 2013 and 2015 and there is a noteworthy trend that homeless people are moving from street locations to 24-hour restaurants, temporary shelters and urban hostels.

Headcount	2013	2015	Growth / Decline (%)
Street Locations	942	780	-17.2%
24-Hour Restaurants	57	256	349.1%
Temporary Shelters / Urban Hostels	415	578	39.3%
Total	1414	1614	14.1%

Table 1: Comparison of Homeless Population between 2013 and 2015 in Hong Kong

Figure 2: Comparison of Human Population between 2013 and 2015 in Hong Kong
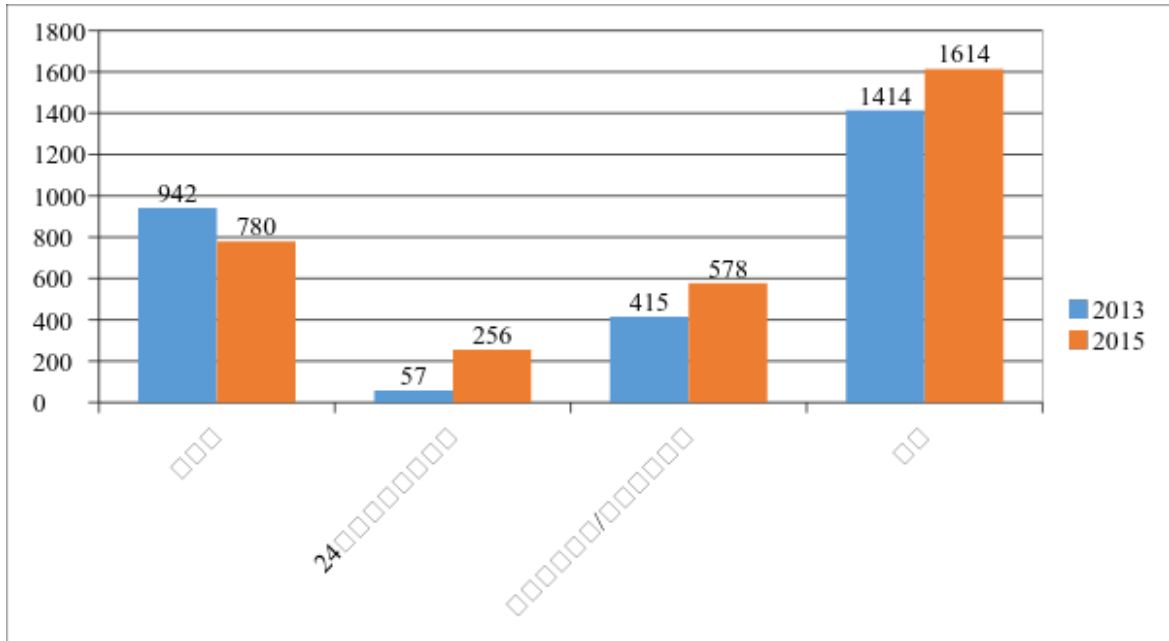
3.1.2. Number of Respondents & Completion Rate of Questionnaires

On the night of survey, volunteers talked to 689 street sleepers and 256 homeless people in 24-hour restaurants, a total of 945 homeless individuals. 641 questionnaires were collected, with a response rate of 67.8%. Some volunteers conducted interviews in various districts and spent longer time in travelling, thus, the survey went on till 3 a.m. Most of homeless people went to sleep by midnight and refused to be interviewed after then. Among the collected questionnaires, 372 were completed and valid for analysis. As shown in Table 3, 219 questionnaires were incomplete due to respondents' refusal to answer the whole questionnaires or refused to answer each question (81.4%), 21 respondents could not express themselves clearly (7.8%), and 29 respondents spoke dialects which the interviewers could not understand (10.8%). The completion rate is 58%, similar to other previous studies.

Table 2: Response Rate & Completion Rate of the Questionnaire Survey

A1. Homeless People Reached	945 (689 at street locations + 256 at 24-hour restaurants)
A2. Questionnaires Collected	641
A3. Response Rate (A2/A1)	67.8%
A4. Valid Questionnaires	372
A4. Completion Rate (A4/A2)	58.0%

Table 3: Reasons for Incomplete Questionnaires

Refusal to answer / answers incomplete for analysis	219 (81.4%)
Inability to express themselves verbally	21 (7.8%)
Dialects which interviewers do not understand	29 (10.8%)
Total	269 (100.0%)

3.1.3. Geographical Distribution of Homeless Population

As shown in Table 4, 194 homeless people lived in Kowloon West, making it the most populated place of homeless people in Hong Kong (52.2% of respondents), followed by Hong Kong Island and outlying islands (92 individuals, 24.7%), New Territories West (30 individuals, 8.1%), Kowloon East (27 individuals, 7.3%) and New Territories East (19, 5.1%). In short, half of the homeless people lived in Kowloon West and one quarter lived on Hong Kong Island and outlying islands. Other homeless people lived sparsely in other districts.

Apart from having the highest concentration of homeless people, some sub-districts in Kowloon West were particularly populated by them. As shown in Table 4, 130 homeless people lived in Sham Shui Po, amounting to 34.9% of the homeless respondents, 64 of them lived in Yau Tsim Mong, amounting to 17.5% of homeless respondents. These two sub-districts had most of the homeless population and were most densely populated by

them in Hong Kong.

On Hong Kong Island, Central and Western District had a relatively higher number of homeless people, (26 respondents, 7%), followed by North Point (24 respondents, 6.5%), Wan Chai (14 respondents, 3.8%). Fewer than 10 homeless people (3%) lived in each of other districts on Hong Kong Island.

Table 4: Geographical Distribution of Homeless Population (Respondents)

Districts	Respondents	Percentage
Sham Shui Po	130	34.9%
Tsim Sha Tsui	21	5.6%
Jordan	8	2.2%
Yau Ma Tei	20	5.4%
Mong Kok	9	2.4%
Tai Kok Tsui	6	1.6%
Sub-total: Yau Tsim Mong	64	17.5%
Sub-total: Kowloon West	194	52.2%
Wan Chai	14	3.8%
Causeway Bay	8	2.2%
North Point	24	6.5%
Central & Western	26	7.0%
Shau Kei Wan	6	1.6%
Chai Wan	2	0.5%
Southern	3	0.8%
Other districts	9	2.4%
Sub-total: Hong Kong Island	92	24.7%

There were 30 homeless people in New Territories West (8.1%), 11 of them, slightly more than other district, were in Tsuen Wan (3%). 27 homeless people lived in Kowloon East (7.3%), 17 lived in Wong Tai Sin, making it the most populated district of homeless individuals in Kowloon East (4.6%). Only 19 homeless individuals were found in New Territories East (5.1%) and 10 in the middle of Kowloon (2.7%). The statistics indicate that homeless individuals lived mostly in sub-districts such as Sham Shui Po, Yau Tsim

Mong, Central and Western District and North Point. 76.9% of them lived in Kowloon West and on Hong Kong Island. Homeless individuals tended to live in older urban area and their geographical distribution remained similar as in previous studies.

Table 4: Geographical Distribution of Homeless Population (Respondents) (Continued)

Districts	Respondents	Percentage
Tsuen Wan	11	3.0%
Yuen Long	8	2.2%
Tuen Mun	6	1.6%
Other Districts	5	1.3%
Sub-total: New Territories West	30	8.1%
Kwun Tong	9	2.4%
Wong Tai Sin	17	4.6%
Ngau Tau Kok	1	0.3%
Sub-total: Kowloon East	27	7.3%
Ma On Shan	3	0.8%
Sha Tin	5	1.3%
North District	11	3.0%
Sub-total: New Territories East	19	5.1%
To Kwa Wan	9	2.4%
Kowloon City	1	0.3%
Sub-total: Middle Kowloon	10	2.7%
Total	372	100.0%

Table 5: Geographical Distribution of Homeless Population (Empty Bed Spaces)

District	Respondents	Percentage
Wan Chai	14	15.1%
East District	1	1.1%

Yau Tsim Mong	26	28.0%
Sham Shui Po	34	36.6%
Kwun Tong	5	5.4%
Wong Tai Sin	2	2.2%
Tsuen Wan	3	3.2%
Sha Tin	1	1.1%
Tuen Mun	3	3.2%
Yuen Long	2	2.2%
Total	91	100.0%

Table 5 shows the geographical distribution of empty bed spaces on the night of survey. 28% and 15.1% were found in Yau Tsim Mong District and Wan Chai District respectively, higher than the percentage of homeless individuals physically identified. Traditionally, these two districts were populated by homeless people. The senior street sleepers are likely to have more personal belongings and thus, this might explain why in these two districts, more empty bed spaces of street sleepers were found.

4. Major Research Findings

4.1. Personal Characteristics of Homeless Population

Table 6: Distribution of Respondents by Gender

		Respondents	Percentage	Valid Percent	Cumulative Percent
Valid	Male	332	89.2	92.5	92.5
	Female	27	7.3	7.5	100.0
	Total	359	96.5	100.0	
Missing Value	99999999.00	13	3.5		
Total		372	100.0		

4.1.1. Gender

4.1.2. Age

The average age of the respondents was 54.3 years old, the median age was 55 years old, with the youngest being 20 and the oldest being 81 years old. Only 19.6% of respondents were under 45 yeas old and 59.4% belonged to the age groups 45 to 64. Another 21% of the respondents were 65 years old or above.

Table 7: Distribution of Respondents by Age

Age Groups	Number	Percentage
Under 25	2	0.6%
25-34	18	5.2%
35-44	48	13.8%
45-54	92	26.5%
55-64	114	32.9%
65 or above	73	21.0%

Total	347	100.0%

Table 7: Distribution of Respondents by Age in Percentage

Age group	Percentage
65歲及以上	21.0%
55-64	32.9
45-54	26.5%
35-44	13.8%
25-44	5.2%
25歲以下	0.6%
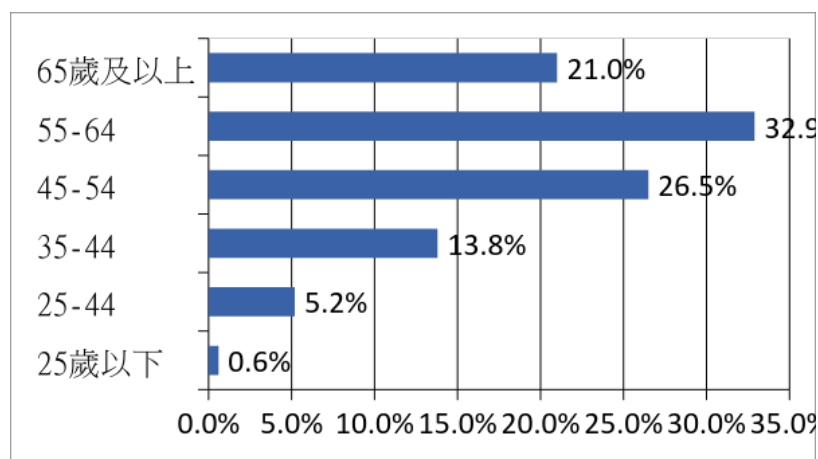
The survey of H.O.P.E. HK 2013 indicated that the average age of the sample population was 54.9 years old, the youngest respondent was 21 years old and the oldest was 90 years old. The majority, or 2/3 of respondents were in the age groups of 51 to 60 and 61 or above.

Both surveys from 2013 and 2015 showed that homeless population was mainly composed of middle and older age groups (45-54 and 55-64).

Table 8: H.O.P.E. HK 2013's Distribution of Respondents by Age

Age Groups	Number	Percentage
21-30	10	3.1%
31-40	32	9.91%
41-50	66	20.43%
51-60	108	33.44%
61 or above	107	33.13%
Total	323	100%

4.1.3. **Educational Attainment**

46.7% of the respondents were with no or only primary school level education, 29.4% with a high school level and 19.8% having a matriculated level or above.

Figure 4: Distribution of Respondents by Educational Attainment
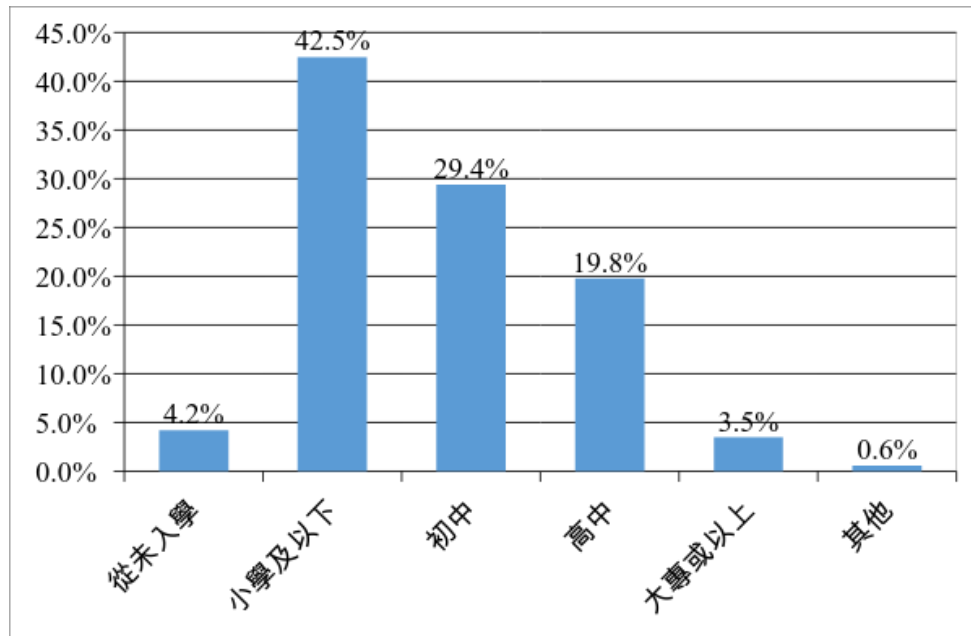
Table 9: Distribution of Respondents by Educational Attainment

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	No formal Education	13	3.5	4.2	4.2
	Primary School	133	35.8	42.5	46.6
	High School	92	24.7	29.4	76.0
	Matriculation	62	16.7	19.8	95.8
	Higher Education	11	3.0	3.5	99.4
	Others	2	.5	.6	100.0
	Total	313	84.1	100.0	
Missing Value	99999999.00	59	15.9		

Total		372	100.0	

4.1.4. **Martial Status**

37.4% of the respondents were single, 32.5% were separated or divorced and 16.1% were married. Compared with the total population of Hong Kong, homeless population has high rates of divorce, separation and being single. It also illustrates their lack of family support.

Figure 5; Distribution of Respondents by Martial Status
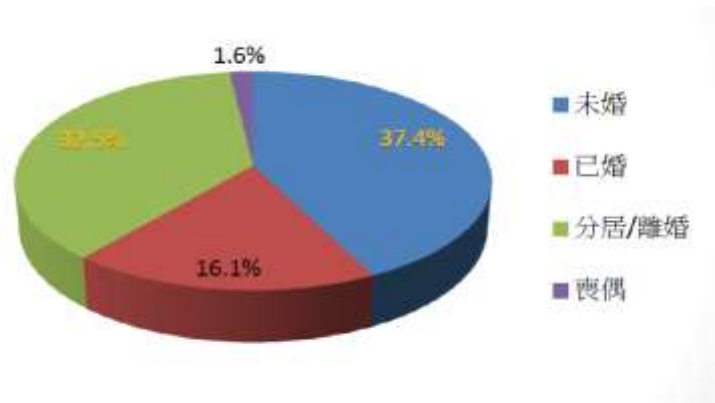
Table 10: Distribution of Respondents by Martial Status

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Single	139	37.4	42.6	42.6
	Married	60	16.1	18.4	61.0
	Separated / Divorced	121	32.5	37.1	98.2
	Widowed	6	1.6	1.8	100.0
	Total	326	87.6	100.0	
Missing Value	99999999.00	46	12.4		
Total		372	100.0		

4.1.5. **Ethnicity**

The majority of homeless individuals were Chinese (89.9%) and 36 non-Chinese homeless people were identified (10.1%). More than half of the non-Chinese homeless people were Vietnamese (55.6%), followed by Nepalese (18.5%) and Indians (11.1%).

Figure 6a: Distribution of Respondents by Ethnicity (Chinese or others)
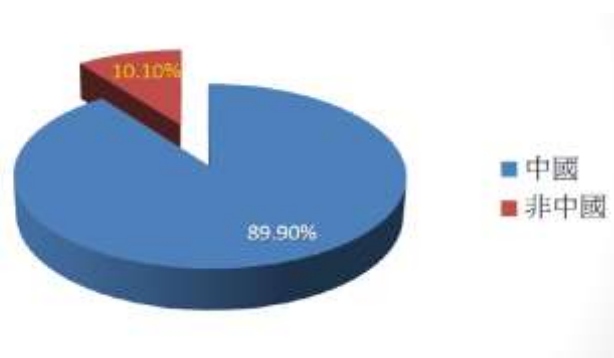
Figure 6B: Distribution of Non-Chinese Respondents by Ethnicity
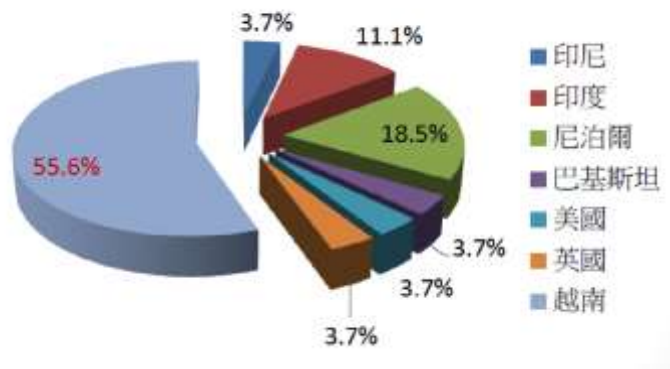
Table 11: Distribution of Respondents by Ethnicity (Chinese or others)

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Chinese	320	86.0	89.9	89.9
	Non-Chinese	36	9.7	10.1	100.0

		Number	Percentage	Valid Percent	Cumulative Percent
	Total	356	95.7	100.0	
Missing Value	99999999.00	16	4.3		
Total		372	100.0		

Table 12: Distribution of Non-Chinese Respondents by Ethnicity

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Indonesian	1	.3	3.7	3.7
	Indian	3	.8	11.1	14.8
	Nepalese	5	1.3	18.5	33.3
	Pakistani	1	.3	3.7	37.0
	American	1	.3	3.7	40.7
	British	1	.3	3.7	44.4
	Vietnamese	15	4.0	55.6	100.0
	Total	27	7.3	100.0	
Missing Value	NA	320	86.0		
	99999999	25	6.7		
	Total	345	92.7		
Total		372	100.0		

Non-Chinese homeless people lived mostly in Kowloon West, including Yau Tsim Mong and Sham Shui Po. 31 of the respondents (16.7%) in this district were non-Chinese, followed by Hong Kong Island (3) and New Territories West (2).

Table 13: Contingency Table of Respondents' Ethnicity (Chinese or Others) and Geographical Distribution

			Districts					Total
			Hong Kong Island	Kowloon West	Kowloon East	New Territories East	New Territories West	
Ethnicity	Chinese	Number	87	161	27	18	27	320

		3	31	0	0	2	36
Non-Chinese	Number	3	31	0	0	2	36
Total	Number	90	192	27	18	29	356

4.2. Conditions and Characteristics of Homelessness

4.2.1. Duration of Homelessness

The median duration of homelessness was 8 years and the average time being homeless was 5.1 years. 50 respondents (13.5%) have been homeless for less than 6 months, 117 (31.5%) have lived on streets for 6 months to 5 years and the rest 205 respondents (55.2%) have been homeless for over 5 years. Among them, 182 (49%) has been homeless for over 10 years. More than half of respondents have lived on the streets for a long duration (over 5 years), almost 30% had a medium term duration of homelessness (6 months to 5 years) and less than 15% have lived on the streets recently (not longer than 6 months).

Table 14: Respondents' Duration of homelessness

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Less than 3 months	30	8.1	8.1	8.1
	3 to 6 months	20	5.4	5.4	13.4
	6 months to 1 year	20	5.4	5.4	18.8
	1 to 2 years	40	10.8	10.8	29.6
	2 to 3 years	22	5.9	5.9	35.5
	3 to 5 years	35	9.4	9.4	44.9
	5 to 10 years	23	6.2	6.2	51.1
	10 to 20 years	168	45.2	45.2	96.2
	20 years or above	14	3.8	3.8	100.0
	Total	372	100.0	100.0	

Results of similar previous studies were shown in Table 15. In 2001, Professor Wong

Hung's research team from City University of Hong Kong found that the median duration of homelessness was 10 months; in 2003, the median duration was 12 months, from a study also done by Professor Wong's team. This indicates that between 2000 and 2003, most respondents were first becoming homeless and therefore the duration was short. In H.O.P.E. HK 2013's survey, the average length and median length of homelessness were 3.9 years and 30 months respectively, with most respondents had been homeless for 1 to 3 years (25.1%) and 15% had slept on streets for 10 years or above. The new H.O.P.E. HK 2015 research notes a sharp increase in both average and median duration of homelessness, at 5.1 years and 96 months respectively. Furthermore, 48.9% of them had been homeless for 10 years or longer. Thus, homelessness remains an unresolved problem while most homeless people remained homeless for a long time.

Table 15: Changes on Duration of Homelessness, 2001-2015

	Mean Duration (year)	Median Duration (month)
2015 H.O.P.E.	5.1	96
2013 H.O.P.E	3.9	30
2003 CityU	-	12
2001 CityU	-	10

- Statistics not available

Table 16: Change on Respondents' Duration of Homelessness between 2013 and 2015
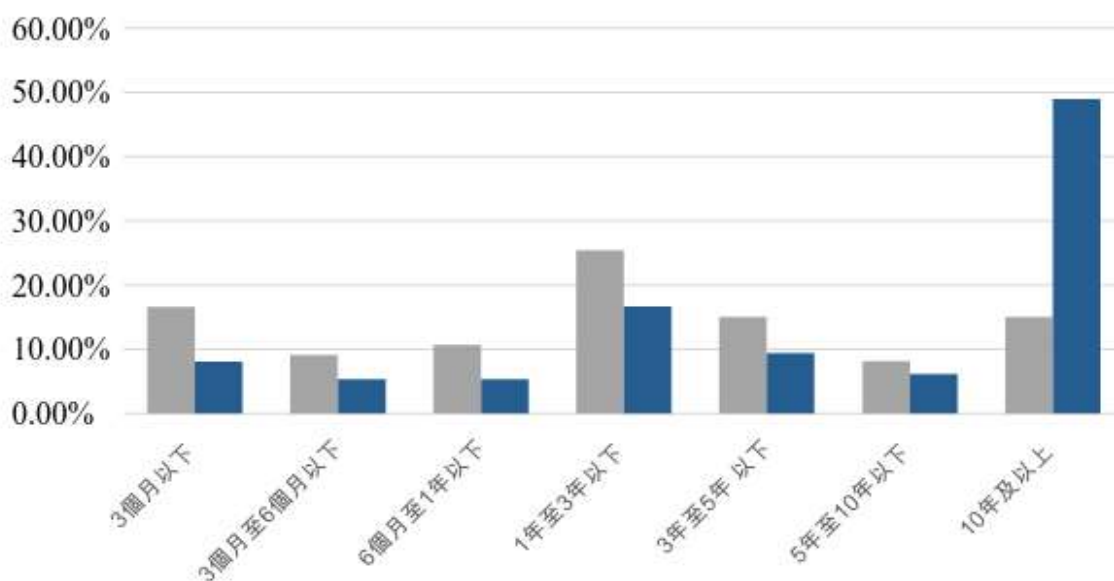
4.3.   Conditions Prior to Homelessness

4.3.1.   Housing Options Immediately Prior to Homelessness

Homeless people tended to rent low-cost housing before they became homeless. 31.3%
of them had lived in cubicle rooms / bed spaces / cage homes, 23% had lived in public
housing and 17.8% had lived in suites / subdivided units, before became homeless.

Table 17: Housing Options Immediately Prior to Homelessness

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Private housing (owned) / Home Ownership Scheme	27	7.3	7.8	7.8
	Private housing (rented: whole flat)	5	1.3	1.4	9.2
	Private housing (rented: suite / subdivided unit)	62	16.7	17.8	27.0
	Private housing (rented: cubicle room / bed space / cage home)	109	29.3	31.3	58.3
	Public housing / shelter	80	21.5	23.0	81.3
	Blockhouse / stone house /rooftop units /stilt house	9	2.4	2.6	83.9

	At workplace (e.g. restaurant / garment factory / construction site / building while working as security guard)	1	.3	.3	84.2
	Others	55	14.8	15.8	100.0
	Total	348	93.5	100.0	
Missing Value	99999999.00	24	6.5		
Total		372	100.0		

4.3.2. **Housing Conditions Immediately Prior to Homelessness**

Before becoming homeless, each interviewee had an average living space of 245 square feet and paid an average monthly rent of HKD2,068, which was 34.6% of their average income. Most respondents reflected that the rent was too high.

Table 18: Size, Rent and Rent to Income Ratio of Housing Immediately Prior to Homelessness

	The lowest value	The highest value	Median	Average
Size (square feet)	0	2100	100	245.4
Rent (HKD)	$100	$15000	$1700	$2067.8
Rent to Income Ratio	0%	100%	30.0%	34.6%

4.3.3. **Moving within two years before becoming homeless?**

1/3 of the respondents reported that they had moved within two years immediately prior to homelessness. The average frequency of moving was 2.6 times.

Table 19: Moving Within 2 Years Immediately Prior to Homelessness

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	No	104	28.0	66.2	66.2
	Yes	53	14.2	33.8	100.0
	Total	157	42.2	100.0	

Missing Value	NA	104	28.0	
	99999999.00	111	29.8	
	Total	215	57.8	
Total		372	100.0	

Table 20: Frequency of Moving Within 2 Years Immediately Prior to Homelessness

	Number
Valid	45
Missing Value	327
Average	2.6000
Median	2.0000
Standard Deviation	2.10141

4.3.4. **Causes of Homelessness**

49.6% of the respondents quoted "cannot afford the expensive rent", 23.7% said "became unemployed and could not afford my home" , 17.5% said they "had relationship problems with family or tenants", 11.3% said it was "a personal choice" , 10.4% descried "previous accommodation was too crowded / conditions too poor", 5.6% of respondents said "evicted or rejected by landlord" and another 5.6% said "previous accommodation was infested by fleas" as causes of their homelessness. Of all, "unaffordable rent" is the most significant reason leading to their homelessness.

Table 21: Causes of Homelessness

		Respondents		Observed Percentage
		Frequency	Percentage	
Causes [a]	Rent too expensive and could not find affordable housing	167	28.0%	49.6%
	To save money	29	4.9%	8.6%
	Became unemployed & had no income to pay rent	80	13.4%	23.7%
	Evicted or rejected by landlord	19	3.2%	5.6%
	Previous accommodation demolished / redeveloped and could	7	1.2%	2.1%

not find new appropriate accommodation			
Homeless after being discharged from prison / hospital / drug treatment centre	13	2.2%	3.9%
Had relationship problems with family / tenants	59	9.9%	17.5%
Family in mainland China / overseas	5	.8%	1.5%
Convenient for daily life / work / previous accommodation too far	14	2.3%	4.2%
Previous accommodation too crowded / conditions too poor	35	5.9%	10.4%
Drug / alcohol problems	12	2.0%	3.6%
Health reasons	7	1.2%	2.1%
Person choices	38	6.4%	11.3%
Gambling addiction	8	1.3%	2.4%
Previous accommodation infested by fleas	19	3.2%	5.6%
Evicted from temporary shelters	3	.5%	.9%
Other reasons	82	13.7%	24.3%
Total	597	100.0%	177.2%

a. Dichotomy group tabulated at value 1.

If the respondents' reasons for becoming homeless were "too expensive rent" or "to save money", interviewers would further ask them, "How much is the maximum rent you could afford for private housing?" A relatively low number of respondents replied this question, only 46 could name an amount while 326 could not tell how much rent they could afford. The average maximum affordable rent from those 46 respondents was HKD2,289 and median was HKD2,100, with the lower quartile value at HKD1,500 and the higher quartile value at HKD3,000.

Table 22: Maximum Affordable Rent for Private Housing

Number	Valid	46

	Missing Value	326
Mean		2289.5652
Median		2000.0000
Standard Deviation		941.29687
Percentile 25		1500.0000
50		2000.0000

4.4. Conditions of Homelessness

4.4.1. Is It Your First Time Being Homeless?

36.7% of 217 respondents became homeless for the first time, the rest 126 (63.3%) reported that they had been homeless for more than once.

Table 23: Whether Being Homeless for the First Time

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Yes	217	58.3	63.3	63.3
	No	126	33.9	36.7	100.0
	Total	343	92.2	100.0	
Missing Value	99999999.00	29	7.8		
Total		372	100.0		

Among the homeless people who had been homeless for less than 3 months, 78% were becoming homeless for the first time. The longer they had been homeless, the more likely they recurred homelessness. 66% who had been homeless for 1 to 2 years were the first-timer being homeless, while it is noteworthy that 66% who had been homeless for 10 to 20 years, were also being homeless for the first time.

Table 24: Contingency Table of Respondents being First Time Homeless and Duration of Homelessness

If it is the first		Is it your first time being homeless?	Total

time being homeless * Duration of homelessness (Interval)			Yes		No			
			Number	Within the duration (Interval)	Number	Within the duration (Interval)	Number	Within the duration (Interval)
	Duration (Interval)	Less than 3 months	21	78%	6	22%	27	100%
		3 to 6 months	15	75%	5	25%	20	100%
		6 months to 1 year	12	67%	6	33%	18	100%
		1 to 2 years	23	66%	12	34%	35	100%
		2 to 3 years	8	40%	12	60%	20	100%
		3 to 5 years	17	53%	15	47%	32	100%
		5 to 10 years	12	57%	9	43%	21	100%
		10 to 20 years	104	66%	53	34%	157	100%
		20 years or above	5	38%	8	62%	13	100%
	Total		217	63%	126	37%	343	100%

4.4.2. Cross Analysis of Respondents Being First Time Homeless and Age Groups

More younger homeless respondents were being first time homeless. Of the age groups 25 to 44 years old, almost 80% (77.8%) were homeless for the first time. Of the age group 35 to 44 years, 60% (57.4%) became newly homeless. For age groups 45 years old and above, an average of 60% of the respondents became homeless for the first time.

Table 25: Contingency Table of Respondents being First Time Homeless * Age Groups

			Age groups						
			Under 25	25-44	35-44	45-54	55-64	65 or above	Total
If it is the first	Yes	Number	1	14	27	55	65	46	208
		Within this age group	100.0%	77.8%	57.4%	61.8%	60.2%	67.6%	62.8%

time being homeless	No	Number	0	4	20	34	43	22	123
		Within this age group	.0%	22.2%	42.6%	38.2%	39.8%	32.4%	37.2%
Total		Number	1	18	47	89	108	68	331
		Within this age group	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Table 26: Frequency of Homelessness Recurrence

		Frequency of Recurring Homelessness
Number	Valid	67
	Missing Value	305
Average		4.1791
Percentile	25	2.0000
	50	2.5000
	75	4.0000

4.4.3. Have You Found "Housing" before Recurring Homelessness?

Table 27: Whether Recurring Homeless Respondents Found "Housing"

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Yes	76	20.4	58.0	58.0
	No	55	14.8	42.0	100.0
	Total	131	35.2	100.0	
Missing Value	NA	198	53.2		
	99999999.00	43	11.6		
	Total	241	64.8		
Total		372	100.0		

76 of 131 recurring homeless respondents (58%) had found "housing" between their different periods of homelessness (please see Table 27).

4.4.4. Types of Housing Found

Respondents were allowed to give multiple answers, thus 86 answers were received from 76 respondents. 59.3% of the answers or 67.1% of the respondents found housing in "private flat / cubicle room / bed space / cage home"; 16.3% of the answers or almost 1/5 of the respondents answered "public housing / hostel for elderly"; 8.1% of the answers or 9.2% of respondents moved from streets to "temporary shelter / urban home for single persons". As shown in Table 28, most of the homeless individuals who found "private housing / cubicle room / bed space / cage home" in between their different periods of homelessness.

Table 28: Housing Options Found (Multiple Answers are Accepted)

		Answers		Observed Percentage
		Number	Percentage	
Housing Options [a]	Private housing / cubicle room / bed space / cage home	51	59.3%	67.1%
	Public housing / hostel for elderly (shared by two to three people)	14	16.3%	18.4%
	Elderly home	2	2.3%	2.6%
	Temporary shelter	1	1.2%	1.3%
	Urban home for single persons	7	8.1%	9.2%
	Hostel provided by charity / church	1	1.2%	1.3%
	Waiting for	1	1.2%	1.3%
	Others	9	10.5%	11.8%
Total		86	100.0%	113.2%

4.4.5. **Reasons for Homelessness Recurrence**

As multiple answers were accepted, 90 replies on reasons for homelessness recurrence from 76 respondents, who had found housing in between different periods of homelessness. 24.4% of the replies or 28.2% of the respondents said they had lost the housing due to "expensive rent / not enough money to pay rent / unemployment"; 23.3% of replies or 26.9% of respondents quoted reasons such as "had relationship problems

with tenants / neighbours"; 18.9% of replies or 21.8% of respondents reported that "living environment was poor / too hot / too crowded" as the reasons for homelessness recurrence. Thus, the major causes of recurrence were high rent, relationship problems with tenants and poor living environment.

Table 29: Reasons for Homelessness Recurrence (Multiple Answers Accepted)

| | | Respondents | | Observed Percentage |
		Number	Percentage	
Reasons for Homelessness Recurrence [a]	Poor living environment / too hot / too crowded	17	18.9%	21.8%
	Relationship problems with tenants / neighbours	21	23.3%	26.9%
	Long distance from previous homeless location	1	1.1%	1.3%
	Too far from workplace	1	1.1%	1.3%
	Too many restrictions in / inconvenient in / not used to the housing	9	10.0%	11.5%
	Other reasons	13	14.4%	16.7%
	Shelter became due	4	4.4%	5.1%
	Expensive rent / not enough money to pay rent / unemployment	22	24.4%	28.2%
	Housing infested by fleas	2	2.2%	2.6%
Total		90	100.0%	115.4%

4.4.6. **Reasons for Remaining Homeless**

621 replies were received while respondents were allowed to give more than one answer. 26.6% of the replies and 52.4% of the respondents quoted "rent of private housing costs too much / living standard diminishes after paying rent"; another 15.1% of replies or 29.8% of respondents reflected "unstable / no jobs"; another 7.9% of replies or 15.6% of respondents had "too little income"; 10.8% replies or 21.3% of respondents said "too long waiting time for public housing / public housing too far away"; 6.3% of replies or 12.4% of respondents expressed "the rent subsidy of the Comprehensive Social Security

Assistance (hereafter: CSSA) is too low"; 4.8% of replies or 9.5% of respondents described "appalling living conditions / fleas at private housing / shelter", as their reasons for remaining homeless. Table 30 shows a long list of reasons, including the uncommon ones. Overall, expensive rent of private housing, unstable employment or unemployment, low income, too long waiting time for public housing, low rent subsidy from CSSA and appalling living conditions at private housing and hostel were the major reasons which kept homeless people on the streets.

Table 30: Reasons for Remaining Homeless (Multiple Answers Accepted)

		Respondents		Observed Percentage
		Number	Percentage	
Reason for Remaining Homeless [a]	Expensive rent at private housing / living standard diminishes after paying rent	165	26.6%	52.4%
	Not enough money to pay security deposit	35	5.6%	11.1%
	Unstable / no jobs	94	15.1%	29.8%
	Income too low	49	7.9%	15.6%
	Poor living conditions / fleas at private housing / hostel	30	4.8%	9.5%
	Too low rent subsidy from CSSA	39	6.3%	12.4%
	Too long waiting time for public housing / public housing too far	67	10.8%	21.3%
	Drugs problems	8	1.3%	2.5%
	Health problems	12	1.9%	3.8%
	Housing infested by fleas	12	1.9%	3.8%
	Application for security deposit was not approved (under CSSA)	4	.6%	1.3%
	Used to be homeless / freedom / cared by others	21	3.4%	6.7%
	Relationship problems with families / neighbours	20	3.2%	6.3%

	Feeling trapped / lonely in housing / personal choices	15	2.4%	4.8%
	Other reasons	50	8.1%	15.9%
Total		621	100.0%	197.1%

4.5. Future Planning

4.5.1. Budget for Housing / Rent

Among the respondents, their average budget for housing / rent was HKD 4,073 and median budget was HKD 3,000. Half of the respondents believed they would need HKD 2,000 to HKD 4,650 to end homelessness and move into homes.

Table 31: Budget for Housing / Rent

Number	Valid	197
	Missing Value	175
Mean		4073.6294
Median		3000.0000
Standard Deviation		3334.33401
Percentile	25	2000.0000
	50	3000.0000
	75	4650.0000

4.5.2. Application for Public Housing?

Respondents were asked if they had applied for public housing. 111 respondents (31.5%) replied positively and 241 respondents (68.5%) said no.

Table 32: Application for Public Housing

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	No	241	64.8	68.5	68.5
	Yes	111	29.8	31.5	100.0
	Total	352	94.6	100.0	
Missing Value	NA	1	.3		
	99999999.00	19	5.1		

		20	5.4		
Total		20	5.4		
Total		372	100.0		

4.5.3. **Reasons for Not Applying Public Housing**

For those 241 respondents who did not apply for public housing, they were asked for the reasons behind and were allowed to give multiple answers, thus, 269 answers were received. 1/3 reported that they did not apply because "the application procedure would be complicated / they were not sure about the application procedure"; 22% of replies indicated that "waiting period is too long and application is unhelpful"; 16.4% did not apply for "personal reasons"

Table 33: Reasons for Not Applying Public Housing (Multiple Answers Accepted)

		Respondents		Observed Percentage
		Number	Percentage	
Reasons [a]	Application procedure too complicated / not sure how to apply	74	27.5%	34.6%
	Waiting period is too long, unhelpful	47	17.5%	22.0%
	No units in preferred district / urban area found	11	4.1%	5.1%
	Already have a public housing unit / in process of a divorce	18	6.7%	8.4%
	Personal reasons	35	13.0%	16.4%
	Others	84	31.2%	39.3%
Total		269	100.0%	125.7%

4.5.4. **Waiting Period for Public Housing**

Table 34: Homeless Applicants' Waiting Period for Public Housing (On-going)

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Under 1 year	13	3.5	28.3	28.3

		Number	Percentage	Valid Percent	Cumulative Percent
	1 to 2 years	6	1.6	13.0	41.3
	2 to 3 years	7	1.9	15.2	56.5
	3 to 4 years	9	2.4	19.6	76.1
	4 to 5 years	2	.5	4.3	80.4
	5 to 6 years	3	.8	6.5	87.0
	7 years or above	6	1.6	13.0	100.0
	Total	46	12.4	100.0	
Missing	NA	294	79.0		
Value	99999999.00	32	8.6		
	Total	326	87.6		
Total		372	100.0		

Among the 111 homeless applicants who answered the length of their waiting period for public housing, 41.3% had an ongoing waiting period of under 2 years, another 44.8% had a waiting period of 2 to 4 years, 10.8% had waited for 4 to 6 years and 13.6% had waited for over 7 years.

4.6. Employment and Income

4.6.1. Employment Status

Table 35: Current Employment Status

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	No	233	62.6	64.7	64.7
	Yes	127	34.1	35.3	100.0
	Total	360	96.8	100.0	
Missing Value	99999999.00	12	3.2		
Total		372	100.0		

127 (35.3%) of the 360 respondents were working at the time of survey while 233 (64.7%) were not working.

4.6.2. Duration of Unemployment

Among the 233 unemployed respondents, 201 indicated the duration of their

unemployment. 132 or 65.7% of them had been unemployed for 2 years or longer; 10.9% for 1 to 2 years and 23.4% for shorter than 1 year. Thus, the majority of homeless respondents were unemployed for a longer time (over 2 years).

Table: Duration of Unemployment

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Under 3 months	18	4.8	9.0	9.0
	3 to 6 months	18	4.8	9.0	17.9
	6 months to 1 year	11	3.0	5.5	23.4
	1 to 2 years	22	5.9	10.9	34.3
	Longer than 2 years	132	35.5	65.7	100.0
	Total	201	54.0	100.0	
Missing	NA	127	34.1		
Value	99999999.00	44	11.8		
	Total	171	46.0		
Total		372	100.0		

4.6.3. **Current / Last Income from Work**

208 respondents answered the question of "how much is your current / last income from work?" The median monthly income was HKD 6,377, slightly lower than an income of a full-timer with legal minimum wages. It is noteworthy that 82 respondents or 39.4% received lower than HKD 5,000 and only 13.9% earned more than HKD 12,000. In general, homeless individuals were employed in low-end jobs, worked limited hours and thus, their monthly income was lower than other regular workers.

Table 37: Current / Last Income from Work (Interval)

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Under HKD 1,000	20	5.4	9.6	9.6
	HKD 1001 – 3000	34	9.1	16.3	26.0

	HKD 3001 – 5000	28	7.5	13.5	39.4
	HKD 5001 – 7000	32	8.6	15.4	54.8
	HKD 7001 – 9000	31	8.3	14.9	69.7
	HKD 9001 – 10000	12	3.2	5.8	75.5
	HKD 10001 – 12000	22	5.9	10.6	86.1
	Over HKD 12000	29	7.8	13.9	100.0
	Total	208	55.9	100.0	
Missing Value	NA	72	19.4		
	99999999.00	92	24.7		
	Total	164	44.1		
Total		372	100.0		

4.6.4. **Financial Support**

449 answers were received from 372 respondents who answered the question of their sources of financial support. 169 or 48.3% of respondents received CSSA; 103 or 29.4% of respondents worked to "earn income"; another 34 or 9.7% of respondents made their living as scavengers; 32 or 9.1% of respondents received support from "charities / community organizations"; 7.7%, 7.1% and 4% lived on their savings, support from friends / people in the community and old age allowance (also known as fruit money) / old age living allowance respectively.

Table 38: Financial Support (Multiple Answers Accepted)

		Respondents		Observed Percentage
		Number	Percentage	
Financial Support [a]	Savings	27	6.0%	7.7%
	CSSA	169	37.6%	48.3%
	Wages	103	22.9%	29.4%
	Old age allowance (fruit money) / old age living allowance	14	3.1%	4.0%

		Number	Percenta ge	Valid Percent	Cumulative Percent
	Scavenging	34	7.6%		9.7%
	Help from friends / neighbourhood	25	5.6%		7.1%
	Borrowing money	7	1.6%		2.0%
	Help from charities / community organizations	32	7.1%		9.1%
	Others	38	8.5%		10.9%
Total		449	100.0%		128.3%

4.7. Living Conditions.

4.7.1. Returning to Live in Hong Kong from Other Countries?

69 or 21.2% of respondents reported that they returned to live in Hong Kong after living / working in other countries.

Table 39: Whether Returning to Live in Hong Kong from Other Countries

		Number	Percenta ge	Valid Percent	Cumulative Percent
Valid	Yes	69	18.5	21.2	21.2
	No	257	69.1	78.8	100.0
	Total	326	87.6	100.0	
Missing Value	99999999.00	46	12.4		
Total		372	100.0		

4.7.2. Regular Contact with Family and Friends?

155 or 44.78% of the respondents contacted their families and friends regularly, while 191 or 55.2%, over half of them did not.

Table 40: Regular Contact with Families and Friends

	Number	Percenta ge	Valid Percent	Cumulative Percent

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Yes	155	41.7	44.8	44.8
	No	191	51.3	55.2	100.0
	Total	346	93.0	100.0	
Missing Value	99999999.00	26	7.0		
Total		372	100.0		

4.7.3. **Contact with Social Workers / Social Service Agencies?**

Table 41: Contact with Social Workers / Social Service Agencies

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Yes	212	57.0	59.9	59.9
	No	142	38.2	40.1	100.0
	Total	354	95.2	100.0	
Missing Value	99999999.00	18	4.8		
Total		372	100.0		

212 or 59.9% of the respondents said they kept in contact with social workers or social service agencies and 40.1% of them did not. Social workers and social service agencies tended to play an important role in connecting homeless population with the society as almost 60% of homeless respondents kept in touch with them.

4.7.4. **Chronic Diseases Which Require Regular Treatment?**

110 or 32% of the 344 respondents reported having chronic diseases which regular treatment was needed, while 234 or 68% of respondents did not have this problem. According to a feather article, "Persons with Disabilities and Chronic Diseases In Hong Kong", in the Hong Kong Monthly Digest of Statistics (January 2015), 1,375,200 people suffered from chronic diseases, amounting to 19% of the population. It is noteworthy that 32% of the homeless respondents suffered from chronic diseases, which reflected that homeless people had more health problems than the general public.

Table 42: Chronic Diseases Which Require Regular Treatment

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Yes	110	29.6	32.0	32.0
	No	234	62.9	68.0	100.0
	Total	344	92.5	100.0	
Missing Value	99999999.00	28	7.5		
Total		372	100.0		

Among the 110 respondents who needed regular treatment, 20 of them suffered from mental illness, i.e. 8% of the total number of respondents. 17 or 4.9% of respondents had orthopaedic disorders; 9 or 2.6% of respondents were patients of internal medicines; 7 or 2% of respondents suffered from diabetics. For details, please refer to Table 42.

Table 43: Types of Chronic Diseases which Require Regular Treatment

Psychiatry	20	5.8%	Eye	2	0.6%
Orthopaedics	17	4.9%	Brain	2	0.6%
Internal Medicine	9	2.6%	Low Back Pain	2	0.6%
Diabetes	7	2.0%	Hematological Diseases	2	0.6%
Asthma	5	1.5%	Otolaryngology	1	0.3%
Chest & Lung	5	1.5%	Liver & Kidney	1	0.3%
Heart	5	1.5%	Tumour	1	0.3%
Hypertension	5	1.5%	Physical Therapy	1	0.3%
Stroke	4	1.2%	General	1	0.3%
Foot injury	4	1.2%	Cramp	1	0.3%
Stomach	3	0.9%	Upper respiratory tract	1	0.3%
Skin	3	0.9%	Surgery	1	0.3%
Total	103	29.9%			

4.7.5. **Have You Taken Any Psychotropic Medications in the Past 6 Months?**

23 of the 110 respondents who needed regular medical treatment had taken psychotropic medications in the past 6 months, i.e. 6.7% of the total respondents. The ratio was lower than the finding of H.O.P.E. HK 2013 (11.2%). It could be explained that in the H.O.P.E. HK 2015 survey, respondents were first being asked if they had chronic diseases which needed regular treatment, and then would be asked which diseases they had and if they had taken psychotropic medications when the first answer was positive. This decline could be explained that it is possible that some respondents with mental illness did not receive regular medical treatment and therefore the question regarding psychotropic medications was not raised. It is also likely that some went through treatment but did not take medications as required by their doctors. According to research from numerous organizations and psychiatrists which serve the homeless people, close to 60% of the homeless population suffer from different types of mental health problems. Yet this survey shows that only 5.8% sought regular medical treatment and 6.7% took psychotropic medications, which is a sign that most homeless people with mental illness were not treated appropriately.

Table 44: Whether Psychotropic Medications Were Taken in the Past 6 Months

		Number	Percenta ge	Valid Percent	Cumulative Percent
Valid	Yes	23	6.2	23.7	23.7
	No	74	19.9	76.3	100.0
	Total	97	26.1	100.0	
Missing Value	NA	226	60.8		
	99999999.00	49	13.2		
	Total	275	73.9		
Total		372	100.0		

4.7.6. **Disabilities**

52 or 15.6% of 333 respondents reported having disabilities.

Table 45: Disabilities

		Number	Percenta ge	Valid Percent	Cumulative Percent
Valid	Yes	52	14.0	15.6	15.6
	No	281	75.5	84.4	100.0
	Total	333	89.5	100.0	
Missing Value	99999999.00	39	10.5		
Total		372	100.0		

4.7.7. **Gambling Habit**

87 or 26.6% of the 327 respondents reported having a gambling habit.

Table 46: Gambling Habit

		Number	Percenta ge	Valid Percent	Cumulative Percent
Valid	Yes	87	23.4	26.6	26.6
	No	240	64.5	73.4	100.0
	Total	327	87.9	100.0	
Missing Value	99999999.00	45	12.1		
Total		372	100.0		

4.7.8. **Habit of Drinking Alcohol**

96 or 28.7% of the 335 respondents reported having a habit of drinking alcohol.

Table 47: Habit of Drinking Alcohol

		Number	Percenta ge	Valid Percent	Cumulative Percent
Valid	Yes	96	25.8	28.7	28.7
	No	239	64.2	71.3	100.0
	Total	335	90.1	100.0	
Missing Value	99999999.00	37	9.9		
Total		372	100.0		

4.7.9. **Drug abuse**

43 or 13.3% of the 324 respondents reported having problems of drug abuse.

Table 48: Drug Abuse

		Number	Percent	Valid Percent	Cumulative Percent
Valid	Yes	43	11.6	13.3	13.3
	No	281	75.5	86.7	100.0
	Total	324	87.1	100.0	
Missing Value	99999999.00	48	12.9		
Total		372	100.0		

The survey shows that significant numbers of homeless people had different addictions (namely 26.6% with gambling addiction, 28.7% with alcohol abuse, 13.3% with drug abuse). It is noteworthy that to end homelessness, providing the homeless population housing is simply not enough. They need housing with comprehensive service to cure their addictions and psychological counselling to handle the causes of their addictions.

4.8.   **Opinions on Policies and Services**

4.8.1. **Do you approve the following government policies?**

Table 49a: Rent Subsidy Increase of CSSA

		No	Percentage	Valid Percent	Cumulative Percent
Valid	Approve	254	68.3	75.6	75.6
	Disapprove	11	3.0	3.3	78.9
	No comments / not sure	71	19.1	21.1	100.0
	Total	336	90.3	100.0	
Missing Value	99999999.00	36	9.7		
Total		372	100.0		

Table 49b: Increase in Public Housing and Speed Up the Allocation Process

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Approve	243	65.3	72.8	72.8

		Number	Percentage	Valid Percent	Cumulative Percent
	Disapprove	15	4.0	4.5	77.2
	No comments / not sure	76	20.4	22.8	100.0
	Total	334	89.8	100.0	
Missing Value	99999999.00	38	10.2		
Total		372	100.0		

254 or 75.6% of the 336 respondents approved the idea to "increase rent subsidy of CSSA"; 243 or 72.8% of them agreed that government should "increase supply of public housing and speed up the allocation process"; 225 or 69.4% of the respondents wanted the government to "provide more low-cost urban hostels for singles"; 170 or 54% agreed that the government should "increase more rehabilitation services for patients with mental illness"; 207 or 65.7% of respondents wanted the government to "place more resources on medical care"; 214 or 68.4% of respondents agreed that the government should "impose a policy to regulate rent". The results in this section reflect that homeless population has soaring demands on subsidy, housing, medical, rehabilitation and other services and support.

Table 49c: Increase in Low-cost Urban Hostels

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Approve	225	60.5	69.4	69.4
	Disapprove	17	4.6	5.2	74.7
	No comments / not sure	82	22.0	25.3	100.0
	Total	324	87.1	100.0	
Missing Value	99999999.00	48	12.9		
Total		372	100.0		

Table 49d: More Rehabilitation Services for Drug Abusers

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Approve	152	40.9	48.6	48.6
	Disapprove	25	6.7	8.0	56.5

		Number	Percentage	Valid Percent	Cumulative Percent
	No comments / not sure	136	36.6	43.5	100.0
	Total	313	84.1	100.0	
Missing Value	99999999.00	59	15.9		
Total		372	100.0		

Table 49e: Increase Rehabilitation Services for Patients with Mental Illness

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Approve	170	45.7	54.0	54.0
	Disapprove	12	3.2	3.8	57.8
	No comment / not sure	133	35.8	42.2	100.0
	Total	315	84.7	100.0	
Missing Value	99999999.00	57	15.3		
Total		372	100.0		

Table 49f: More Resources on Medical Care

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Approve	207	55.6	65.7	65.7
	Disapprove	19	5.1	6.0	71.7
	No comments / not sure	89	23.9	28.3	100.0
	Total	315	84.7	100.0	
Missing Value	99999999.00	57	15.3		
Total		372	100.0		

Table 49g: Impose Policy to Regulate Rent

		Number	Percentage	Valid Percent	Cumulative Percent
Valid	Approve	214	57.5	68.4	68.4
	Disapprove	18	4.8	5.8	74.1
	No comment / not sure	81	21.8	25.9	100.0
	Total	313	84.1	100.0	
Missing	99999999.00	59	15.9		

Value					
Total	372	100.0			

4.9. **Case Studies**

4.9.1. **Homelessness due to Economic Factors**

Name: Brother Keung

Age: 50

Profession: Cleaning worker

Brother Keung is a cleaning worker, he is employed irregularly and earns a few thousand Hong Kong dollars per month. He has been wishing for a stable home for a long time. Once he rented a bed space for HKD 1,100 per month. That bed space was together with some 30 bed spaces in an apartment of 1,000 square feet. Most of bed spaces did not face windows and the rooms were bad ventilated. The worst part was: the flat was infested by fleas. Each night he could catch 20 to 30 fleas, they would bite his arms, legs, nose, mouth and he was worried that they would climb into his ears. Disturbed by the fleas, he could only sleep 2 hours each night. Without proper rest, he performed poorly at work and was scared that his employer would see those bite marks on his body. He complained about flea infestation to his landlord but was ignored. Eventually, he could not stand such appalling environment and moved to the streets. "I would rather sleep on the streets, at least I would be waken up by fleas." Most of the homeless people did not intend to become homeless, but if they are paying for housing which "do not deserve the rent", then they would look for "free housing" with fewer fleas, i.e. to sleep on the streets. However, homeless people face other types of challenges.

Social workers who work with homeless people often point out, most homeless individuals shared similar experience with Brother Keung, namely they paid expensive rent for a divided room / cubicle room, but the size and hygiene level in this type of housing turned them away. They might "make many attempts to find housing till they are scared / disappointed enough to give up". As said before, nobody wants to sleep on the streets if s/he could have a roof above her/his head. "Unaffordable rent" and "poor living environment", are indeed the double obstacles for homeless people to end their

50

homelessness.

4.9.2. Homelessness due to Drug Addiction

Name: Ah-Kuen (alias)

Age: 56

Profession: Currently unemployed, lived on CSSA, disability allowance and scavenging

Ah-Kuen first became homeless when he was 32. He has lived briefly in a hostel provided by The Society of Rehabilitation and Crime Prevention for 5 or 6 times, but stopped living there as it was located in a remote district and far from his work. He rented private housing but due to his health conditions and lack of skills, he lost his job and could not afford private housing anymore. Thus, he returned to live on the streets.

Ah-Kuen was convicted for drug crimes and stealing and sentenced 9 times. He was released but could not find work. He was severely addicted and needed to take drugs as frequent as 4 times per day. Without enough money to buy drugs, he pick-pocketed to fund his addiction. If he could find some informal jobs, he could live on his income too.

Ah-kuen described, "I would like to get rid of this addiction too. But if I meet others (drug-addicts) on the streets and they would suggest we go take drugs together. That is an overwhelming temptation.", "If I live in a flat, I could stay away from them (his drug-addicted friends) and it is easier for me to withdraw. I know that there is subsidy from the government, but it is not enough for rent. The flats are so small and filled with fleas, how could one live there? The space is so tiny, no privacy and things are stolen easily.", "I don't like to sleep on the streets, it is noisy day and night, with the strong afternoon sun, the heat, cold weather or strong wind. Normally I sleep on the streets but if it is too cold, I move into the temporary cold shelters."

Ah-Kuen's drug addiction has meanwhile become milder and now he takes methadone only. He lost his ability to work due to his leg injury and now he receives disability allowance.

Ah-Kuen believes that the first step to help homeless people with drug-addiction is to

provide them housing. It could help them stay away from other drug-addicts on the streets and keep temptation at bay. It also increases their chance to look for long-term employment.

4.9.3. Homeless Individual with Mental Illness

Name: Mr Inspector (alias)

Age: 60

Profession: Currently unemployed

<u>Background of Interview</u>

From the night of the survey, volunteers remember one homeless person particularly well, whom they call "Mr Inspector". Mr Inspector was about 60 years old, wore a remnant blazer and enjoyed reading newspapers. He often walked around in the neighbourhood, which he called it "patrolling", and soliloquized. He lived under a flyover in Mid-Levels, with very basic belongings for over 5 years. He was very wary of strangers. Despite repeated visits and goodwill shown by the social workers, he kept conversation short with them and limited to "investigation" and social issues. His speech did not make sense and was out of touch of reality. When social workers brought him warm food, sometimes he would refuse but sometimes he would be excited and immediately enjoyed the food. Until now, Mr Inspector refuses to disclose any information about his identity, background, financial support and housing.

<u>Excerpt of Interview</u>

Volunteer: Uncle, how are you doing? My name is C, I know that you are living here and would like to talk to you. How may I address you?

Mr Inspector: It is expected to get exterminated when you investigate such a serious case. For us police…

Volunteer: Since when have you been investigating this case?

Mr Inspector: I am still investigating. As long as I am investigating, I can't disclose anything.

Volunteer: I see, I see. Then how about your family? Do they know that you are investigating here? Why do you sleep here?

Mr Inspector: The case is about the safety of all Asians, you better don't ask so much, otherwise you would get into trouble. You know, many people are spying. Even Chiang Kai-shek's death is related to this case. don't you know…

A Student Volunteer's Reflection

When we first met Mr Inspector, he refused to tell us his name or his past, but we noticed he was a very learned man, with great knowledge of social issues. His habit of reading newspapers might contribute to his knowledge. Yet, his speech was incoherent and he behaved like he lived in another reality. Sometimes, he talked about recent affairs, which made us believe he was not entirely out of touch of reality. To me, Mr Inspector behaved like many other patients with mental illness. They live on the streets but they are not hostile. In the process of sharing, our priority should not be placed only in judging the correctness of his conversations, but to listen attentively and to show him respect and care.

One does not become homeless without a reason. Mental illness or other factors, might contribute to their homelessness. Most homeless people's mental health is affected by the fact that their sleep quality on streets is poor and thus, they have difficulty to integrate into society. How to help homeless people? Is giving them housing with four walls enough? Forcing them to leave their own "happy world" and to integrate into a society with many problems? There is no standard answer to this. To accompany them, to brighten their world, might be more valuable than material donations.

Reflection from Social Workers

Mental illness is common among homeless individuals, some of them might even suffer from severe mental disorders, such as schizophrenia. It is rather difficult to track down their medical history and experience before getting sick, we often have to spend months or even years, to collect and reconstruct their stories. To many others, they are "poor" and "pitiable", but we believe that each of them has her/his own philosophy, characters and history. Apart from material donation, it is more important to get into their world,

listen, care, understand and respect their life. Mental illness affects their capacity to lead a normal life, many of them do not even realize or refuse to acknowledge that they need medical care. Some hospitals provide outreach psychiatric services, but homeless people still encounter many obstacles in getting medical care. To bring them back into the medical care network is simply the only way to help them recover and improve their living conditions. Yet, we are in the dilemma. Our "clients" are rather passive in seeking help and we, the social workers often need to "help" or even "interfere". We might be doing the unpleasant tasks of violating their freedom and sending them back to the "cruel reality". Thus, we must make sure our goal of treating them is to improve their livelihood. We emphasise the follow-up support after medical treatment, such as basic living needs, housing, supporting network and etc., which are all key factors to rebuild their life and none of them should be missed out.

5. Recommendations

5.1. Recommendation 1: To Provide Housing with Integrated Services

Over 80% of homeless respondents of this survey expressed their demand for housing, most of them are singles and close to 50% are recipients of CSSA. Currently, the upper limit of CSSA's rent subsidy for a single household is HKD 1,735. To rent a loathsome bed space, cubicle room, sub-divided room, attic or rooftop unit, without windows / shared kitchen and toilet / infested by fleas would cost HKD 1,800 to 2,200, which this rent subsidy could not cover and homeless people would need to pay the difference from their living allowance. A sub-divided with private toilet (costs HKD 3,500 or more in the urban areas per month) is far beyond their affordability. Thus, homeless people could only rent private housing with extremely poor living environment and often would end in conflicts with other tenants, while sharing facilities in an overcrowded setting. Furthermore, more than half of the homeless population do not apply CSSA and their average monthly income is at HKD 6,500. To hand out 30% of their income for a loathsome housing and other job-related expenses, is a very uneconomical deal for many of them. Thus, **homelessness recurrence** takes place frequently. **Close to 60% of the respondents became homeless again for reasons such as "poor living environment", "unaffordable rent" and "poor relationships with other tenants / neighbours".** Apart from private housing, social workers would also refer homeless individuals to temporary shelters. However, the supply of these temporary shelters is very limited. Currently, there are 280 vacancies in free shelters for homeless people and the duration of each stay is limited to 1 to 3 months. The government-sponsored shelters allow homeless individuals to stay for up to 6 months, assuming that after these 6 months, they would be ready and able to afford private housing. Yet, as discussed above, homeless individuals would find the living environment in private housing far worse than living on the streets. The waiting period for public housing, due to most of the applicants are singles and limited to the "points-system for one-person application", would take 20 yeas or more. Thus, the vicious cycle of homelessness recurrence is not being properly addressed by providing them short-term shelters and the scheme of public housing.

The Vicious Cycle of Homelessness Recurrence

Apart from the objective factors discussed above, homeless people have their own personal problems to deal with. The survey shows that most of the unemployed homeless people belonged to the long-term unemployed category, with an average of over 2 years of unemployment. In other words, they would encounter enormous difficulties in returning to the labour market. 51.3% of the homeless people did not have social support, as they did not keep regular contacts with families and friends. 29.6% of the homeless population suffered from chronic diseases, 14% had physical disabilities, 23.4%, 25.8% and 13.3% had gambling addiction, alcohol abuse and drug abuse problems respectively. Front-line social workers also noticed that certain number of homeless people were often involved with criminal activities and drugs. Another research shows, released former-prisoners who could not find housing and live on the streets, have a higher re-offending rate due to their exposure to the unfavourable environment[1]. Thus, homelessness causes offenders to go back to prisons and it becomes a vicious cycle. To break this cycle, the government should provide extended-transitional residences, with one-stop integrated services to support them with mental rehabilitation / drug addiction treatment / psychological counselling / employment counselling. This can address their short/mid-term housing needs; the early interventions and long-term follow-ups from social workers could assist them to resolve their complicated personal problems.

In July 2014, social workers of Society for Community Organization, students and researchers of City-Youth Empowerment Project of City University Of Hong Kong visited the homeless services in New York City. The city government provides housing with one-stop services, including medical care, psychological counselling, drug addiction treatment with support from medical professionals, social workers and psychologists. The housing also accommodates the specific needs of ex-mental patients and former drug addicts, allows them to stay for 5 to 7 years. **We believe this type of accommodation with integrated comprehensive services would seal the vacuum in the current service model in Hong Kong.**

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1 Society for Community Organization (2015), Research Report on Rehabilitation Services for Senior Male Ex-inmates in Hong Kong

Thus, our first recommendation is to:

to provide transitional accommodation to homeless people for not shorter than 3 years, together with one-stop services, covering mental rehabilitation, drug addiction treatment, psychological counselling, employment counselling. Homeless individuals' social, psychological and rehabilitation issues should be proactively addressed and resolved in this model.

5.2.   **Recommendation 2: Immediate Increase in Number and Duration of Subsidized Shelter Stay**

Affected by the economic downturn in mainland China, Hong Kong's economic growth this year would slow down and industries such as finance, tourism, retailing, services and constructions would be hit by such a recession. Some economists estimated that Hong Kong would enter its cycle of economic depression and a collapse in labour market could be triggered at any time. Based on our knowledge of the two previous financial crises, we expect the size of homeless population would continue to grow due to unemployment and therefore, there is an urgent need to increase housing services for homeless people. The government should assist the able-bodied homeless people to survive this difficult time and prevent them from becoming homeless. Such a measure could also save the society from paying a higher relief fund in the future.

Given the limited supply of temporary shelters for the homeless, each homeless person could stay in a shelter for 1 to 6 months. When time is up, the homeless individuals must pack and go, despite their inability to afford private housing. Many of them end up returning to live on streets.

Economic downturn and high unemployment rate would take someone a longer time to find job, to save money for moving and it is particularly true for a homeless individual in the temporary shelter. Thus, a year of accommodation should be given to these homeless individuals, to ensure they have enough time to find the next housing.

When a homeless individual could not find a job, s/he would have to rely on CSSA and the rent subsidy of CSSA could not afford rent in private housing. It is also unrealistic to expect one to save money from CSSA to seek better housing. As a result, an unemployed homeless person would continue to linger around in the temporary shelters and there is an urgency to make their stay extendable.

We have been urging the government to reopen the budget shelters for over a decade but so far in vain. As there is a lack of "second type of budget shelters" to accommodate short-term homeless residents, they are forced to extend their stay, making the overall

stay even longer.

To address the continuous growth of homeless population, the government should allocate more resources to organizations to further subsidize their work with homeless people and expand the quota of shelters. Without reducing the current quota, the extra resources should be spent on extending the stay in these shelters to 1 to 1.5 years. Some of the shelters should be considered to transformed into mid-term shelters.

Our second recommendation is to:

increase the number of short term shelter spaces and extend duration allowed for both long-term and short-term shelter stay.

5.3.   **Recommendation 3: To Develop Specific Housing Policies, to Build Temporary / Alternative Housing**

When Chun-ying Leung ran for the Chief Executive Election, he announced that 70% of land in Hong Kong had not been developed and would increase land supply to build more public housing and meet the people's housing demand. However, his government has become a lame duck, thus public housing and land supply are far from meeting the people's demand. Grassroots people face vast difficulty in getting housing and they are expected to wait a decade or so, before they could realize their dream of having their homes.

Government and real estate developers own most of the useable land and properties in Hong Kong. In urban, sub-urban areas and New Territories, there are different pieces of lands to be developed. **Government and developers also own properties which are not being occupied and can be redeveloped, such as former schools, government properties, 清水平房 built by real estate developers..**   To address the grassroots people's immediate housing needs, the government should consider to make use of the existing resources, namely the idle land. We recommend the government to make temporary use of the idle land by borrowing or renting it to non-government organizations or social enterprises, to build temporary housing for people who are waiting for the allocation of public housing. When the land is developed and housing is available, families who live in the temporary housing would have the priority to get allocated and the idle land would be then released for further development.

Both former and current ministers of Development Bureau agreed that having non-government organizations to run temporary housing on idle land is indeed a plan worth to explore. It can avoid mismatch of resources, namely the embarrassing coexistence of empty homes and street sleepers. Wing Lee Residence is a laudable initiative to demonstrate the NGOs' involvement. .

Our third recommendation is to

3) lobby government, property developers, religious organizations, private property

owners to come to an agreement in using their idle land / properties, to rent or borrow them to non-government organizations to run temporary homes on a time-bound basis. Such a measure aims to help combat the housing crisis of grassroots people in the coming few years.

5.4.   **Recommendation 4: To Address the Homeless Population's Medical Needs and to Provide Staffed Mobile Medical Services**

We recommend the government to increase resources in providing more outreach mobile medical services to homeless individuals. Based on previous research conducted by social services agencies and psychiatrists, close to 70% of homeless people suffered from mental illness, 30% of them had serious mental disorders but did not get treated. This indicates that there is a vacuum in the medical care system in Hong Kong. In general, mentally ill homeless people are lack of insight into their illness and they are not aware that they are ill. When they refuse to be treated, even their families find it difficult to help them. Furthermore, homeless people move around, which make it difficult for the community psychiatrist teams to locate them and conduct medical examination with them. Their unstable homeless conditions and their mental health conditions can perpetuate each other, leading to self-neglect and even death.

To address this need of the homeless people, we recommend the government to establish and support the operation of a staffed medical services vehicle, to provide medical care to homeless people in all over Hong Kong. The operation of mobile medical services could follow the example of the Salvation Army's Health and Care Express – Mobile Service station for Street Sleepers Project. The project first set off in September 2014, one of its services is called "Cure Angels", which combines the talents between medical professionals and social workers, by recruiting medical professionals, such as physicians from psychiatry, family medicine, orthopaedics and general medicine and nurses from general medicine and psychiatry as volunteers. The "Cure Angels" visit street sleepers regularly, provide medical check-ups and basic treatments, accompany homeless people to hospitals and refer them to specialists. After one year, the "Cure Angels" has proven itself to be a successful project, with 100 medical professionals in its volunteer team, provided services to 329 street sleepers and successfully helped 21 patients with serious mental disorders admit into hospitals for treatment. After treatment, social workers would seek appropriate housing for these homeless individuals, follow up on their conditions and treatment after they are accommodated. With these medical and social

interventions, we hope to end their homelessness and prepare them to re-enter the society.

The sponsorship of Health and Care Express – Mobile Service station for Street Sleepers Project will end in September 2017. We recommend the government to sustain this project and promote it to a mobile medical unit with regular staff. Currently, medical professionals in the team are volunteers. We recommend the government to cover the operation costs of the medical vehicle and the salaries of a part-time psychiatrist and a registered nurse, to ensure the services' stability. We also suggest to bridge this service with Hospital Authority, which allows psychiatrists in the medical vehicle to access the medical records of the homeless patients from Hospital Authority's Electronic Health Record Sharing System. It could enhance the psychiatrists' efficiency in understanding the patients' conditions and provide them with the most appropriate medication and treatment.

Our fourth recommendation:

4) The government should set up mobile medical services for homeless people and employ a part-time psychiatrist and a registered nurse. Collaboration between the mobile medical services and Hospital Authority should be introduced, which allows psychiatrists in the medical vehicles to have immediate access to homeless patients' medical records.

5.5.   **Recommendation 5: The Government should Conduct City-Wide Survey on Homeless Population Regularly (Annually / Biennially)**

The Social Welfare Department started to conduct annual city-wide survey on homeless population in 1980. By 1994, it reduced the survey to once every two years, claiming that the homeless population remained stable. The last survey conducted by the Social Welfare Department was 2000, recording 819 homeless individuals in Hong Kong. Since then, all researches on homeless population have been initiated by academics and community organizations and they all face the common problem: lack of resources. The government has the responsibility to take the homelessness issue seriously and allocate resources for regular surveys, namely to record the precise number of homeless population and to understand the social issues they face, such as poverty, housing and etc., in order to make appropriate and effective policies. The results of these surveys should be made open, involving service agencies and the public to discuss and analyze, to find out the causes and resolutions to this structural problem. Government's participation is particularly crucial when it comes to a complicated social issue such as homelessness. A government-led city-wide survey shows its determination in addressing this issue, facing it and combating it instead of underestimating it. Both H.O.P.E. HK 2013 and H.O.P.E. HK 2013 have borrowed the idea from other countries' homeless street count. Based on this experience, we recommend the government to play the role of a coordinator, to conduct an annual or biennial homeless population survey with the relevant service agencies and universities systematically, to keep abreast of the updated number of homeless people and social issues they face.

Our fifth recommendation:

5) **The government should initiate regular surveys on city-wide homeless population (annually or biennially), with the involvement of social service agencies. networks of college volunteers which are concerned about the welfare of homeless people.** The surveys aim to deliver the latest number of homeless population and the insight of related social issues.

5.6.   **Recommendation 6: The Government Should Develop a Set of Comprehensive Policies to Address Homelessness**

In recent years, the Hong Kong Government has adopted administrative measures to evict homeless people, such fencing off areas under flyovers, locking football fields up at night, spraying water in pavilions in parks in the evening, or even making excuses to clear homeless people's personal belongings. Currently, there is no regulation or policy to safeguard homeless people's basic rights, let alone their rights to adequate housing. Despite the government's hostile measures to remove them, the number of homeless people increased in the last two years, their average duration of being homeless and frequency of homelessness recurrence also soared. It is a message to the government that its measures to put them out of sight cannot help alleviate homelessness.

Comparison between H.O.P.E. HK 2013 and H.O.P.E. HK 2015

	2013	2015
Homeless population	1414	1614
Average duration of being homeless	3.9 years	5.1 years
Average frequency of homelessness recurrence	2.8 times	4.18 times

In July 2014, social workers of Society for Community Organization, students and researchers of City-Youth Empowerment Project of City University Of Hong Kong visited the services for homeless people in New York City. The city government provides housing with one-stop services, including medical care, psychological counselling, drug addiction treatment with support from medical professionals, social workers and psychologists. The housing also accommodates the specific needs of ex-mental patients and former drug addicts, allows them to stay for 5 to 7 years. Department of Homeless Services was commissioned (please refer to

http://www1.nyc.gov/site/dhs/index.page for details) to address the issues of homelessness. The Department conducted a New York City Homeless Street Count in 2014 with local community organizations and academics, the mandate of the department

head is to formulate the housing supply and homeless people related policies each year. As a global metropolis, Hong Kong fails to come up with similar policies on homeless people, its government-sponsored shelters fail to meet the needs of homeless people, as they are only allowed to stay for a very limited period of time. Currently, each government department operates on its own, there is no common policy or mission to combat the problem of homelessness.

Our sixth recommendation:
6) The government should develop a set of comprehensive policies, to positively address and handle the basic needs of homeless people.

Overview of Recommendations

Recommendations	Issues to be addressed	Nature of measures and duration of implementation
1) To provide housing together with one-stop integrated services	Lack of housing with one-stop integrated services to help homeless people resolve their housing and personal problems, which could help them leave the vicious cycle of living in shelter, renting loathsome private housing and recurring homelessness.	To increase mid-term accommodation with comprehensive services, with a duration of 3 years of stay or longer.
2. To Increase in number and duration of subsidized shelter stay	Shortage of shelters and limited duration of stay, which leaves homeless people no other choices but to linger around in the shelters.	To extend the subsidized shelter stay from 1 to 6 months, to 1 to 1.5 year.
3. To develop specific housing policies, to build temporary / alternative housing	Housing market fails to provide adequate and affordable flats and single household (due to the points-system) has an extremely long waiting period for public housing.	For mid/long-term implementation.
4. To address the homeless population's medical needs and to provide staffed mobile medical services	Homeless people often have mental illness and other medical needs, yet they seldom are aware of their health conditions and would not seek treatment. Currently, the subsidized outreach medical services are under-staffed.	For long-term implementation.
5. The government should conduct regular surveys on city-wide homeless population (annually / biennially)	There is a lack of official research and statistics on homeless population. The latest official research was done by the Social Welfare Department in 2000, which is no longer up to date.	For long-term implementation.
6. The government should develop comprehensive policies to address the homelessness issues	The government ignores the basic needs of the homeless people and in some areas, heavy-handed measures were adopted to evict them. However, these measures cannot help alleviate homelessness.	For long-term implementation.