

Service and Resource Inventory for Marion and Polk Counties

GAP ANALYSIS

July 2020 Update

I. INTRODUCTION

In October 2018, the Mid-Willamette Homeless Initiative program coordinator completed a resource mapping project over the course of five months for the Mid-Willamette Homeless Initiative steering committee to discover available services and gaps for those who are experiencing homelessness throughout Marion and Polk counties. More than 550 resources were identified. MWVHA staff updated the *2018 Service and Resource Inventory Map and Initial Findings* (“2018 Inventory”) through researching the current service continuum for the homeless population. The goal of this analysis is to provide regional level information to inform local planning and decisions for the MWVHA and partners to improve service delivery, array, and access for those in the community experiencing housing instability and homelessness. This is an overview of relevant data.

2018 Priorities

The 2018 Inventory determined four primary needs in the region’s service delivery system:

1. Coordinated Homeless Response System: Coordinated Entry
2. Sheltering Services outside of Salem-Keizer Area
3. Expanding Shelter Options
4. Housing

Progress

Much progress has been made in addressing the four areas, specifically around implementing and utilizing a Coordinated Homeless Response System. The Mid-Willamette Homeless Initiative transformed efforts and collaboration into establishing a local Continuum of Care (CoC), the Mid-Willamette Valley Homeless Alliance (MWVHA), which broke away from the Rural Oregon Continuum of Care (ROCC) and became recognized as the local CoC for the Marion-Polk region at the start of 2020.

II. HOMELESS PREVALENCE AND GAP ANALYSIS

On a single night, 17 of every 10,000 people in the United States were experiencing homelessness. According to HUD’s [2019 Annual Homeless Assessment Report](#) (AHAR, 2020), the number of people experiencing homelessness nationwide increased by nearly three percent between 2018 and 2019. The unsheltered homeless population experienced an increase of nine percent, and number of individuals over 24 years staying in unsheltered locations increased by 11 percent. Women and girls experiencing unsheltered homelessness rose by 12 percent, outpacing a seven percent increase among men (AHAR,

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2020). Oregon's total homelessness rates have increased by nearly 20% from 2016-2019. In one year, 2018-2019, total homelessness increased by nearly 10% (AHAR, 2019).

In Oregon in 2019, there were:

- 15,876 overall homeless individuals counted in 2019 PIT Count
- 12,354 homeless individuals (78%; 4,609 **chronically homeless individuals = 37%**)
- 4,902 documented chronically homeless individuals (**31%**)
- 1,438 homeless Veterans (9%)
- 1,590 homeless unaccompanied youth under 25 years (10%)
- 658 homeless unaccompanied youth under 18 years (4%)
- 1,147 homeless family households (56% remain unsheltered; 7% families relation to total)
- 293 chronically homeless people in families (66% remain unsheltered; **6% chronically homeless**)

In the Marion and Polk region, recent Coordinated Entry data (**6/1/20**) showed:

- **1,188 total homeless people, with 579 chronically homeless (49% vs. 17% nationally and 37% in Oregon)**
- 815 single individuals (487 single **individuals chronically homeless; 60% vs. 37% nationally**)
- 373 individuals in 120 families (35 families chronically homeless; **29% vs. 6% nationally**)

III. 2020 MWVHA STRATEGIC ANALYSIS

The Mid-Willamette Valley Homeless Alliance successfully applied for and transitioned into a registered, regional Continuum of Care (CoC) as of February 28, 2020. The U.S. Department of Housing and Urban Development (HUD) [CoC Program](#) promotes communitywide systems committed to the goal of ending and preventing homelessness. CoCs receive funding from HUD for community programs aimed to quickly rehouse, minimize trauma and dislocation, promote access and utilization of programs, and optimize self-sufficiency for individuals and families experiencing homelessness (HUD, 2020).

Below are MWVHA Strategic Plan Goals with resource and service inventory analyses.

A. AFFORDABLE HOUSING: Increase access and expand affordable housing units to help fill the 15,000-household gap and mitigate barriers such as land supply and zoning.

Many studies have shown that access to affordable housing has broad, positive impacts. Affordable housing increases financial stability and allows families to prioritize spending on what matters most, including food, transportation, healthcare and saving for college or retirement. From 2000-2015, Oregon underproduced housing by approximately 155,000 housing units. At its most basic level, a functioning housing market needs to produce at least one new housing unit for every new household formed. Producing 1.1 new units for each household formed is the minimum needed to account for vacancy, demolition, and obsolescence, while still maintaining market conditions and accommodating demand for new housing. In Marion County, from 2000-2016, for every 100 households formed during this time period, an average of 89 units were built.

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As outlined in the 2018 Out of Reach Report¹, **Marion County has 46,715 renting households (40% of total households) and Polk County has 10,322 households (35% of total households). Vacancy rates for Marion and Polk counties were 2.3% and 2.9%, respectively².**

Affordable Housing Need: The need for more affordable housing is great. According to Oregon Housing and Community Services’ (OHCS) Affordable Housing Inventory (2019), Marion County has 3,146 affordable housing units, and Polk County has 839 affordable units. These numbers include OHCS-funded projects as well as those funded by all twenty housing authorities, HUD, USDA, Network for Oregon Affordable Housing, and county and city governments. The data below shows Affordable Housing Units in inventory for both counties, the Need Distribution Percentage, and number of units for equity.

Rent Burdened: the federal standard that no more than 30% of a household’s gross income should be spent on rent and utilities. Households paying over 30% of their income are considered cost burdened. Households paying over 50% of their income are considered **severely cost burdened**.

Need (Equity) Distribution Percent is a percentage of the state’s low income renter households and severe rent burdened households, to the total number of units in the Oregon Affordable Housing Inventory. This calculation provides an estimate for how many units would have been funded in each community if they were distributed according to their Need Distribution Percent. Dividing actual units of affordable housing in inventory in each county by the number of units needed to have equitable distribution—where need for housing is met with adequate supply of available housing—calculates how severe the gap is for affordable housing. If the community has enough units available in inventory to meet the need for affordable housing units, then the total inventory percentage will be 100%. If the percentage is higher than 100%, the community has more units than needed and conversely, if the total inventory percentage is less than 100%, the community has unmet need distribution.

Affordable Housing	Polk	Marion
Affordable Housing Units in Inventory	839	3146
Need (Equity) Distribution Percent	1.8%	7.1%
Equitable Distribution of Units	1169	4530
Actual Units / Equitable Distribution of Units	71.8%	69.4%

Data indicates Polk County has a 72% total inventory percentage and Marion County has a nearly 70% total inventory percentage—both falling short of equitable distribution of units in their respective counties, leaving many without affordable housing options ([OHCS, 2019](#)). Both estimate approximately 30% more available affordable housing units just to meet current need, which equates to an additional 252 units in Polk County and 944 units in Marion County. Thus, the current affordable housing unit deficit for Marion and Polk counties is approximately **1,200 units**.

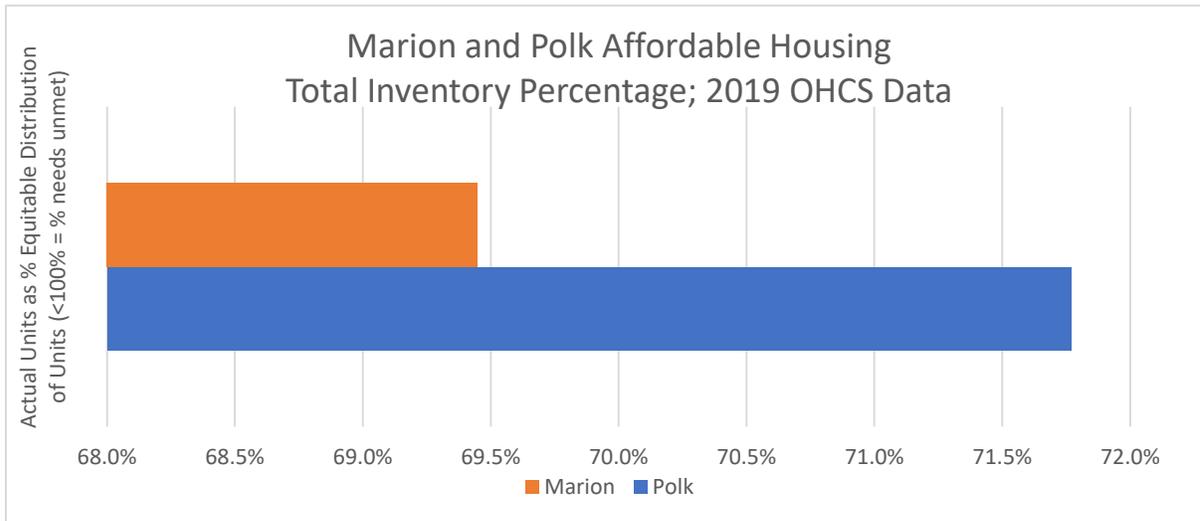
¹ National Low Income Housing Coalition. (2020). *2019 Out of Reach: The High Cost of Housing* [\[PDF\]](#). National Low Income Housing Coalition.

² US Department of Housing and Urban Development (2016).

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Affordable housing gaps exist, both in availability or capacity, as well as specific populations:

- All housing authority properties have a nine month to four year waitlist
- Seniors: only two properties are for ages 58+, in Salem and Mt. Angel
- Farm workers and families: 52 units (44 Woodburn, 8 Silverton)
- Transitional Age Youth (TAY): Marion County Youth Rental Assistance Program, Independent Living Housing Subsidy Program (dependent on funding)



Rent: The 2019 estimated monthly rent affordable at mean renter wage³ is calculated to be: \$694/mo. (up 6.8% from \$650/month in 2018) in Marion County, and \$502/mo. (up 2.4% from \$490/month in 2018) in Polk County.

Data for Marion and Polk counties shows the median income of homeless households with any source of income (roughly 51% of the homeless population in Marion and Polk counties) is \$8,820 per year (ARCHES, CAA, 2018). Typically, this income is from Social Security Income (SSI) of or around \$750 per month. Monthly rent that is affordable to households relying on SSI is \$250. The average (fair market) rent for a two-bedroom apartment in Marion and Polk counties is far greater than \$250 per month, leaving many without affordable options to be self-sufficient in long-term permanent housing.

Oregon’s statewide rent stabilization law was signed February 2019 which established a maximum annual rent increase of 7% plus the consumer price index (CPI) measure of inflation for rental housing more than 15 years old, as well as a for-cause eviction standard for renters after 12 months of occupancy. This law establishes a cap on rapidly rising rent prices experienced throughout the state and nation.

³ National Low Income Housing Coalition. (2020). *2019 Out of Reach: The High Cost of Housing* [\[PDF\]](#). National Low Income Housing Coalition.

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THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

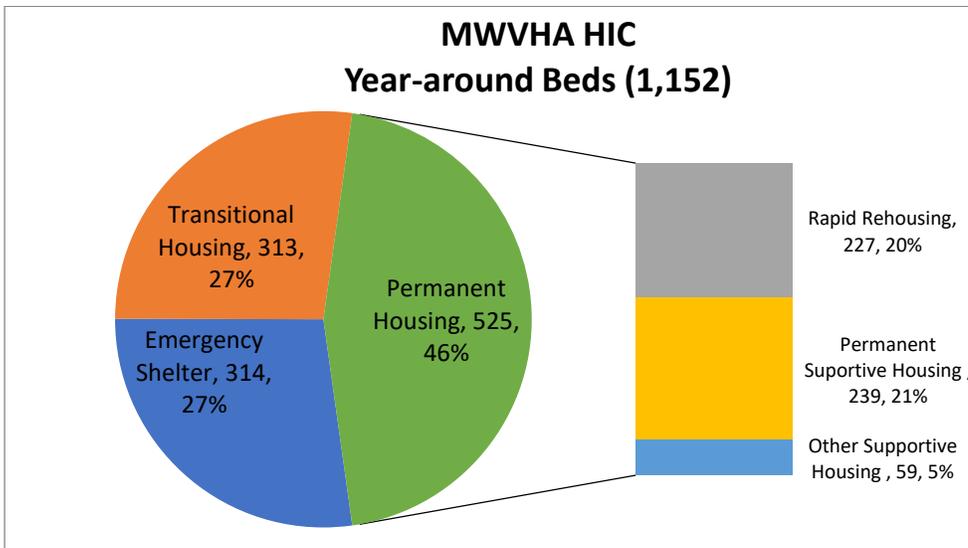
B. SHELTER AND HOUSING OPTIONS:

- **SHELTER:** Address gaps in shelter beds, including the need for low-barrier shelters.
- **TRANSITIONAL HOUSING:** Address gaps in transitional housing, including capacity for transitional case management.
- **PERMANENT HOUSING.** Utilize the resources of Rapid Rehousing and expand Permanent Supportive Housing to address the needs of the high percentage of chronically homeless individuals concentrated in the Salem-Keizer area.

Expanded sheltering and housing options continue to be identified as needs by local service providers and corresponding data. While current information was not available for a few smaller facilities, the Housing Inventory Count (HIC) for Marion and Polk counties submitted June 30, 2020 showed:

- **1,152 year-around beds** and 225 seasonal beds (warming shelters) for a total of **1,377 beds to address homelessness.** The HIC inventory breaks down to:

Availability	Bed Type	# of Beds
Year-around	Emergency Shelter	314
	Transitional Housing	313
	Permanent Housing	525
	• Rapid Rehousing	227
	• Permanent Supportive Housing	239 (204 in vouchers)
	• Other Permanent Housing	59
	Year-around Subtotal	1,152
Seasonal	ES Warming Shelters	225
	TOTAL	1,377



MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

Coordinated Entry data (chart below) highlights utilization of available Marion and Polk county housing options. Evidence-based programs such as those listed below are the most utilized programs in the region and yet remain insufficient in meeting need in the region⁴:

- **Permanent Supportive Housing (PSH)**: long-term rental assistance with supportive services
- **Rapid Rehousing (RRH)**: short-term rental assistance for quickly helping households obtain and retain housing
- **Diversion**: Assists families and individuals in securing temporary or permanent solutions to homelessness, outside of the homeless service systems

Coordinated Entry Data for Utilization of Housing Services* (June 2020)

	# HHs Assessed	% of total	Avg. SPDAT	Marion	% Marion	Polk	% Polk
Prevention	328	22%	8	272	20%	55	38%
Diversion	130	9%	3.57	120	9%	10	7%
Rapid Rehousing	611	40%	7.49	558	41%	53	37%
Perm. Supportive Housing	443	29%	11.9	416	30%	27	19%
Total	1,512	N/A	8.5	1,366	90%	145	10%

*Housing Services do not include Emergency Shelter

According to Coordinated Entry data above, **the most needed housing service is Rapid Rehousing (RRH)**. The number of households assessed needing RRH support was 611, while the HIC snapshot shows Marion and Polk counties had 227 beds at any given time. Even if the chart above represented only single person households (which it does not) the delta would be 384 beds. The second-highest need is for Permanent Supportive Housing (PSH). The HIC snapshot shows Marion and Polk counties had 239 PSH beds to shelter 443 households. Again, if the chart above represented only single person households (which it does not) the delta would be 204 beds. This data shows the need for a dramatic increase in Rapid Rehousing and Permanent Supportive Housing options.

In the 2018 Inventory report, **sheltering options** were needed to serve families of all types, and individuals of all need levels. Culturally-specific and low-barrier shelters were identified to be most urgent, specifically for women, youth, families, and non-sobriety required eligibility. The lack of low barrier shelters and sheltering options for families, both with and without minor children and those with boys over 12 years old, to stay together remains a particular concern. For families without minor children, whether those be couples without children or parents with adult children, there are currently no options to stay together in an emergency situation. This presents as a barrier to access for family units who do not wish to be separated. Sheltering with pets has also been an increasing need in Marion

⁴ U.S Interagency Council on Homelessness. (2017). *Key Considerations for Implementing Emergency Shelter Within an Effective Crisis Response System* [PDF]. U.S Interagency Council on Homelessness.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

and Polk counties. Many experiencing unsheltered living will prefer to remain unsheltered than abandoning their pets. In response to this trend, ARCHES began distributing pet food among their other tangible goods and services offered to those experiencing various levels of homelessness and housing insecurity.

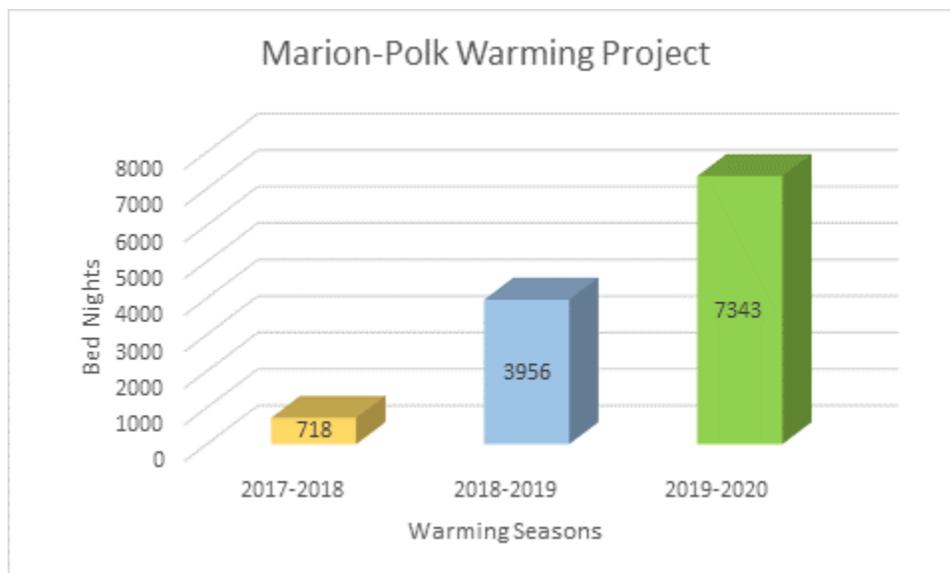
Emergency Shelters: Provide short-term shelter, typically up to 60 days. The 2020 HIC inventoried 314 emergency shelter beds in Marion and Polk counties.

Youth Shelter: Community Action Agency opened a youth emergency shelter in December 2018, Taylor's House, offering safety, stability, structure, and success in moving forward. Taylor's House (11 beds) is located in Salem and provides year-around resources to at-risk, homeless, runaway and street youth ages 11-18 years. Polk County and the rural areas of Marion County do not have any designated youth shelter, which remains a gap in service for this population.

Other Emergency Shelters: Other emergency shelters include those shelters available in a crisis or day-of offered year-around. According to 2020 HIC data, Marion and Polk counties have 314 emergency shelter beds (including the 11 Taylor's House beds).

Seasonal Shelters: Warming shelter beds, or seasonal shelter beds, have increased since 2018. According to the recent Housing Inventory Count snapshot, Marion and Polk counties had 225 seasonal (warming shelter) beds.

Warming shelter bed nights increased by 86% from 2018-19 to 2019-20. Data below show the positive increase in warming shelter bed nights in response to growing needs and strategic efforts. From the 2018 report, warming shelter bed nights have increased ten-fold. A lack of seasonal warming shelters continues in rural areas, as does a lack of year-around sheltering options outside of Salem-Keizer.



MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

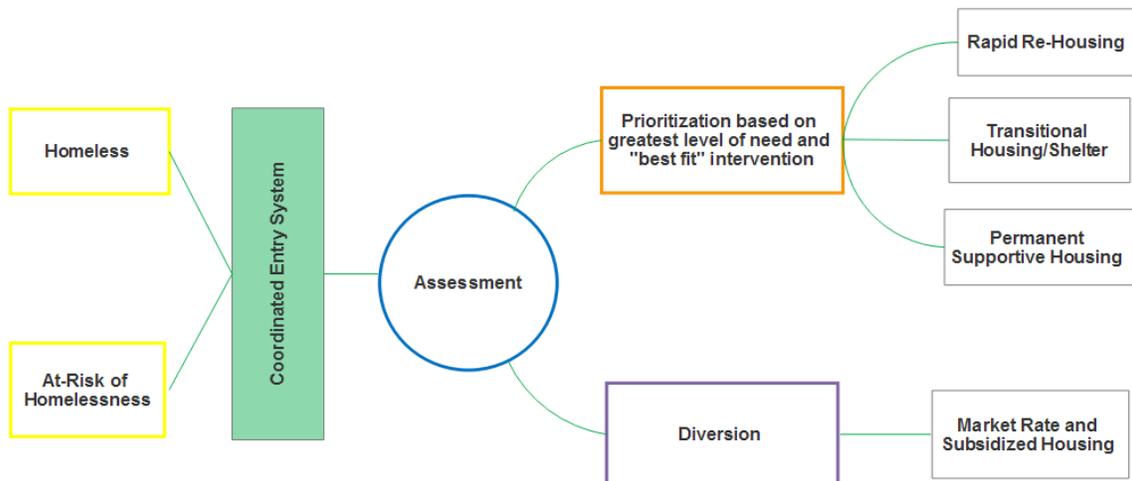
- C. HOMELESS SYSTEM:** Develop a more robust, responsive, coordinated, and client-focused system of services to engage and support individuals and families experiencing homelessness to achieve housing stability.

Of the four areas identified in 2018, the most immediate inefficiency was the fragmented and largely uncoordinated local **homeless response system**. The system at the time was lacking in key elements needed for an efficient response to homelessness, broadly defined as being able to quickly rehouse and/or shelter individuals and families when in need. Formation of the regional CoC and its governance charter provides the foundation for developing the system.

A coordinated system should provide immediate access to low-barrier shelter, and if there is inadequate supply of sheltering options, should allocate limited resources based on vulnerability or need. In a well-functioning system, every individual and family who presents as homeless or at-risk should be offered diversion services, and if none are available or appropriate, same-day emergency shelter should be offered⁵. The region had been operating under a coordinated entry *program* led by Community Action Agency, wherein there are some participating agencies allocating resources through the centralized interest list but not all.

Implementation of a Coordinated Homeless Response System has begun, expanding the Coordinated Entry national model throughout the region. Coordinated Entry is a national best practice intended to organize community homeless assistance resources through appropriate, targeted intervention, with the goal of quickly housing individuals and families⁶. Efforts to recruit community partners to join Coordinated Entry include the development of an outreach plan to service providers, both those receiving and not receiving HUD funds, to utilize Coordinated Entry as a mechanism to align efforts and efficiently serve our community's homeless individuals.

Example of Coordinated Entry Response System:



⁵ US Interagency Council on Homelessness, *Strengthen Crisis Response Systems* (2018).

⁶ U.S Interagency Council on Homelessness. (2017). *Key Considerations for Implementing Emergency Shelter Within an Effective Crisis Response System* [PDF]. U.S Interagency Council on Homelessness.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

Domestic violence providers utilize a separate Coordinated Entry system to keep client information private and secure. Since the 2018 Inventory, Center for Hope & Safety developed local domestic violence Coordinated Entry protocols and shared them with other domestic violence providers across the state.

MWVHA also adopted the national Built for Zero Model to end chronic homelessness and veteran homelessness and is launching Collaborative Case Conferencing in the summer of 2020. Collaborative Case Conferencing is a case management approach to triaging individual needs for those on an established By-Name List to become and remain housed. The By-Name List is generated from Coordinated Entry, and partners throughout the community's coordinated homeless response system are aligned to keep the list current and relevant.

D. HEALTH & PUBLIC SAFETY: Address physical and mental health and public safety issues relating to homelessness

Physical and mental health among those identifying as homeless or housing instable has become an increasingly prevalent need in Marion and Polk counties. Mental and behavioral health issues continue to be top contributing factors among the chronically homeless population. This includes substance use disorders, trauma, psychiatric conditions, violent behavior, and other public health and safety concerns. Mental and behavioral health providers are in high demand in both Marion and Polk counties and often have a wait list for entering services and are dependent on insurance status and/or funding. Barriers exist for individuals seeking counseling services to address mental and behavioral health conditions.

Marion County Law Enforcement Assisted Diversion (LEAD) Program:

LEAD is a Marion County program implemented in 2018 to address low level drug and quality of life crimes in downtown Salem and in East Salem on Lancaster Drive. LEAD diverts people with frequent low-level offenses into community-based treatment and support services – including housing, healthcare, job training, treatment, and mental health support – instead of the traditional criminal justice system. A unique coalition of leaders representing law enforcement, health and human services, prosecution, and local government collaborated to create this pilot program. LEAD's goal is to improve public safety by reducing the criminal behaviors of program participants. LEAD provides participants with immediate case management services and access to additional resources in a coordinated and supportive manner in an effort to avoid booking in the criminal justice system.

E. SPECIFIC POPULATIONS. Address the unique needs and characteristics of specific populations (chronically homeless, youth, families, seniors, LBGTQ populations, farmworkers, Veterans, survivors of domestic violence, survivors of human trafficking, and persons with disabilities, including those who are medically fragile).

Designated Beds – The following chart shows how many of the inventoried beds in the 2020 HIC are designated for HUD-identified populations.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE
THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

Bed Type	Family Units	Family Beds	Chronic	Veteran	Unaccompanied Minors & Youth
Emergency Shelter	13	31		6	11
Transitional Housing	16	47		30	14
Rapid Rehousing	23	82			
Permanent Supportive Housing			2	68	
Other Permanent Housing					
TOTAL	52	160	2	135	25

CHRONICALLY HOMELESS

June 1, 2020 Coordinated Entry data for Marion and Polk counties indicate of those individuals identified as homeless (1,188), 48.7% were identified as chronically homeless. National chronically homeless rates are 16.9% and in Oregon, 37% of total homeless individuals. Of the single individuals experiencing homelessness, nearly 60% are chronically homeless locally versus 37% nationally. Of families experiencing homelessness, 29.2% in Marion and Polk counties are chronically homeless, whereas the national rate is 6% (AHAR, 2020).

YOUTH

Youth (especially those residing in Polk County) experience disparities with available affordable housing. Transitional Age Youth are limited to options dependent on funding, such as the Independent Living Housing Subsidy Program, and the Marion County Youth Rental Assistance Program. Support for families who allow non-familial youth to stay with them (usually their teenagers’ friends) is being developed so a family can shelter a youth legally in their homes as a way to fill the gap in transitional housing. These “host homes” are utilized in lieu of available resources to create a specific building for transitional housing to shelter this population when in need. Youth often “couch surf” as a low barrier attempt to meet shelter and transitional housing needs temporarily. Couch surfing is when an individual rotates between houses based on available bed/couch/space to sleep temporarily for one or several nights.

Youth face additional barriers as many are minors (under the age of 18). Youth often are not able to obtain housing due to lack of legal identification, legal emancipation or parent consent, income and financial resources, rental history, and experience navigating the system. Many youth are experiencing homelessness due to toxic family environments or the families themselves are experiencing homelessness and may need to separate members in order to obtain shelter. **70% of adults in the region’s Coordinated Entry system reported experiencing homelessness as a youth.**

More than 2,000 students attending publicly-funded schools in Marion and Polk counties have been identified as homeless and are enrolled in the McKinney-Vento Program (a HUD-funded program for serving those experiencing homelessness, utilizing a broader definition than ‘literal homelessness’). See chart below.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE
THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

Homeless Students Enrolled in and Identified at Public Schools in Marion and Polk Counties:

District	County	K-12 Total	In Shelter	Doubled-Up/Couches	Motel/Hotel	Unsheltered	Unaccompanied
St Paul SD 45	Marion	12	0	11	0	*	0
North Marion SD 15	Marion	16	*	9	*	*	*
Jefferson SD 14J	Marion	21	0	18	*	0	*
Mt Angel SD 91	Marion	25	0	21	0	*	*
North Santiam SD 29J	Marion	58	*	50	*	*	*
Gervais SD 1	Marion	64	*	55	0	8	*
Silver Falls SD 4J	Marion	73	0	64	6	*	0
Cascade SD 5	Marion	83	26	53	*	*	12
Woodburn SD 103	Marion	319	*	247	*	62	39
Salem-Keizer SD 24J	Marion	1,164	85	908	82	89	233
Perrydale SD 21	Polk	10	0	0	0	10	0
Falls City SD 57	Polk	32	0	15	0	17	6
Dallas SD 2	Polk	70	7	58	0	*	0
Central SD 13J	Polk	84	*	70	*	6	26
Marion-Polk Totals		2,031	118	1579	88	192	316

Youth, especially those residing in Polk County, experience gaps in youth-specific shelter at all ages up to 25 years (Transitional Aged Youth are those ages 18-24 years). **Of those students identified as homeless in the region, 196 (10%) attend school in Polk County and 1,831 in Marion (90%).** New Family First legislation went into effect on July 1, 2020 which limits Foster Care youth remaining in shelter for longer than two months, further limiting options for youth with need for consistent shelter and/or housing.

Youth are often coupled with adults in service array and delivery, however, are often left behind if services do not specifically call out youth. Youth are a culturally-specific group of individuals themselves and have different needs and barriers than adults. Similar to MWVHA's implementation of collaborative case conferencing and By-Name Lists for adults (chronically homeless and Veterans), youth are a population that currently remains without youth-dedicated collaborative case conferencing to triage culturally-specific needs and services to end and prevent youth homelessness.

FAMILIES

Children under the age of 18 living in poverty account for over 25% of Marion County's under-18 years old population, and over 17% in Polk County. The [Marion-Polk Community Health Needs Assessment](#) also indicates nearly 34% of all children in Marion County and 26% of all children in Polk County under 18 live in a single-parent household. Of those, nearly **76% of those householders are female single**

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

parents in Marion County and 72% in Polk County. Children receiving SNAP benefits account for nearly 57% of all households with children under age 18 in Marion County and nearly 49% of all households with children under age 18 in Polk County—both rates above the state rate of 45% (CHA, 2019).

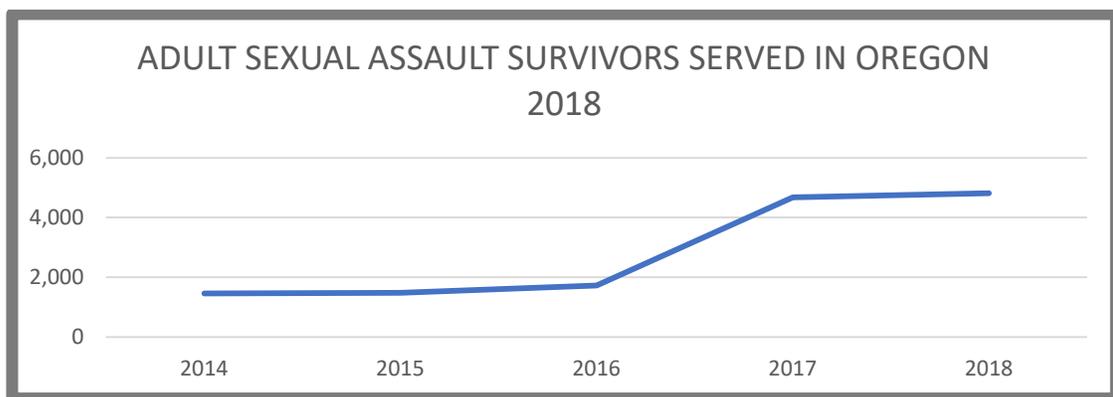
According to the [2019 AHAR](#), about one in three (30%) people experienced homelessness as part of a family with at least one adult and one child under 18 years of age. Less than 1% were in households composed of one or more children without an adult present (AHAR, 2020). Sheltering options remain a need for families of all types. Culturally-specific and low-barrier shelters were identified in the 2018 Inventory to be most urgent, specifically for women, youth, families, and non-sobriety required eligibility. The 2020 HIC shows 52 designated family units with 160 family beds in Marion and Polk counties; 82 of those designated family beds are in rapid rehousing, 47 are in transitional housing, and 31 are in emergency shelters.

The lack of low barrier shelters and sheltering options for families, both with and without minor children and mothers with boys over 12 years old, to stay together remains. For families without minor children, whether those be couples without children or parents with adult children, there are currently no options to stay together in an emergency situation. This presents as a barrier for family units that do not wish to be separated.

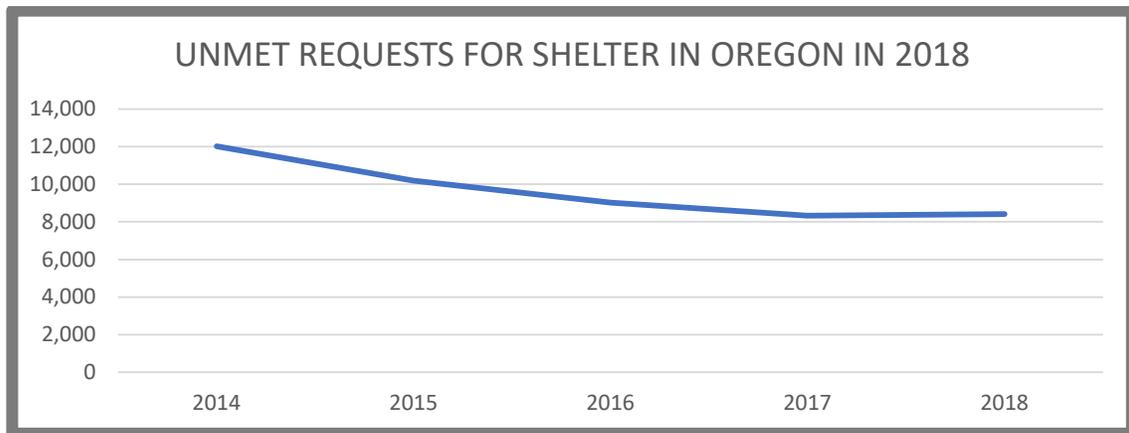
DOMESTIC VIOLENCE SURVIVORS

Homelessness resulting from domestic violence has been a HUD priority in recent years and a local priority for community leaders in the Marion-Polk county region. In 2015, one in five homicides in Oregon was the result of domestic violence, or “intimate partner violence” in the [Marion-Polk Community Health Needs Assessment](#). A 2015 Marion County jail survey found that 86% of female inmates had experienced domestic violence and three out of four inmates had experienced sexual abuse. Evaluators emphasized that rates of domestic violence with corrections-involved females in Marion County were significantly higher than the norm in other jurisdictions. Corrections-involved individuals are also at significant risk for homelessness.

The number of adult survivors of sexual assault who were served by domestic violence service providers rose significantly [in Oregon](#) (DHS, 2020), while unmet need for shelter decreased slightly. Despite the decrease, unmet need remains prevalent.



MID-WILLAMETTE VALLEY HOMELESS ALLIANCE THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON



In Marion and Polk counties, services focused on domestic violence (DV), or intimate partner violence, appear on both the gaps and needs analysis of the [Community Health Needs Assessment](#)—each in the top five priorities (2019). Domestic and sexual violence programs at shelters are offered to help survivors assess their options and how to minimize risk.

Local Coordinated Entry data from July 2018 indicated of the 1,657 people assessed in Marion County, 733 **reported a history of domestic violence (44.2%)**. Of those 733 individuals, 331 (19.9% of the total; 45% of reported DV) stated that they were fleeing from their last intimate partner relationship. In Polk County, 164 individuals were assessed and of those, 79 **reported a history of DV (48%)** and 40 (24% of the total, and 50.6% of reported DV) stated that they were fleeing. In its last reporting year, Center for Hope & Safety received more than 30,000 contacts to their program. The 2020 HIC identified 31 DV beds in Marion and Polk counties, although additional resources are coming online through the Center for Hope & Safety's latest CoC-funded program for Rapid Rehousing.

A DV-related survey conducted by the Oregon Legislative Alliance in 2018 identified housing as the number one priority. The survey included DV survivors (31%), social service providers, DHS caseworkers, tribal advocates, health care providers, faith-based partners, legal advocates, prosecutors, law enforcement, and domestic and sexual violence service providers. More than 58% of the responses were from outside the Portland Metro area and 23% from the Mid-Valley region.

VETERANS

According to the [Marion-Polk Community Health Needs Assessment](#), military personnel can experience higher rates of exposure to adverse environmental factors during service that can increase risk for chronic health conditions and/or disability. About 10% of community members were Veterans, and **Polk County had a larger proportion of Veterans than Marion County and the state**. The proportion of Veterans living in the community has been decreasing in recent years, most of who served in Vietnam or the Gulf War.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

Across Oregon, rural Continuums of Care saw the greatest increase in homelessness among Veterans in 2018, jumping from 379 in 2017 to 474 in 2018. Homeless Veterans in rural Oregon counties now outnumber homeless Veterans in Multnomah County (which saw an increase of just two).

A Veterans By-Name List is currently operated and managed by Mid-Willamette Valley Community Action Agency (MWVCAA) and utilized by Veterans service providers in the community via case conferencing, to coordinate services and collaborate on provider referrals for individuals and families on the list. This ensures not only that services are not being duplicated for Veterans, but also that all resources are shared and brought to the table for each Veteran experiencing homelessness. Releases of Information are utilized to ensure privacy as well as communication around collaborative resource sharing for Veterans on the By-Name List.

Built for Zero methodologies are improving the quality of the MWVHA Veteran By-Name List, such as identifying which service providers are connected to each Veteran and which programs they are eligible for as they move through the Continuum of Care. Built for Zero is also improving Case Conferencing methodology to increase community participation and frequency, allowing for more efficient and rapid placement of Veterans experiencing homelessness.

According to a November 2019 report, there were 233 Veterans experiencing homelessness within the MWVHA region, with 80 (34%) identified as chronically homeless. Forty-five (45) Veterans on the By-Name List were female, equating to 19% of Veterans experiencing homelessness in Marion and Polk counties. The Marion-Polk region has six (6) emergency shelter beds designated for male Veterans, 30 transitional housing beds for male Veterans, and 68 HUD VASH vouchers.

Identified gaps from Veteran service providers in Marion and Polk counties include shelter and transitional beds available to female Veterans, and low barrier beds for both female and male Veterans.

OTHER UNDERSERVED OR UNDERREPRESENTED POPULATIONS

The Marion-Polk region encompasses a culturally diverse population, with a particularly high Latinx population, but also significant Russian, Marshallese, and other diverse populations that experience or are at risk of experiencing homelessness. According to the recent [Community Health Needs Assessment](#), Marion and Polk counties have a greater percentage of the community population being younger, under the age of 25, than Oregon. The community has a larger percentage of members that identified as Hispanic or Latinx than Oregon. About 26% identified as Hispanic/Latinx in Marion County, compared to 13% in Polk County, and 12% in Oregon. Marion and Polk counties have a higher percentage of members that speak a language other than English at home than Oregon. Roughly 1 in 4 households (25%) in Marion County speak a language other than English, compared with 14% in Polk County, and 15% in Oregon. The most common languages spoken after English were Spanish, Asian or Pacific Islander languages, and Russian. About 15% of community members are living with a disability, which has been increasing over time. The most common types of disabilities in the community were difficulties walking, living alone, or cognitive. The proportion of community members living with a disability differed by race and ethnicity. One third (33%) of Marion County community members lived outside of the five largest cities in Marion County. About 16% of Polk County community members lived outside of its largest cities. The region is

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE THE CONTINUUM OF CARE FOR THE MARION & POLK REGION OF OREGON

growing, aging, and becoming more diverse, a trend that is predicted to continue into the future. Population projections estimate that there will be 500,000 community members by 2035. Older adults will represent a greater proportion of the overall population in the future than they do currently (CHA, 2019).

Over a fifth of all people experiencing homelessness nationally were Hispanic or Latino (22%). Nearly three in 10 people in families with children experiencing homelessness were Hispanic/Latino (29%), considerably higher than the proportion of Hispanic/Latino individuals experiencing homelessness. Almost all Hispanic/Latino families experiencing homelessness, 94 percent, were sheltered (AHAR, 2020).

Unsheltered homelessness increased nationally in 2019 across all racial groups, with largest absolute increases observed among people who were either white (increase of 5%) or African American (increase of 10%), followed by a 28% increase in the number of unsheltered Native Americans (an increase of 28%) (AHAR, 2020).

Seniors experience disparities in available affordable housing (especially those ages 58 to 62 years) and accessing shelters, and are often the victims of violent crimes and robbery.

Nearly two-thirds of people experiencing homelessness nationally were men or boys (61% or 343,187 men and boys), 39 percent were women or girls (219,911 women and girls), and less than one percent were transgender (3,255 people) or gender non-conforming (1,362 people). These gender characteristics reflect the high percentage of men among the homeless individual population (AHAR, 2020).

F. PREVENTION & SYSTEMS ALIGNMENT: Align systems and expand strategies that mitigate risks of becoming homeless or returning to homelessness.

Marion- and Polk-based organizations are actively working to align systems and programs focused on supporting and preventing individuals from experiencing homelessness. Programs are designed to support individuals and families across the continuum of homelessness. Financial literacy classes are offered at schools and shelters as a harm-reduction and prevention strategy, aligning education for self-sufficiency with homeless service providers. Many systems and agencies effectively partner in Marion and Polk counties and have begun to integrate healthcare with social services, specifically with children, families, and education.

In 2019, various systems and stakeholders in Marion and Polk counties aligned to conduct a Community Health Needs Assessment. The assessment identified data-driven, key gaps and needs. The top five were:

- Safe, stable, affordable housing options.
- Expansion of services to chronically homeless with health, mental health, and substance abuse tri-morbidity needs.
- Continued efforts to reduce domestic violence and the impact on affected populations.
- More affordable, high-quality child care for low-income families and the subsidy to pay for it.
- Adequate public transportation in rural areas and in Salem on evenings and weekends.

Mapping Connections between Mainstream Resources and Programs and Homelessness Services

