



**MID-WILLAMETTE VALLEY
HOMELESS ALLIANCE**
MOVING TO END AND
PREVENT HOMELESSNESS

Marion and Polk Counties' Homeless and Housing Services
GAPS ANALYSIS

August 2021

PURPOSE

The purpose of this Gaps Analysis is to provide regional data to inform local planning and decisions for the Mid-Willamette Valley Homeless Alliance and partners. This document provides an overview of relevant data and a gaps analysis, which can help attract resources and improve service delivery, array, and access for those experiencing housing instability and homelessness in Marion and Polk counties.

TABLE OF CONTENTS

I. BACKGROUND	Page 3
II. PREVALENCE OF HOMELESSNESS	Page 5
III. DATA ALIGNED WITH REGIONAL GOALS	Page 9
Goal 1: Homeless Services System	10
Goal 2: Affordable Housing	13
Goals 3-5: Shelters, Transitional Housing, Permanent Housing	16
Goal 6: Health and Safety	21
Goal 7: Prevention Services and Systems Alignment	23
Goal 8: Specific Populations	24
Goal 9: Community Engagement	33

I. BACKGROUND

Marion and Polk counties are located in the Willamette Valley and are the fifth and thirteenth most populous counties in Oregon. Marion and Polk counties span approximately 1,950 square-miles, 1,200 of which are in Marion County and 750 in Polk County. Marion County's five largest cities, home to 66% of the county's total population, are Keizer, Salem, Silverton, Stayton, and Woodburn. Polk County's largest cities are home to approximately 84% of the county's total population, and are Dallas, Falls City, Independence, Monmouth, Salem, and Willamina. The Marion-Polk region makes up approximately 10% of the total state population. Marion County and Polk County populations have increased by 10% and 14% respectively since 2010.

2016-17

Over the course of 12 months, a multi-disciplinary task force engaged more than 100 people to develop a strategic plan to address homelessness in Marion and Polk counties. Led by elected commissioners of Marion and Polk counties and the mayors of Salem and Keizer, this Mid-Willamette Homeless Initiative Task Force was the pre-cursor to the Mid-Willamette Homeless Initiative Steering Committee, which took on the task of implementing that 2017 strategic plan.

2018

In October 2018, the Mid-Willamette Homeless Initiative program coordinator completed a resource mapping project for the steering committee to understand available services and identify gaps for those who are experiencing homelessness throughout Marion and Polk counties. More than 550 resources were assessed, and findings identified four primary needs for the region's homeless and housing services delivery system:

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

2019

Over the course of 2019, regional stakeholders and local leaders convened to conduct a region-wide Marion-Polk Community Health Needs Assessment (CHA) using an evidence-based process to comprehensively collect and assess current data and trends. The primary trend identified through the comprehensive, multi-sector data analysis was the increasing **unmet housing need**, perceived to be due to lack of availability and lack of affordability, for both renting and owning. Secondary trends were the increasing unmet need for mental health and substance abuse treatment and support, increasing

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

rates of sexually transmitted diseases, increasing cost of healthcare, and increasing tensions around immigration and immigration policy (CHA, 2019).

The Mid-Willamette Homeless Initiative mobilized efforts and partner collaboration to establish a local Continuum of Care (CoC). Marion and Polk counties withdrew from the large, “balance of state” Rural Oregon Continuum of Care and the Mid-Willamette Valley Homeless Alliance (the “Alliance”) successfully applied for and transitioned into a registered, regional Continuum of Care (CoC) in December 2019. As such, the Alliance promotes communitywide systems committed to the goal of ending and preventing homelessness, a primary focus of the U.S. Department of Housing and Urban Development (HUD) [CoC Program](#). CoCs also direct HUD funding to 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.

2020

In July 2020, Alliance staff updated the 2018 service inventory and prepared the first regional Gaps Analysis.

2021

In August 2021, Alliance staff prepared the second regional Gaps Analysis. Updated findings and data were aligned with the region’s priority areas identified in the Alliance Strategic Plan.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

II. PREVALENCE OF HOMELESSNESS

ACROSS THE NATION

On a single night across the United States, 18 out of every 10,000 people were experiencing homelessness. Sixty-one percent (61%) of individuals experiencing homelessness were staying in sheltered locations, leaving nearly 40% unsheltered or in locations not suitable for human habitation. According to HUD’s 2021 Annual Homeless Assessment Report (AHAR, 2021), the number of people experiencing homelessness nationwide increased by nearly three percent in one year (2018-2019), and by two percent the following year (2019-2020). Moreover, the number of individuals experiencing **chronic homelessness (repeated or long-term) increased by 15% in one year**, from 2019 to 2020.

IN OREGON AND MARION AND POLK COUNTIES

Oregon’s total homelessness rates increased by nearly 10% in one year (2018-2019), contributing to a 20% increase from 2016 to 2019 (AHAR, 2019). Three Oregon counties significantly contributed to these large increases, having both the highest number and greatest percentage of households experiencing homelessness: Multnomah (30% of total homeless statewide), Lane (11% of total homeless statewide), and Marion (8% of total homeless statewide). Polk County ranked 16th among Oregon counties, contributing 1% of the total homeless population statewide.

CHRONIC HOMELESSNESS

Marion and Polk’s counties’ homeless population experiences high rates of *chronic homelessness*, a HUD designation applied to “*either (1) an unaccompanied homeless individual with a disabling condition and continuously homeless for a year+, or (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years.*”

Local Coordinated Entry data (June 2021) illustrates the number of the region’s homeless population and chronic homeless prevalence, as compared to the state and nation.

	Prevalence #	# chronic Homeless	% chronic (out of prevalence #)	% chronic (Oregon)	% chronic (Nation)
Total homeless	811	352	43%	37% (2019)	17% (2019)
Single Individuals	592	331	56%	37%	37% (2019)
Number of Families	76	27	36%	6%	6%
Number Individuals in Families	301	-	-	-	-

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

GENDER

Nearly two-thirds (61%) of people experiencing homelessness nationally were men or boys while 39% were women or girls. Less than 1% were transgender or gender non-conforming (AHAR, 2020). The high prevalence of men among the homeless individual population across the nation is reflected locally as well. Males in Marion and Polk counties accounted for 63% of total individuals counted in the 2021 shelter count. The 2021 HIC PIT shows the breakout of sheltered individuals by gender, all three types of shelter were disproportionately utilized by males more than females.

Gender (adults and children)	Sheltered			Total
	Emergency	Transitional	Safe Haven	
Female	101	61	1	163
Male	111	158	7	276

Males in the community had a higher mortality rate than females, and have lower life expectancy than females. Male chronic disease rates are higher among men and men die at a higher rate from injury than women.

RACE AND ETHNICITY

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.

More than a fifth of all people experiencing homelessness nationally were Hispanic or Latino (22%). Nearly three in ten 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).

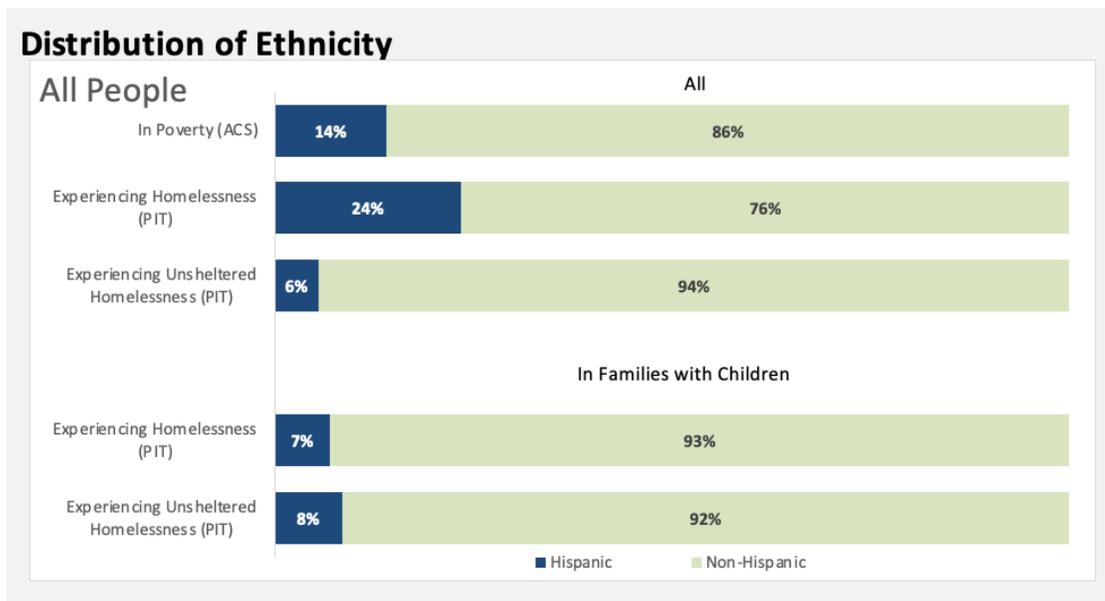
MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

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

A Marion-Polk region homeless services system 2020-21 study conducted by a student team from Willamette University’s Atkinson School of Management found through structured interviews, surveys, and data analysis:

- Native and Latinx groups are overrepresented in the houseless population.
- There is an underutilization of vouchers by minority groups.
- There are differences in the way in which people of color interact with services.
- There are Latinx community members who experience housing insecurity who need rent assistance but are under reported due to multigenerational homes.
- There is an abundance of barriers the BIPOC community faces.

In addition, 26% of community members in Marion County identified as Hispanic or Latina(o), which was higher than Polk County (13%) and Oregon (12%). Marion County had a smaller proportion of members who identified as White, non-Hispanic/Latina(o) than Polk County and the state. Marion County also had a larger proportion of members who identified as Native Hawaiian or Pacific Islander than Polk County and the state. Those who identified as American Indian/Alaska Native, African America/Black, White, non-Hispanic, or Multiracial, had a higher proportion of people living with disabilities and higher death rates (CHA, 2021).



III. DATA ALIGNED WITH REGIONAL GOALS

The Alliance's [Strategic Plan](#) identifies nine regional goals for local efforts to end and prevent homelessness. Data has been aligned to identify the gaps related to each of these goals:

- 1) **HOMELESS SERVICES SYSTEM.** Develop a robust, responsive, coordinated, and client-focused system of services to engage and support individuals and families experiencing homelessness to achieve housing stability.
- 2) **AFFORDABLE HOUSING.** Increase access and expand affordable housing units to help fill the gap in housing supply across Marion and Polk counties.
- 3) **SHELTERS.** Address gaps in shelter beds, including the need for low-barrier shelters.
- 4) **TRANSITIONAL HOUSING.** Address gaps in transitional housing, including capacity for transitional case management.
- 5) **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.
- 6) **HEALTH & SAFETY.** Address physical and mental health and safety issues relating to homelessness.
- 7) **PREVENTION SERVICES & SYSTEMS ALIGNMENT.** Align systems and expand strategies that mitigate risks of becoming homeless or returning to homelessness.
- 8) **SPECIFIC POPULATIONS.** Address the unique needs and characteristics of specific populations (chronically homeless, youth, families, seniors, LBGTO populations, farmworkers, Veterans, survivors of domestic violence, survivors of human trafficking, and persons with disabilities, including those who are medically fragile).
- 9) **COMMUNITY ENGAGEMENT.** Increase leadership, communication, collaboration, and community engagement in preventing and reducing homelessness.

GOAL 1: HOMELESS SERVICES SYSTEM

COORDINATED ENTRY SYSTEM

Formation of the regional CoC and its governance charter provided the foundation for developing the coordinated regional homeless services 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 offered.¹

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 families². The U.S. Department of Housing and Urban Development (HUD) requires that CoCs establish and implement a Coordinated Entry (CE) process that can be used by any local organization providing housing services to people experiencing a housing crisis (Responsibilities of the Continuum of Care, 2016). Coordinated Entry is a person-centered process utilized by multiple agencies, in order to ensure those experiencing homelessness can get help finding stable housing and/or access to other services specifically developed for people experiencing a housing crisis. This process allows homeless persons and/or those at-risk of becoming homeless to be assessed, referred, and connected to the appropriate shelter or housing service(s) in a timely fashion. The assessment is used to determine vulnerability levels of individuals and/or households in order to match their needs with appropriate resources. The data collected via CE Assessment is not intended to be utilized by only a single organization, but rather centralized into a Homeless Management Information System (HMIS) that can be edited and/or added to by different agencies within a given region as needed. One goal of this method is reducing the need for participants to have to tell their story multiple times throughout multiple assessment phases, hopefully minimizing trauma for participants (Coordinated Entry Elements, 2017, 2019).

The four components of a Coordinated Entry System are 1) Access, 2) Assessment, 3) Prioritization, and 4) Referral. A December 2020 assessment of the Alliance's Coordinated Entry System (CES) used HUD's Self-Assessment Tool to evaluate of the four components, as well as CES Planning, Data Management, and Evaluation. Findings were used to identify system gaps and action plans to address these gaps. A summary of the Access, Assessment, Prioritization, and Referral findings is provided below.

¹ US Interagency Council on Homelessness, *Strengthen Crisis Response Systems* (2018).

² 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

COMPONENT #1: ACCESS	Standards Assessment					Improvement Plan Summary
	# of Standards	# Met	%	# Need Improvement	%	
Essential Standards	14	8	57%	6	43%	Creating a robust, multi-faceted model for system access by all populations across the region, along with population-specific tools and accommodations will address current system shortcomings
Recommended Standards	2	2	100%	0	na	
Optional Standards	3	2	67%	1	33%	
Total # of Access Standards	19	12	63%	7	37%	

COMPONENT #2: ASSESSMENT	Standards Assessment					Improvement Plan Summary
	# of Standards	# Met	%	# Need Improvement	%	
Essential Standards	9	9	100%	0	na	Adopting a youth assessment tool and conducting introductory and ongoing assessor training, including basic assessment protocols and effective engagement methods for special populations (e.g.; mental health, youth, domestic violence survivors, autism, non-English speakers) will strengthen the assessment aspect of the system.
Recommended Standards	14	9	64%	5	36%	
Optional Standards	3	1	33%	2	67%	
Total # of Assessment Standards	26	19	73%	7	27%	

COMPONENT #3: PRIORITIZATION	Standards Assessment					Improvement Plan Summary
	# of Standards	# Met	%	# Need Improvement	%	
Essential Standards	8	6	75%	2	25%	Developing and documenting prioritization based on a specific and definable set of criteria, and engaging all providers to support the CE system will help standardize the system and improve client outcomes.
Recommended Standards	5	4	80%	1	10%	
Optional Standards	1	1	100%	0	na	
Total # of Prioritization Standards	14	11	79%	3	21%	

COMPONENT #4: REFERRAL	Standards Assessment					Improvement Plan Summary
	# of Standards	# Met	%	# Need Improvement	%	
Essential Standards	5	3	60%	2	40%	Increasing training, support, and monitoring of CoC- and ESG-funded providers to assess and improve client connections; engaging other providers; and, ultimately, increasing resources will address shortcomings in the referral aspect of the system.
Recommended Standards	12	5	42%	7	58%	
Optional Standards	2	1	50%	1	50%	
Total # of Referral Standards	19	9		10		

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

Over the past year, the Alliance expanded the number of housing providers using HMIS from 25% to 80% as of July 2021.

The coverage rate for year-around beds reported in HMIS was 43% in 2020, which rose to 68% in 2021. The following chart shows how many of the region’s inventoried beds are represented in HMIS. 100% of permanent supportive housing providers and seasonal shelters utilize HMIS, 75% of rapid rehousing, 46% of transitional housing, and 68% of emergency shelter beds. Since organizations providing shelter for survivors of domestic violence do not use HMIS, data is calculated without those 72 beds for a total of 1,290 beds.

Bed Type Inventoried	Inventory w/o DV Beds	Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter	247	167	68%
Transitional Housing	382	176	46%
Rapid Rehousing	369	245	75%
Permanent Supportive Housing	243	234	100%
Other Permanent Housing	6	0	0%
SUBTOTAL	1,205	822	68%
Seasonal/Warming Shelter	85	85	100%
TOTAL	1,290	907	70%



MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

GOAL 2: AFFORDABLE HOUSING

HOUSING SHORTAGE

Across Oregon, including in the mid-Willamette Valley, there is a housing shortage. From 2000 to 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. However, an average of just 89 units per year were built for every 100 households formed in Marion County, from 2000 to 2016.

RENTERS

As outlined in the 2020 Out of Reach Report³, Marion County has 47,366 renting households, 41% of total households, and Polk County has 10,277 renting households, 35% of total households. In comparison, Oregon's renting households make up 18% of total households. Vacancy rates for Marion and Polk counties were 2.3% and 2.9%, respectively⁴.

RENT BURDENED

The federal standard is that no more than 30% of a household's gross income should be spent on rent and utilities. Households paying more than 30% of their income are considered cost burdened. Households paying more than 50% of their income are considered severely rent burdened.

The general housing shortage exacerbates conditions for low-income individuals and families. Many of these households are severely cost burdened, spending more than half of their income on housing.

AFFORDABLE RENTAL HOUSING

"Affordable housing" is that which was originally funded or put into the affordable housing stock with the support of tax funding (tax credits, grants, and other public dollars), and, in turn, is required to provide rental housing at a "reduced rate" to low-income households for an established period of time (dependent on funding stream). The local need for affordable housing is substantial. According to Oregon Housing and Community Services' (OHCS) Affordable (Rental) Housing Inventory (2019), Marion County has 3,146 affordable rental units, and Polk County has 839 affordable rental units. The data below shows affordable rental housing units in inventory for both counties, the Need Distribution Percentage, and number of units for equity.

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

⁴ US Department of Housing and Urban Development (2016).

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

Affordable Housing	Marion	Polk	Total Region
Affordable Housing Units in Inventory	3,146	839	3,985
Need (Equity) Distribution Percent	7.1%	1.8%	
Equitable Distribution of Units	4,530	1,169	5,699
Actual Units / Equitable Distribution of Units	69.4%	71.8%	
Units Needed	1,384	330	1,714

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 to be 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.

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 affordable rental units in their respective counties, leaving many without affordable housing options ([OHCS, 2019](#)). The number of affordable rental units in Marion would need to increase by 44% (1,384 units) just to meet current need; and an increase of 39% (330 units) is required to meet the current need in Polk County. Overall, the current affordable rental housing unit deficit for Marion and Polk counties is more than 1,700 units.

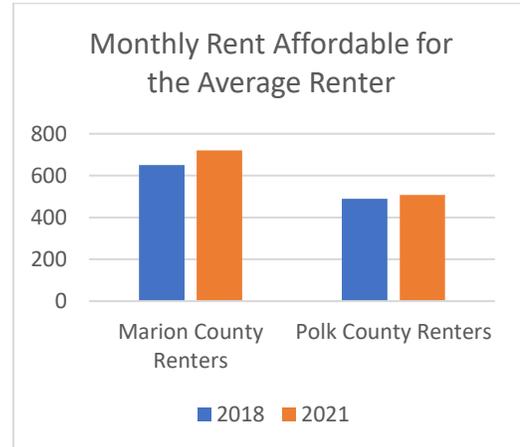
Affordable rental housing gaps exist – in general availability, as well as for specific populations:

- 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 (18-24 years old): Marion County Youth Rental Assistance Program, Independent Living Housing Subsidy Program (dependent on funding)

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

RENT

In the past three years, average renter capacity has increased – 10.8% for Marion County renters and 3.7% for Polk County renters. The [2021](#) estimated monthly rent that is affordable at mean renter wage⁵ is calculated to be: \$720 in Marion County (up from \$650/month in 2018), and \$508 in Polk County (up from \$490/month in 2018). Although affordable rent at mean renter wage has increased, the rate has not kept pace with the increased cost of rental units.



RENTER INCOME

Oregon’s zero-bedroom/studio housing unit average monthly rent is \$949 which requires a \$38,000 annual income to afford. Oregon’s average monthly rent for a three-bedroom apartment is \$1,824 which requires a \$73,000 annual income to afford. The estimated median renter household income in Polk County is \$34,367 and in Marion County, \$38,520. Average monthly rents exceed what is affordable for median renter households, and even more so unaffordable for minimum wage households.

At minimum wage, an individual would need to work 61 hours per week to afford renting a zero-bedroom/studio apartment, and 117 hours per week to afford renting a three-bedroom housing unit. Minimum wage earners’ affordable rent is \$624 per month, an unattainable amount for even a zero-bedroom housing unit. The gap in affordable rent for those earning minimum wage is nearly 35% (minimum of \$325/month) for even the most affordable housing unit.

Families earning minimum wage must choose to work more than full time to afford any size of housing unit, doubly impacting families with young children having to choose between long hours away from parenting their children and long childcare hours. Working 61 hours to 117 hours per week to afford a stable place to live further marginalizes those experiencing disparities and deepens the opportunity gap to end the prevalence of generational poverty. Demographics show that one out of every two babies born in Oregon are born into Medicaid coverage. The rate of children living in poverty is nearly 50% across the region. Additionally, 37% of babies born in Marion County are of Hispanic origin, a population which currently experiences racial disparities and generational poverty (OHA vital statistics, 2017). Rent is not affordable for families living on minimum wage. The grave impacts of unaffordable rent compound with racial disparities, poverty, health disparities, and in marginalized populations.

⁵ National Low Income Housing Coalition. (2020). *2019 Out of Reach: The High Cost of Housing* [\[PDF\]](#). National Low Income Housing Coalition.

HOMELESS HOUSEHOLDS

Data for Marion and Polk counties show 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 Social Security Income (SSI) of or around \$750 per month. Monthly rent that is affordable to households relying on SSI is \$250. Average rent for a zero-bedroom apartment in Marion and Polk counties is \$949/month, making housing unattainable for households depending on SSI. This gap leaves the majority of homeless individuals and families without affordable options to be self-sufficient in long-term permanent housing.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

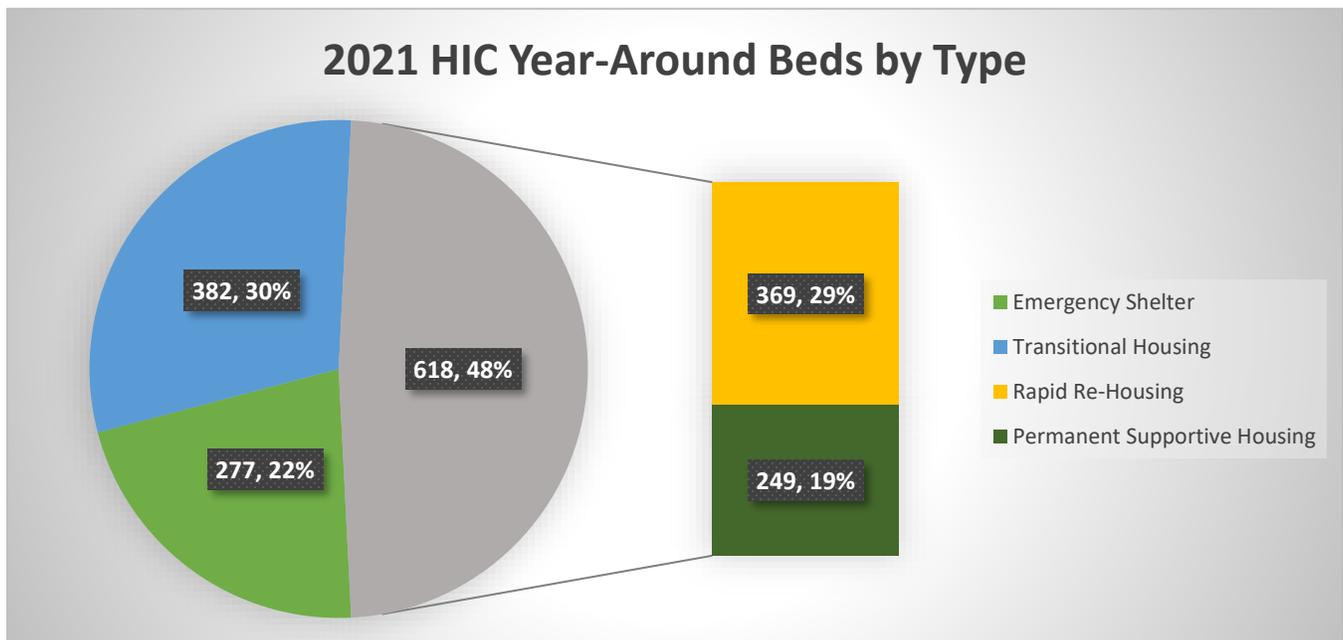
GOALS 3-5: SHELTERS, TRANSITIONAL HOUSING, AND PERMANENT HOUSING

The 2021 Housing Inventory Count (HIC) for Marion and Polk counties indicates the region had 1,186 year-around beds and 85 seasonal beds (warming shelters), for a total of 1,271 beds to address homelessness. The addition of 91 temporary beds added with COVID funding helped offset beds lost due to social distancing requirements and brought the total number of beds up to 1,362 for the region.

2021 Housing Inventory Count

Availability	Bed Type	# of Beds	COVID temporary beds	Total by Type
Year-around	Emergency Shelter	203	74	277
	Transitional Housing	382	0	382
	Permanent Housing	601	17	618
	• Rapid Rehousing	369 (market-based)		
	• Permanent Supportive Housing	243 (198 market-based; 45 facility-based)		
	• Other Permanent Housing	6 (facility-based)		
	Year-around Subtotals	1,186	91	1,277
Seasonal	Warming Shelters	85	0	85
	TOTALS	1,271	91	1,362

2021 HIC Year-Around Beds by Type



MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

FACILITY-BASED, MOTELS, AND MARKET-BASED HOUSING

The following chart shows the region’s year-around inventory by where the beds are located from the 2021 HIC: facility-based beds, motels, and methods used to access the housing market (Rapid Rehousing and vouchers).

2021 Housing Inventory Count

Bed Type	Facility-based Beds	Beds using Market		Motel Beds	Total
		RRH	Vouchers		
Emergency Shelter	198			79	277
Transitional Housing	330		52		382
Rapid Rehousing		369			369
Permanent Supportive Housing	45		198		243
Other Permanent Housing	6				6
TOTALS	579	369	250	79	1,277 year-around beds
		619			
	45%	48%		7%	

FACILITY-BASED BEDS

The number of market-based beds fluctuates with available resources for hotel/motel stays and rental assistance (rapid rehousing and most permanent housing). Year-around facility-based beds are comprised of permanent shelters, transitional housing, and some permanent housing. In 2021 there were 579 facility-based beds to meet the region’s year-around needs.

The 2021 HIC shows 198 facility-based emergency shelter beds and the growing use of hotel/motel beds to temporarily shelter individuals and families.

Year-around Facility-based Beds	
Emergency Shelter	198
Transitional Housing	330
Permanent Housing	51
TOTAL	579

When permanent and transitional housing is not available, the homeless response system must look for even more temporary solutions through emergency shelter options. Even with all these year-around and temporary options, there remains approximately 1,500 unsheltered homeless individuals on a given night in Marion and Polk counties.

Data below shows the need for different types of housing, based on Coordinated Entry assessments.

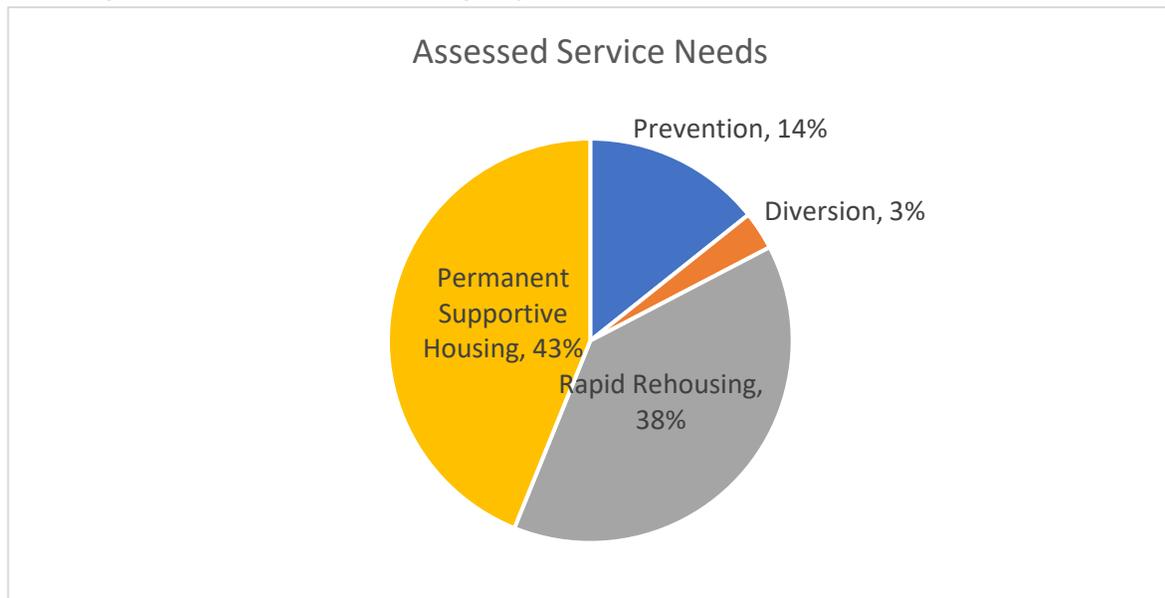
MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

- **Prevention:** Assistance to keep people in housing
- **Rapid Rehousing (RRH):** Short-term rental assistance to quickly help households obtain and retain housing, typically for 12-24 months
- **Permanent Supportive Housing (PSH):** long-term rental assistance with supportive services

Coordinated Entry Data for Assessed Housing Service Needs* (June 2021)

	# HHs Assessed	% of total	HHs in Marion	% Marion	HHs in Polk	% Polk
Prevention	107	14%	91	13%	16	29%
Diversion	28	3%	24	3%	4	7%
Rapid Rehousing	283	38%	269	39%	13	24%
Perm. Supportive Housing	320	43%	299	44%	21	38%
Total	738	N/A	683		54	

*Housing Services do not include Emergency Shelter



According to 2021 Coordinated Entry assessment data, the most needed housing service was Permanent Supportive Housing (PSH), which accounted for 43% of the needs. In the past year, Salem Housing Authority opened Redwood Crossings, a permanent supportive housing facility with 36 beds. **While a move in the right direction, there remains a large unmet need for permanent supportive housing.**

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

Rapid rehousing (RRH) accounted for 38% of the needs in 2020-21. The good news is that there are more financial resources for RRH than supportive housing. However, RRH relies on the availability of market-based rental units, which are in short supply. Transitional housing can sometimes fill the gap and provide the housing and case management help for individuals and families to address other barriers and develop the capacity to become low-risk renters. The region has 330 transitional housing beds (2021 HIC), nearly all of which were filled at the time of the Housing Inventory Count in January 2021. In the past year, Mid-Willamette Valley Community Action Agency opened Tanner Project, a Veteran transitional housing facility with 36 beds, helping to address the needs for these services.

In 2018, culturally specific and low-barrier emergency shelters were identified to be most urgent, specifically for women, youth, families, and non-sobriety required eligibility. The lack of low barrier emergency sheltering options for families, without minor children and those with boys over 12 years old, to stay together in an emergency remains a need. This presents as a barrier to access for families who do not wish to be separated.

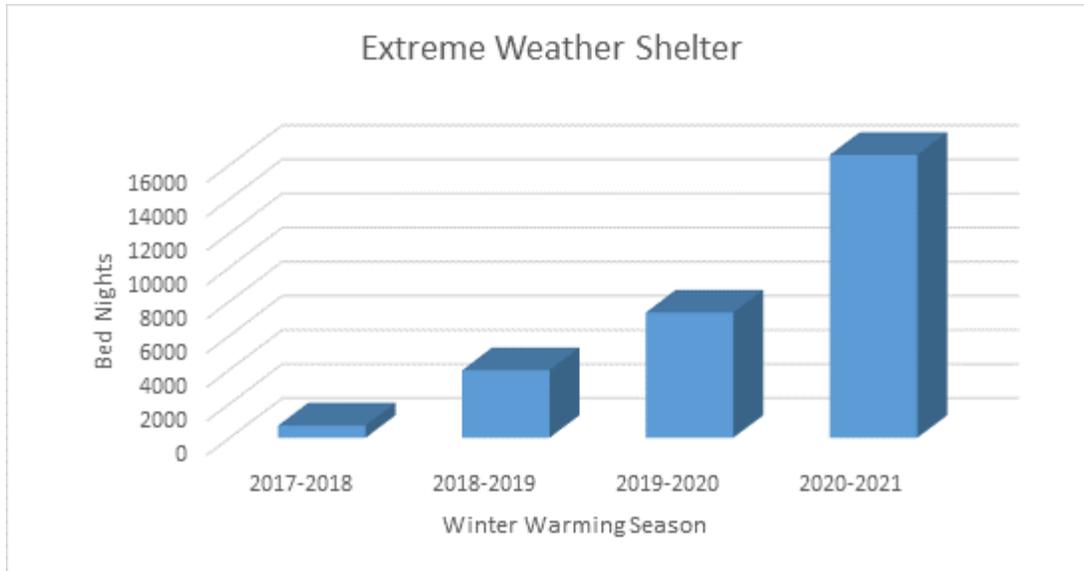
Sheltering with pets has also been an increasing need in Marion and Polk counties. Many experiencing unsheltered living will prefer to remain unsheltered than abandoning their pets. In response to this trend, ARCHES and other providers began distributing pet food among their other tangible goods and services offered to those experiencing various levels of homelessness and housing insecurity. Shelters allowing pets however, are still in high demand and a major gap to individuals seeking and receiving services.

Emergency shelters provide short-term shelter, typically on a night-by-night basis, with some providing up to 60 days. The 2021 HIC inventoried 277 emergency shelter beds, a decrease from 314 emergency shelter beds in 2020 in Marion and Polk counties. This decrease is largely attributed to COVID-19 social distancing and health precautions.

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 (10 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 still do not have any designated youth shelter, which remains a gap in service for this population.

Seasonal Shelters: Warming shelter beds and bed nights increased dramatically from 2017-2018 to 2020-2021. Data below show the positive increase in warming shelter bed nights in response to growing needs and strategic efforts. 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



Year	Bed Nights
2017-2018	718
2018-2019	3,956
2019-2020	7,343
2020-2021	16,584

INVENTORY EXPANSION

The number of facility-based beds is anticipated to increase further as the region is able to continue current services, utilize federal CARES ACT funding, leverage additional resources, and bring the following new programs online.

- Managed Camps (ES)
- Project Turnkey Hotels (ES)
- Union Gospel Mission expansion (ES)
- Salem Housing Authority, Yaquina Hall (PSH)
- Salem Housing Authority, Sequoia Crossings (PSH)

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

GOAL 6: HEALTH AND SAFETY

A safe environment, free of crime and violence, is critical to the health and well-being of community members. Homeless individuals report experiencing violence and crime regularly, particularly among unsheltered women, youth, and older adults. According to the Marion-Polk Community Health Assessment (CHA), violent crime rates have been gradually increasing in the region (and state) in recent years. Marion County experiences a higher violent crime rate than Polk and the state (CHA, 2021).

Mental health is an important part of overall health and well-being for all ages. It is defined by the CDC as, “our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices.” According to the 2021 CHA, the most common chronic conditions for adults in this region are depression, disability, arthritis, asthma, and diabetes.

In Oregon, a higher percentage of lesbian, gay, and bisexual 11th graders report symptoms of depression than straight 11th graders, and 11th graders who are gay or bisexual were more likely to attempt suicide in the past year.

Mental and behavioral health providers are in high demand in both Marion and Polk counties and often have wait lists for entering services. Some services are dependent on insurance status and/or funding even if/when access is available.

Oregon data shows the percent of adults with frequent mental health distress is correlated with income. Those living in poverty experience 200% more frequent mental health distress (CHA, 2021). Mental health and income are intrinsically linked for individual’s whole-person journey to wellness and wellbeing.

Physical and mental health disparities among those identifying as homeless or experiencing unstable housing conditions are concerning. Of those in Marion and Polk counties that experience homelessness, Coordinated Entry data indicates approximately one-quarter experience a serious mental illness (24%) and one quarter experience chronic substance abuse (26%).

Marion-Polk Individuals Experiencing Homelessness

24% experience a serious mental illness

26% experience chronic substance abuse

Among those experiencing chronic homelessness, mental and behavioral health issues continue to be top contributing factors to their unsheltered status. Conditions frequently include unmitigated trauma, substance use disorders, psychiatric conditions, violent behavior, and other public health and safety

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

concerns. Interventions designed to address physical and mental health conditions are needed to help end and prevent homelessness in the community.

Alliance partners recognize the prevalence of unstable mental and physical health conditions and the need for stable housing, case management, and resource navigation, for those experiencing homelessness and unsheltered living. The Alliance's CoC Collaborative Committee chose to launch a health and safety subcommittee to ensure interventions and resources are implemented to address unmitigated mental and physical health conditions and improve safety for those experiencing homelessness.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

GOAL 7: PREVENTION SERVICES AND SYSTEMS ALIGNMENT

Regional partners and 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, addressing social determinants of health with wraparound services and supports, case management and resource navigation.

Local diversion supports are offered to those at risk of becoming homeless, and with the onset of COVID-19 funding, the region has been overwhelmed with supportive resources such as rental vouchers, deposit programs, utility assistance, stabilization services, and childcare resources.

More than 60 agencies in Marion and Polk counties are active in the CoC Collaborative Committee, which serves the community through facilitated discussions, education, alignment, and partnership. Agencies connect resources and opportunities and have begun to integrate homeless services with healthcare and other social services.

PREVENTION ASSISTANCE

- Utility Assistance
- Rental Assistance
- Assistance accessing benefits
- Displaced worker programs
- Self-sufficiency programs

REGIONAL POPULATION FORECAST

Forecasting future demographics provides insight into meeting future needs of the community, from health resource need and allocations, to upgrades and expansions of existing infrastructure. Data from the 2021 CHA notes the population in Marion and Polk counties is growing, aging, and becoming more diverse—a trend predicted to continue well into the future.

- The population is forecasted to continue to grow over the next 50 years, not only due to more births than deaths thanks to medical and public health advances expanding lifespans, but also due to the increased migration of people into this community.
- The community is estimated to exceed 500,000 members by 2035, with Polk County growing at a faster rate than Marion County.
- Shifts in age groups are forecasted to occur over the next 50-year period, with a greater proportion of members falling into older age groups. Preparations must be made to expand and prepare for the growing needs of an aging population, especially for those whose income will largely be dependent on social security income.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

GOAL 8: SPECIFIC POPULATIONS

Addressing the unique needs and characteristics of specific populations is crucial to providing person-centered, appropriate care that will triage the unique needs of individuals experiencing homelessness.

Alliance Goal: Address the unique needs and characteristics of specific populations

Chronically Homeless
Youth
Families

Seniors
LGBTQ Populations
Farm Workers

Veterans
Survivors of Domestic Violence
Persons with Disabilities

CHRONICALLY HOMELESS

The Marion-Polk region’s homeless population experiences high rates of *chronic homelessness*, a HUD designation given when an individual is “either (1) an unaccompanied homeless individual with a disabling condition and continuously homeless for a year+, or (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years.”

More than one quarter of individuals experiencing homelessness nationwide experience chronic homelessness (AHAR, 2021), an increase of 15% from 2019-2020. Local Coordinated Entry data (June 2021) indicate of those individuals identified as homeless, 43% were chronically homeless, whereas Oregon’s rate was 34% and the national rate was 27%. Of the single individuals experiencing homelessness, nearly 56% experience chronic homelessness in the region, versus 34% in Oregon and 27% nationwide.

Percent of Homeless Individuals Experiencing Chronic Homelessness

27% Nationwide

34% in Oregon

56% in Marion-Polk counties

Of families experiencing homelessness, 36% in Marion and Polk counties are chronically homeless, whereas the national rate is 6% (AHAR, 2021).

Unsheltered Chronically Homeless

Oregon ranks fourth highest in the nation for the percent of chronically homeless individuals who are unsheltered. More than two-thirds (77%) of chronically homeless individuals in Oregon were staying in unsheltered locations, a higher unsheltered rate than for all individuals (51%) (AHAR, 2021).

Local Coordinated Entry data (June 2021) illustrates the severity of the region’s chronic homeless prevalence as compared to the state and nation. Locally, chronic homeless rates for total homeless people, single individuals, and number of families are all significantly higher than the state and nation.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

	Prevalence #	# Chronic Homeless	% chronic (out of prevalence #)	% chronic (Oregon)	% chronic (Nation)
Total Homeless People	811	352	43%	37% (2019)	17% (2019)
Single Individuals	592	331	56%	37	37% (2019)
Number of Families	76	27	36%	6%	6%
Number of Individuals in Families	301	xx			

Less than one quarter of the region’s chronically homeless individuals were sheltered during the 2021 Housing Inventory Count.

YOUTH

Marion and Polk counties have a greater percentage of the community under the age of 25 than Oregon (CHA Update, 2021). Youth face additional barriers as many under the age of 18 years are often 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 youths experience 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.

Youth, especially those residing in Polk County, experience disparities with available affordable housing and shelter options. Transitional age youth (18-24 years old) are limited to options dependent on funding, such as the Independent Living Housing Subsidy Program, and county Youth Rental Assistance Programs.

Youth often “couch surf” as a low barrier temporary attempt to meet shelter and transitional housing needs. Couch surfing is when an individual rotates between houses based on available bed/couch/space to sleep temporarily for one or several nights.

Homeless Students. The McKinney-Vento Act’s Education of Homeless Children and Youth Program ensures homeless children and youth are provided a free and appropriate public education, despite lack of a fixed place of residence or supervising parent or guardian. The state assures the right of homeless and other children and youth in similar circumstances to enroll in schools.

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

The U.S. Department of Education definition of homeless includes the HUD definition of homeless, as well as individuals and families who are temporarily doubled-up, living in motels, and couch-surfing. McKinney-Vento Program Homeless Liaisons assist schools with identification of eligible children and families, as well as provision of needed services.

Nearly 2,000 students attending publicly-funded schools in Marion and Polk counties identified as homeless in 2019-2020. Twelfth grade had the highest number of homeless students by grade level. Twelfth grade students experience homelessness at a rate of 38% more than the second highest grade level. Tenth grade experiences the second highest number of homeless students by grade level.

According to [Oregon Department of Education](#) school year 2019-2020, **Falls City School District has the highest percentage of homeless students in the entire state.** Nearly one-in-four students experience homelessness that attend a Falls City district school. The following table shows the number of homeless students and the district’s rate of homeless students as compared to total enrollment for the [2019-20 school year.](#)

District	County	# Homeless K-12	Total K-12 students	% Homeless
Cascade SD 5	Marion	114	2,517	4.53%
Gervais SD 1	Marion	29	1,376	2.11%
Jefferson SD 14J	Marion	4	826	0.48%
Mt Angel SD 91	Marion	13	728	1.79%
North Marion SD 15	Marion	16	1,857	0.86%
North Santiam SD 29J	Marion	78	2,283	3.42%
Salem-Keizer SD 24J	Marion	1,117	41,770	2.67%
Silver Falls SD 4J	Marion	73	3,974	1.84%
St Paul SD 45	Marion	17	290	5.86%
Woodburn SD 103	Marion	301	5,628	5.35%
Central SD 13J	Polk	60	3,313	1.81%
Dallas SD 2	Polk	67	3,234	2.07%
Falls City SD 57	Polk	44	190	23.16%
Perrydale SD 21	Polk	13	316	4.11%
ALL	Marion-Polk	1,946	68,302	2.9%

Youth, especially those residing in Polk County, experience gaps in youth-specific shelter at all ages up to 25 years. Youth are often coupled with adults in service array and delivery, however, and are often left behind if services do not specifically call out youth. Youth are a culturally specific group of

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

individuals themselves and have different needs and barriers than adults. The State of Oregon launched a State Youth Assessment in late 2020 to identify regional, specific needs throughout the state to adequately address youth homelessness. Regional data will be available in Fall 2021.

Unaccompanied Youth. Four U.S. states reported two-thirds or more of unaccompanied homeless youth were staying in unsheltered locations. Oregon ranked among those top four: 66% of unaccompanied homeless youth in Oregon were unsheltered (AHAR, 2021). The rate of unaccompanied youth that experience homelessness rose from 12% to 15% in the region in the 2020-2021 school year.

The table below shows the living situation of homeless students by school district, including those who are unaccompanied youth.

2019-2020 Homeless Students' Living Situation (Grades Pre-K – 12) and Unaccompanied Homeless Youth

District	Shelter	Doubled-Up	Unsheltered	Motel/Hotel	Total	Unaccompanied
Salem-Keizer SD 24J	60	866	109	83	1,118	205 (18%)
Woodburn SD 103	*	245	51	*	296	38 (13%)
Central SD 13J	*	53	*	0	53	24 (45%)
Cascade SD 5	32	80	2	0	114	10 (9%)
Falls City SD 57	*	26	17	0	43	10 (23%)
Sheridan SD 48J	*	22	0	0	22	5 (23%)
Dallas SD 2	12	48	*	*	60	0
North Marion SD 15	7	7	0	*	14	0
North Santiam SD 29J	0	76	*	0	76	0
Perrydale SD 21	0	*	11	0	11	0
Silver Falls SD 4J	*	58	13	0	71	0
St Paul SD 45	*	16	0	0	16	0
	111+	1,497+	20+	83+	1,894+	292+

FAMILIES

Children under the age of 18 living in poverty account for more than 25% of Marion County’s under-18 years old population, and more than 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 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).

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

According to 2021 Coordinated Entry data (see table on page 25), 36% of homeless families (27 families) were chronically homeless. The year of 2020 brought historically-damaging wildfires to the region which left hundreds of additional individuals and families homeless and displaced.

The 2021 Housing Inventory Count identified 114 family units with 475 family beds in Marion and Polk counties. Rapid Rehousing hosted the largest number of family units for the region with 44 units. Permanent Supportive Housing hosted the largest number of family beds for the region with 172 family beds. The following chart highlights the breakdown of family beds in the 2021 HIC.

Bed Type	Family Units	Family Beds
Emergency Shelter	17	48
Transitional Housing	24	88
Rapid Rehousing	44	167
Permanent Supportive Housing	29	172
TOTAL	114	475

SHELTER OPTIONS FOR FAMILIES

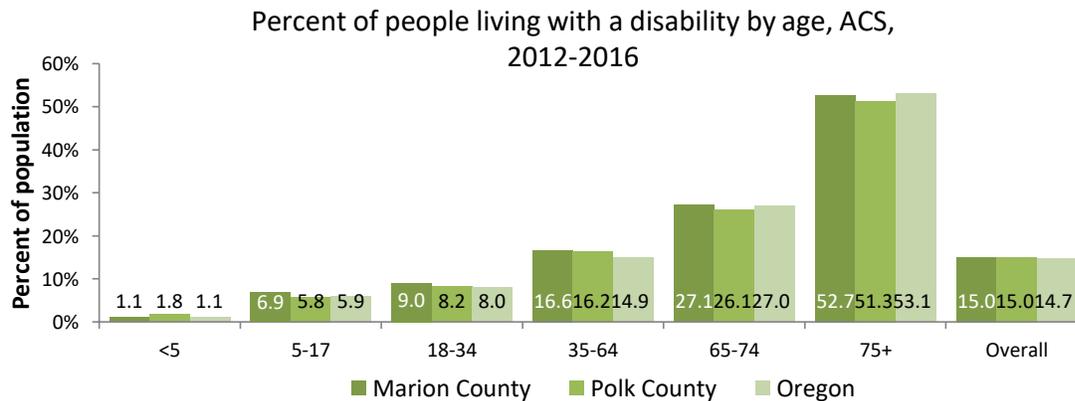
The lack of low barrier shelters and sheltering options for families to stay together remains prevalent, both with and without minor children and for mothers with boys over 12 years old. Limited emergency shelter options (14 beds) for families with minor children exist. Families without minor children currently have no options to stay together in an emergency shelter, this includes couples without children, or parents with adult children. This presents as a barrier for family units that do not wish to be separated.

The recent award of the Emergency Solutions Grant (ESG-CV) addresses the regional gap for families wishing to stay together in an emergency. ESG-CV projects from Center for Hope & Safety, Family Promise, Sable House, and Sheltering Silverton, focus on serving homeless families.

SENIORS

Age is one of the most important predictors of overall health, as people of different age groups experience different health problems. 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. The proportion of people living with disabilities in the community increases with age. More than half of community members over the age of 75 were living with a disability. The Community Health Assessment Update (2021) shows the percentage of people living with a disability by age:

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE



About half of all renters in the region pay 30% or more of their gross household income on rent. Rent burden is greater among persons over 50 years of age, and greatest among persons over 65 years of age. The average monthly payment for those living on Social Security income (SSI) in the region is \$783/month, which equates to rent affordable to SSI recipient is \$235/month. Rent is not affordable in the region for those living on SSI.

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. Oregon was among the top three states with the highest rates of homelessness among all Veterans, far exceeding the national rate. In four states, more than half of all Veterans experiencing homelessness were unsheltered. Oregon was the third highest state with 51% of homeless Veterans living unsheltered (AHAR, 2021).

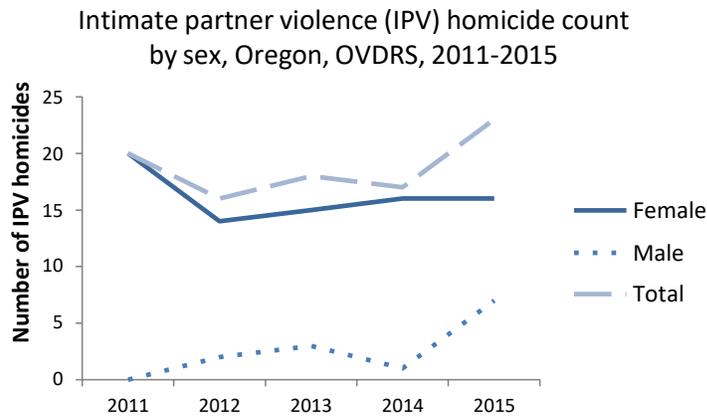
About 10% of community members were Veterans, and Polk County had a larger proportion of Veterans than Marion County and the state. According to a June 2021 report, there were 68 homeless Veterans within the Marion-Polk region.

SURVIVORS DOMESTIC VIOLENCE & HUMAN TRAFFICKING

Homelessness resulting from domestic violence has been a HUD priority in recent years and a local priority for community leaders in the Marion-Polk region. 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 due to the magnitude of the impact on a victim and high prevalence of intimate partner violence. One in five homicides in Oregon (2015) was the result of domestic violence, or “intimate partner violence” as called in the [Marion-Polk Community Health Needs Assessment](#). The number of homicides resulting from intimate partner violence highlighted an

MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

increasing trend from 2011 to 2015; more females were killed than males as a result of intimate partner violence.



Local Coordinated Entry data from July 2018 indicated of the 1,657 people assessed in Marion County, 44% **reported a history of domestic violence (733)**. 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, 48% **reported a history of DV (79)** and 40 (24% of the total, and 50.6% of reported DV) stated that they were fleeing.

A 2018 Marion County jail survey found that 85% of female inmates and 42% of male inmates had experienced domestic violence. Nearly seven out of ten inmates reported a history of homelessness, with more than 46% having experienced chronic homelessness. Half of inmates were currently homeless at the time of arrest. The primary reason (31%) for being homeless was self-reported as substance abuse. Corrections-involved individuals are also at significant risk for exiting jail into homelessness.

Services for DV survivors are in high demand. Domestic and sexual violence programs at shelters are offered to help survivors assess options and identify how to minimize risk. The Center for Hope & Safety receives more than 30,000 contacts to their program annually (2020). The Center for Hope & Safety and Sable House have needed to expand capacity in 2020 to provide services for DV survivors in Marion and Polk counties.

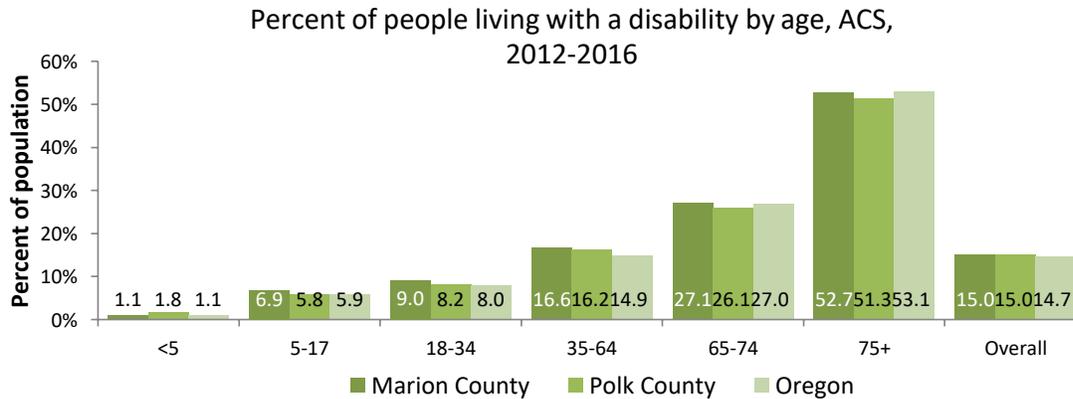
PEOPLE LIVING WITH DISABILITY

Disabilities can make it more difficult for a person to engage in certain activities and interact with the world around them. There are many types of disabilities, and two people with the same disability may be affected in different ways. Adults living with disabilities are at greater risk of chronic disease such as diabetes and cancer; they are also more likely to be current tobacco smokers; and, in some cases, are

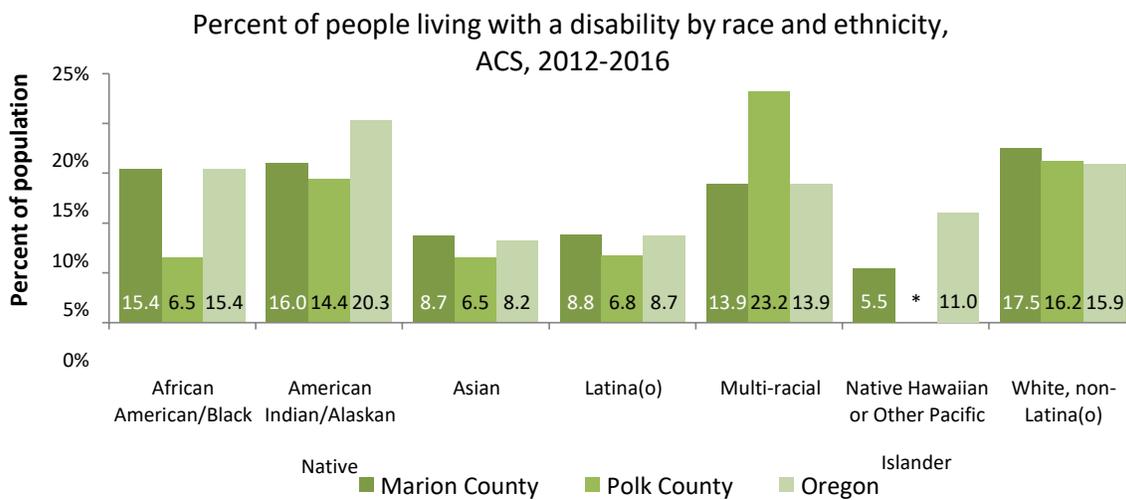
MID-WILLAMETTE VALLEY HOMELESS ALLIANCE

less likely to receive preventive screenings to catch disease early. Oregon 11th grader students with a disability were more likely to attempt suicide. About 15% of community members are living with a disability, which has been increasing over time (CHA, 2021).

The most common types of disabilities in the community were difficulties walking, living alone, or cognitive. The proportion of people living with disabilities in the community increases with age. Over half of community members over the age of 75 were living with a disability.



The proportion of community members living with a disability differed by race and ethnicity. Those who identified as American Indian/Alaska Native, African American/Black, White/non-Hispanic, or Multiracial, had a higher proportion of people living with disabilities and higher rates of death than the general population of the region.



GOAL 9: COMMUNITY ENGAGEMENT

Alliance Goal: Increase leadership, communication, collaboration, and community engagement in preventing and reducing homelessness.

The Alliance Strategic Plan acknowledges room for much greater community engagement to help end homelessness, including expanded discussions among smaller communities and rural areas that may not seem to have the same prevalence of homelessness as more urban environments. In fact, HUD studies show that homelessness in rural areas is equivalent, if not greater by percent, than urban areas. By way of local example, nearly 1 in 4 students in Falls City were identified as homeless, marking the highest rate in Oregon.

The Alliance experiences racial and ethnic disparities throughout its governance structure and participation in committees. The Alliance is dedicated to reducing those disparities, and over time, the Alliance will track community engagement metrics to identify gaps and areas for improvement.



**MID-WILLAMETTE VALLEY
HOMELESS ALLIANCE**
MOVING TO END AND
PREVENT HOMELESSNESS

MWVHomelessAlliance.org