



**An Analysis of Trends in the  
Continuum of Housing for  
Homeless & Low-Income  
Residents in Benton &  
Franklin Counties**

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**For:**

Benton & Franklin Health  
District

*July, 2022*



**INSTITUTE FOR  
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JUNE 30, 2022

EASTERN WASHINGTON UNIVERSITY

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## **Executive Summary**

Benton Franklin Health District (BFHD) participates in a local process to assess community wide health priorities in collaboration with a multitude of community partners. An important dimension of a Community Health Needs Assessment (CHNA) is the development of a Community Health Improvement Plan (CHIP) to address the issues identified through the CHNA. Bringing together representatives from community service providers, health care agencies, business partners, non-profit organizations, government agencies, and community members, two Housing Forums were convened in May of 2022. These sessions were an opportunity to review relevant data and share unique perspectives in an attempt to identify current needs and gaps in the continuum of housing availability for homeless and low-income residents. This report summarizes the key findings.

### **Findings from the forums:**

According to the participants at the forums, the four greatest needs in helping to reduce challenges for homeless and low-income residents to secure housing include:

- (1) Removing barriers,
- (2) Greater availability of housing options,
- (3) Need for more coordination, and
- (4) Need for stronger social supports.

### **Findings from the review of the data:**

- A review of the housing data indicates that total housing units have not been meeting population demand, but there are efforts to build up units, specifically multi-family units.
- Increasing rental rates are a challenge for renters because the growth rate of household income is about one-third of the growth rate of rent.
- The greater Tri-Cities has consistently been in a very tight market for rental housing, as the vacancy rate is below 2% for most years from 2016 to 2021.
- Persons experiencing homelessness and unstable housing are growing in Tri-Cities, whereas the WA number is decreasing. There are currently almost 4,000 people in the HMIS system in the greater Tri-Cities. The length of days someone is homeless in the greater Tri-Cities has nearly doubled and the rate of those returning to homelessness is still increasing.

### **Findings from the survey of housing options:**

- The most significant obstacles facing housing facilities that serve homeless and low-income residents are lack of financial resources, drug use by and workforce challenges. Relations with neighbors and ability to attract potential clients are ranked lower.

## 1. **The scope of the project**

Benton Franklin Health District (BFHD) participates in a local process to assess community wide health priorities in collaboration with a multitude of community partners. A result of this process is the Community Health Needs Assessment (CHNA). The goal is to determine what the greatest health needs are for the community in collaboration with all four healthcare systems in the region and the Benton Franklin Community Health Alliance. Having a current CHNA is required for BFHD to maintain national accreditation as a public health agency.

An important dimension of a CHNA is the development of a Community Health Improvement Plan (CHIP) to address the issues identified through the CHNA. The CHIP delegates all goals and strategies to various community partners involved in the process, providing accountability and metrics to measure health improvement. Specifically, the Benton-Franklin Community Health Improvement Plan (CHIP) is a three-year plan to address community health issues that were identified during the comprehensive Community Health Needs Assessment (CHNA).

In developing a strategic comprehensive plan to improve community health, it is important to tap into local resources and bring together representatives from the community to engage in collaboration. This process was described in the 2019 CHIP:

*A truly collaborative CHIP is designed to break down those silos and bring everyone to the table. It has been developed with input from your community service providers, health care agencies, business partners, non-profit organizations, government agencies, and community members. It relies on a collective action approach, recognizing that we are stronger and more effective together. The CHIP is the culmination of those efforts, providing specific actions and commitments from local agencies and partners, to improve the health of those we serve.*

In this spirit, two Housing Forums were convened in May of 2022. These sessions were an opportunity to review relevant data and share unique perspectives in an attempt to identify current needs and gaps in the continuum of housing availability for homeless and low-income residents.

The following document is the result of this collaboration of community stakeholders and is organized as follows. The most important outcome of the forums was the identification of the top housing needs for homeless and low-income residents in the community. Participants were prompted at the start of the session and then again at the conclusion to articulate pressing housing concerns through their individual lenses. A summary of the key discussions that arose is presented first. Next, relevant community housing and homelessness data is presented that was used to inform the discussions. Lastly, the results of an online survey of organizations targeting homeless and very low-income populations are presented to provide insight into current housing resources in the community and challenges they are facing.



## **2. Overview of the two convening sessions**

Two Housing Forums coordinated by the Benton-Franklin Health District were held at the United Way Building in Kennewick, Washington on Tuesday, May 17, 2022 and Wednesday, May 25th, 2022. The purpose of the convenings of community stakeholders was to gather data to be included in the 2022 Community Health Needs Assessment (CHNA) and to inform the prioritization of goals, objectives and action steps in the 2023 Community Health Improvement Plan (CHIP). According to Kelly Harnish, a public health educator and co-facilitator of the forums along with Carla Prock, senior manager of Healthy People & Communities, Greater Kennewick, “The CHIP belongs to all of us, so your input in its formation will ensure that it’s a useful guide in our collective, ongoing work. We will continue to keep you informed and involved throughout the CHNA/CHIP process.”

Participants in the forums included representatives from a wide variety of groups, including the police & fire departments, local medical centers, private health care providers, city and county governments, government programs / agencies, local schools, financial institutions, charities and other non-profit organizations. A list of participants can be found in Appendix C.

The forums involved passionate, engaged members of the community who were willing to come to the table and talk about the current availability of housing for homeless and low-income residents in the community from their unique experiences. As a result, during the forums, needs and gaps were identified, as were opportunities for changes at various levels. At both the start of the meetings and at the conclusion, participants were asked: “What is the top need for housing the homeless & low-income residents in this community?” Although comprehensive lists of answers are provided in Appendices A & B, there were four broad categories that responses fell into: (1) Removing barriers, (2) Greater availability of housing options, (3) Need for more coordination, and (4) Need for stronger social supports.

### **2.a. Removing barriers for homeless or low-income residents seeking housing**

A repeated concern that was articulated at the forums was the importance of removing barriers that currently impede the ability of homeless or low-income residents to move into either temporary or permanent affordable housing. Examples of barriers that individuals can face include language barriers (especially for some Hispanic residents), the cost of housing (especially in the current inflationary environment), or physical barriers such as housing that is inaccessible for individuals with disabilities. Additionally, some facilities place conditions or restrictions on residents. For example, some facilities might require attendance at religious services or not permit pets. Some facilities may only accept individuals and not families or even restrict their housing to a single age or gender.

Proposed solutions include streamlining the process to apply for assistance, increasing case management, providing instructions and marketing materials in other languages such as Spanish, and increasing the availability of housing for seniors as well as for those with a mental or physical disability.



## **2.b. Greater availability of housing options for homeless or low-income residents**

In considering housing options such as shelters, rapid re-housing, transitional or supportive housing for currently unhoused individuals, an important and pressing need is increased availability of family friendly and youth friendly shelters, in particular those accepting single parents with teenagers. Greater options for young adults, aged 18-24 is also needed.

Another aspect of the discussions pertained to providing more affordable housing. In particular, participants articulated a need for more senior housing, more multi-family units, and more transitional housing for workers making minimum wage as well as for those currently experiencing homelessness.

Proposed solutions to help increase the availability of housing options included strategies to encourage further development – in essence to build more. Appendices A & B provide lengthier lists of specific suggestions from participants. Some examples include promoting the development of mixed income housing, streamlining the building process and considering zoning code changes to allow for the building of more affordable housing types.

## **2.c. Need for more coordination across organizations**

A common theme of the discussions centered around the need for further coordination and collaboration between organizations in order to connect resources and support to those who need it. Stronger partnerships between entities such as case managers, providers of aid, and providers of shelter could help move individuals into appropriate housing more efficiently. Another important partnership could be a landlord / tenant liaison program.

In general, participants called for collaboration across public and private sectors of the local economy and urged for greater involvement of the business community. Employers should find it beneficial to assist their employees in finding affordable housing as a tool for retention and recruitment of valuable workers. Additionally, financial institutions could help provide a bridge to assist low-income residents move from renting to home ownership.

## **2.d. Need for stronger social supports**

Lastly, participants identified a need for stronger social supports to prevent people from becoming homeless or at risk of losing housing in the first place. This more upstream approach includes community education to reduce stereotypes around homeless people and those seeking housing assistance as well as showing the benefits to the community of investments in low-income housing solutions. With more public buy-in, issues of NIMBY-ism (Not In My Backyard) might be less of a concern for developers.

With education and support, it might be possible to keep families from becoming vulnerable to losing their housing. For example, financial literacy would help with budgeting so that a single financial emergency would not drain the family's resources and provide longer term stability.

Community health investments could be instrumental in helping to alleviate some of the challenges of housing homeless and low-income residents. Greater access to health care

resources such as primary care could also keep people out of the emergency room and less likely to be burdened with medical debt. Efforts to prevent and treat mental health and substance abuse disorders could also lead to less people becoming homeless or at risk of losing their shelter.

### **3. Presentation of the housing market data from Benton Franklin Trends**

#### **3.a. Home ownership rates in Benton & Franklin counties**

Home ownership is a reflection of housing affordability and financial security. For most U.S. families, the home is the greatest asset in their portfolio. A recent study commissioned by the Consumer Federation of America and Fannie Mae concluded that homeownership is the main path to wealth and housing security for lower-income and minority Americans.

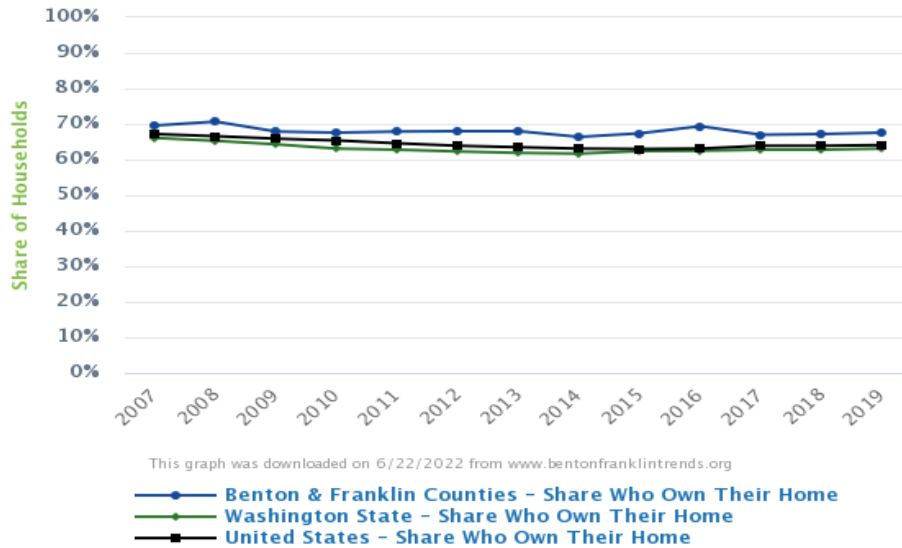
A community with high home ownership rates usually exhibits different socio-economic indicators than a community with low home ownership rates. As the Great Recession underlined, however, there are probably limits to the share of households owning their own homes. Increasing home ownership in the face of rising affordability challenges may lead to an increasing rate of foreclosures instead of asset-building.

For this indicator, home owners are defined as the people who are in the process of buying a home through a loan or mortgage, or people who have already paid off their loan or mortgage and own the home outright.

According to the US Census Bureau, the pandemic made the collection of accurate one-year estimates for the American Community Survey (ACS) impossible in 2020. Estimates for 2021 will be available fall, 2022.

This indicator measures the share of households who own their own home in Benton & Franklin Counties combined. Washington State and the U.S. are offered as benchmarks.

**Figure 1. Share of Owner-Occupied Housing Units**



Source: [Benton Franklin Trends](#)

### 3.b. Median home resale prices

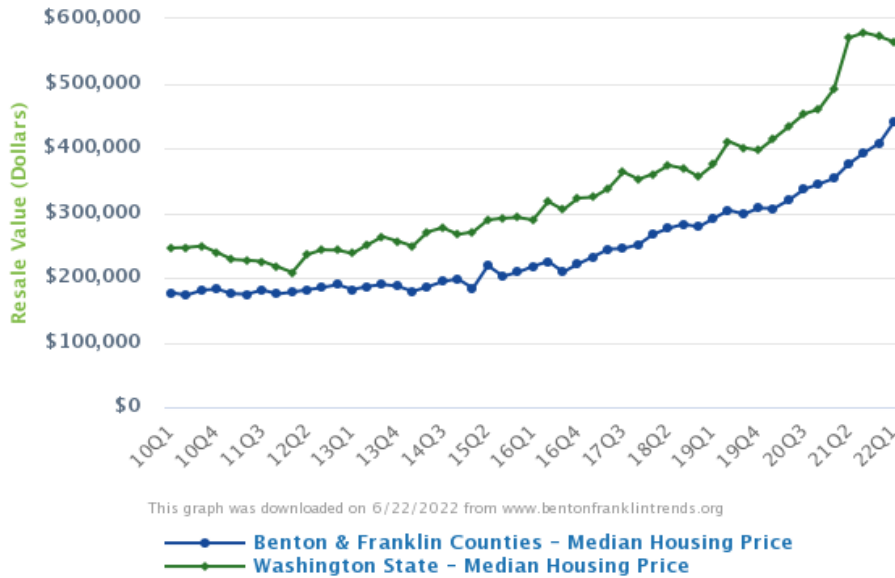
For most, a home is the most important purchase in our lifetime. Via a mortgage, it will typically take 15-30 years to complete. As a result, the price of a home is usually the most important price a consumer will face.

Home prices reflect both supply of and demand for homes in a given market. Tracking prices is a way of assessing both the forces of supply and demand. The supply of homes depends on many factors, such as the cost of a lot, the cost to develop a lot, materials costs and the wages paid to all the contractors involved in construction. Demand, in turn, typically depends on population and income growth, although in markets with second homes, the wealth of residents in "feeder" markets matters, too.

Home prices that rise quickly can signal a rise in supply costs, an increase in the determinants of demand, or a combination of both. A rapidly accelerating trend in home prices brings both benefits -- to existing homeowners, local governments, and costs -- to prospective buyers, and in the extreme, to the ability of a community to attract and retain workforce members.

This indicator measures the quarterly median resale price of homes in Benton & Franklin Counties combined. Note that this measure does not capture the prices of new homes. Washington State is offered as a benchmark.

**Figure 2. Median Home Resale Price**



Source: [Benton Franklin Trends](#)

### 3.c. First-time buyer housing affordability index

A home purchase is usually the most important one in our lifetime. Obviously, the price needs to be manageable to our income flows. Otherwise, financial hardship can easily follow, as the events of the 2008-2009 Great Recession illustrated. Further, a high percentage of homeownership is a policy goal of many elected officials and non-profits: ownership is said to lead to a greater sense of participation in the life of a community, and ultimately, in society.

From an economic development perspective, housing prices can impact a community's ability to attract and retain workers. For many reasons, then, it is in the interest of a broad range of parties to see "affordable" home prices in their community. This sentiment is especially true when directed at first-time home buyers. Their purchase is seen as the start of an advancement in wealth accumulation, and of course, a higher standard of living.

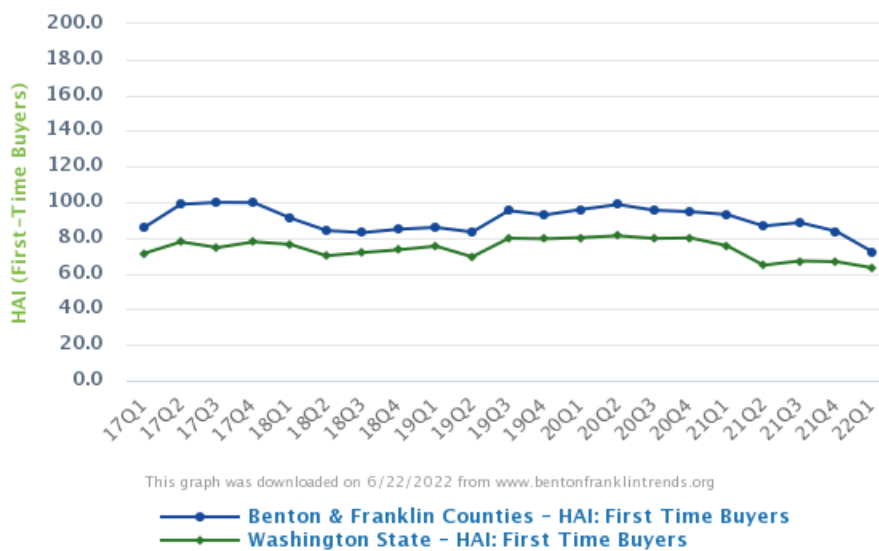
The first-time Home Buyers Affordability Index (HAI) is calculated and maintained by the Washington Center for Real Estate Research (WCRER). The Index expects first-time homebuyers will purchase a less expensive home, face a lower down-payment, and report a lower income than area averages. Specifically, the Index measures the ability of a typical household, as measured by household income at 70% of the median, to purchase their first home. The home price is assumed to be 85% of the area's median price. Transactions assumptions of the index are: 10% down payment and a 30-year fixed mortgage.

A central assumption behind the index is that the household does not spend more than 25% of its income on principal and interest payments. When the index lies at 100, the household pays exactly this share of its income to principal and interest. When the index lies above, it pays less. When the index lies below, the household pays more. Note that this index carries values that are almost always lower than those of the All Buyers Affordability Index [indicator](#).

This indicator measures the quarterly calculations of the first-time buyers Home Affordability Index (HAI) for Benton & Franklin Counties combined. The first-time home buyers HAI for Washington State is offered as a benchmark.

Benton Franklin Trends [7.3.3 Housing Affordability Index for First-Time Homebuyers](#)

**Figure 3. Housing Affordability Index for First-Time Homebuyers**



Source: [Benton Franklin Trends](#)

### 3.d. Share of renting households paying more than 50% of income on shelter

Lack of adequate and affordable rental housing is a significant problem throughout many communities across the United States. At least since the early 1980s, federal housing authorities have suggested that 30% of a household's income is the threshold under which housing is considered "affordable." This 30%-of-income standard says that non-housing needs, i.e. costs for basic necessities such as clothing, food, and other non-housing monthly bills that do not include rent, mortgage, property taxes, etc., can be met with 70% of a household's annual income. It also suggests that when housing costs are at or less than 30% of a household's income, the household's ability to save for future needs or emergencies becomes

easier. When costs become larger than 30%, however, saving is significantly reduced or eliminated, and meeting basic needs with the left-over income becomes more difficult.

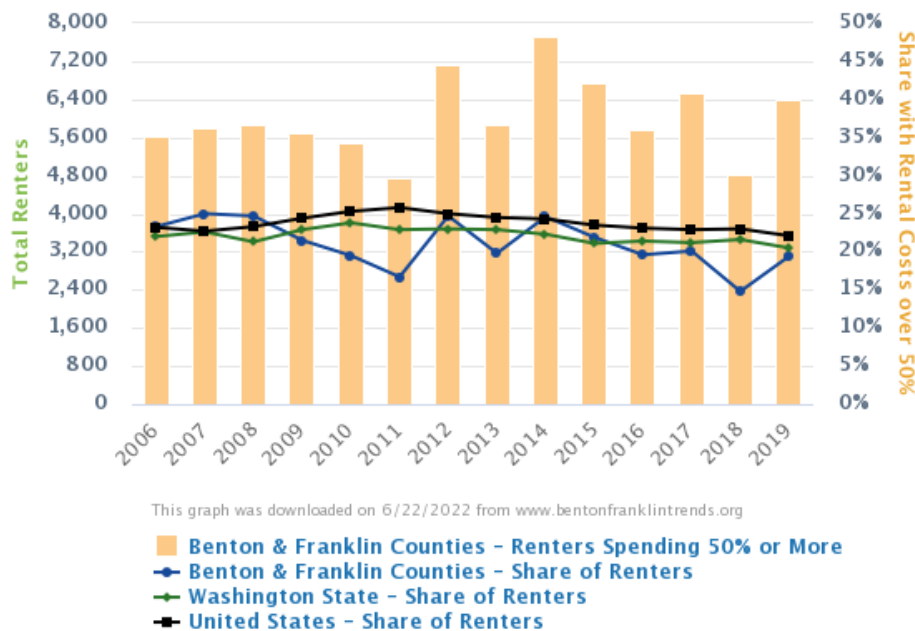
Both the 30% and the [50% income to housing costs ratio](#) are referred to by the federal government as the “housing-cost burden.” Households above 30% but below 50% are considered to have a “moderate housing-cost burden.” Households at 50% and above are considered to have a “severe housing-cost burden.” The [U.S. Census American Community Survey \(ACS\)](#), data source for this indicator, considers gross rent, as the “contract rent plus the estimated average monthly cost of utilities (electricity, gas, and water and sewer) and fuels (oil, coal, kerosene, wood, etc.) if these are paid by the renter (or paid for the renter by someone else).” This report focuses on severe housing-cost burden.

According to the US Census Bureau, the pandemic made the collection of accurate one-year estimates for the American Community Survey (ACS) impossible in 2020. Estimates for 2021 will not be available in fall, 2022.

This indicator measures the total and share of renters in Benton & Franklin Counties combined who spend 50% or more of their household income on shelter costs. Washington State and the U.S. are offered as benchmarks.

Benton Franklin Trends [7.2.3 Total & Share of Renters Spending 50% or More of Household Income for Shelter Costs](#)

**Figure 4. Share of Renters Spending More than 50% of Income on Shelter**



Source: [Benton Franklin Trends](#)

### **3.e. Housing supply by price level**

One way of capturing supply in residential real estate markets is to consider it in monthly terms, as defined by the current sales rate. A low value indicates a "tight" or sellers' market; a high value points to a buyer's market. This indicator calculates approximately how many months it would take for the current inventory of homes for sale in Benton & Franklin Counties to be exhausted if no new homes were listed. The measure is broken into four different price ranges and is offered as a quarterly trend.

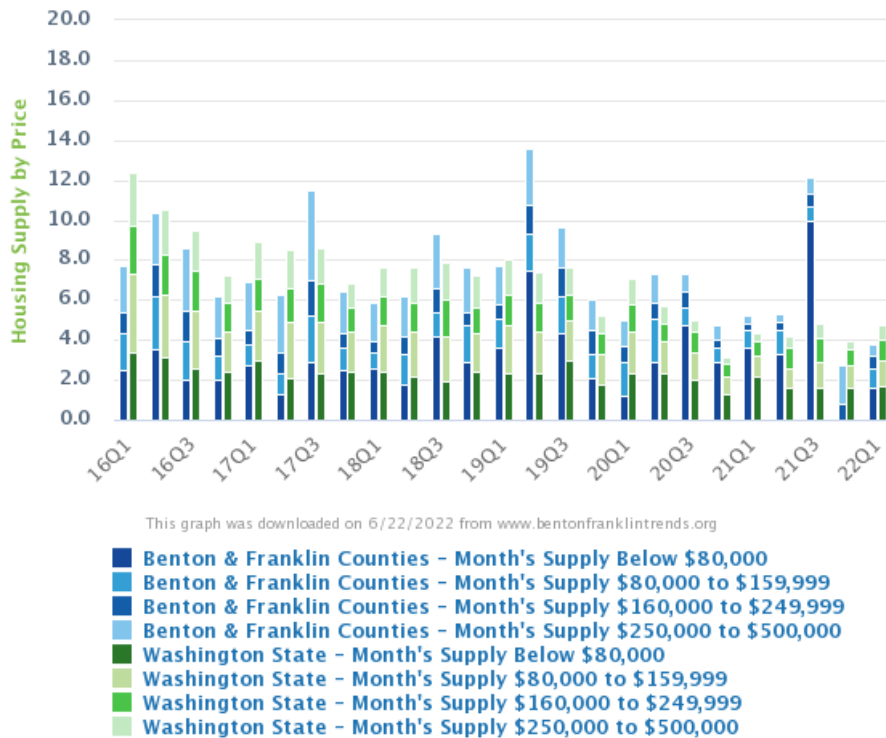
The results give an idea of the balance of demand and supply of residences at different price points. They provide a signal to local builders where opportunities may lie. They also give county officials a sense of where the local market may be heading and consequently what amount their real estate excise tax stream may take.

The data come from the Washington Center for Real Estate Research (WCRER). WCRER reports that "The seasonally adjusted annual rate of sales for the quarter is compared to the end-of-quarter listing inventory to determine the month's supply." Also, according to WCRER, a 'normal or balanced' inventory would yield a five to seven month's supply of homes.

This indicator measures the month's supply of housing by price range in Benton & Franklin Counties combined. Price ranges included are: \$80,000 or less; \$80,000-\$159,999; \$160,000-\$249,999; and \$250,000-\$500,000. Washington State is offered as a benchmark.



**Figure 5. Monthly Supply of Homes Listed by Price Level**

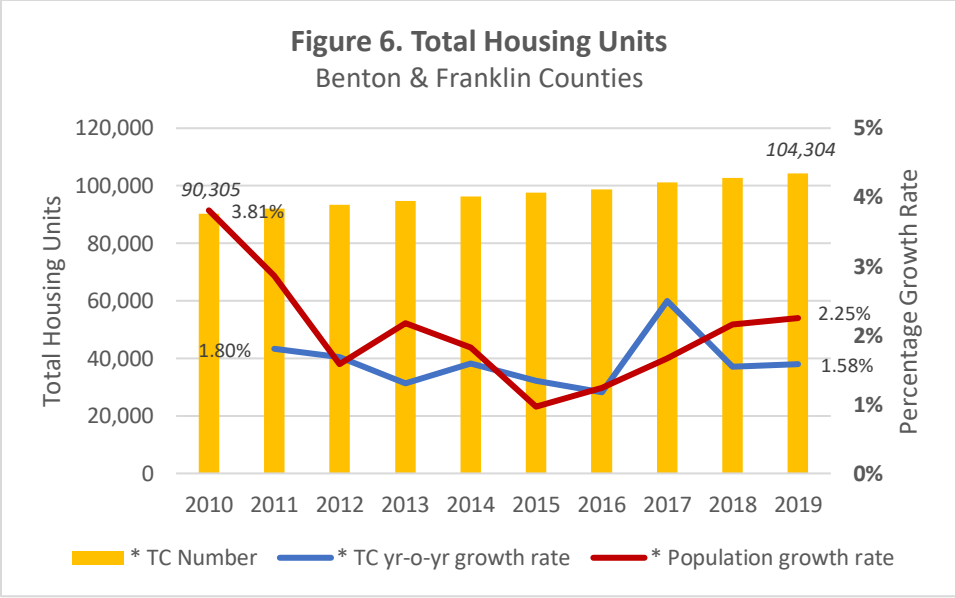


Source: [Benton Franklin Trends](#)

#### 4. Supplemental data to the Benton Franklin housing market

##### 4.a. Total housing units

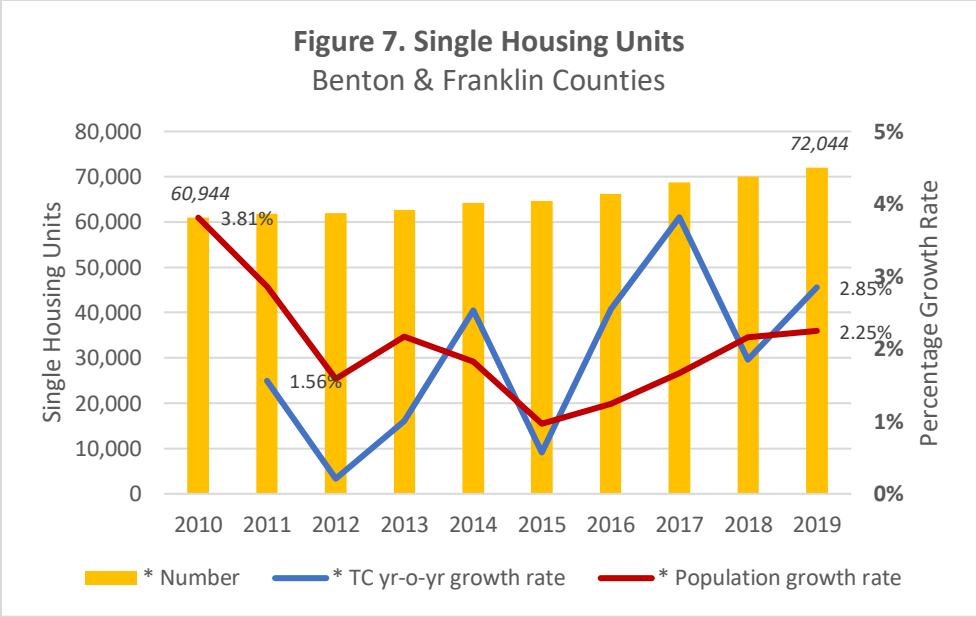
Using data from the American Community Survey (ACS) of the US Census Bureau, one can depict the total number of housing units in the Tri-Cities from 2010 to 2019 (the most recent year that data is available) is presented in Figure 6. The combined Benton & Franklin counties have seen a steady increase in total housing of about 15,000 units – from 90,305 housing units in 2010 to 104,304 units in 2019. The compound annual growth rate (CAGR) of units was 1.6%, whereas the CAGR of population was 1.9%. Housing increases are not keeping pace with population growth and with population projected to increase even more by 2030, this failure of the housing units to meet the growing demand could become even more problematic.



Source: American Community Survey (ACS), US Census Bureau

**4.b. Single family residences**

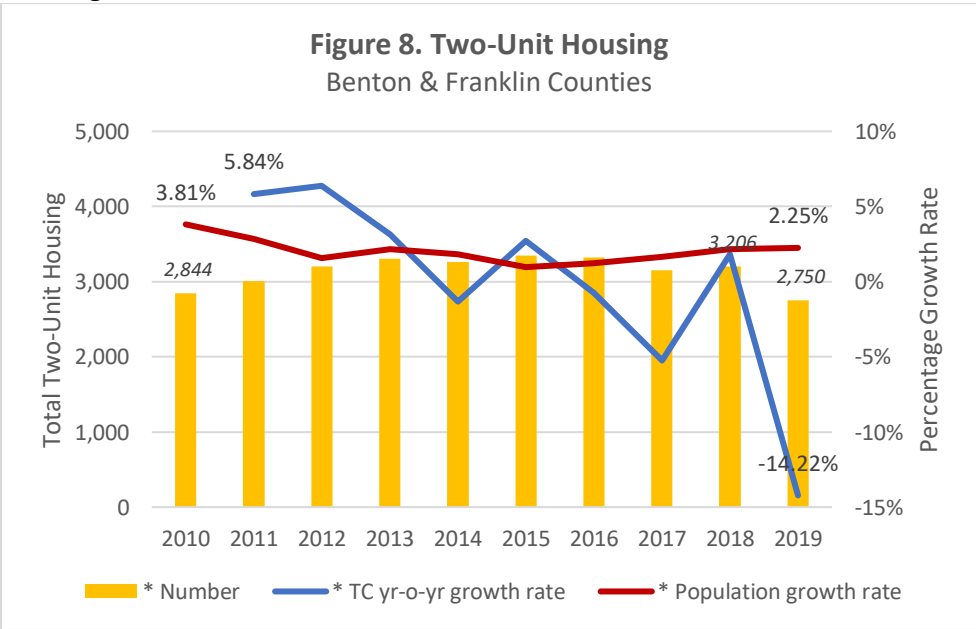
Breaking total housing units into the separate types of housing is insightful. Again, using data from the Census Bureau’s ACS, Figure 7 shows the change in the number of single housing units in the combined counties from 2010 to 2019. Single housing units make up almost 70% of total housing units. Since 2010, there has been sustained overall growth in the number of single housing units. As recently as 2019, this rate of growth in units has been above the population growth rate for the combined counties (2.25%). Looking further back, over the decade, the CAGR of single housing units was 1.98%, whereas the CAGR of population was 1.9% implying that the increase in this type of housing has kept pace with population growth.



Source: American Community Survey (ACS), US Census Bureau

**4.c. Two-Unit Housing (Duplexes)**

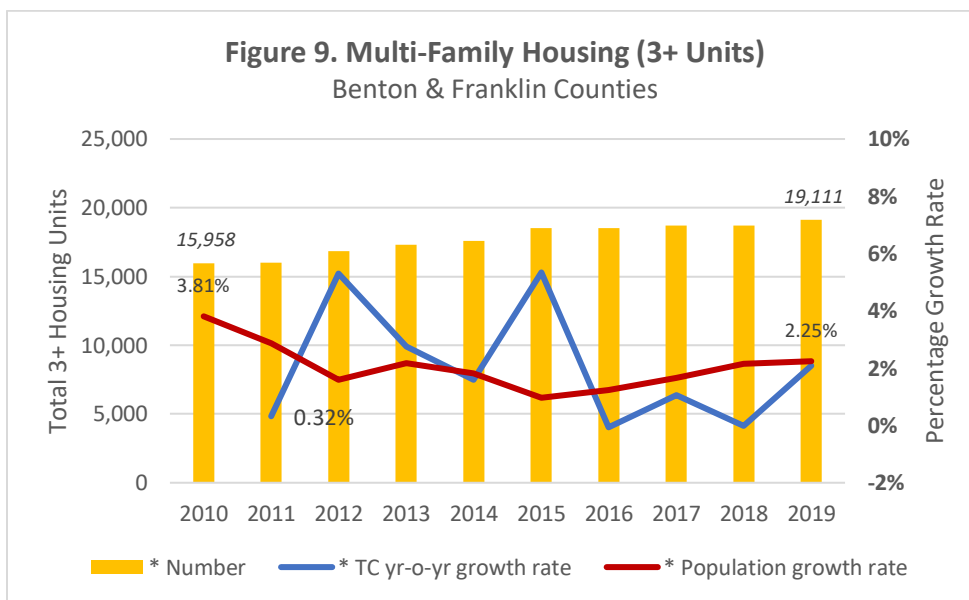
Turning to the smallest component of total housing units in the US Census Bureau’s ACS, we note that two-unit housing, often called duplexes, make up only about 4% of total housing units in the combined Benton & Franklin Counties. Although Figure 8 depicts a sharp drop in duplex units from the previous year, the high margin of error ( $\pm 401$  units) suggests that this could be the result of a small sample size. Nonetheless, the rate of population growth still exceeds the rate of growth in this type of housing, especially since the growth in two-unit housing units seems to have fallen.



Source: American Community Survey (ACS), US Census Bureau

#### 4.d. Multi-Family Units

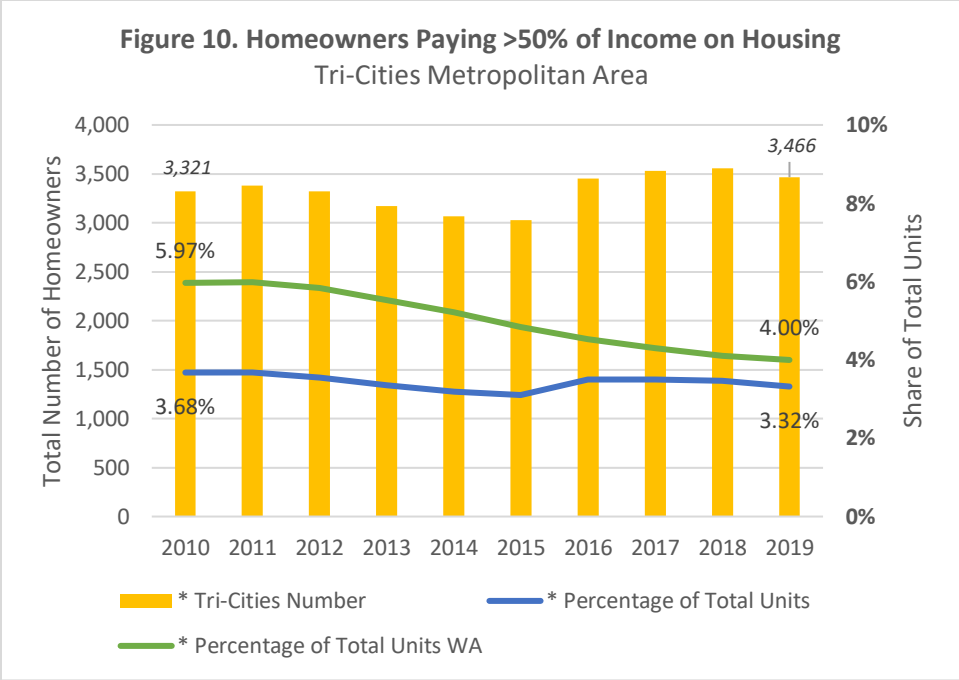
Using data from the ACS, Figure 9 shows the total number of multi-family housing units (defined as three or more units) and the rate of growth from 2010 to 2019. This is the next most important type, behind single family units, comprising about one in five housing units in the greater Tri-Cities. Multi-family housing has grown at a compound AGR of 2.0% whereas the population CAGR over same period was 1.9%. Consequently, there has been some success in building multi-family units to meet growing demand. However, it is interesting that production of new multi-family units was faster than population growth before 2016, but thereafter dropped below population growth rate. In the most recent year for which data is available, 2019, the rate of growth in this type of housing and the rate of growth in population have converged.



Source: American Community Survey (ACS), US Census Bureau

#### 4.e. Share of homeowners paying more than 50% of income on shelter costs

As with renters, the ACS of the US Census Bureau also provides information on the share of homeowners who regularly pay more than 50% of their income on shelter costs. Households with a ratio greater than 50% are considered to have a “severe housing-cost burden”. Looking at Figure 10, we observe a sharp growth of over 400 units from 2015 to 2016 in Tri-Cities. The share of homeowners experiencing severe housing-cost burden in the Tri-Cities has decreased only slightly from 3.7% to 3.3% of all homeowners. In contrast, the Washington state average has fallen considerably from a higher 6% to 4% in 2019. The share of Tri-Cities homeowners paying more than 50% of their income towards their shelter costs is still below the state average. In terms of total number of units, there has been only a slight increase over the time period.

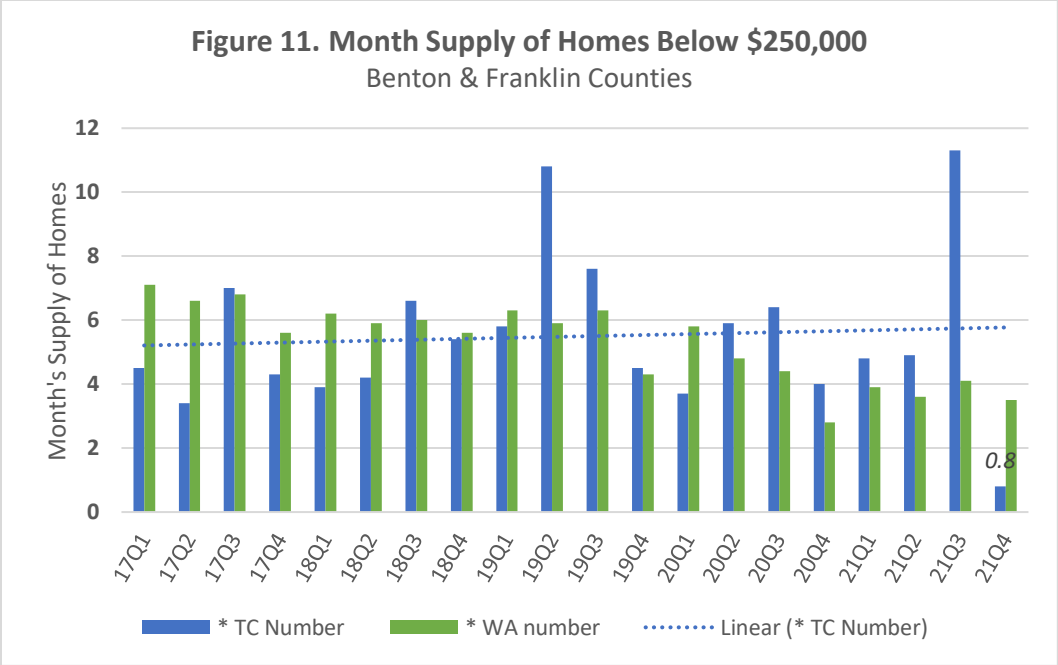


Source: American Community Survey (ACS), US Census Bureau

**4.f. Month supply of homes for sale below \$250,000 in list price**

The Washington Center for Real Estate Research (WCRER) at the University of Washington publishes quarterly data for Washington State's Housing Market. WCRER receives data on single-family home sales from each multiple listing service located in, or providing market coverage to, Washington communities.

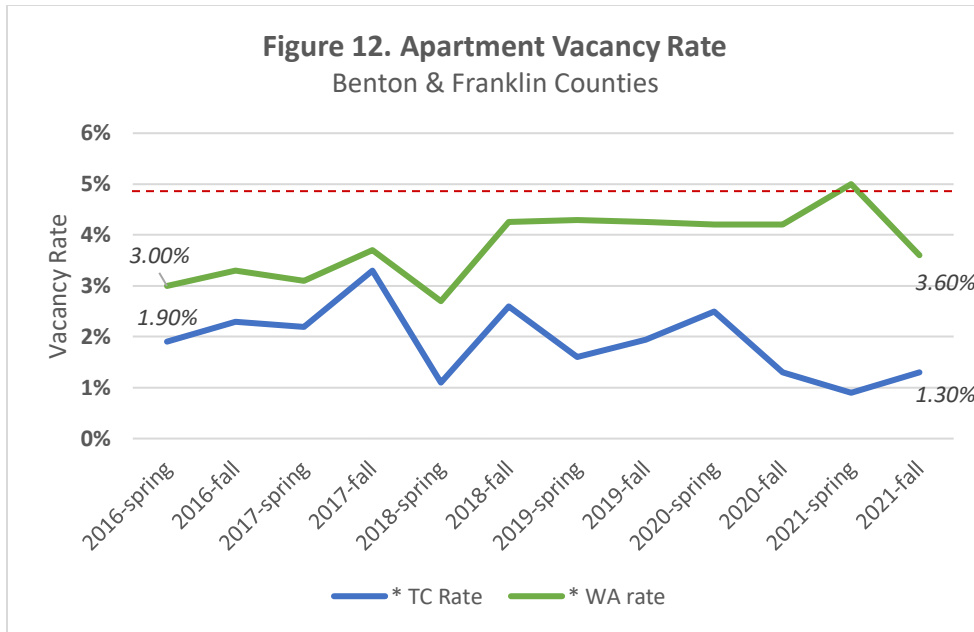
The monthly supply of homes for sale below \$250,000 (list price) as shown in Figure 11 is approximately how many months it would take for the current inventory of homes for sale in this category to be exhausted if no new homes were listed. As the dashed blue trend line indicates, there has been a slight overall growth for Tri-Cities since first quarter of 2017. Over the same time period, the state average has decreased slightly. A robust housing market has left less than a month's supply of single-family homes for sale below \$250,000 at the end of the 2021. This is bad news for first-time homebuyers in particular. Further, when first-time homebuyers can not move out of rental units, it becomes even harder for lower income or homeless residents to move from shelters or transitional housing into rental units.



Source: [Washington Center for Real Estate Research \(WCRER\)](#)

**4.g. Apartment vacancy rate**

Using data from the WCRER, Figure 12 shows the apartment vacancy rate for Benton & Franklin Counties over the past 5 years. Not only has the Tri-Cities apartment vacancy rate consistently been below the state average, the gap between the two rates has been increasing. Economists consider an apartment vacancy rate below 5% as representing somewhat tight conditions and falling below 3% represents a severe shortage of rental housing for local residents. Currently, the Tri-Cities’ rental markets are extremely tight and could be considered a severe shortage of rental housing. With very fewer apartments becoming available, competition for those apartments increases making candidates with lower incomes or coming from a previously unhoused situation might be less attractive to landlords when choosing their next tenants.

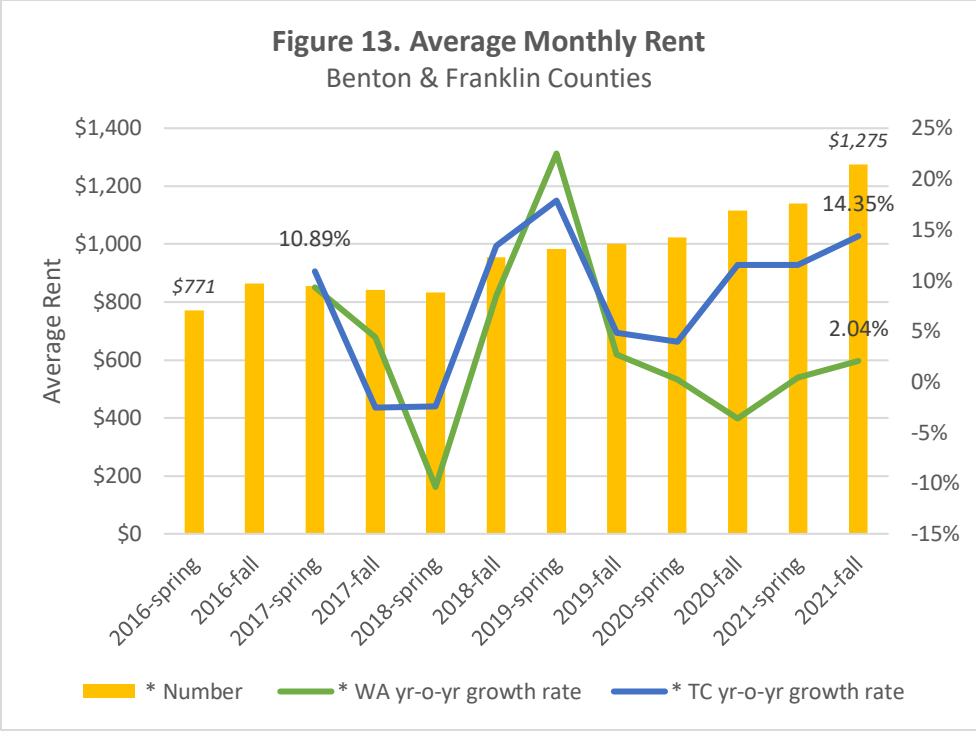


Source: [Washington Center for Real Estate Research \(WCRER\)](#)

#### 4.h. Average monthly rent

When there are fewer apartments becoming available, economists predict the excess demand will drive up the price of those rentals in the form of higher average monthly rates. In the greater Tri-Cities this has been very dramatic as shown in Figure 13. Using data from the WCRER, the year-over-year effective annual growth rate in average monthly rent increased by nearly 15% from the fall of 2020 to the fall of 2021, far exceeding the state average of only 2%. In fact, the average monthly rent in the greater Tri-Cities increased by a CAGR of 8.7% from spring 2016 to fall 2021, while the median household income only rose by 2.9% (CAGR). The rate of increase in rent was more than three times the rate of increase in incomes. This significant increase in area rents is going to be even more daunting for lower income or homeless residents seeking to move into an apartment.



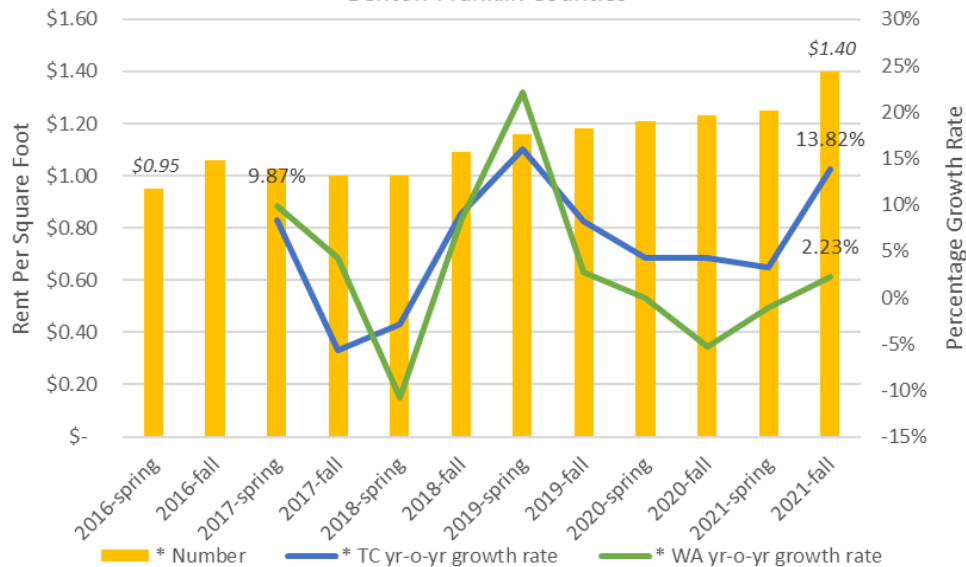


Source: [Washington Center for Real Estate Research \(WCRER\)](#)

**4.i. Monthly rent per square foot**

Another way to think about apartment rents is to compare them on the basis of monthly rent per square foot. This takes into account size differences between apartment types. The WCRER collects data on this measure of housing activity and monthly rent per square foot for Benton & Franklin Counties shown from the spring of 2016 to fall of 2021 in Figure 14. It is the best measure to compare rental rates. Much like average monthly rent in Figure 13, the monthly rent per square foot also shows an overall positive trend for Tri-Cities to a relative high of nearly 14% year-over-year growth from fall of 2020. Considering a longer time frame, the compound AGR from 2016 to 2021 is 8% for the greater Tri-Cities. During that same time period, median household income had a CAGR of 2.9%. Clearly the rate of increase in monthly rent per square foot has outpaced the rate of growth in incomes. And the monthly rent per square foot in Benton & Franklin Counties has also exceeded the state average.

**Figure 14. Monthly Rent Per Square Foot**  
Benton-Franklin Counties



Source: [Washington Center for Real Estate Research \(WCRER\)](#)

## 5. Presentation of homelessness from Benton Franklin Trends

### 5.a. Measuring homelessness -- Point-in-time count

According to the U.S. Department of Housing and Urban Development (HUD), a homeless person is defined as someone with a disabling condition who has been continuously homeless for either a year or more or has had at least four episodes of homelessness in the past three years. A person is considered homeless when he/she resides in places not meant for human habitation, such as cars, parks, sidewalks, and abandoned buildings; or in an emergency shelter; or in transitional housing.

Homelessness is a complex issue created by both individual and societal forces. Mental illness, physical disability, substance abuse, poverty, and response to domestic violence are all contributing factors that can lead a person to homelessness. Likewise, a community's capacity to provide affordable housing, adequate social support, and a living wage also influence housing stability.

Once a person or a family becomes homeless, their problems can multiply. Accessing affordable health care - or any health care at all, obtaining social services, finding employment, and keeping children focused on school become major challenges without basic needs such as shelter, a mailing address, or even a telephone number.

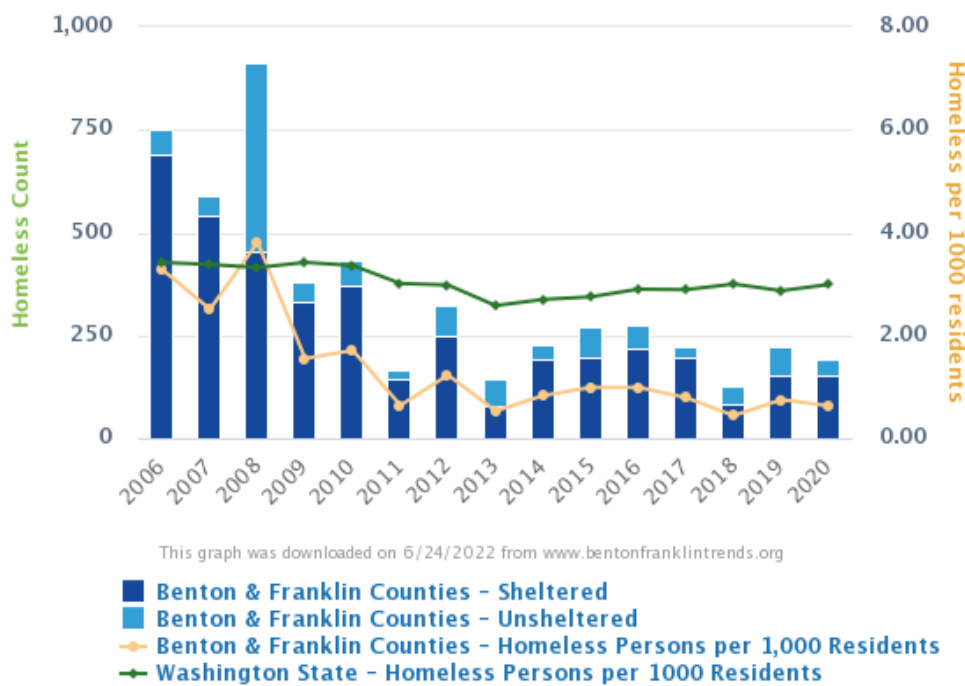
There is an alternative method to the Point-in-Time (PIT) – a compilation of all people using services for homeless persons in a given year from the HMIS (Homeless Management Information System) files, but this approach captures only those homeless who become part of HMIS. Furthermore, local government funding from HUD is based on the one-day count. This count takes place in late January.

All homeless are counted whether they are in shelters or on the street, and the resulting number represents the total count on that day only. The PIT provides a sampling of how many people are homeless on any given day in Benton & Franklin Counties. Washington State serves as a benchmark.

This indicator measures all homeless people and the number of homeless persons per 1,000 residents in the combined counties of Benton & Franklin, from the results of the annual, one-day PIT. Types of homelessness counted are: sheltered and unsheltered. Sheltered homelessness refers to people in an emergency shelter, transitional housing, motel/hotel, or temporarily living with someone who has stable housing. Unsheltered housing refers to people sleeping on the street, sidewalks, in their vehicles, abandoned buildings, under a bridge, or any form of unsuitable shelter.

Benton Franklin Trends [7.4.1 Total Homeless People & Rate Per 1,000 Residents](#)

**Figure 15. Total Homeless People & Rate Per 1,000 Population**



Source: [Benton Franklin Trends](#)

According to the PIT count in 2020, only 190 persons were homeless in the Benton & Franklin Counties and most of them were able to be housed in shelters. This represents a significant decline since 2006 both in total number and rate per 1,000 residents. The rate for the combined counties is far below the state average.

## 5.b. Measuring student homelessness

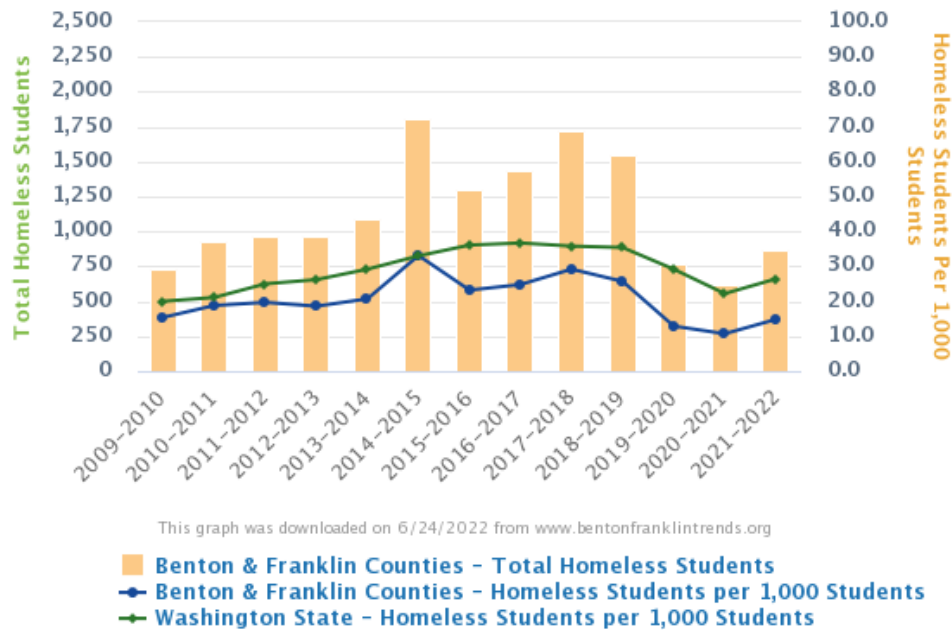
Homelessness among youth brings additional challenges. Many are homeless because they have fled abusive homes, have mental health issues or physical disabilities, or are grappling with substance abuse issues. Many have not completed their high school education and have no income. Accessing affordable health care - or any health care at all, finding and obtaining social services such as food and shelter, finding employment, and keeping focused on school become major challenges.

The stress of living on the streets, in shelters, or in another's home can hinder a child's ability to keep up at school. The effects of a homeless life at a young age can also lead to social, emotional, and behavioral problems that can be long-lasting.

This indicator adopts the McKinney-Vento definition of homeless youth. According to the [McKinney-Vento Education of Homeless Children and Youth Assistance Act](#), homeless children are "individuals who lack a fixed, regular, and adequate nighttime residence." With its accompanying federal funding, the Act requires states to develop ways to identify homeless students so educational resources can be provided to reduce the burden of homelessness. In the Act, homelessness covers more living situations than those used by the U.S. Housing & Urban Development Agency. The most notable addition covers students "sharing housing due to loss of housing, economic hardship or a similar reason."

This indicator measures the total number of homeless students enrolled in a public school at the beginning of a school year and the homeless student rate per 1,000 enrolled public-school students in Benton & Franklin Counties combined, as defined by the McKinney-Vento Act. Only public-school students ages 18-years and younger are counted for this indicator. All of Washington State's public-school districts serve as a benchmark.

**Figure 16. Homeless Students, By Type & Per 1,000 Students**



Source: [Benton Franklin Trends](#)

Although there was a slight increase in the number of homeless students in Benton & Franklin Counties between 2014-2019, both the total number of homeless students and the rate per 1,000 residents have fallen to similar levels from 2009-2010. In the fall of 2020, the number of homeless students was about 620 students and most of these were not on the street, but rather doubled up in shared housing. The rate for the combined counties is much lower than the state average.

**6. Presentation of homelessness from Washington’s HMIS**

**6.a. Measuring homeless or unstably housed populations over time**

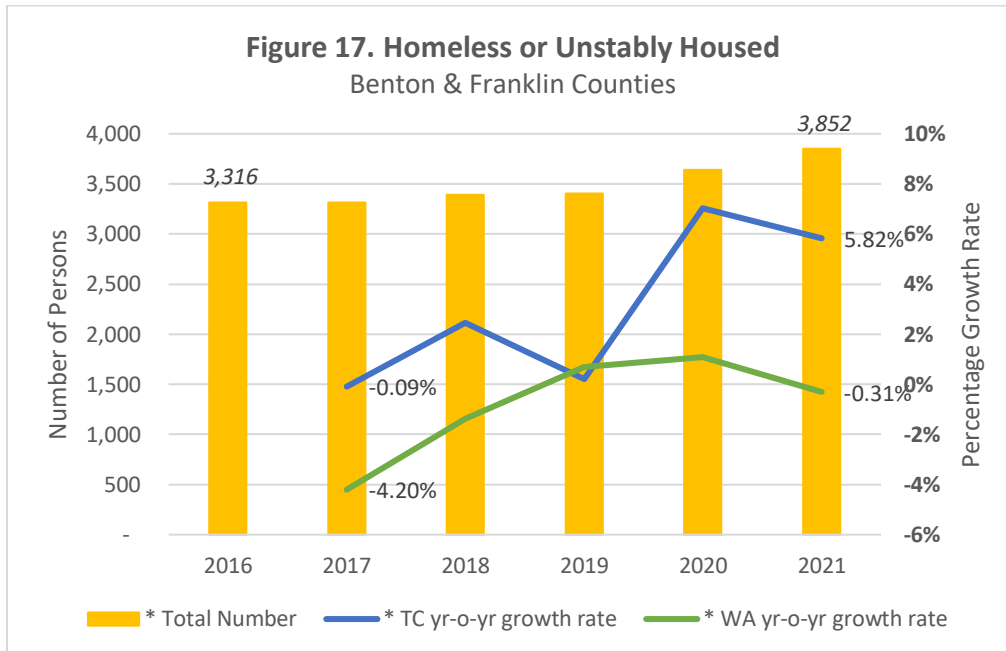
The Homeless Management Information System (HMIS) is a technology system used to collect client-level data at the local level on the provision of housing and services to homeless individuals and families as well as to persons at risk of homelessness.

The HMIS follows a Continuum of Care approach to process protected personal information and other data to create an unduplicated and accurate accounting of homelessness within the Continuum of Care.

. In contrast to the PIT count, the HMIS covers those who are in the system over the course of a year, rather than at one specific date.

### 6.b. Number of homeless or unstably housed

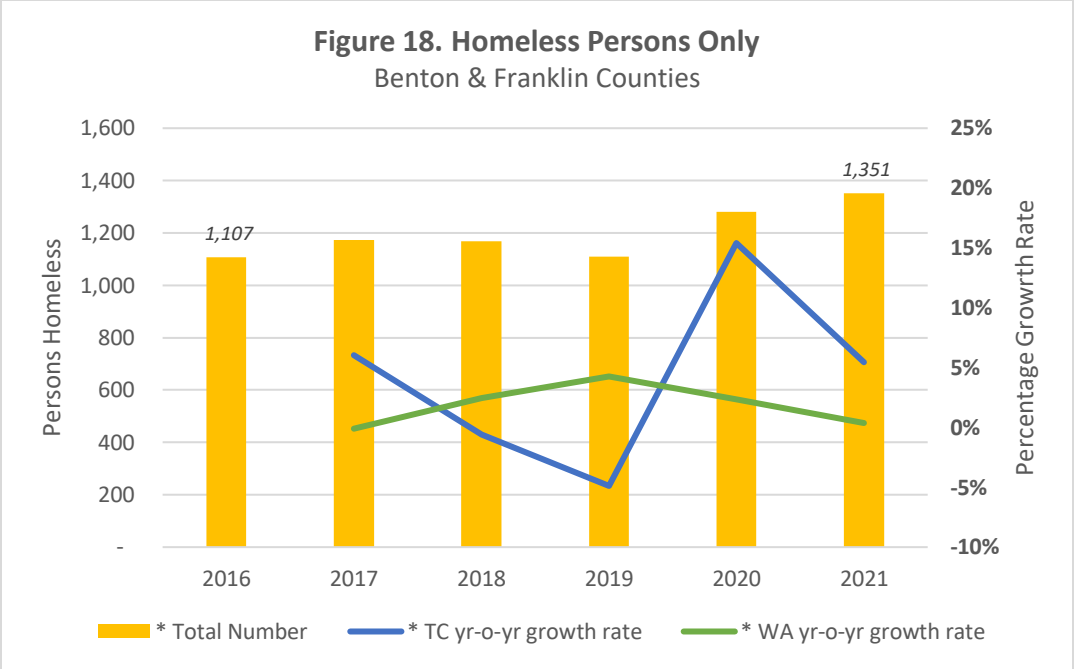
Using data from the Washington State Homeless System Report Card, Figure 17 shows all persons who are known to lack a fixed, regular, and adequate nighttime residence. Since 2016, the growth rate in the number of homeless or unstably housed individuals in the greater Tri-Cities has been consistently higher than that of Washington. Between 2016 and 2021, the number of homeless or unstably housed in the greater Tri-Cities grew by a CAGR of 2.8%, whereas WA had a CAGR of -0.8%.



Source: [Washington State Homeless System Report Card](#)

### 6.c. Number of homeless (only)

Turning just to the number of homeless, we access data from the Washington State Homeless Report Card for the past six years in Benton & Franklin Counties in Figure 18. Homeless refers to people who are sleeping out of doors, people who are sleeping in a place not meant for human habitation (car, bus station, etc.) or people staying in temporary facilities like emergency shelters and transitional housing. The Tri-Cities experienced a CAGR over the period of 4.1% compared to the state average CAGR of 1.9%. Both the number of homeless persons and the rate of growth has increased in the greater Tri-Cities.



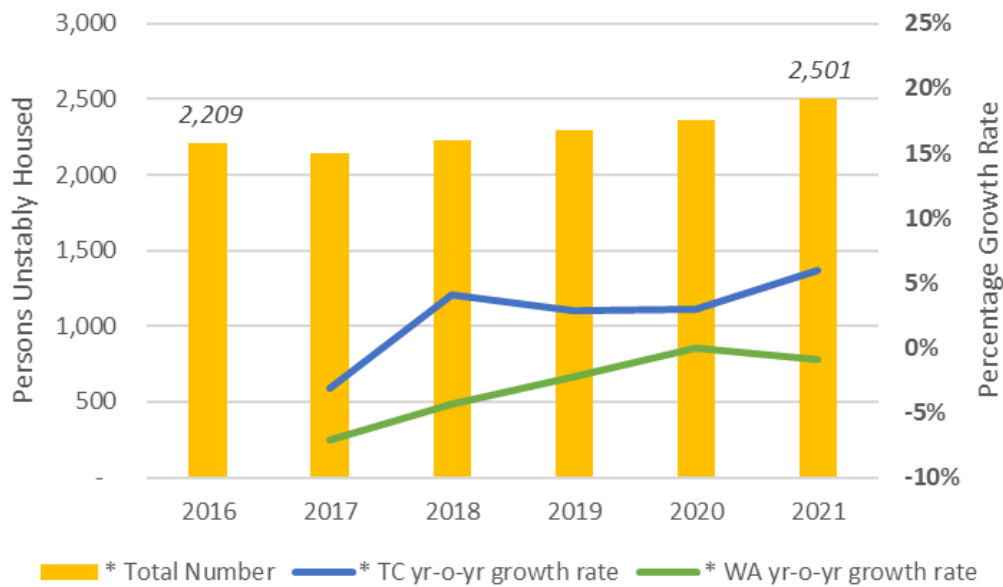
Source: [Washington State Homeless System Report Card](#)

**6.d. Number of unstably housed persons only**

Now considering just the number of unstably housed persons, we portray in Figure 19 shows data from 2016 to 2021 for the combined counties. Unstably housed refers to all persons who are currently housed and not homeless or imminently losing their housing, experiencing housing instability, but may have one or more other temporary housing options or are lacking the resources or support networks to retain or obtain permanent housing. Unstably housed individuals represent a larger portion than homeless persons. The compound AGR for the two counties was 2.5%, whereas WA CAGR was -2.9%.



**Figure 19. Unstably Housed Persons Only**  
Benton & Franklin Counties

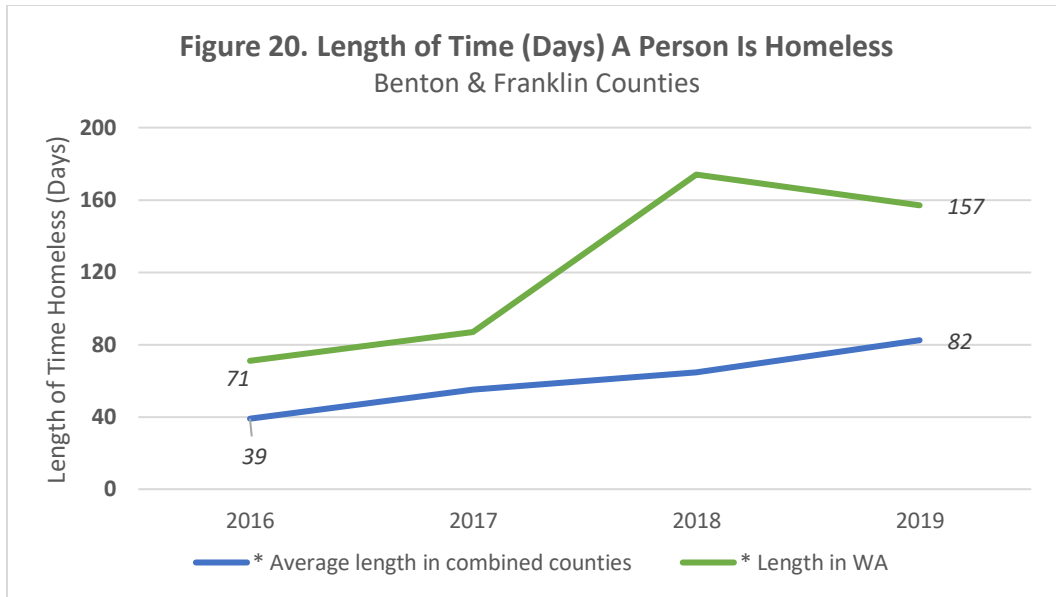


Source: [Washington State Homeless System Report Card](#)

**6.e. Average length of days of homelessness**

In addition to considering the number and rate of homeless and unstably housed individuals in a community, it is important to measure the average length of homelessness. Figure 20 shows the number of days recorded in HMIS that a person has spent in emergency shelters and safe havens during a one-year period and then finds the average. Permanent housing projects are only counted if the person was homeless at entry in the HMIS system.

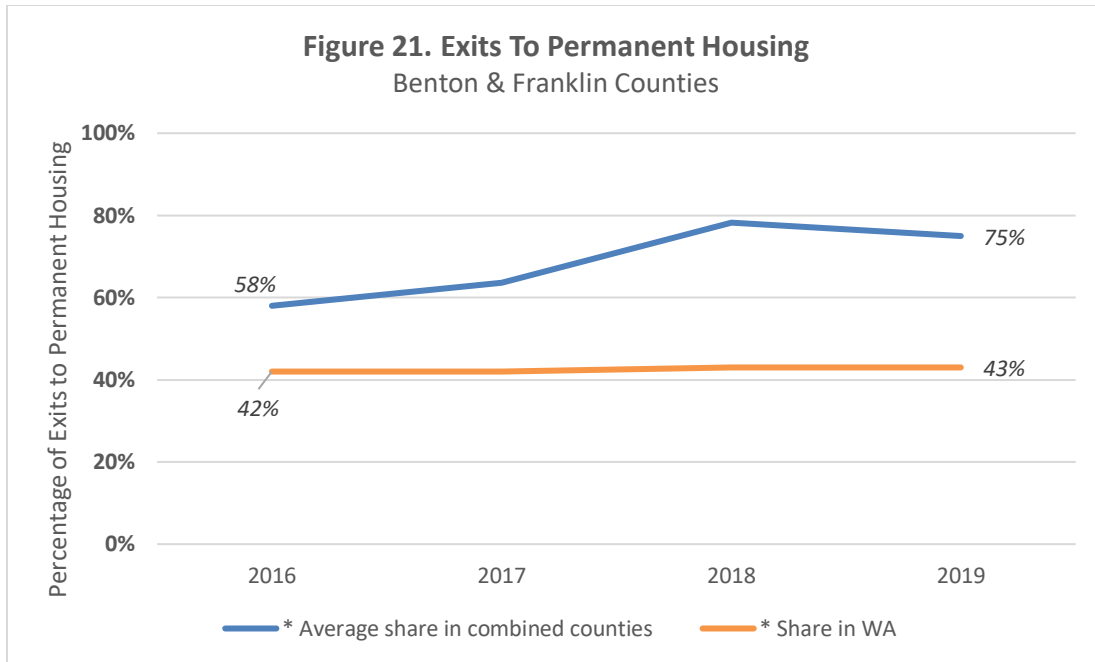
The length of time that an individual is homeless in the greater Tri-Cities has doubled from nearly 40 days in 2016 to over 80 days in 2021. This issue is not unique to Benton & Franklin Counties; the state average has gotten even worse.



Source: [Washington State Homeless System Report Card](#)

#### 6.f. Share of exits to permanently housed

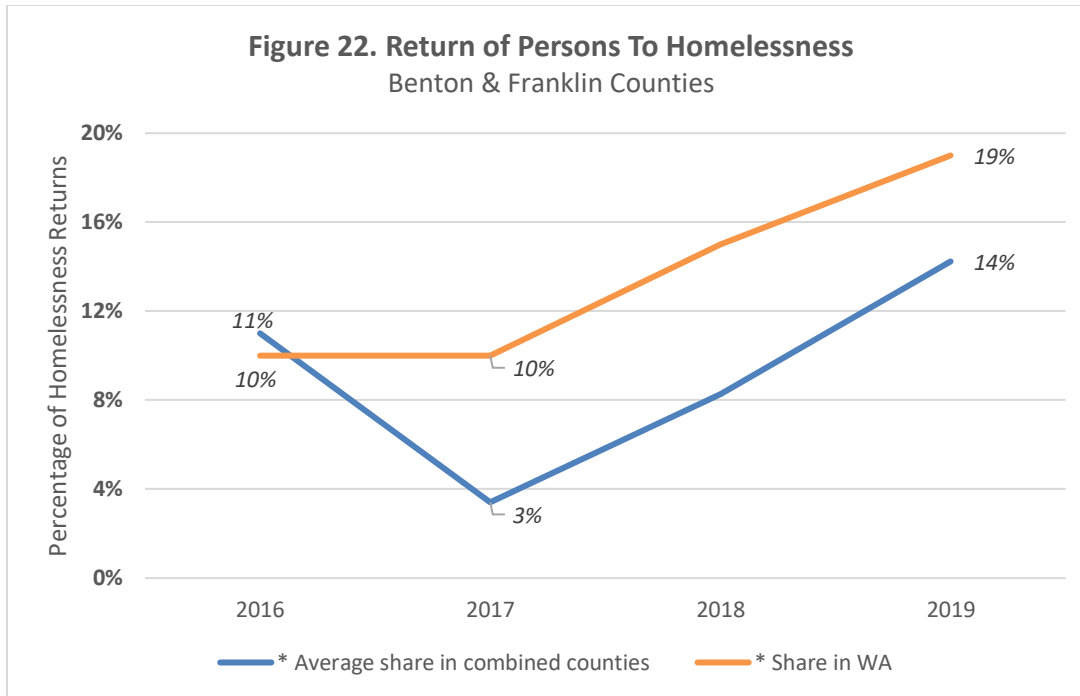
One way of measuring change in homelessness is that rate at which people are able to exit from a condition of homelessness to one of permanent housing. Figure 21 shows data on the number of people who exited emergency shelter, safe-haven, transitional housing, and rapid re-housing to permanent housing between 2016 and 2019. This is one of the most crucial indicators to track the success of those leaving the homeless/unstable system to permanent housing. The share of exits to permanent housing for Benton & Franklin Counties rate was consistently higher than WA benchmark and in fact showed overall growth from around 60% to 75%, implying that three out of every four individuals who used a shelter, safe-haven, transitional housing or rapid re-housing was able to move out of those forms of housing to permanent housing instead.



Source: [Washington State Homeless System Report Card](#)

#### 6.g. Share of exits returning to homelessness

On the other hand, sometimes people who are able to exit shelters or rapid re-housing into more permanent housing find themselves unable to sustain permanent housing and ultimately return to homelessness. Figure 22 tracks the return of people to homelessness. This indicator measures share of people who exit homelessness to permanent housing & then return to homelessness within 2 years. The rate for Tri-Cities is still below the Washington benchmark, but the rate still increased over the years from 10% to 14% of those who originally exited from homelessness and then returned. In terms of success, this means that in 2016, only one in ten exits from homelessness resulted in a return to homelessness but in 2019 this rate had increased to one in seven individuals who had exited homelessness returned to homelessness. The good news is that still six out of every seven exits remain in permanent housing.



Source: [Washington State Homeless System Report Card](#)

#### 6.h. Summary of findings from the data portion

- A review of the housing data indicates that total housing units have not been meeting population demand, but there are efforts to build up units, specifically multi-family units.
- Increasing rental rates are a challenge for renters because the growth rate of household income is about one-third of the growth rate of rent.
- The greater Tri-Cities has consistently been in a very tight market for housing, as the vacancy rate is below 2% for most years from 2016 to 2021.
- Persons experiencing homelessness and unstable housing are growing in Tri-Cities, whereas the WA number is decreasing. There are currently almost 4,000 people in the HMIS system in Tri-Cities. The length of days someone is homeless in the Tri-Cities has nearly doubled and the rate of those returning to homelessness is still increasing.

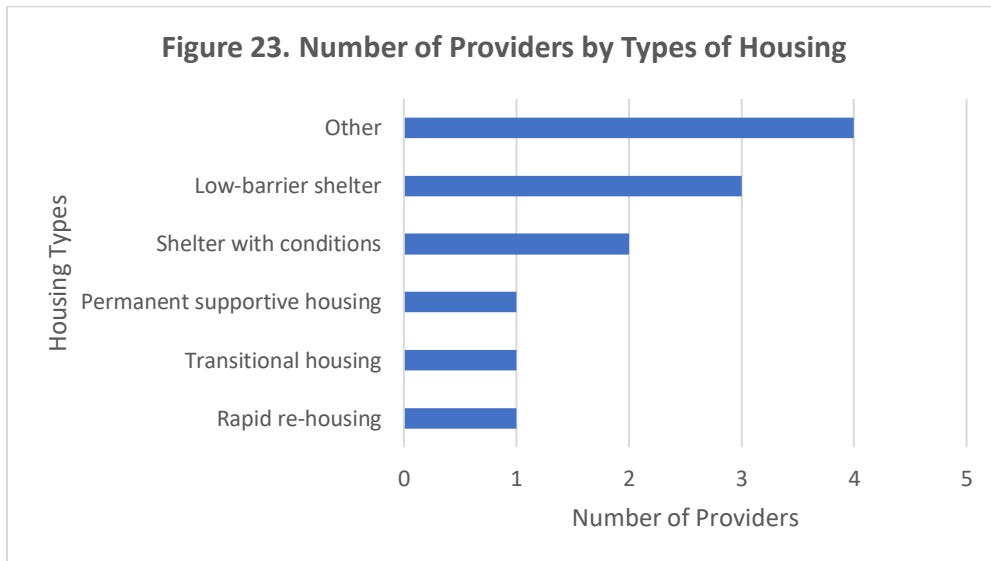
### 7. Presentation of findings from a survey of capacity and use of organizations targeting homeless and very low-income populations

#### 7.a. Description of the survey instrument

In order to provide insight into the availability of a variety of housing types for unhoused people in the greater Tri-Cities, a survey was conducted. Invitations to participate were sent

from the Benton Franklin Health District to list of providers, resulting in nine completed responses to the online survey. Through Survey Monkey, organizations were asked about the types of housing, types of families served, tenure of stays, number of beds and plans for expansion. The specific questions are provided in Appendix A.

The providers who responded to the survey offered a variety of types of housing as shown in Figure 23. Providers were able to select more than one category if it applied.



Source: EWU IPPEA, Unpublished survey, 2022

### 7.b. Definitions of types of housing

Rapid re-housing is an intervention intended to give persons experiencing homelessness who do not need ongoing support permanent housing as quickly as possible. Transitional housing is a longer-term step between homelessness and permanent housing that often involves substantial services such as mental health services, rehabilitation, and job training. Permanent Supportive Housing (PSH) is an intervention aimed at providing affordable housing and substantial supportive services to persons experiencing homelessness, often the chronically homelessness or disabled individuals.

Shelters were separated into two categories: (1) Shelters with conditions and (2) Low-barrier shelters. Conditions can include restrictions by gender, family-type, age, pets, or requiring religious participation. Shelters that do not have these types of restrictions are designated as low-barrier shelters.

### 7.c. Characteristics of low-barrier shelters from the survey

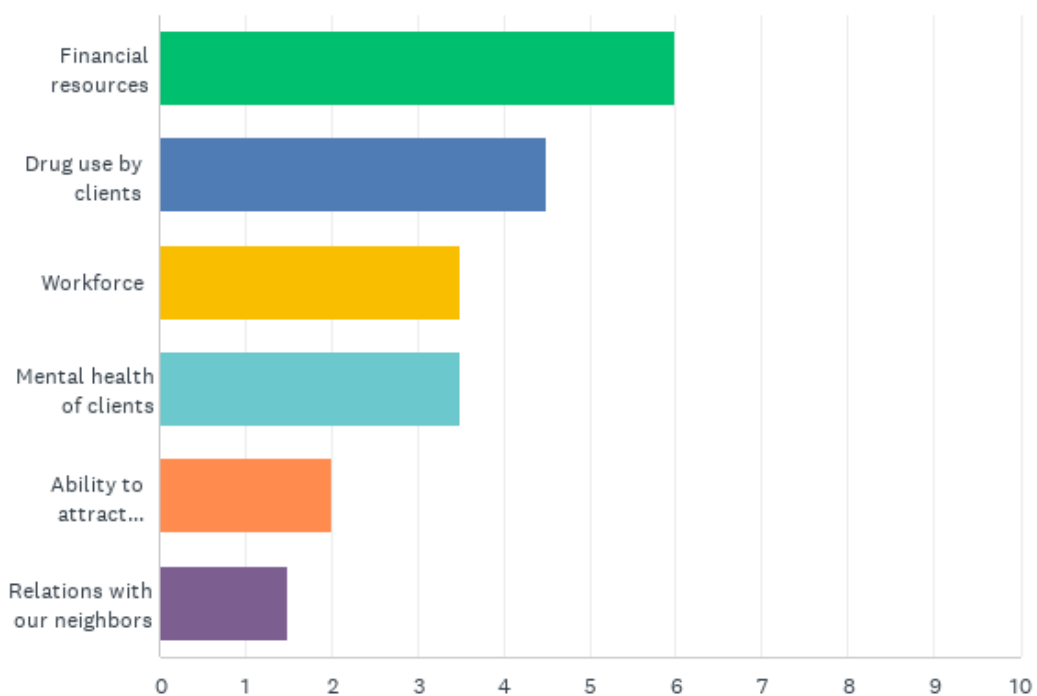
Providers of low-barrier shelters who responded to the survey (2) indicated that they do segregate by gender. Although one of the providers reported that they did not take families, the other provider was open to accepting mothers, fathers and children. Both providers reported having limits on the length of stay in their low-barrier shelters, such as aging out when

an individual turns 18 years of age and a time limit of only 30 to 90 days. Both facilities reported being able to accept persons with either physical and developmental disabilities.

When asked about capacity constraints, one of the providers indicated that they were fortunate enough to be able to serve everyone seeking assistance. The other provider indicated that they do have an active waitlist and have to turn away approximately four people per day. There is a total of 23 total beds combined. Although both providers indicated a desire to expand capacity, one provider stated they lacked the funding to do so. The other provider reported that they do plan to expand the shelter for 16 to 20-year-old clients in particular and incorporate a few more beds for 13 to 15-year-old teens as well.

Low barrier shelters face various obstacles in their operations. When asked about which obstacles are most pressing, as shown in Figure 24, the providers agreed that limited financial resources are the most daunting. Drug use by clients is also a significant concern for the low-barrier shelters along with the mental health of their clients and workforce challenges. The ability to attract homeless individuals and the relations with neighbors were not rated as highly.

**Figure 24. Ranking of Obstacles to Success, Low-barrier Shelters**



Source: EWU IPPEA, Unpublished survey, 2022

#### **7.d. Characteristics of shelters with conditions from the survey**

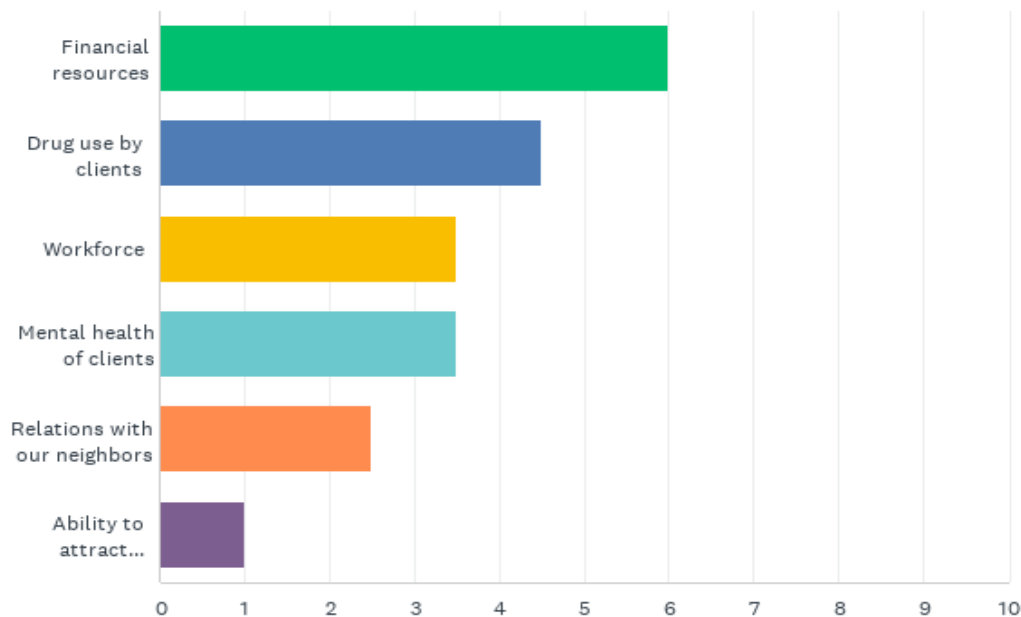
Providers of shelters with conditions (2) who responded to the survey reported that conditions at their facilities include no pets and participation in religious services. One of the facilities is only licensed for teens aged 13-17 years old. Another facility limits the length of stay to 90 days, however they are willing to extend the duration if there is ongoing case management such as to move the individual to another type of housing.

The shelters with conditions that responded to the survey operate some facilities that did not permit families and some facilities that were open to mothers, fathers and children. All providers reported that they accept persons with both physical and developmental disabilities, although it was not clear what accommodations they have. It is typical of these facilities to segregate by gender.

In attempting to ascertain bed capacity, respondents were asked if they were currently able to serve everyone seeking assistance. Although one facility indicated in the affirmative, the other provider reported that they do occasionally have a waitlist and it could be a couple of days until people move from the waitlist to a bed in the shelter. Combined, there are 210 beds currently in the shelters with conditions with plans to add over another 105 beds in the near future.

For shelters with conditions, much like low-barrier shelters, the biggest obstacles are financial resources and drug use by clients. In fact, one provider reported that the lack of detox/mental health services precludes individuals from being accepted even though there may be available beds. Shelters with conditions are also facing significant workforce challenges as well as challenges related to the mental health of their clients. Similar to low-barrier shelters, relations with neighbors and ability to attract homeless individuals are less significant obstacles.

**Figure 25. Ranking of Obstacles to Success, Shelters with Conditions**



Source: EWU IPPEA, Unpublished survey, 2022

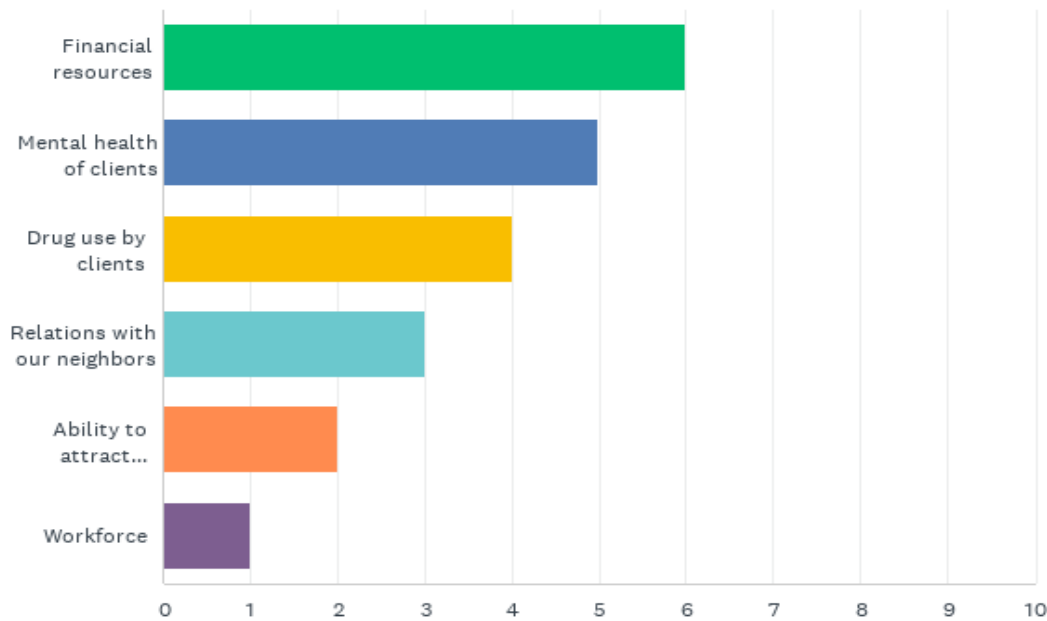
**7.e. Characteristics of rapid re-housing from the survey**

The one responding provider of rapid re-housing reported a length of stay of one year. They do not serve families and do not segregate by gender at their facility. The rapid re-housing facility does accept people with either a physical or developmental disability. Presently, this



facility is not experiencing a waitlist, but has applied for additional funding to be able to offer even more beds in the near future. Figure 26 shows that much like the low-barrier shelters and shelters with conditions, the rapid re-housing facility also ranks financial resource constraints as the greatest obstacle to success. For rapid re-housing providers, the mental health of their clients is the second greatest obstacle followed by drug use by clients. The least significant obstacle is workforce challenges.

**Figure 26. Ranking of Obstacles to Success, Rapid Re-housing**



Source: EWU IPPEA, Unpublished survey, 2022

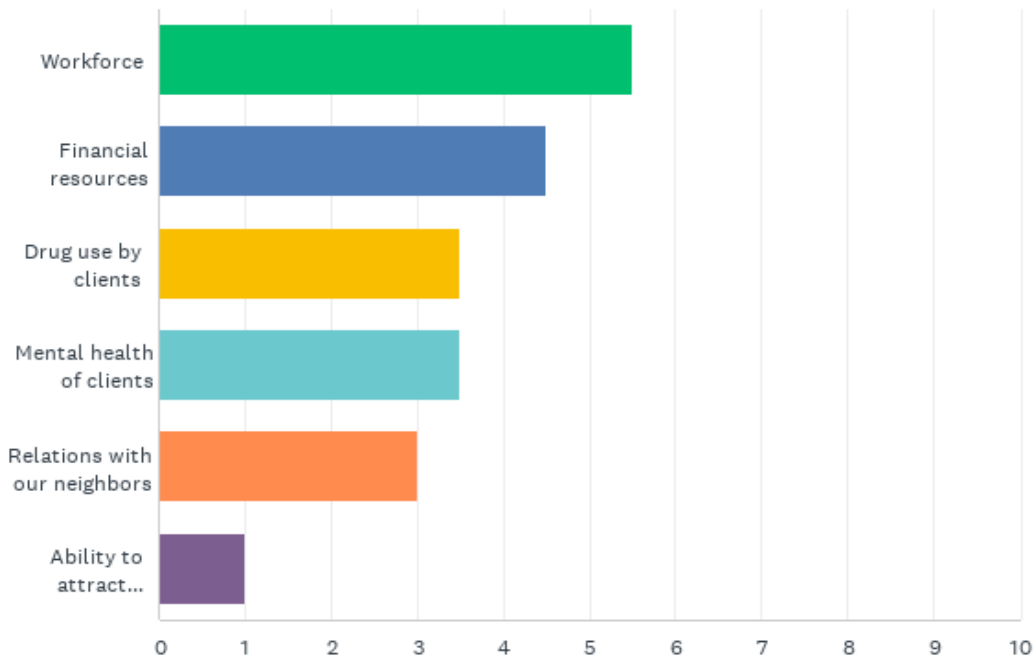
**7.f. Characteristics of permanent supportive housing from the survey**

As the name implies, this type of affordable housing includes substantial supportive services to persons experiencing homelessness, often the chronically homeless or disabled individuals. The facilities that responded to the survey reported that families are welcome and there are no limits to the length of stay. Individuals are not segregated by gender in these facilities. The respondents reported that the supportive housing serves people with either physical or development disabilities.

Despite having over 1,000 units combined, permanent supportive housing facilities that responded are unable to serve everyone seeking assistance. One facility reported that they have to turn away approximately five people per day. Because of excess demand, respondents have waitlists of between 400-500 people seeking permanent supportive housing. Survey respondents indicated plans to add an additional 100+ units in the next two years.

Workforce challenges are the greatest obstacle facing permanent supportive housing, followed closely by financial resources. Similar to the other forms of housing, relations with neighbors and ability to attract potential clients were ranked lowest amongst the obstacles.

**Figure 27. Ranking of Obstacles to Success, Permanent Supportive Housing**



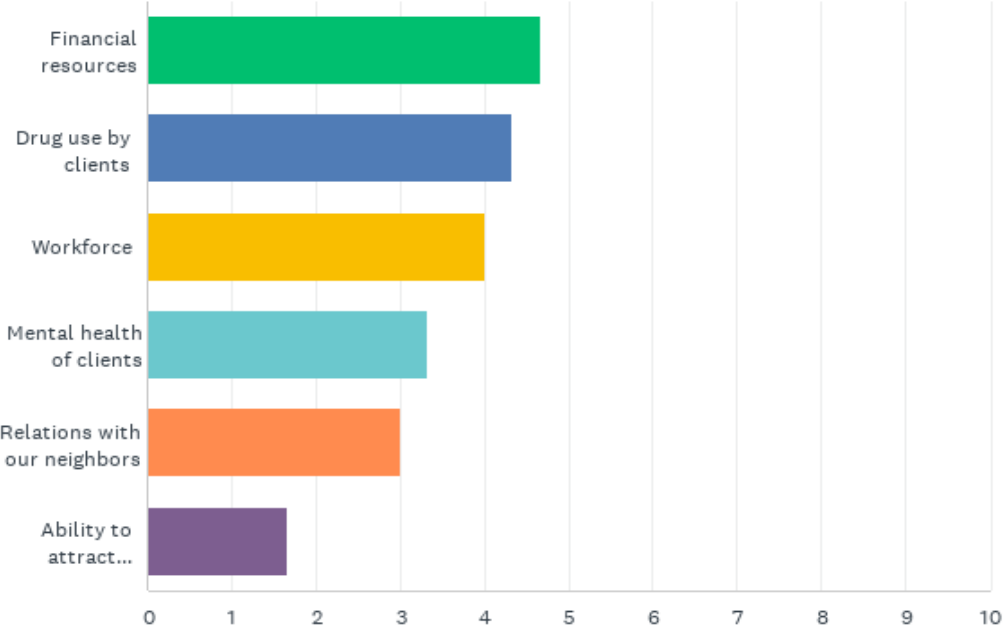
Source: EWU IPPEA, Unpublished survey, 2022

### **7.g. Characteristics of other housing types**

In addition to the specific types of housing previously mentioned, the survey solicited responses from public housing, affordable housing, organizations offering section 8 (HUD) vouchers, and an extended youth shelter. Combined, these facilities have a capacity of nearly 650 beds, some of which are dedicated for youth and others can serve families. One of the facilities reported that unfortunately they turn away approximately 10 people per day. The average waitlist is 375 people. Combined, these facilities indicated plans to expand by another 56 beds within the next two years.

Consistent with the other categories of housing types, respondents in this group are facing significant obstacles due to financial resources. Drug use by clients is also an obstacle along with workforce challenges. Relations with neighbors and ability to attract potential clients are ranked lower.

**Figure 28. Ranking of Obstacles to Success, Other Housing Types**



Source: EWU IPPEA, Unpublished survey, 2022

## Sources

Benton & Franklin Counties Community Health Improvement Plan, 2020

[https://cdn5-hosted.civiclive.com/UserFiles/Servers/Server\\_10765972/File/Agency%20Reports/2020%20CHIP%20FINAL.pdf](https://cdn5-hosted.civiclive.com/UserFiles/Servers/Server_10765972/File/Agency%20Reports/2020%20CHIP%20FINAL.pdf)

Benton Franklin Trends, EWU Institute of Public Policy & Economic Analysis

<http://bentonfranklintrends.org/>

Washington State Homeless System Report Card

[https://public.tableau.com/app/profile/comhau/viz/DRAFTWashingtonStateHomelessSystemPerformance\\_CountyReportCardSFY2019/ReportCard](https://public.tableau.com/app/profile/comhau/viz/DRAFTWashingtonStateHomelessSystemPerformance_CountyReportCardSFY2019/ReportCard)

Washington State Center for Real Estate Research, University of Washington

<https://wcrer.be.uw.edu/archived-reports/>

## Appendix A

<b>Notes from Homelessness and Housing Forum</b>	<b>May 18, 2022</b>
<b>Note taker: Kelly Harnish</b>	
<b>Question: What is the top housing/homelessness need in this community?</b>	
<ul style="list-style-type: none"> <li>• Wraparound services for substance abuse and homelessness</li> <li>• Connection to resources and support</li> <li>• Regional and unified approach to resources</li> <li>• Collaborate between public and private sectors, republicans and democrats. Unification.</li> <li>• Affordable housing</li> <li>• Specialty services that are coordinated</li> <li>• Critical age need is &lt;18 years old and 18-24 years old</li> <li>• Prevention—Many people are one emergency away from homelessness</li> <li>• Population who are just outside the threshold to qualify for aid</li> <li>• Intensive assistance/case management for some</li> <li>• Accessible housing for those with mental health or physical disabilities</li> <li>• Low barrier housing</li> <li>• More multifamily units</li> <li>• More rentals</li> <li>• Community education on root causes of homelessness to encourage empathy/support</li> <li>• Family mentoring re: how to stay housed, employed, fed</li> <li>• Marketing strategies for solutions/aid that are culturally correct and in multiple language</li> <li>• Better promotion of resources</li> <li>• More supply and affordability</li> <li>• Easy access to assistance (Spanish, low education, help with forms)</li> <li>• Refugees need cooperation from landowners to establish housing</li> <li>• Give refugees more time (current is 1 year). Pay increases change eligibility for Section 8</li> <li>• Meet people where they're at (paper, digital, social media)</li> <li>• Employers helping employees find/afford housing</li> <li>• Reduce NIMBYism through education/awareness of mutual benefits</li> <li>• Code changes to allow affordable housing</li> <li>• Reduce time and barriers to development</li> <li>• Increase vacancy rates</li> <li>• Address discriminatory landlords</li> <li>• Need more case management</li> <li>• Need more than an apartment (garden, a sense of community)</li> <li>• "Housing First"</li> <li>• Strategic and collaborative approaches</li> <li>• Coordinated entry meeting run by a paid city employee</li> <li>• Landlord/tenant liaison program</li> <li>• Bring back Hotspotters but make it regional</li> <li>• Get ahead of the problem, cooperate, combine resources</li> <li>• Bridge the barriers of having three cities</li> <li>• Bridge to homeownership to reduce dependency long term</li> <li>• Address zoning issues</li> </ul>	

- Help people stay in their homes
- Financial literacy education
- Senior housing

## Appendix B

Notes from Homelessness and Housing Forum	May 24, 2022
<b>Note taker: Kelly Harnish</b>	
<b>Question: What is the top housing/homelessness need in this community?</b>	
<ul style="list-style-type: none"><li>• Public housing finding</li><li>• Deal with inflation, housing is scarce and unaffordable</li><li>• Low stock of low-income housing, specifically rentals</li><li>• Affordable housing in safe neighborhoods</li><li>• Affordable, accessible housing for seniors and those with disabilities</li><li>• Housing options for sex offenders</li><li>• Education on housing resources</li><li>• More low-barrier, non-secular shelters</li><li>• Land use issues</li><li>• Incentivize builders to do some percentage of low-income housing</li><li>• Community education to reduce stereotypes re: homeless people and those seeking housing aid</li><li>• Prevention and mental health/substance use disorder treatment</li><li>• Remove restrictions on where low income housing is built</li><li>• Better access to primary care to keep people out of ER.</li><li>• Better access to needed medication</li><li>• Identify landlords who will rent to people in recovery from substance use disorder</li><li>• Make public transit available for free to everyone, increase access, reduce barriers</li><li>• Strengthen partnerships within housing/homelessness aid sectors</li><li>• Better wages for everyone</li><li>• Transitional housing for those on minimum wage</li><li>• Reduce wait times for housing/housing aid</li><li>• Reduce barriers to receiving assistance</li><li>• Need more family-friendly and youth friendly shelters</li><li>• Shelters accepting single fathers and mothers with teen/adolescent boys</li><li>• Make involuntary treatment easier from a legal standpoint</li><li>• Community education regarding benefits to the community if investments are made for low-income housing/homelessness solutions</li><li>• More permanent supportive housing</li><li>• Improve the quality and safety of current housing and shelter conditions</li><li>• Reduce barriers</li><li>• Promote mixed income housing for builders</li><li>• Streamline the building process</li><li>• HUD should provide more public housing in addition to vouchers</li><li>• Rent prices need to be lower</li><li>• Rental association feels it would help if it were easier to evict renters</li><li>• City should rezone using state funding</li><li>• Government should donate land for affordable housing</li><li>• Local leaders should take responsibility</li><li>• Better partnerships with business community</li><li>• Assist people with medical debt</li></ul>	

## Appendix C

### Participants in the Homeless / Housing Forums

#### May 18, 2022 (8:30 am)

Amira	Alsalamy
Jon	Amundson
Kailey	Baer
Meghann	Barker
Lizz	De La Mora
Robert	Gear
Chris	Guerrero
John	Kennedy
Paul	Klein
Lorraine	Landon
Christopher	Nulph
Brissa	Perez
Jet	Richardson
Ana	Ruiz Kennedy
Shannon	Snapp
Kyle	Sullivan
Gracie	Valle-Chimal
Gina	Vasquez
Sandy	Westin
JILL	YOUNG- MCMURCHIE

#### May 24, 2022 (1:30 pm )

Kyle Sullivan  
Kendra Palomarez  
Jacob Gonzalez  
Raquel Munguia  
Brandy Arojo  
Joely Nye-Felt  
Susan Campbell  
Mauricio Gomez  
Diana Henning  
Julie Jackson  
Blanche Barajas  
Michelle Holt  
Stephanie Button  
Leanna Ashley



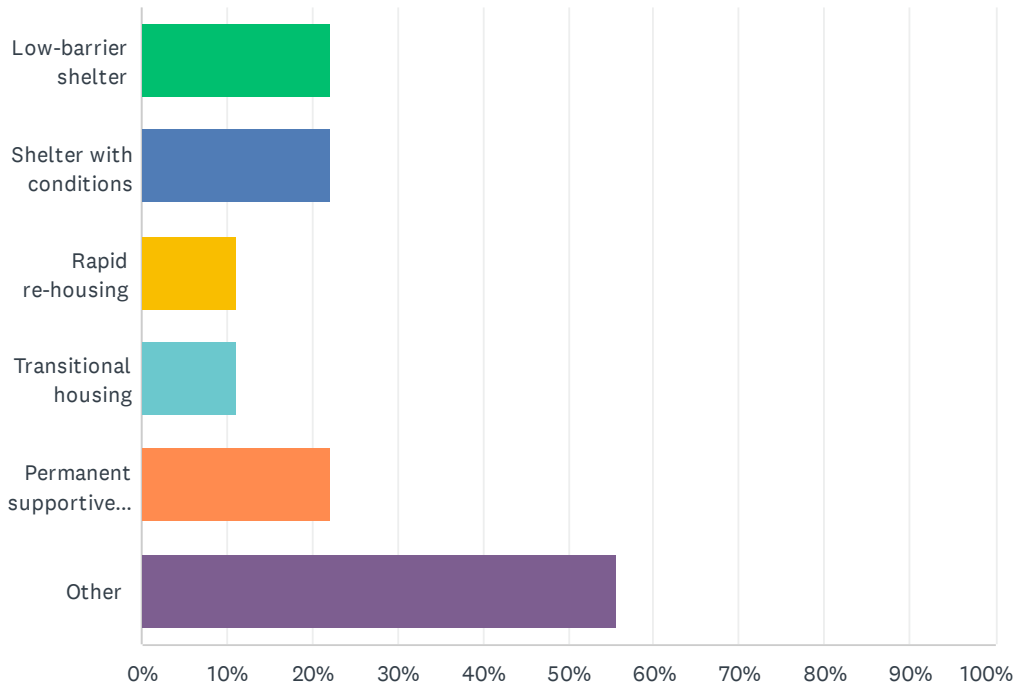
WADE FORSYTHE  
cyndi kimmel  
Melanie Olson  
Diane Goheen  
Diane Goheen  
Lidia Lippold  
Lisa Godwin  
Michael Van Beek  
Letty Perez  
Kathy Parson  
Kathy Parson  
Carl Baker  
Jason Bliss  
Matt Truman  
Maggie Gonzales  
Stacy Waldvogel  
Stacy Waldvogel  
Susan Campbell  
Kerwin Jensen  
Jamilynn Lewis  
Diane Halo  
G W  
Ronni Batchelor  
Ansley Gerhard  
Silvia Balli  
Carson Godinez  
Maria Mena

### Q1 Please enter the name of your organization here.

Answered: 9 Skipped: 0

### Q2 Please identify the types of housing you provide for the homeless. Select all that apply.

Answered: 9 Skipped: 0

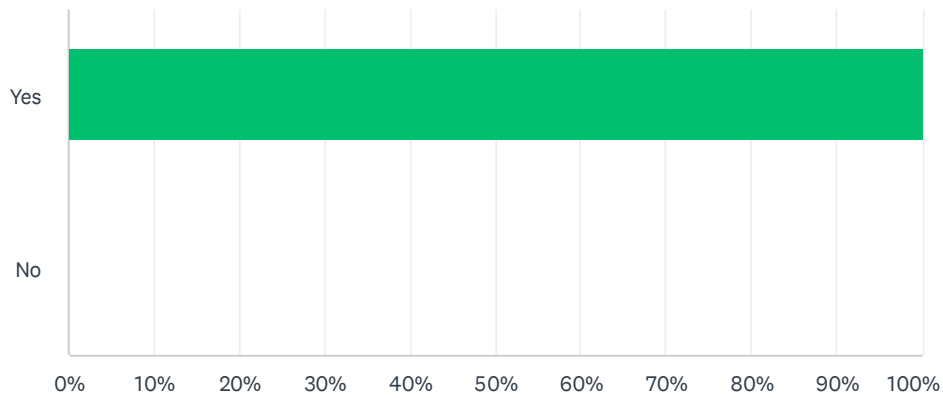


ANSWER CHOICES	RESPONSES
Low-barrier shelter	22.22% 2
Shelter with conditions	22.22% 2
Rapid re-housing	11.11% 1
Transitional housing	11.11% 1
Permanent supportive housing	22.22% 2
Other	55.56% 5
Total Respondents: 9	

### Q3 Do you have limits on the length of stay in your housing?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



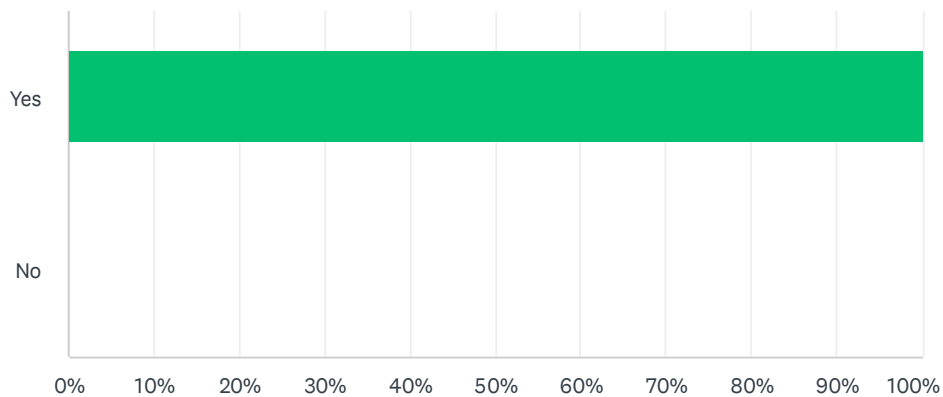
ANSWER CHOICES	RESPONSES
Yes	100.00% 2
No	0.00% 0
TOTAL	2

Q4 If you do have limits on the length of stay in your housing, what are they? (In days)

Answered: 2 Skipped: 7

Q5 Do you segregate by gender?

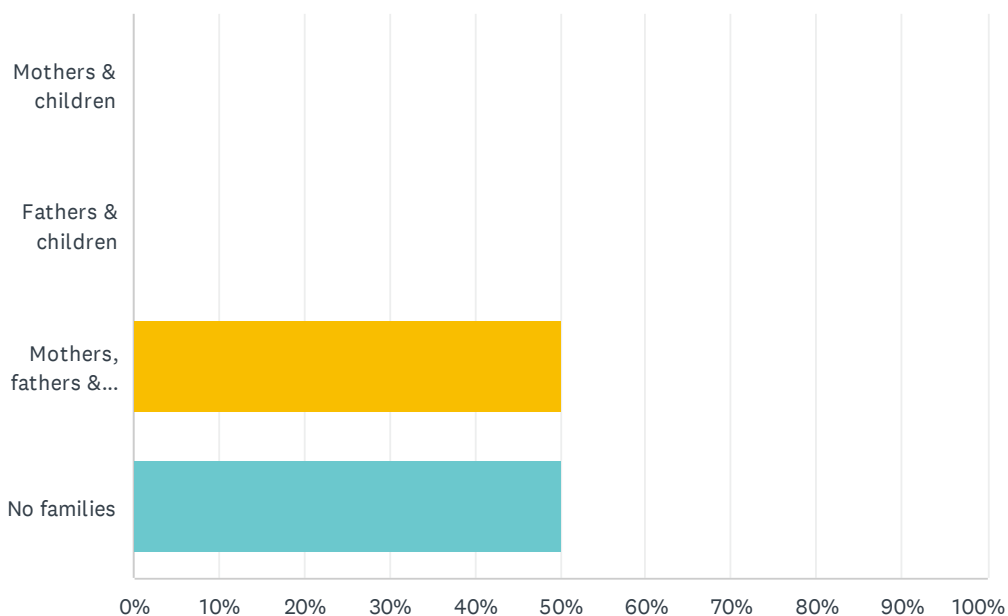
Answered: 2 Skipped: 7



ANSWER CHOICES	RESPONSES
Yes	100.00% 2
No	0.00% 0
TOTAL	2

## Q6 Do you serve families?

Answered: 2 Skipped: 7

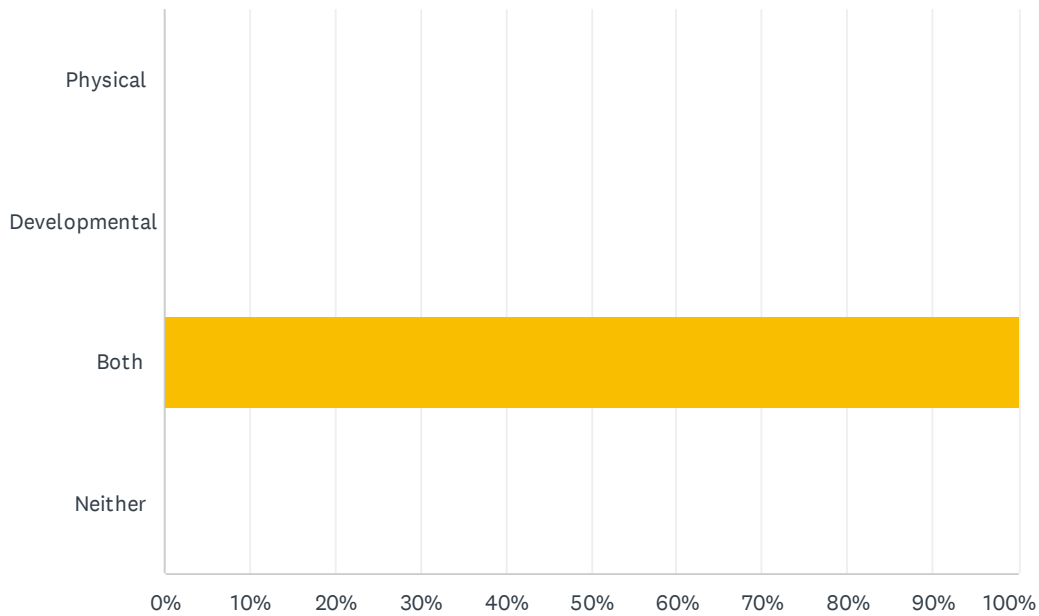


ANSWER CHOICES	RESPONSES
Mothers & children	0.00% 0
Fathers & children	0.00% 0
Mothers, fathers & children	50.00% 1
No families	50.00% 1
<b>TOTAL</b>	<b>2</b>

## Q7 Do you serve people with disabilities?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



ANSWER CHOICES	RESPONSES
Physical	0.00% 0
Developmental	0.00% 0
Both	100.00% 2
Neither	0.00% 0
<b>TOTAL</b>	<b>2</b>

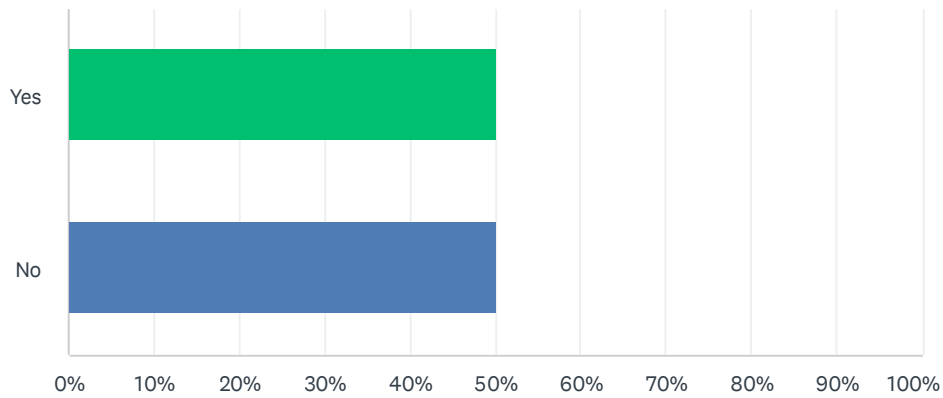
Q8 What is your current bed capacity?

Answered: 2 Skipped: 7

Q9 Are you currently unable to serve everyone seeking assistance?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



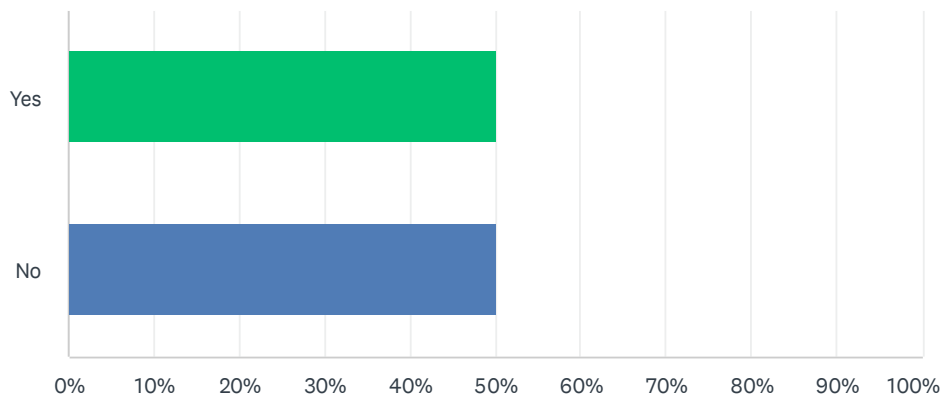
ANSWER CHOICES	RESPONSES	
Yes	50.00%	1
No	50.00%	1
TOTAL		2

Q10 If you are currently unable to serve everyone, how many are you turning away a day?

Answered: 1 Skipped: 8

Q11 If you are currently unable to serve everyone, do you have a waitlist?

Answered: 2 Skipped: 7



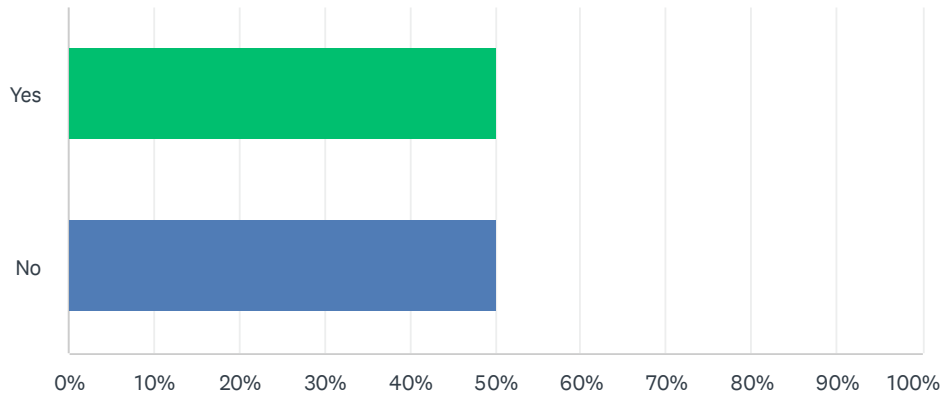
ANSWER CHOICES	RESPONSES	
Yes	50.00%	1
No	50.00%	1
TOTAL		2

### Q12 If you have a waitlist, how many people are currently on the waitlist?

Answered: 1 Skipped: 8

### Q13 Do you have plans to expand bed capacity?

Answered: 2 Skipped: 7



ANSWER CHOICES	RESPONSES	
Yes	50.00%	1
No	50.00%	1
TOTAL		2

### Q14 If you plan to expand your bed capacity, please tell us the amount.

Answered: 2 Skipped: 7

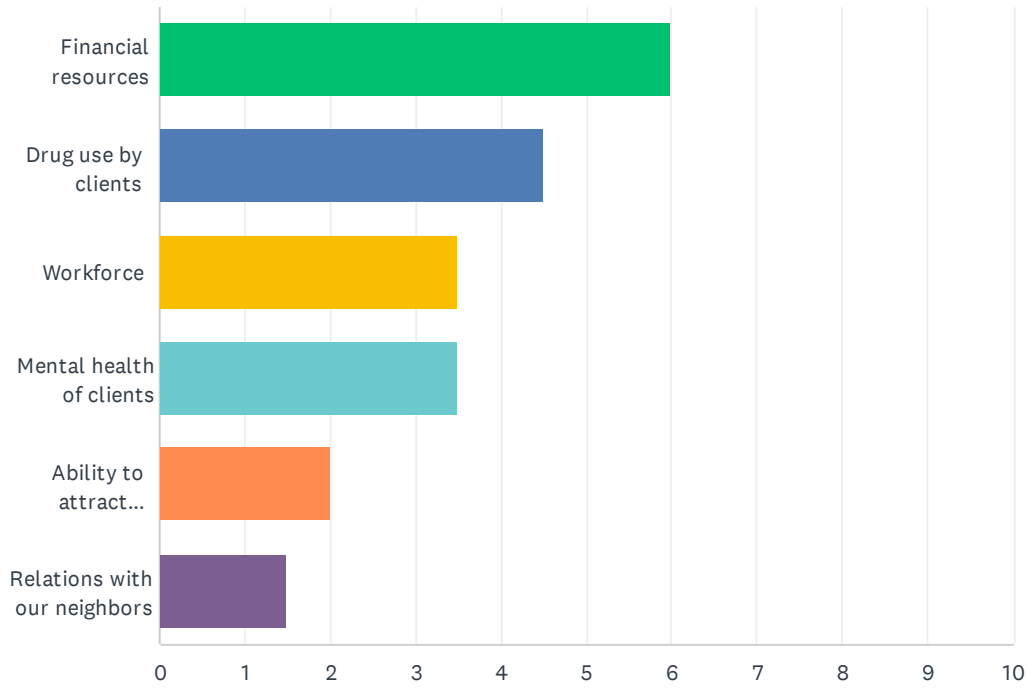
### Q15 If you plan to expand your bed capacity, when will the additions be open? (month, year)

Answered: 1 Skipped: 8

### Q16 Please rank the largest obstacles to your success.

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



	1	2	3	4	5	6	TOTAL	SCORE
Financial resources	100.00% 2	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	2	6.00
Drug use by clients	0.00% 0	50.00% 1	50.00% 1	0.00% 0	0.00% 0	0.00% 0	2	4.50
Workforce	0.00% 0	50.00% 1	0.00% 0	0.00% 0	50.00% 1	0.00% 0	2	3.50
Mental health of clients	0.00% 0	0.00% 0	50.00% 1	50.00% 1	0.00% 0	0.00% 0	2	3.50
Ability to attract homeless	0.00% 0	0.00% 0	0.00% 0	50.00% 1	0.00% 0	50.00% 1	2	2.00
Relations with our neighbors	0.00% 0	0.00% 0	0.00% 0	0.00% 0	50.00% 1	50.00% 1	2	1.50

Q17 If there is an obstacle to your success not listed above, please describe it here.

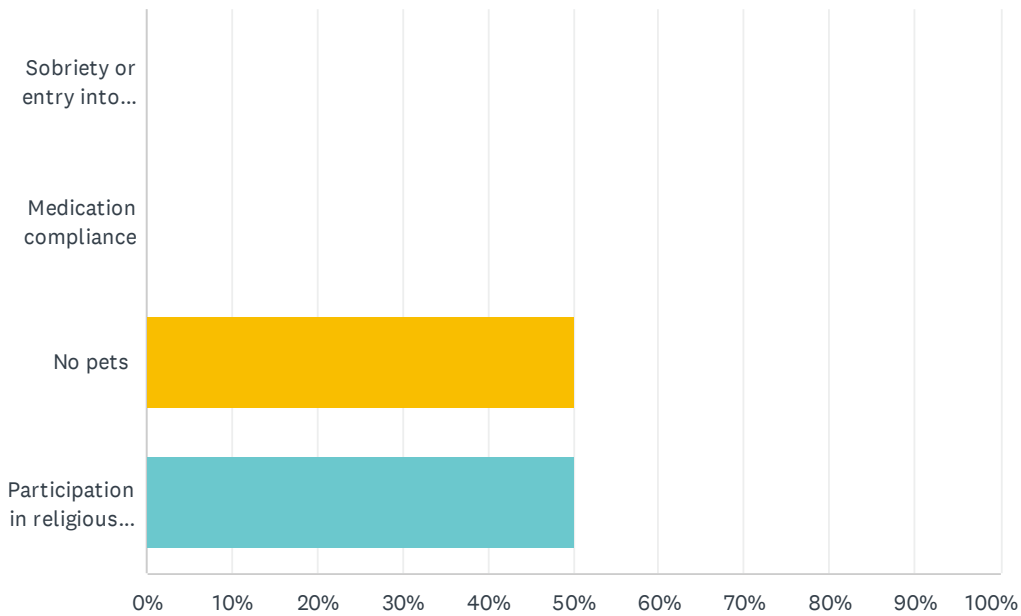
Answered: 0 Skipped: 9

Q18 What conditions does your shelter have?

Answered: 2 Skipped: 7



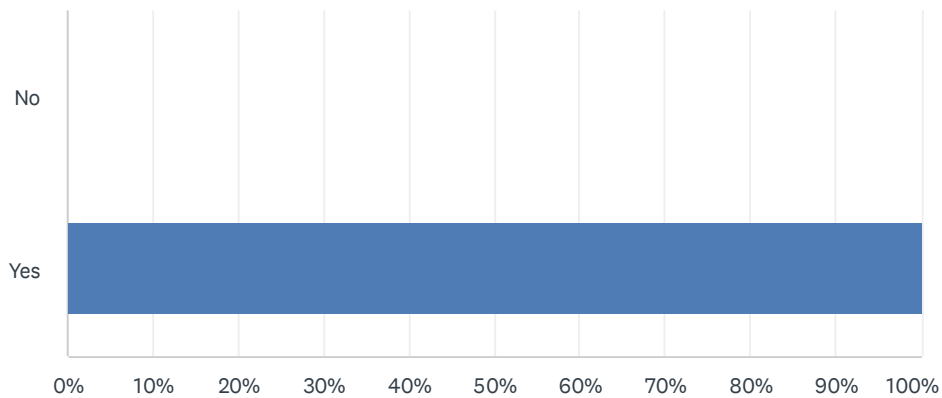
## Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



ANSWER CHOICES	RESPONSES	
Sobriety or entry into rehabilitation services	0.00%	0
Medication compliance	0.00%	0
No pets	50.00%	1
Participation in religious services	50.00%	1
Total Respondents: 2		

### Q19 Do you have limits on the length of stay in your housing?

Answered: 2 Skipped: 7



Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey

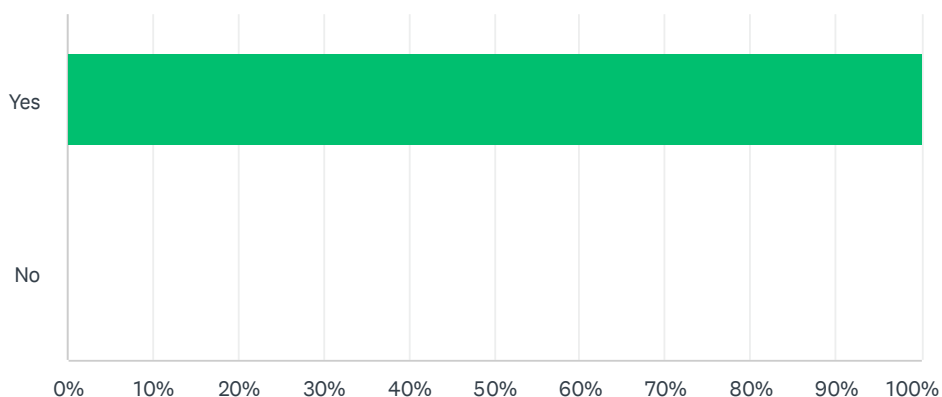
ANSWER CHOICES	RESPONSES
No	0.00% 0
Yes	100.00% 2
TOTAL	2

Q20 If you do have limits on the length of stay in your housing, what are they? (In days)

Answered: 2 Skipped: 7

Q21 Do you segregate by gender?

Answered: 2 Skipped: 7

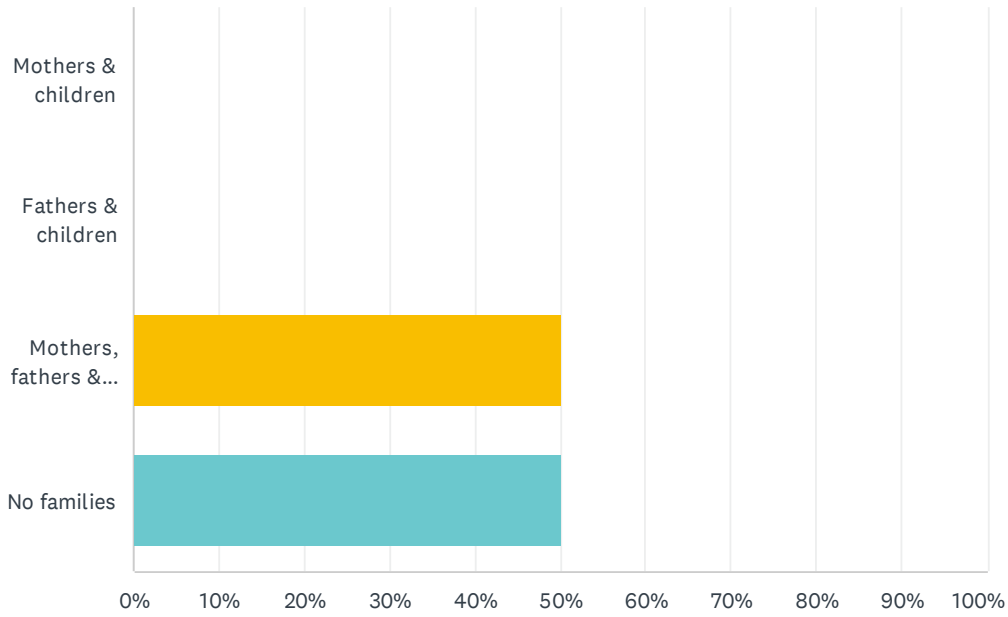


ANSWER CHOICES	RESPONSES
Yes	100.00% 2
No	0.00% 0
TOTAL	2

Q22 Do you serve families?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey

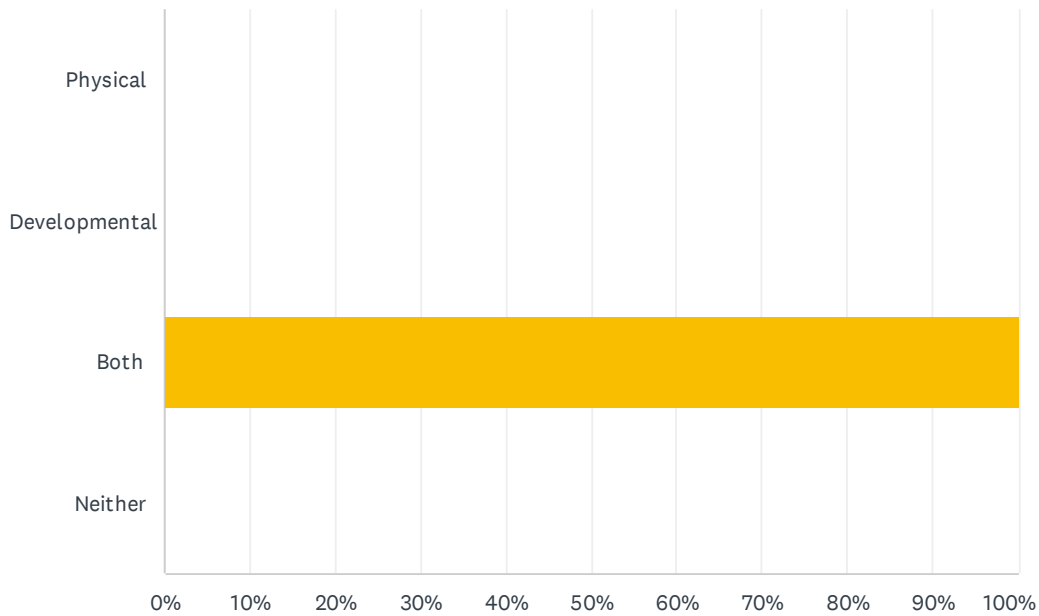


ANSWER CHOICES	RESPONSES	
Mothers & children	0.00%	0
Fathers & children	0.00%	0
Mothers, fathers & children	50.00%	1
No families	50.00%	1
<b>TOTAL</b>		<b>2</b>

Q23 Do you serve people with disabilities?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



ANSWER CHOICES	RESPONSES
Physical	0.00% 0
Developmental	0.00% 0
Both	100.00% 2
Neither	0.00% 0
<b>TOTAL</b>	<b>2</b>

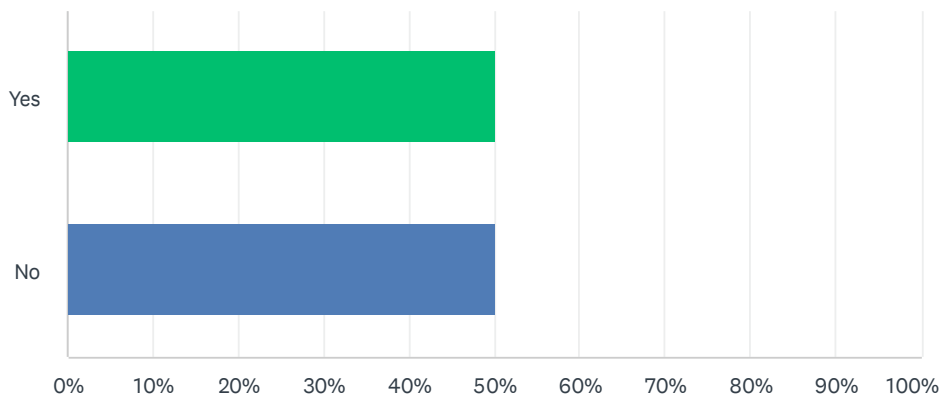
Q24 What is your current bed capacity?

Answered: 2 Skipped: 7

Q25 Are you currently unable to serve everyone seeking assistance?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



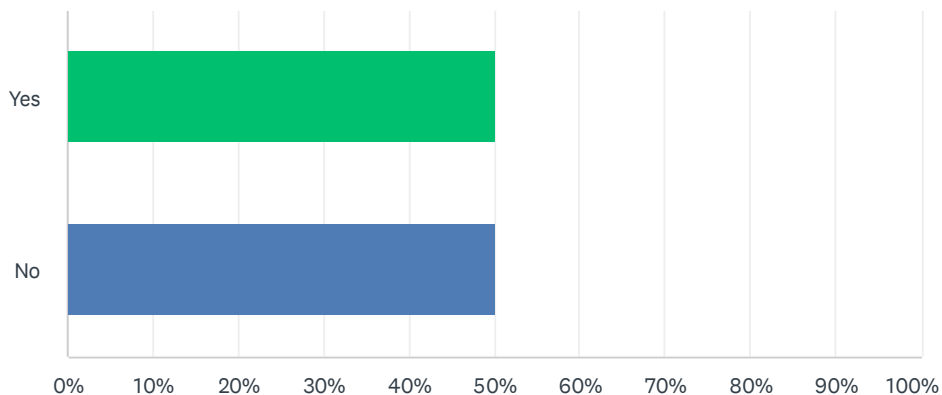
ANSWER CHOICES	RESPONSES
Yes	50.00% 1
No	50.00% 1
TOTAL	2

Q26 If you are currently unable to serve everyone, how many people are you turning away a day?

Answered: 1 Skipped: 8

Q27 If you are currently unable to serve everyone, do you have a waitlist?

Answered: 2 Skipped: 7



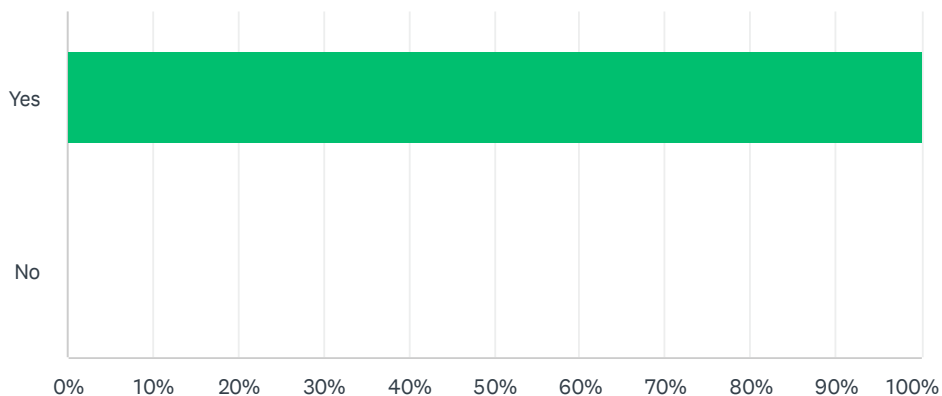
ANSWER CHOICES	RESPONSES
Yes	50.00% 1
No	50.00% 1
TOTAL	2

### Q28 If you have a waitlist, how many people are currently on the waitlist?

Answered: 1 Skipped: 8

### Q29 Do you have plans to expand bed capacity?

Answered: 2 Skipped: 7



ANSWER CHOICES	RESPONSES	
Yes	100.00%	2
No	0.00%	0
TOTAL		2

### Q30 If you plan to expand your bed capacity, please tell us the amount.

Answered: 2 Skipped: 7

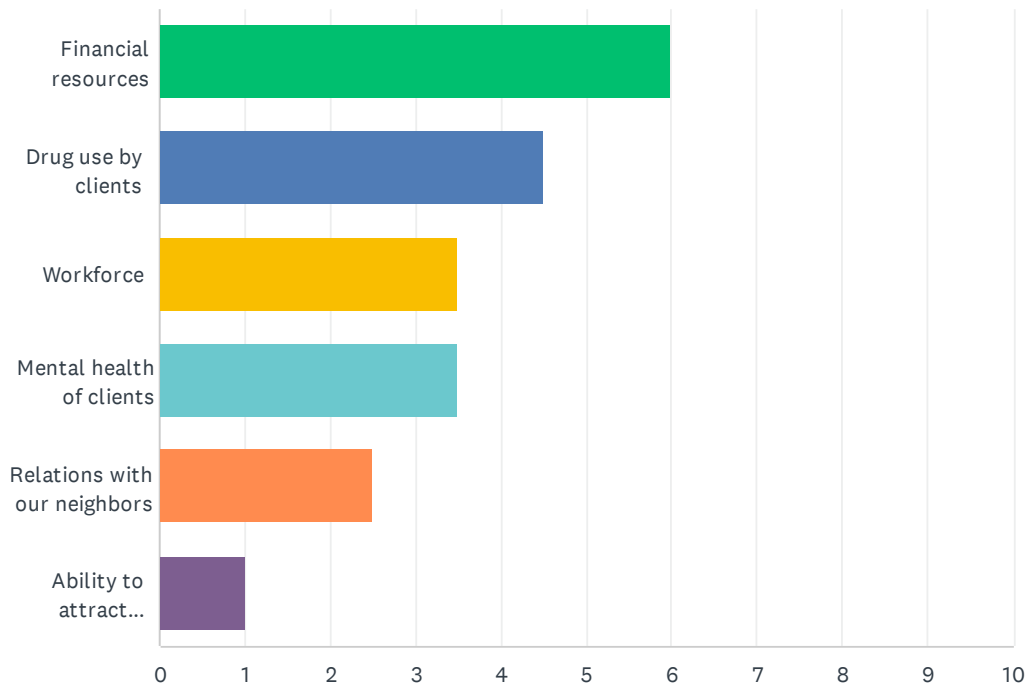
### Q31 If you plan to expand your bed capacity, when will the additions be open? (month, year)

Answered: 2 Skipped: 7

### Q32 Please rank the largest obstacles to your success.

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



	1	2	3	4	5	6	TOTAL	SCORE
Financial resources	100.00% 2	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	2	6.00
Drug use by clients	0.00% 0	50.00% 1	50.00% 1	0.00% 0	0.00% 0	0.00% 0	2	4.50
Workforce	0.00% 0	50.00% 1	0.00% 0	0.00% 0	50.00% 1	0.00% 0	2	3.50
Mental health of clients	0.00% 0	0.00% 0	50.00% 1	50.00% 1	0.00% 0	0.00% 0	2	3.50
Relations with our neighbors	0.00% 0	0.00% 0	0.00% 0	50.00% 1	50.00% 1	0.00% 0	2	2.50
Ability to attract homeless	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	100.00% 2	2	1.00

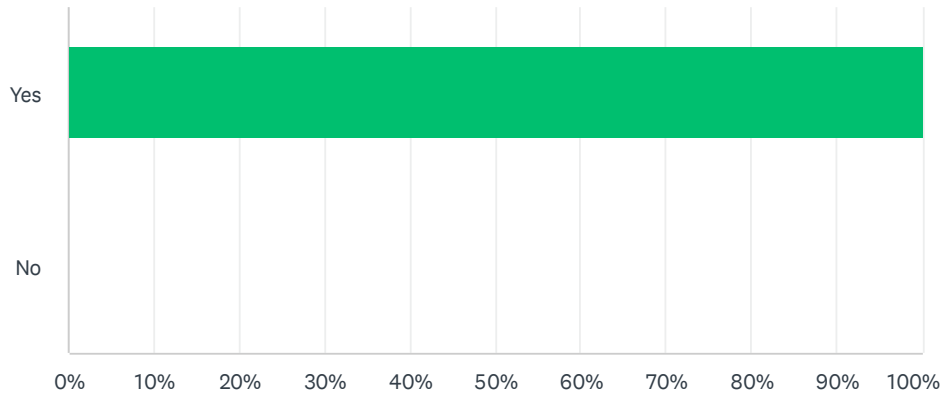
Q33 If there is an obstacle to your success not listed above, please describe it here.

Answered: 1 Skipped: 8

Q34 Do you have limits on the length of stay in your housing?

Answered: 1 Skipped: 8

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



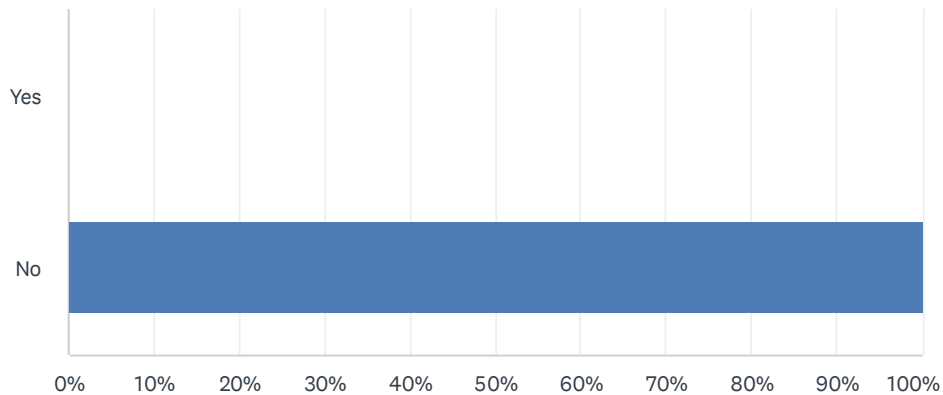
ANSWER CHOICES	RESPONSES	
Yes	100.00%	1
No	0.00%	0
TOTAL		1

Q35 If you do have limits on the length of stay in your housing, what are they? (In days)

Answered: 1 Skipped: 8

Q36 Do you segregate by gender?

Answered: 1 Skipped: 8

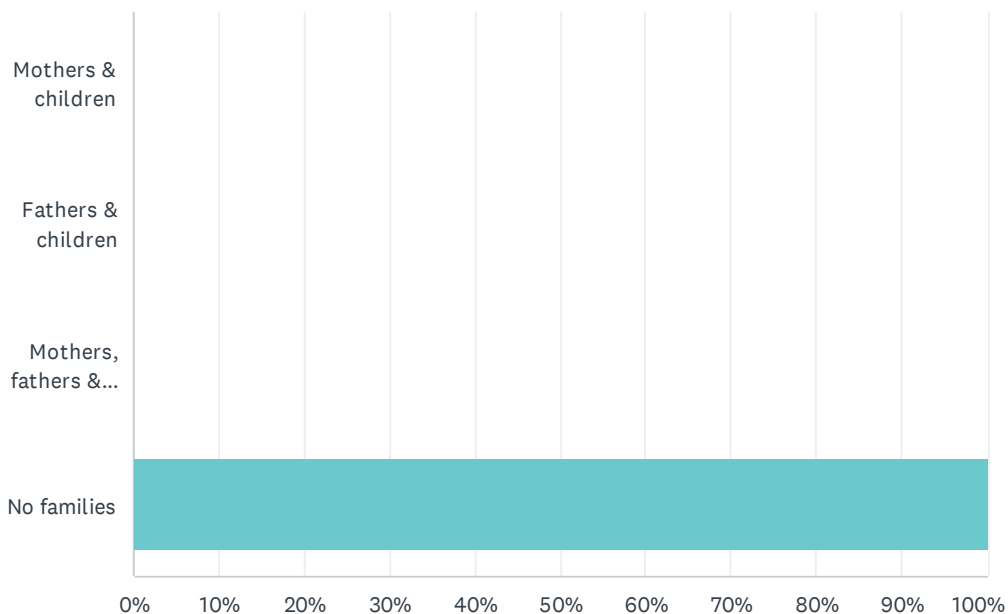


ANSWER CHOICES	RESPONSES	
Yes	0.00%	0
No	100.00%	1
TOTAL		1



### Q37 Do you serve families?

Answered: 1 Skipped: 8

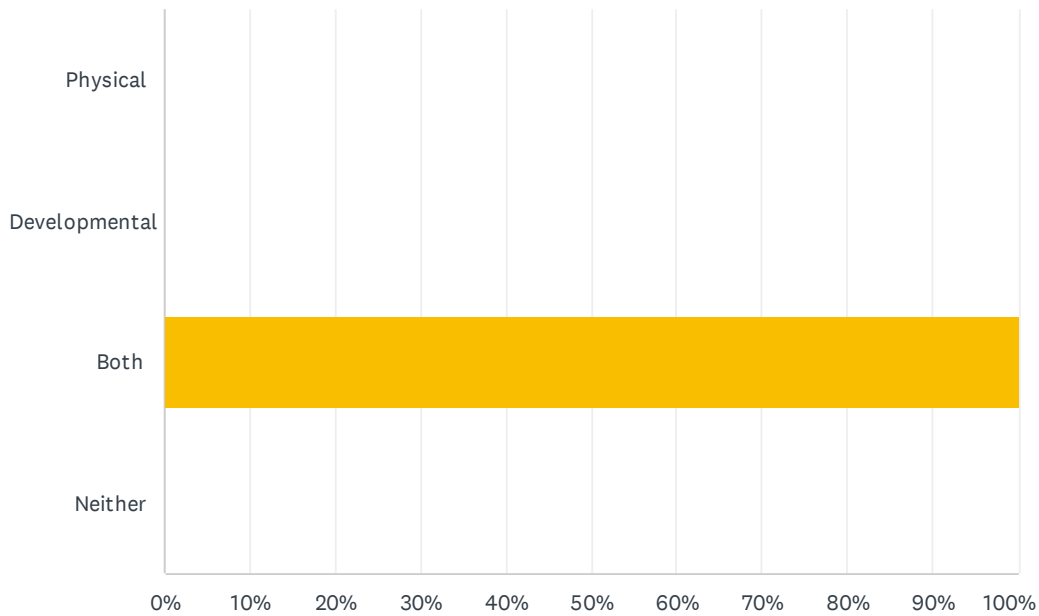


ANSWER CHOICES	RESPONSES
Mothers & children	0.00% 0
Fathers & children	0.00% 0
Mothers, fathers & children	0.00% 0
No families	100.00% 1
<b>TOTAL</b>	<b>1</b>

### Q38 Do you serve people with disabilities?

Answered: 1 Skipped: 8

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



ANSWER CHOICES	RESPONSES
Physical	0.00% 0
Developmental	0.00% 0
Both	100.00% 1
Neither	0.00% 0
<b>TOTAL</b>	<b>1</b>

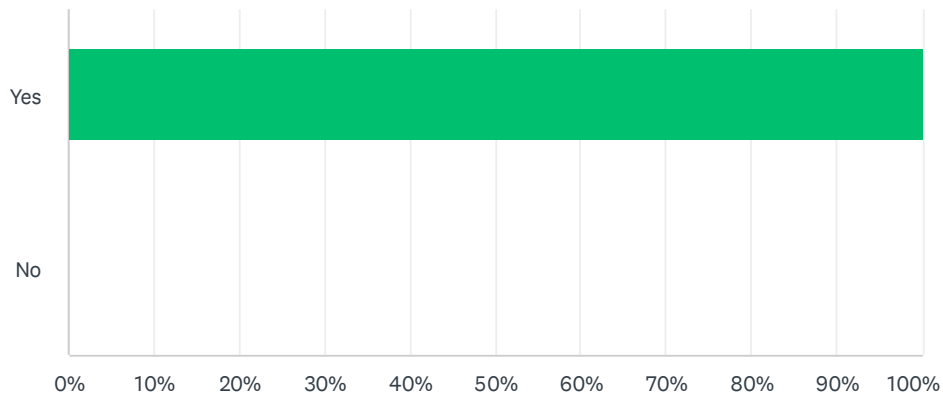
Q39 What is your current unit capacity?

Answered: 1 Skipped: 8

Q40 Are you unable to serve everyone seeking assistance?

Answered: 1 Skipped: 8

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



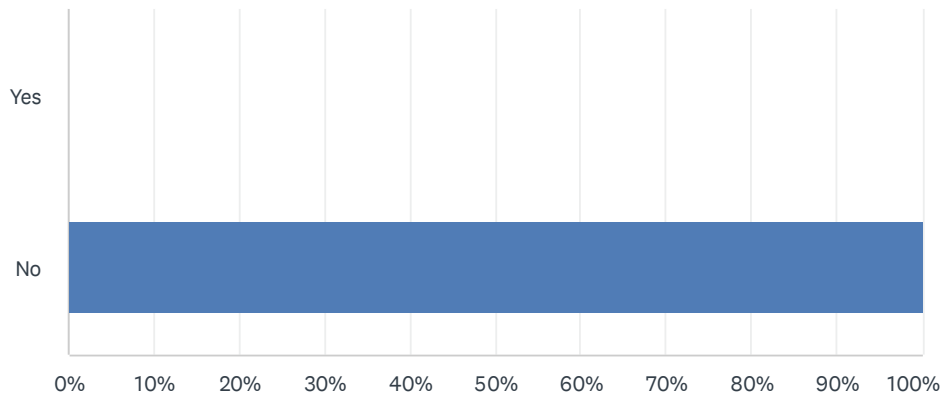
ANSWER CHOICES	RESPONSES
Yes	100.00% 1
No	0.00% 0
TOTAL	1

Q41 If you are unable to serve everyone, how many people are you turning away a day?

Answered: 1 Skipped: 8

Q42 If you are unable to serve everyone, do you have a waitlist?

Answered: 1 Skipped: 8



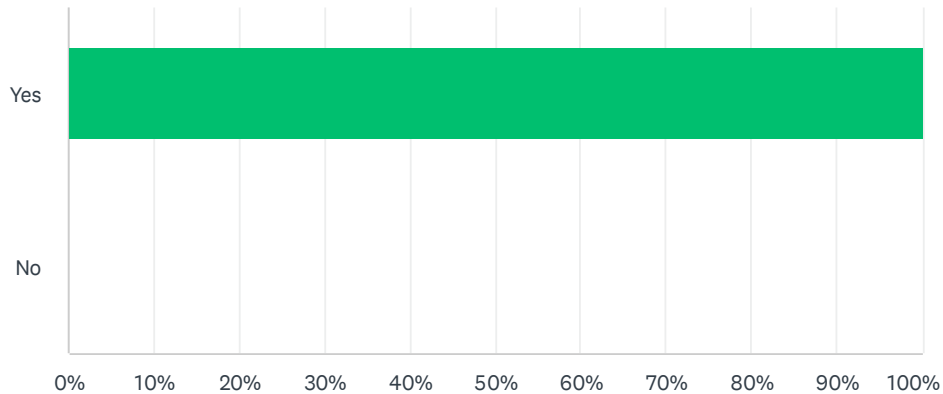
ANSWER CHOICES	RESPONSES
Yes	0.00% 0
No	100.00% 1
TOTAL	1

### Q43 If you have a waitlist, how many people are currently on the waitlist?

Answered: 0 Skipped: 9

### Q44 Do you have plans to expand unit capacity?

Answered: 1 Skipped: 8



ANSWER CHOICES	RESPONSES	
Yes	100.00%	1
No	0.00%	0
TOTAL		1

### Q45 If you plan to expand your unit capacity, please tell us the amount.

Answered: 1 Skipped: 8

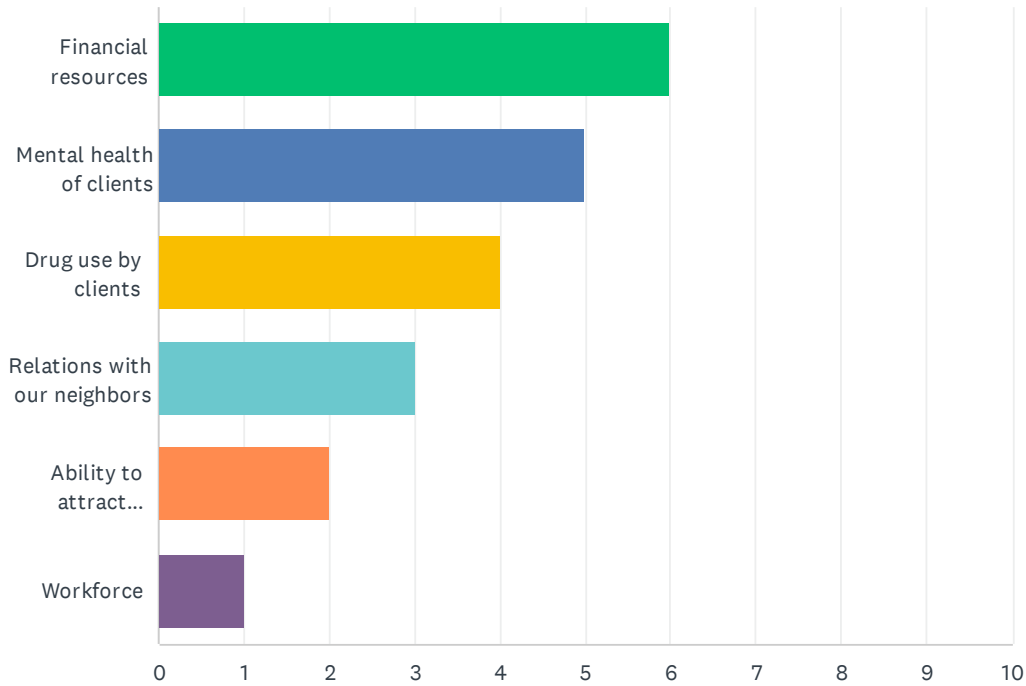
### Q46 If you plan to expand your unit capacity, when will the additions be open? (month, year)

Answered: 0 Skipped: 9

### Q47 Please rank the largest obstacles to your success.

Answered: 1 Skipped: 8

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



	1	2	3	4	5	6	TOTAL	SCORE
Financial resources	100.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	1	6.00
Mental health of clients	0.00% 0	100.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	1	5.00
Drug use by clients	0.00% 0	0.00% 0	100.00% 1	0.00% 0	0.00% 0	0.00% 0	1	4.00
Relations with our neighbors	0.00% 0	0.00% 0	0.00% 0	100.00% 1	0.00% 0	0.00% 0	1	3.00
Ability to attract homeless	0.00% 0	0.00% 0	0.00% 0	0.00% 0	100.00% 1	0.00% 0	1	2.00
Workforce	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	100.00% 1	1	1.00

**Q48 If there is an obstacle to your success not listed above, please describe it here.**

Answered: 0 Skipped: 9

**Q49 Do you have limits on the length of stay in your housing?**

Answered: 0 Skipped: 9

⚠ No matching responses.

ANSWER CHOICES	RESPONSES
Yes	0.00% 0
No	0.00% 0
TOTAL	0

### Q50 If you do have limits on the length of stay in your housing, what are they? (In days)

Answered: 0 Skipped: 9

### Q51 Do you segregate by gender?

Answered: 0 Skipped: 9

⚠ No matching responses.

ANSWER CHOICES	RESPONSES
Yes	0.00% 0
No	0.00% 0
TOTAL	0

### Q52 Do you serve families?

Answered: 0 Skipped: 9

⚠ No matching responses.

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey

ANSWER CHOICES	RESPONSES
Mothers & children	0.00% 0
Fathers & children	0.00% 0
Mothers, fathers & children	0.00% 0
No families	0.00% 0
TOTAL	0

### Q53 Do you serve people with disabilities?

Answered: 0 Skipped: 9

⚠ No matching responses.

ANSWER CHOICES	RESPONSES
Physical	0.00% 0
Developmental	0.00% 0
Both	0.00% 0
Neither	0.00% 0
TOTAL	0

### Q54 What is your current unit capacity?

Answered: 0 Skipped: 9

### Q55 Are you unable to serve everyone seeking assistance?

Answered: 0 Skipped: 9

⚠ No matching responses.

ANSWER CHOICES	RESPONSES
Yes	0.00% 0
No	0.00% 0
TOTAL	0

Q56 If you are unable to serve everyone, how many people are you turning away a day?

Answered: 0 Skipped: 9

Q57 If you are unable to serve everyone, do you have a waitlist?

Answered: 0 Skipped: 9

 No matching responses.

ANSWER CHOICES	RESPONSES
Yes	0.00% 0
No	0.00% 0
TOTAL	0

Q58 If you have a waitlist, how many people are currently on the waitlist?

Answered: 0 Skipped: 9

Q59 Do you have plans to expand unit capacity?

Answered: 0 Skipped: 9

 No matching responses.

ANSWER CHOICES	RESPONSES
Yes	0.00% 0
No	0.00% 0
TOTAL	0

Q60 If you plan to expand your unit capacity, please tell us the amount.

Answered: 0 Skipped: 9



### Q61 If you plan to expand your unit capacity, when will the additions be open? (month, year)

Answered: 0 Skipped: 9

### Q62 Please rank the largest obstacles to your success.

Answered: 0 Skipped: 9

 No matching responses.

	1	2	3	4	5	6	TOTAL	SCORE
Financial resources	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00
Workforce	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00
Drug use by clients	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00
Mental health of clients	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00
Relations with our neighbors	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00
Ability to attract homeless	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0	0.00

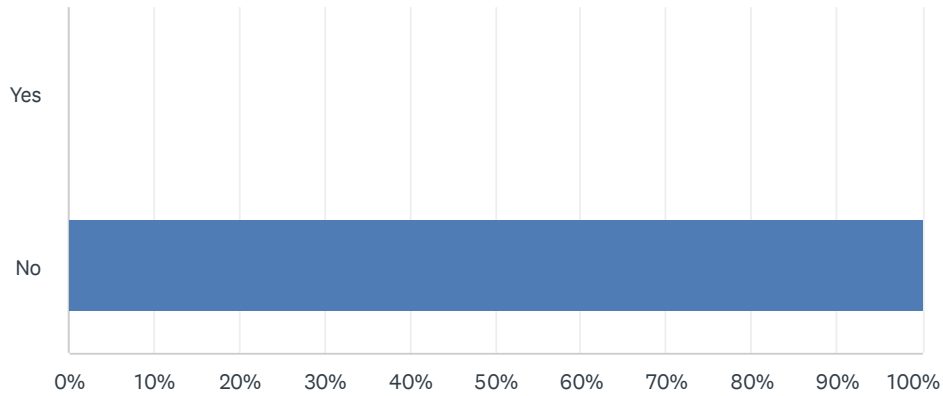
### Q63 If there is an obstacle to your success not listed above, please describe it here.

Answered: 0 Skipped: 9

### Q64 Do you have limits on the length of stay in your housing?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



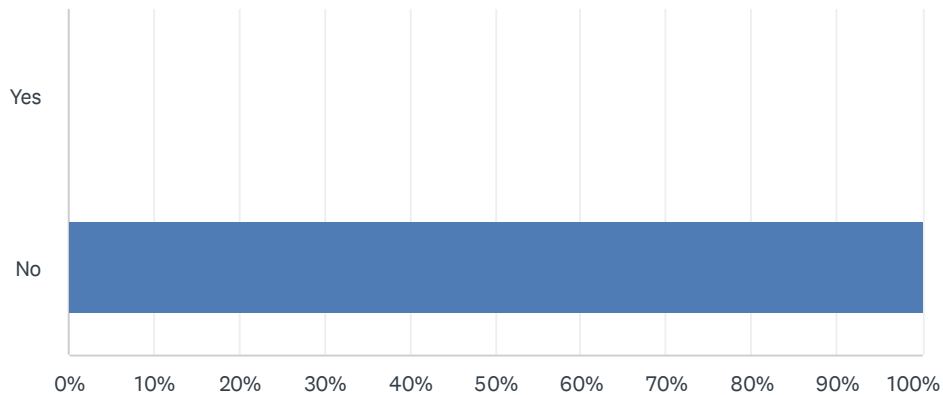
ANSWER CHOICES	RESPONSES
Yes	0.00% 0
No	100.00% 2
<b>TOTAL</b>	<b>2</b>

Q65 If you do have limits on the length of stay in your housing, what are they? (In days)

Answered: 0 Skipped: 9

Q66 Do you segregate by gender?

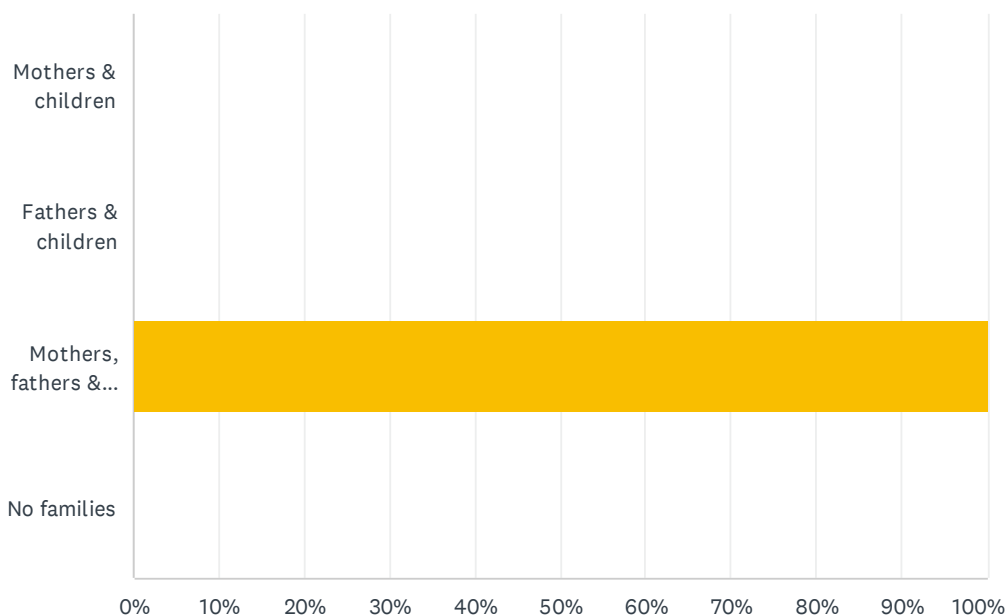
Answered: 2 Skipped: 7



ANSWER CHOICES	RESPONSES
Yes	0.00% 0
No	100.00% 2
<b>TOTAL</b>	<b>2</b>

## Q67 Do you serve families?

Answered: 2 Skipped: 7

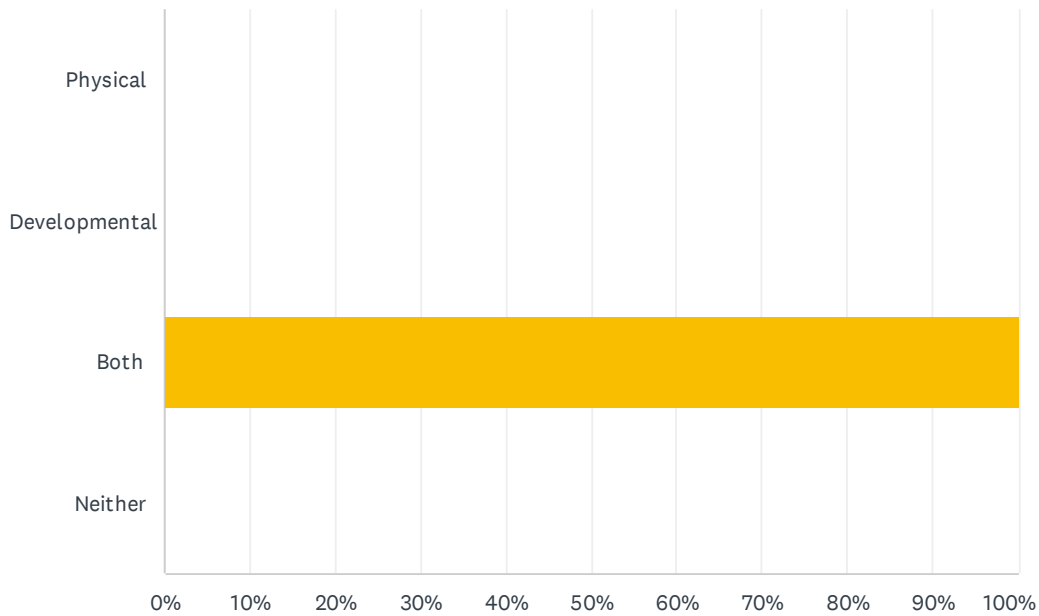


ANSWER CHOICES	RESPONSES
Mothers & children	0.00% 0
Fathers & children	0.00% 0
Mothers, fathers & children	100.00% 2
No families	0.00% 0
<b>TOTAL</b>	<b>2</b>

## Q68 Do you serve people with disabilities?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



ANSWER CHOICES	RESPONSES
Physical	0.00% 0
Developmental	0.00% 0
Both	100.00% 2
Neither	0.00% 0
<b>TOTAL</b>	<b>2</b>

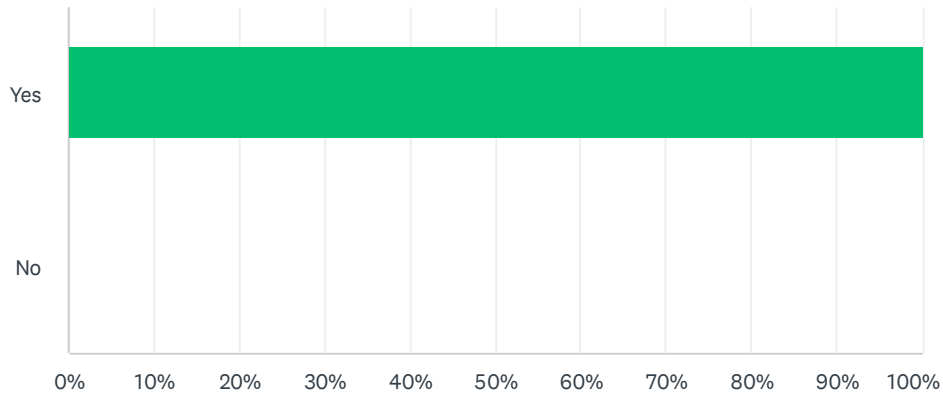
Q69 What is your current unit capacity?

Answered: 2 Skipped: 7

Q70 Are you unable to serve everyone seeking assistance?

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



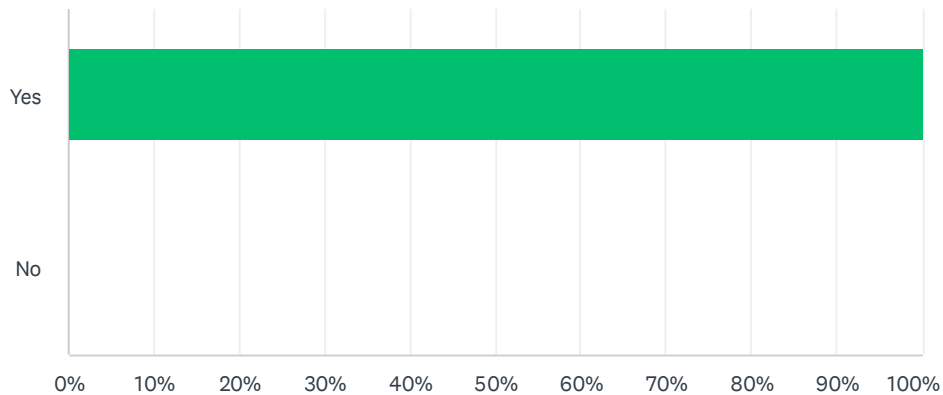
ANSWER CHOICES	RESPONSES
Yes	100.00% 2
No	0.00% 0
TOTAL	2

Q71 If you are unable to serve everyone, how many people are you turning away a day?

Answered: 2 Skipped: 7

Q72 If you are unable to serve everyone, do you have a waitlist?

Answered: 2 Skipped: 7



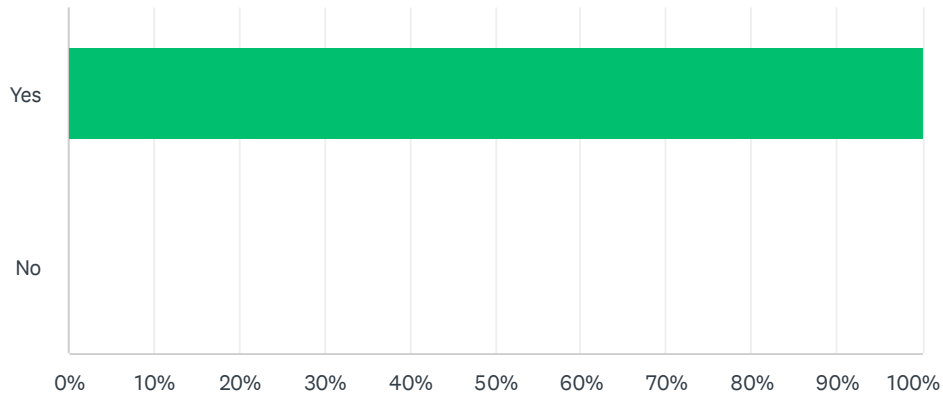
ANSWER CHOICES	RESPONSES
Yes	100.00% 2
No	0.00% 0
TOTAL	2

### Q73 If you have a waitlist, how many people are currently on the waitlist?

Answered: 2 Skipped: 7

### Q74 Do you have plans to expand unit capacity?

Answered: 2 Skipped: 7



ANSWER CHOICES	RESPONSES
Yes	100.00% 2
No	0.00% 0
TOTAL	2

### Q75 If you plan to expand your unit capacity, please tell us the amount?

Answered: 2 Skipped: 7

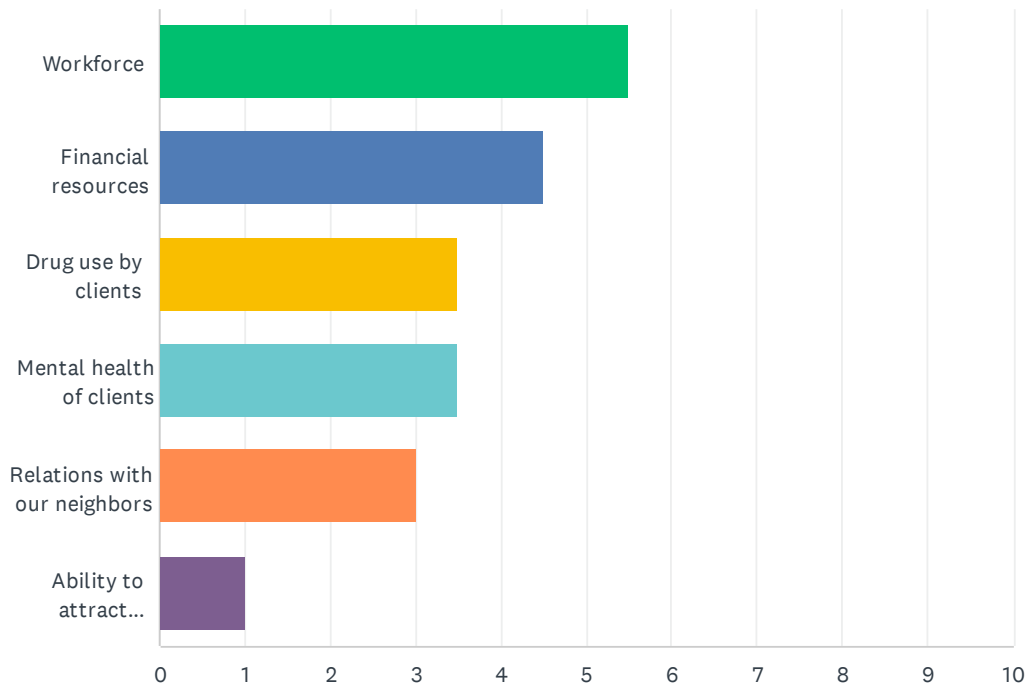
### Q76 If you plan to expand your unit capacity, when will the additions be open? (month, year)

Answered: 2 Skipped: 7

### Q77 Please rank the largest obstacles to your success.

Answered: 2 Skipped: 7

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



	1	2	3	4	5	6	TOTAL	SCORE
Workforce	50.00% 1	50.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	2	5.50
Financial resources	50.00% 1	0.00% 0	0.00% 0	50.00% 1	0.00% 0	0.00% 0	2	4.50
Drug use by clients	0.00% 0	0.00% 0	50.00% 1	50.00% 1	0.00% 0	0.00% 0	2	3.50
Mental health of clients	0.00% 0	50.00% 1	0.00% 0	0.00% 0	50.00% 1	0.00% 0	2	3.50
Relations with our neighbors	0.00% 0	0.00% 0	50.00% 1	0.00% 0	50.00% 1	0.00% 0	2	3.00
Ability to attract homeless	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	100.00% 2	2	1.00

**Q78** If there is an obstacle to your success not listed above, please describe it here.

Answered: 1 Skipped: 8

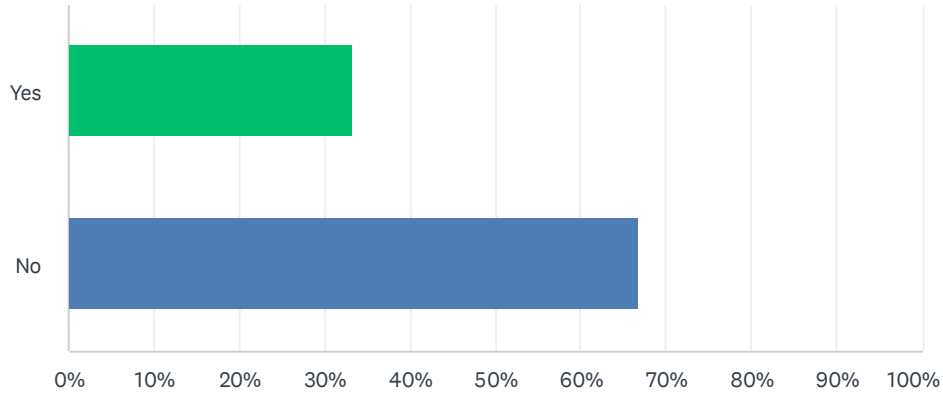
**Q79** What other type of housing do you provide? Please describe.

Answered: 3 Skipped: 6

**Q80** Do you have limits on the length of stay in your housing?

# Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey

Answered: 3 Skipped: 6



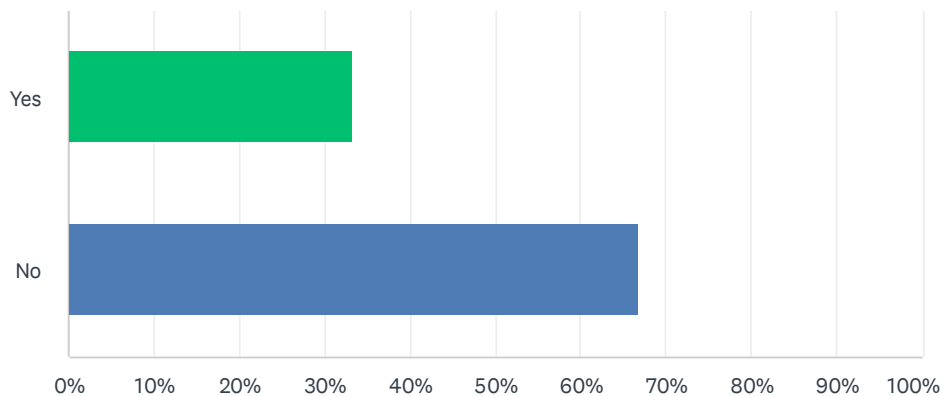
ANSWER CHOICES	RESPONSES	
Yes	33.33%	1
No	66.67%	2
<b>TOTAL</b>		<b>3</b>

## Q81 If you do have limits on the length of stay in your housing, what are they? (In days)

Answered: 1 Skipped: 8

## Q82 Do you segregate by gender?

Answered: 3 Skipped: 6



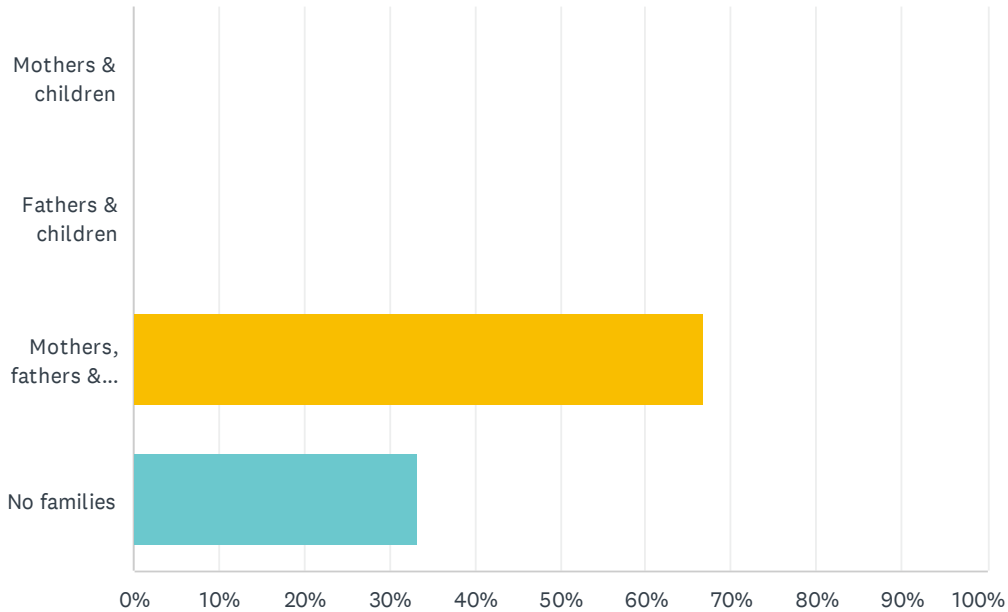


Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey

ANSWER CHOICES	RESPONSES
Yes	33.33% 1
No	66.67% 2
<b>TOTAL</b>	<b>3</b>

### Q83 Do you serve families?

Answered: 3 Skipped: 6

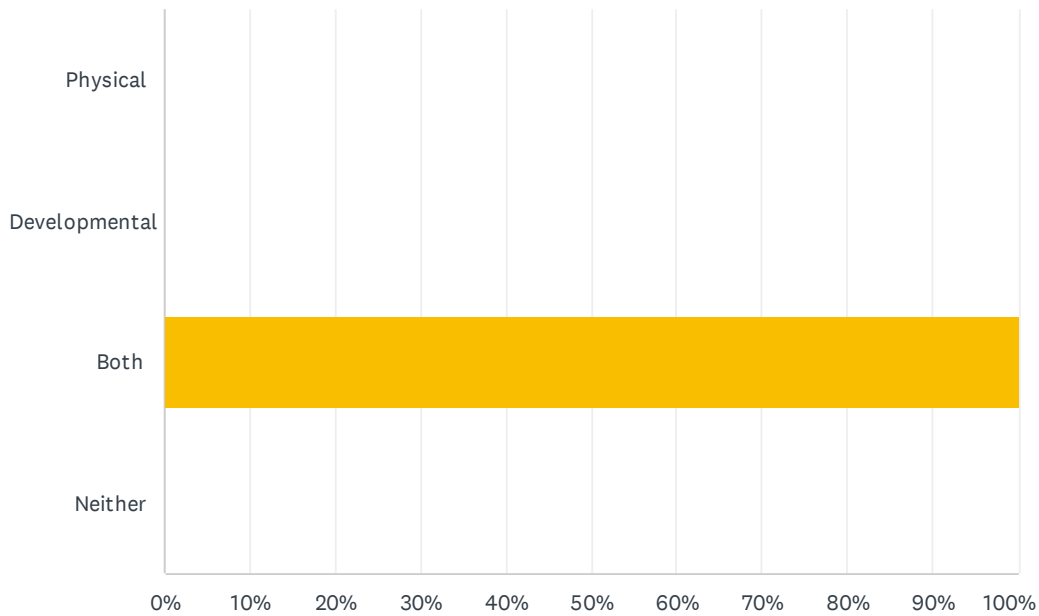


ANSWER CHOICES	RESPONSES
Mothers & children	0.00% 0
Fathers & children	0.00% 0
Mothers, fathers & children	66.67% 2
No families	33.33% 1
<b>TOTAL</b>	<b>3</b>

### Q84 Do you serve people with disabilities?

Answered: 3 Skipped: 6

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ANSWER CHOICES	RESPONSES
Physical	0.00% 0
Developmental	0.00% 0
Both	100.00% 3
Neither	0.00% 0
<b>TOTAL</b>	<b>3</b>

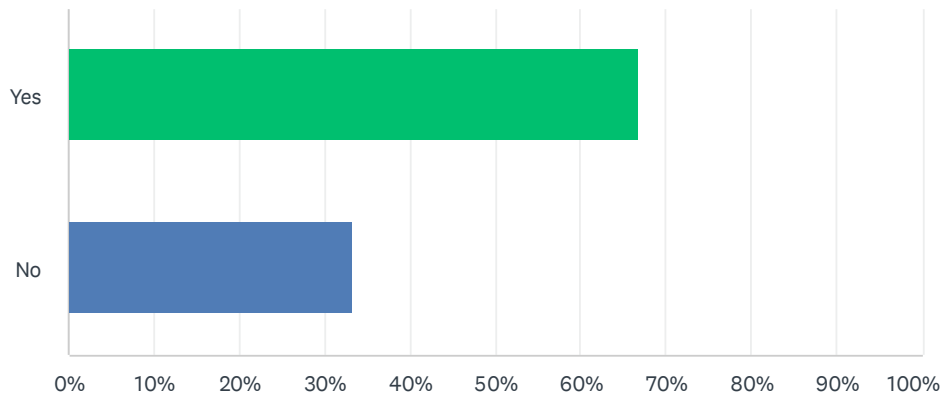
Q85 What is your current bed/unit capacity? (Please specify beds or units)

Answered: 3 Skipped: 6

Q86 Are you unable to serve everyone seeking assistance?

Answered: 3 Skipped: 6

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



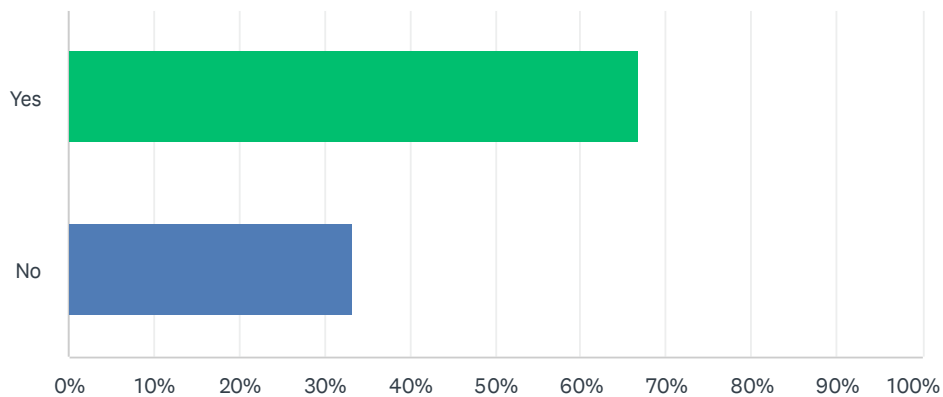
ANSWER CHOICES	RESPONSES
Yes	66.67% 2
No	33.33% 1
TOTAL	3

Q87 If you are unable to serve everyone, how many people are you turning away a day?

Answered: 2 Skipped: 7

Q88 If you are unable to serve everyone, do you have a waitlist?

Answered: 3 Skipped: 6



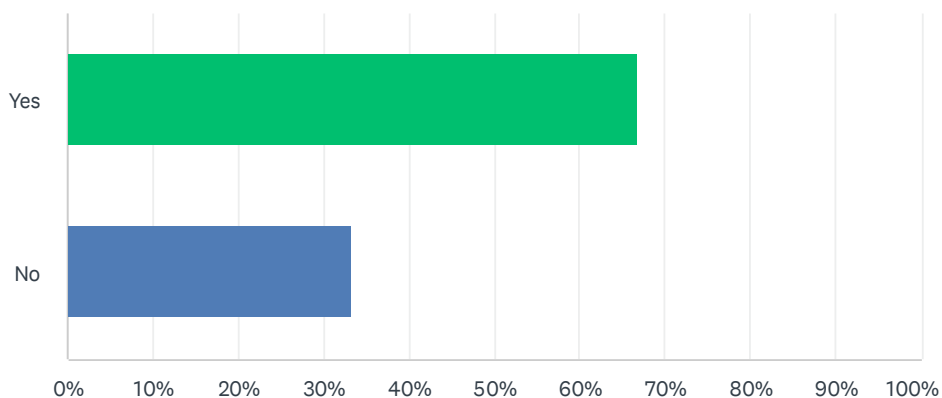
ANSWER CHOICES	RESPONSES
Yes	66.67% 2
No	33.33% 1
TOTAL	3

### Q89 If you have a waitlist, how many people are currently on the waitlist?

Answered: 2 Skipped: 7

### Q90 Do you have plans to expand bed/unit capacity?

Answered: 3 Skipped: 6



ANSWER CHOICES	RESPONSES	
Yes	66.67%	2
No	33.33%	1
TOTAL		3

### Q91 If you plan to expand your bed/unit capacity, please tell us the amount. (Please specify beds or units).

Answered: 2 Skipped: 7

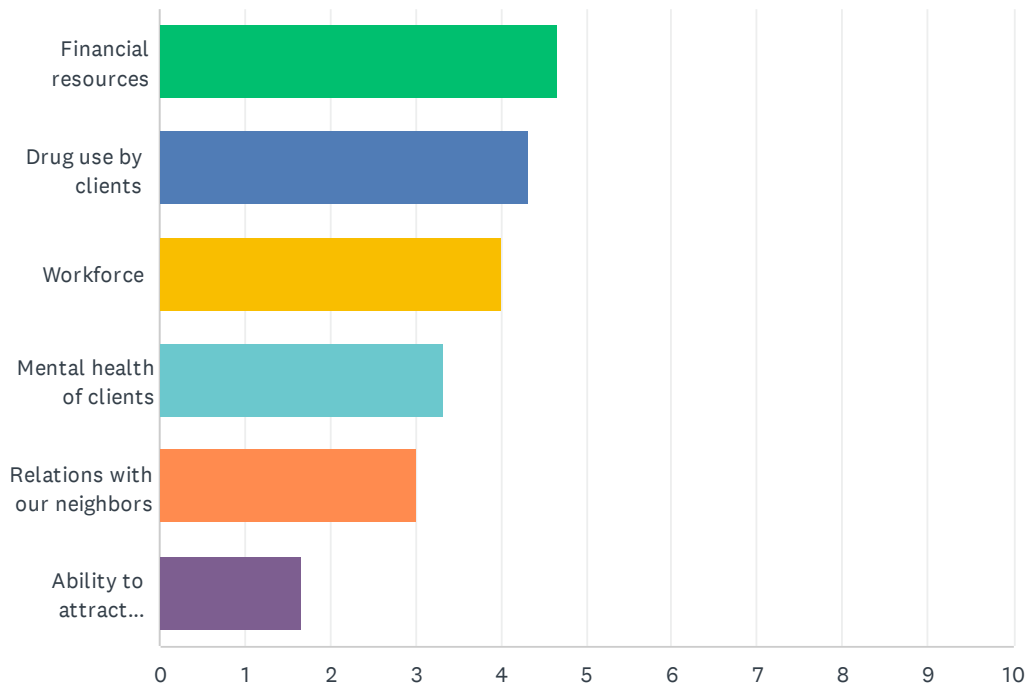
### Q92 If you plan to expand your bed/unit capacity, when will the additions be open? (month, year) (Please specify beds or units)

Answered: 2 Skipped: 7

### Q93 Please rank the largest obstacles to your success.

Answered: 3 Skipped: 6

Benton-Franklin Counties Community Health Improvement Plan Housing Providers for the Homeless Survey



	1	2	3	4	5	6	TOTAL	SCORE
Financial resources	66.67% 2	0.00% 0	0.00% 0	0.00% 0	33.33% 1	0.00% 0	3	4.67
Drug use by clients	0.00% 0	66.67% 2	0.00% 0	33.33% 1	0.00% 0	0.00% 0	3	4.33
Workforce	33.33% 1	33.33% 1	0.00% 0	0.00% 0	0.00% 0	33.33% 1	3	4.00
Mental health of clients	0.00% 0	0.00% 0	66.67% 2	0.00% 0	33.33% 1	0.00% 0	3	3.33
Relations with our neighbors	0.00% 0	0.00% 0	33.33% 1	33.33% 1	33.33% 1	0.00% 0	3	3.00
Ability to attract homeless	0.00% 0	0.00% 0	0.00% 0	33.33% 1	0.00% 0	66.67% 2	3	1.67

**Q94 If there is an obstacle to your success not listed above, please describe it here.**

Answered: 0 Skipped: 9