Region 9 Strategic Plan:

Toward Safe, Stable, Affordable Housing & Community Connections for All

Contents

Introduction

Homelessness has been an enduring social problem in the United States, with both surges and declines throughout our history.[1] Nationwide, roughly 653,100 people - about half the population of Hawaii - experience homelessness each night.[2] The causes of homelessness are an interaction of both structural and individual factors, including (but not limited to) poverty, mental health issues, substance use disorder, domestic violence, previous engagement in the criminal justice system, foster care system involvement, racism and lack of affordable housing.[3, 4, 5] The most recent U.S. Department of Housing and Urban Development (HUD) report on homelessness (2023) found unusually high rates of homelessness, breaking all previous records since reporting efforts started in 2007. In the past year (2022-2023), there has been a 12% increase in the count of those experiencing homelessness in the United States, or about 70,650 additional individuals, with an increase of 16% in families that have children and 11% for individuals.[6]

COVID-19 created a heightened awareness of the role of housing and community connections as it relates to health outcomes, especially for those experiencing homelessness. Due to the pandemic, many individuals lost employment, putting their housing at risk.[7] For those who experienced homelessness during the COVID-19 pandemic, vital services were closed or limited and staff turnover rapidly increased.[8] Living in crowded or shared living conditions during the pandemic, such as converted gymnasiums for emergency homeless shelters, increased the risk of infection, with those in such settings experiencing three times higher odds of contracting COVID-19.[9, 10, 11] Beyond COVID-19, homelessness often means exposure to the elements, poor nutrition, and issues accessing medical care, which increase the potential for early mortality.[12] In the United States, those who experience homelessness die nearly 30 years earlier than their peers who are not homeless.[13] There is a critical need for integration of housing and social services, including healthcare, to improve the quality of life for those experiencing homelessness.[14]

The U.S. Department of Housing and Urban Development (HUD) first emphasized the need for coordinated responses to homelessness in 1994, using the term "Continuum of Care" (CoC) to describe the array of services and partnerships necessary to tackle the multifaceted issue of homelessness. The goal of CoCs is to bring together stakeholders from various organizations that support efforts to promote stable housing and community connections under one umbrella to break down silos and act strategically together.[15] Indiana's Balance of State Continuum of Care encompasses 91 of Indiana's 92 counties and is divided into regions. Each region is encouraged to establish a Regional Planning Council (RPC) to ensure that homelessness data is captured and to coordinate the full range of housing and social services across a specific geographical area.

Region 9 serves Hoosiers in Wayne, Fayette, Franklin, Rush, and Union counties. Region 9 contains an array of housing and homelessness services providers, social services providers, civic and community leaders, and individuals with lived experiences that are passionate about making housing available to all residents. They also have deep insight into the barriers and opportunities. Drawing on quantitative benchmarks and stakeholders' assessments of the current strengths and needs across the region, this strategic plan offers the vision, goals, and strategies to help ensure that no one goes without a home in Region 9.
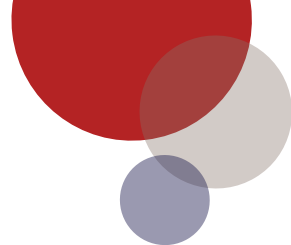
Key Terms

Homelessness: The U.S. Department of Housing and Urban Development (HUD) defines a person(s) or families as experiencing homelessness if they fall under at least one of the four categories. The first category includes those who are without "fixed, regular or adequate nighttime residence" (e.g., living in a shelter or a place that is not intended for humans to live). The second category includes those who will "imminently (within 14 days) lose their primary nighttime residence" (e.g., lack resources to obtain permanent housing, no new residence identified). The next category pertains to those determined to be experiencing homelessness under other federal statutes for homelessness (e.g., unaccompanied youth under 25, families with children and youth). The final category focuses on person(s) fleeing or attempting to flee domestic violence and are without a home, who are then considered homeless by HUD (e.g., lack resources to obtain permanent housing, has no residence).[16]

Continuum of Care (CoC): The Continuum of Care (CoC) Program was created to encourage community-wide engagement in ending homelessness, provide funding for non-profit providers, states, tribal groups, and local governments to rehome those experiencing homelessness (e.g., families, individuals, those fleeing domestic violence, dating violence, sexual assault stalking, and youth) with the aim of both minimizing trauma, dislocation of those experiencing homelessness, promoting access to programs in an effective mainstreamed way and supporting the self-sufficiency of those experiencing homelessness. Continuum of care (CoC) program funds are afforded use in 5 areas: transitional housing, supportive services only, permanent housing, Homeless Management Information System (HMIS) and homelessness prevention.[17]

Under the Indiana Continuum of Care (CoC), funds are distributed to projects for renewal or creation across the state of Indiana to support those with the potential of experiencing homelessness or are currently experiencing homelessness. The rubric used to allocate funds from the state requires in some instances attendance at meetings such as HMIS and CoC training, office hours, Internal Renewal Project Application (IRPA) training and engaging with coordinated entry such as case conferencing. Therefore, attendance at meetings and training is a core measurement taken into account by the state of Indiana when distributing funds to projects.[18] [19]

Point-in-Time (PIT) is defined by HUD as *"a count of sheltered and unsheltered people experiencing homelessness on a single night in January. HUD requires that CoC's conduct an annual count of people experiencing homelessness who are sheltered in emergency shelter, transitional housing and Safe Haven on a single night… Each count is planned, coordinated, and carried out locally."*[20]

The **Homeless Management Information System (HMIS)** is defined by HUD as a *"local information technology system used to collect client-level data and data on the provision of housing and services to individuals and families at risk of and experiencing homelessness."* The specific HMIS is selected by each CoC, which meets the HUD requirements for data collection, management, and reporting.[21]

Coordinated Entry is conducted to reorient CoC efforts to be less program-oriented and more person-focused systems. They are defined as a "centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. *"[Such a] system covers the [CoC's] geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool."* There are core elements to Coordinated Entry, including the following: access points to a person(s) experiencing homelessness (e.g., calling a hotline like 211, walking into a social service provider office), assessment of the need (e.g., initial triage, diversion, intake, initial assessment/eligibility and comprehensive assessment), prioritization (e.g., documentation of vulnerability and needs to support allocation of future resources) and referral (e.g., referral of person in need to resources and services).[22]

Property Managers will be used across this document to broadly describe individuals and companies such as (but not limited to) landlords, property management companies and property investors.

About the Region 9 Regional Planning Council

Continuum of Care (CoC) Programs across the country assist individuals who are experiencing housing instability, making strategic use of limited resources to address homelessness and improving community coordination of services and supports. In Indiana, the Balance of State CoC, which encompasses 91 of Indiana's 92 counties, is subdivided into regions. Each region is empowered to establish a Regional Planning Council (RPC) that can respond to local strengths and conditions and create its own tailored approach to addressing housing needs.

Region 9, which is the focus of this report, serves Hoosiers in Wayne, Fayette, Franklin, Rush, and Union counties.

Leadership Team

The Region 9 RPC is currently led by:

- Jessica Burton, Co-Chair | Practice Manager, Meridian Health Services
- Donielle Harleman, Co-Chair | Residential Coordinator of Permanent Supportive Housing, Centerstone
- Donna Tegeler, Coordinated Entry Lead | Assistant Manager for Supportive Housing at Centerstone
- Elisa Worland, Secretary | Community Development/Health & Human Sciences Extension Educator, Purdue Extension

Strategic Planning Team

This strategic plan was developed with input from a wide array of community partners. Supported by a grant from the Indiana Department of Health, staff from the Indiana Community Action Poverty Institute coordinated the research and strategic planning efforts.

In addition to the leadership team, the following individuals served on the strategic planning steering committee:

- Tim Pierson, Founder and President, Bridges for Life
- Sarah Mitchell, Manager of Economic Development, Economic Development Corporation of Wayne County

About the Indiana Community Action Poverty Institute

The Indiana Community Action Poverty Institute conducts research and promotes public policies to help Hoosiers achieve and maintain financial well-being. The Institute is a program of the Indiana Community Action Association. Community Action Agencies have their origins in the War on Poverty, serve Hoosiers in all 92 counties, and provide over seventy unique programs and services. The Institute views housing as one of the foundations needed to achieve financial well-being and it advocates for policies to make foundations like housing available to all, to promote access to good jobs, to ensure that appropriate safety nets exist, and to remove financial drains.

Methodology

The strategic planning process included two primary activities – stakeholder interviews and secondary research – that informed the biweekly meetings of the strategic planning steering committee and the development of this plan.

Stakeholder Interviews

Between August and November of 2023, staff at the Indiana Community Action Poverty Institute created two interview protocols: one for key stakeholders and one for individuals who experienced housing instability. Institute staff recruited participants through recommendations from the steering committee as well as outreach through the Institute's database of community needs assessment participants. Staff interviewed (7) housing/homeless service providers, (8) social service providers, (7) civic/community leaders, and (11) individuals with direct experience of homelessness or housing instability. Institute staff also received (3) responses from stakeholders via Google Forms and solicited feedback through community meetings held both in-person and over Zoom.

As themes emerged, the Institute also requested interviews with experts from outside the region to learn about their approaches to housing challenges. For these, questions were developed by the steering committee and some interviews included steering committee members. In total, staff conducted (10) interviews with key stakeholders outside of Region 9.

Interviews were conducted by phone or Zoom and typically lasted 30 minutes or less, although a few lasted an hour or more. Recordings were transcribed using NVIVO transcription software and coded for key themes and recommendations. Themes and representative quotes are offered throughout the report. Data from the stakeholder interviews was also presented to steering committee members to inform goal setting.

Other Data Sources

This report also draws from other sources of data to better understand a) the housing needs in the region and b) how stakeholder views align with available research. These sources included:

- **Quantitative data** from sources like the U.S. Census Bureau, the U.S. Department of Housing and Urban Development, the Indiana Housing and Community Development Authority, and Eviction Lab
- **Research studies and gray literature** gathered from academic journals, published reports, and evaluations

Drafting Review

Stakeholders were actively engaged in reviewing drafts of this report to ensure information was timely and relevant to regional needs. Our team solicited input from two main avenues:

- **Presentations**
- **Direct Emailing**

Presentations were conducted with the leadership and strategic planning teams, the broader Region 9 planning council membership and the Franklin County Housing & Health Coalition (FCHHC). At the end of each presentation, feedback was collected through verbal comments, a survey and/or via email reach outs from stakeholders. Emails were sent to over 75 stakeholders and included all participants interviewed, social service providers, community and county leadership and law enforcement to provide feedback. Suggested revisions to the drafted report were brought back to the leadership and steering committee members for review before adjustments were implemented. Confirmed additions and modifications were incorporated into this final report and strategic planning document.

Benchmarks:
Homelessness & Housing in Region 9

Homelessness and housing instability can be extremely challenging to measure. Definitions of homelessness vary and the mobility of individuals who are unhoused or housing unstable can make them especially difficult to reach. Furthermore, some who are experiencing homelessness seek places that are hard for others to find them, which can make it challenging in turn to include them in measurements. For these reasons, establishing benchmarks with which to measure progress toward a shared vision of safe, stable, and affordable housing for all is challenging. Region 9 will monitor several measures of homelessness, contributing factors to homelessness, and housing availability and affordability to assess its progress.

Homelessness

The annual Point in Time Count can be described as a census of individuals who are experiencing homelessness in a specific region and is an effort to establish the currently known and accessible number of individuals who are experiencing homelessness. It is conducted on a single night of the year in January *if* individuals are available in a particular region to participate and as such, it only provides a snapshot of people who were able to be reached and assessed during this period.[23] As noted below, some counties in Region 9 were unable to complete Point in Time Counts in past years. Furthermore, the federal criteria for a person to be designated as experiencing homelessness does not include individuals who are "couch surfing," or those staying in non-homeless person designated beds.[24] Also, counts on youth and children (under 18) are particularly challenging due to fear caregivers have in relation to the Department of Child Services (DCS) removing their children due to being without housing. Therefore, it is important to note that the numbers below, in particular for children experiencing homelessness, may not be fully representative due to these factors. Region 9's PIT Count results indicate growth in homelessness, with a significant proportion of counted homeless individuals experiencing unsheltered homelessness.

Table 1. Region 9 Point in Time Count Results, 2020–2023

	2020 Total	2021 Total	2022 Total	2023 Total
Total persons	22 90% unsheltered	55 76% unsheltered	50 84% unsheltered	99 79% unsheltered
Number of households	20	55	50	98
Number of persons under age 18	1	0	0	0
Number of persons age 18-24	1	2	1	3
Number of persons over age 24	20	53	49	96
Total Persons by County				
Wayne	20	33	42	86
Fayette	1	22	8	13
Rush	1	X	X	X
Union	X	X	X	X
Franklin	X	X	X	X*

Source: Indiana Housing and Community Development Authority, 2020–2023

* We would like to acknowledge the efforts taken by individuals from the Franklin County Housing & Health Coalition (FCHHC) in Franklin County in 2023 to conduct a PIT count in 2023. Due to variations from official PIT requirements in data collection, the PIT numbers for Franklin County were not included as official numbers in the published dataset from the BOS, therefore leading to a data gap for reporting at the state level.
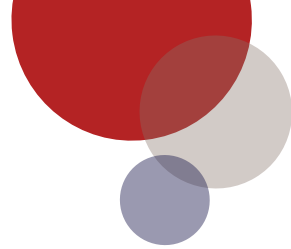
Differences in Homeless Definitions & Data Collection (HUD vs McKinney-Vento)

Accounting for the number of people experiencing homelessness within a particular region can be complicated and difficult on its own, but there are additional complexities in how homelessness is delineated, which can create differences in counts. An example of this is the variation in how The Housing and Urban Development Authority (HUD) defines homelessness in comparison to the McKinney-Vento policy.

The Housing and Urban Development Authority (HUD) has specific categories that individuals must meet to be deemed homeless, they include: [25]

- Literally Homeless (lack fixed, regular and adequate nighttime residence)
- Imminent Risk of Homelessness (Lose their primary nighttime residence within 14 days, no new residence identified and lack the resources/support to get other permanent housing)
- Considered to be experiencing Homelessness under Other Federal Statues (e.g., unaccompanied youth under 25, etc.)
- Fleeing/Attempting to Flee Domestic Violence (lacks resources or support for permanent housing)

While standards for the federal law surrounding the accounting of students experiencing homelessness (McKinney-Vento) has broader categories including: [26]

- Doubled-up (Students sharing housing due to loss of housing or economic hardship)
- Sheltered (Students living in emergency, domestic violence, or transitional shelter)
- Unsheltered (Students living in campgrounds, trailer parks, cars, parks, public spaces, temporary trailers, abandoned building, substandard housing, bus and train stations for lack of housing)
- Hotels/Motels (Students living in hotels and motels for lack of housing)
- Unaccompanied Youth (Students not in physical custody of parent or guardian)

As shown in the lists above, several categories are not accounted for within the HUD definition of a person experiencing homelessness in comparison to the McKinney-Vento definition. Furthermore, data collection differences are also present with HUD homeless numbers being gathered at a single point during the year called the Point in Time Count (PIT) of any person experiencing (what they define) homelessness. In comparison, the Mckinney-Vento count is a continuous accounting of known students experiencing homelessness (specific to only students). These differences contribute to the discrepancies seen between HUD and McKinney-Vento Data. Names and contact information for the known current (2024) Mckinney-Vento liaisons for several of the larger school corporations/districts in Region 9 can be found in Appendix 3.

Table 2. Region 9 Number of Students Experiencing Homelessness

	2020 Number of Students Experiencing Homelessness	2023 Number of Students Experiencing Homelessness
Wayne	115 Students	108 Students
Fayette	14 Students	23 Students
Rush	35 Students	30 Students
Union	No Data	4 Students
Franklin	14 Students	5 Students
Region 9 Total	**178 Students**	**170 Students**

Source: Indiana Youth Institute, 2020; Indiana Youth Institute Kids Count Data Book, 2024

The data above was collected through school liaisons (Mckinney-Vento Requirement) within Region 9 counties.[27, 28] Data collected for the years between 2020 to 2023 can be unreliable due to reporting differences (e.g., school closures) and difficulties from the COVID-19 pandemic in data collection and outreach. Therefore, for consistency, this report presents data for pre- and post-COVID-19 pandemic to ensure reporting is more aligned with typical expectations for these counties.

Predictors of Housing Instability & Homelessness

Because homelessness can be challenging to measure, particularly in rural areas, measuring predictors of housing instability and homelessness can also provide insight into challenges and progress.

Eviction Filings

Eviction is associated with a host of negative consequences for tenants and the community at large, including increased homelessness and residential mobility post-eviction, increased use of emergency shelters, reduced labor market participation, employment, and earnings,[29] worsened mental health, and increased childhood hunger.[30] While eviction filings do not tell us the exact number of tenants who were required to leave a property and/or experienced homelessness, researchers observe that eviction filings predict housing instability and homelessness.[31]

Table 3. Eviction Filings

	2022 Estimated Filings[1]	2022 Estimated Filing Rate[2]
Wayne	740 households	8.4%
Fayette	195 households	6.7%
Rush	73 households	3.8%
Union	26 households	3.3%
Franklin	28 households	2.0%

Source: Eviction Lab, 2022 Eviction Filing Data

Renter Cost Burden

High rental costs predict homelessness and impact the purchasing ability for individuals and families to afford necessities for daily life such as food, medical care and transportation costs.[32] Excessive rent burdens further entrench individuals and families into poverty.[33] The table below reflects the percentage of renters in each county paying 30% or more of household income toward rent, as collected by the U.S. Census Bureau.

Table 4. Renter Cost Burden

Region 9 Total
42.1%
of renters

Wayne
43.3%
of renters

Fayette
48.3%
of renters

Rush
33.8%
of renters

Union
42.8%
of renters

Franklin
33.0%
of renters
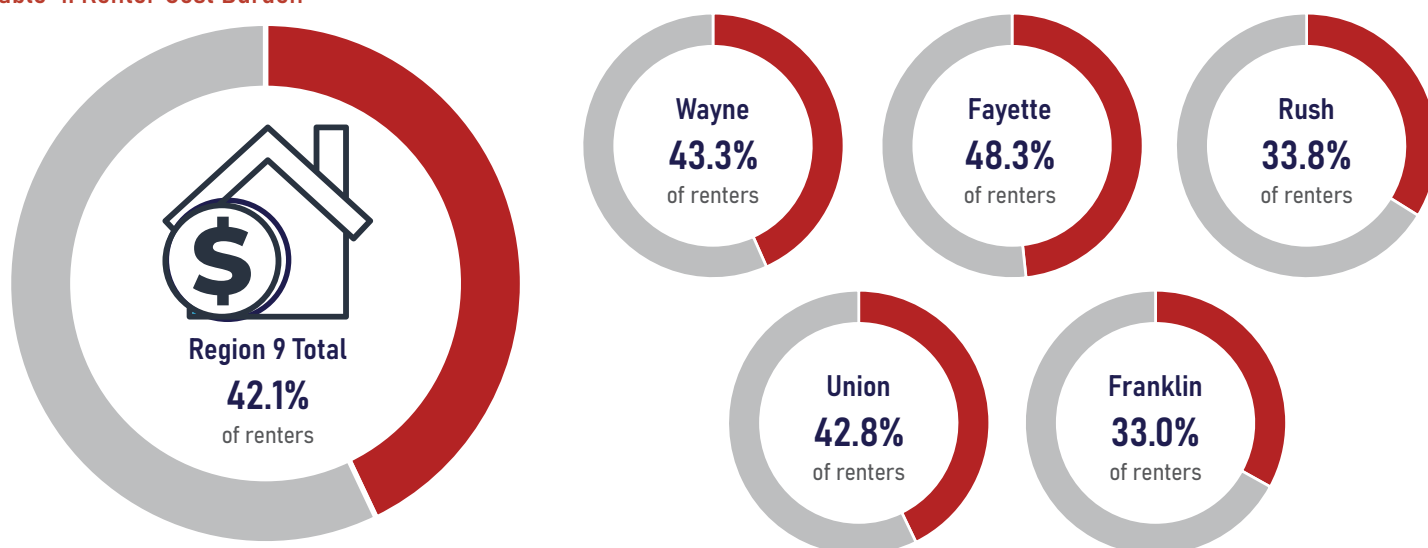
Source: U.S. Census Bureau, 2018–2022 American Community Survey 5-Year Estimates

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1   Eviction Lab Dec 2022–Dec 2023 data
2   The filing rate is the percent of rentals with eviction filings.

Poverty Rates

Due to the significant impact of poverty on the immediate living conditions and well-being of those impacted, and the generational and societal harm it creates, it is of prime importance to know how many persons at a time are estimated to be experiencing such conditions within Region 9. For households with children, exposure to poverty at a young age is a risk factor for homelessness.[34] Furthermore, homelessness can be considered an Adverse Childhood Experience (ACE), which places these children at higher risks for long-term negative health outcomes.[35] Poverty has been found to increase familial conflict due to economic hardship increasing psychological distress, which then impacts engagement with others in the household.[36] Child poverty has a significant impact on both the development of children and in turn society at large, costing an estimated aggregated $500 billion (about $1,500 per person in the US).[37] The figure to the right provides an overview of the current percentage of the population that is deemed to be in poverty within Region 9 counties.

Figure 1. Poverty Rates by County

Population for whom poverty status is determined

Percent below poverty level

- 11.8%–16.4%
- 7.5%–11.7%
- 6.1%–7.4%
- 6%–6%

Year: 2022

Source: U.S. Census Bureau, 2018–2022 American Community Survey 5-Year Estimates

Asset Limited, Income Constrained, Employed "ALICE" Rates

While poverty rates help provide a window into the financial health of a community, there are limitations due to the specific parameters placed on who is counted, and therefor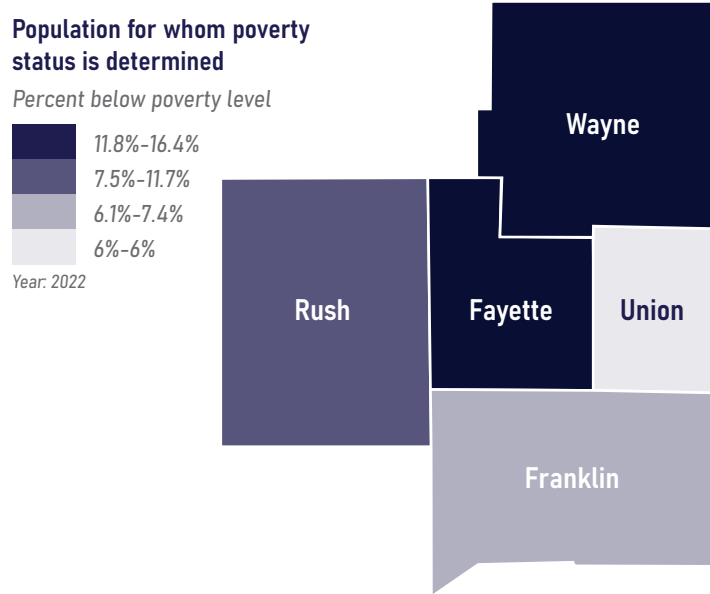e some households that are financially struggling are not captured in poverty rates. For instance, households that make just enough to be above the poverty line but not enough to live comfortably and financially thrive, such as have savings in case of a financial shock, are not accounted for in poverty rates. These persons can be considered Asset Limited, Income Constrained, Employed or "ALICE"- which includes those that earn above the Federal Poverty Level, but are unable to make enough to thrive and struggle affording basic cost of living for their respective county. Low wages are a major factor as the cost of living has increased; wages of individuals have not kept up with increased costs, leading to financial difficulties for those who are considered ALICE. Many people who are ALICE are one or two paychecks away from experiencing a financial shock situation, where they do not have the income anymore to survive financially.[38]

Table 4: Alice Households in Region 9

% of ALICE Households	2018	2019	2020	2021
Wayne	23%	27%	*	27%
Fayette	23%	21%	*	27%
Rush	30%	33%	*	27%
Union	26%	24%	*	28%
Franklin	25%	22%	*	25%

Source: United Way, United for ALICE, 2018, 2019, 2021

The data represented in **Table 4** does not include information from the year 2020 due to difficulties in data collection from the COVID-19 pandemic for various entities. Support for households struggling was also provided in vastly different ways and approaches due to the unique pandemic context. Of note, while **Table 4** provides an overview of the ALICE rates for county level, additional information such as detailed breakdowns of ALICE rates for each township that exists within Region 9 counties is provided on the United for ALICE website. [39]

Rental Costs vs. Wages

Jobs and the wages provided by employers play a significant role in the ability for individuals and families to access stable housing. When examining the most common positions held by persons in the central and southern Indiana Nonmetropolitan area, which would include Region 9 counties, the associated wages are not aligned with current cost of living or the increased rental costs for the region. Typical rental units in Region 9 **(Table 5)** range from $647- $715 for 1-bedroom rental units and $863-939 for a 2-bedroom rental while the most common occupations provide a median hourly salary between $10.98 to $23.52 **(Tables 6 & 7)**.[40, 41] Households are experiencing high rates of rent burden due to increasing rents and the lack of well-paying jobs that keep up with cost of living.

Table 5: Fair Market Rent & Income Required for Affordability

	One Bedroom	Monthly Income Required for Affordability	Two Bedroom	Monthly Income Required for Affordability
Wayne	$657	$2,190	$863	$2,876
Fayette	$657	$2,190	$863	$2,876
Union	$714	$2,380	$926	$3,087
Rush	$670	$2,233	$863	$2,876
Franklin	$715	$2,383	$939	$3,130

Source: U.S. Department of Housing and Urban Development FY 2024 Fair Market Rent and Author's Calculations Based on FRM & Affordability Benchmark of Rent at 30% of Household Income

Table 6: Most Common Occupations in Central Indiana Nonmetropolitan Area

Occupation	Estimated Number Employed	Median Hourly Wage	Monthly Full-Time (40hrs) Gross Pay (Before Taxes)
Miscellaneous Assemblers and Fabricators	5,380	$18.39	$3,163.08
Fast Food and Counter Workers	5,200	$10.98	$1,888.56
Cashiers	3,970	$11.42	$1,964.24
Retail Salespersons	3,940	$13.12	$2,256.64
Laborers and Freight, Stock, and Material Movers, Hand	3,710	$16.47	$2,832.84

Source: U.S. Bureau of Labor Statistics Occupational Employment and Wage Statistic May 2022; Monthly Full-Time Gross Pay is author's calculation using medial hourly wage and assuming a 40 hour work week and 4.3 weeks per month
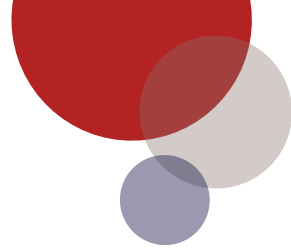
Table 7: Most Common Occupations in Southern Indiana Nonmetropolitan Area

Occupation	Estimated Number Employed	Median Hourly Wage	Monthly Full-Time (40 hrs) Gross Pay (Before Taxes)
Misc. Assemblers and Fabricators	11,590	$19.53	$3,359.16
Heavy and Tractor-Trailer Truck Drivers	5,110	$23.52	$4,045.44
Fast Food and Counter Workers	4,750	$10.91	$1,876.52
Laborers and Freight, Stock, and Material Movers	4,660	$16.83	$2,894.76
Cashiers	4,630	$11.25	$1,935.00

Source: U.S. Bureau of Labor Statistics Occupational Employment and Wage Statistics May 2022

Debt in Collections

Having debt in collections can interfere with access to safe, stable, and affordable housing in multiple ways. It depresses credit scores, which may lead property managers to reject applicants for housing. It can also lead to financial hardship – especially if the collections result in wage garnishment or otherwise onerous payment plans – reducing a household's ability to make timely rent or mortgage payments.[42] Historically, medical debt has been the most common type of debt on individuals' credit reports, although recent policy changes removing certain medical debts may shift that balance going forward.[43] The data in **Table 8** below represents estimates produced by the Urban Institute using a sample of over 10 million nationally representative, de-identified consumer-level records from a major credit bureau as well as data from the U.S. Census Bureau's American Community Survey (ACS) and the Decennial Census (2020).[44] Paying attention to the prevalence of debt in collections may prove beneficial as community leaders strive to improve housing access and stability.

Table 8: Medical & Other Debt Burden for Region 9

	Est. % of those with Med Debt in Collections	Est. % of those with All Types of Debt in Collections
Wayne	13%	31%
Fayette	15%	32%
Union	11%	21%
Rush	25%	35%
Franklin	17%	28%

Source: Urban Institute 2023

Housing Availability

Addressing homelessness and housing stability also requires an understanding of the resources available to put a roof over someone's head. These include emergency shelter beds, supportive housing options, and rapid rehousing – as well as available housing units, new housing starts and subsidized units.

Emergency Shelter, Supportive Housing, & Rapid Rehousing Beds

Stakeholders in Region 9 expressed a strong desire to see increased emergency housing resources. The Indiana Housing and Community Development Housing Inventory Count reports on the number of units and beds provided within the Continuum of Care area specifically designated for those experiencing homelessness.[45] There are specific categories nested within this inventory count, which include emergency shelter, supportive housing and rapid rehousing. Within Region 9, there is a severely limited supply of these categories. The currently known counts for the last three years are presented in the following table, and Appendix 2 provides more detailed information on which organizations are included.

Table 9. Emergency Shelter, Supportive Housing, & Rapid Rehousing Beds in Region 9

	2021	2022	2023
Emergency Shelter	18	18	21
Permanent Supportive Housing	32	32	32
Rapid Rehousing	4	4	3

Source: Indiana Housing and Community Development Authority Housing Inventory Count, 2021–2023

Total Housing Units & Subsidized Units

Choice and affordability in housing depends on the number of housing units and subsidized units in the Region. A number of federal funding sources create and maintain subsidize housing units, including the Low-Income Housing Tax Credit,[46] Rural Rental Housing (Section 515),[47] Section 202 Supportive Housing for the Elderly,[48] Project-Based Section 8, HOME Investment Partnerships Program,[49] and Public Housing.

Table 10. Housing Units, Subsidized Units

	Total Housing Units	Total Subsidized Units
Wayne	30,782	1,612
Rush	7,357	314
Union	3,237	134
Fayette	10,896	286
Franklin	9.687	302
Region 9 Total	**61,959**	**2,648**

Source: Total Units: U.S. Census Bureau American Community Survey 2018–2022; Total Subsidized Units: Indiana Housing & Community Development Authority, 2023

New Housing Development

New housing development offers increased options and some research suggests that this alone can increase affordability across the market in urban settings.[50] **Table 11** shows new housing starts in Region 9.

Table 11. New Housing Starts (Any Type)

	2022[3]
Wayne	45
Rush	21
Union	10
Fayette	24
Franklin	50
Region 9 Total	**150**

Source: Indiana Housing and Community Development Authority, Indiana Housing Dashboard 2023

Homes Built By Decade

When examining the long-term pattern of homes being built across the decades in Region 9, there has been a significant decline in the last 20 years, with the last 4 years having almost no noteworthy housing development. As can be seen in the chart below **(Chart 1)** most of the current housing stock was built close to 50-100 years ago, which can present additional housing challenges related to out–of–date plumbing, electrical, and other structural concerns that can be expensive to remediate.[51]

Chart 1: Homes Built by Decade
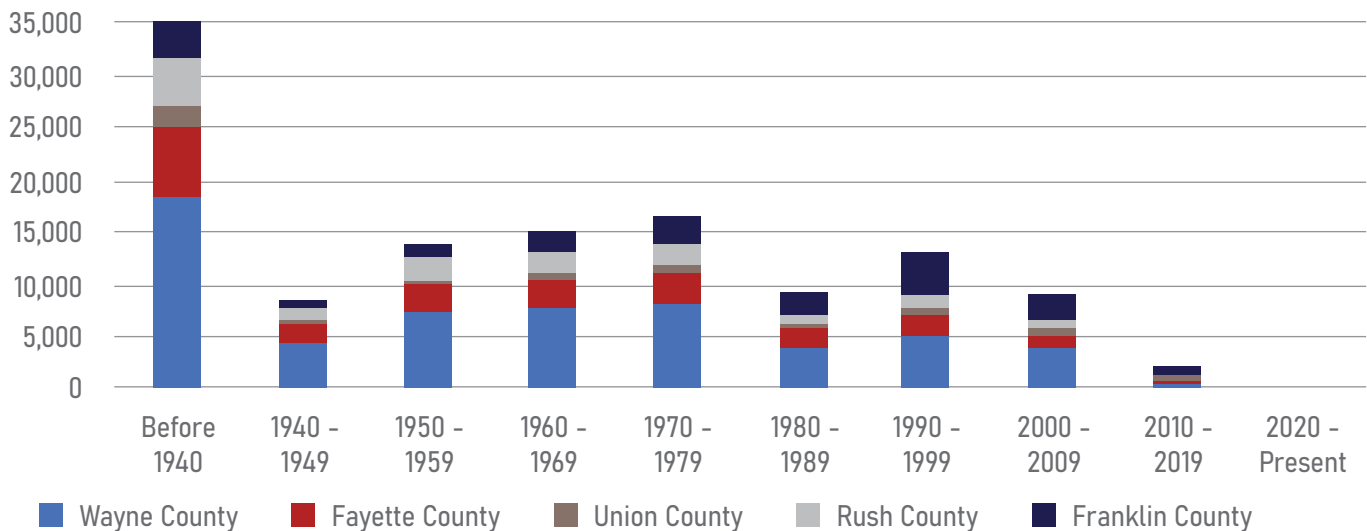
Source: U.S. Census Bureau, 2018–2022 American Community Survey 5-Year Estimates

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3 The Indiana Housing and Community Development Authority dashboard only has data for 2022, but this will serve as a useful benchmark against which to assess future development.

Utility Costs Region 9

Access to heat, running water, and other utilities are commonly considered an essential aspect of quality housing. Therefore, the cost of utilities for the counties in Region 9 can provide insight on affordability of basic housing needs **(Chart 2)**.[52]

Chart 2: Utility Costs in Region 9
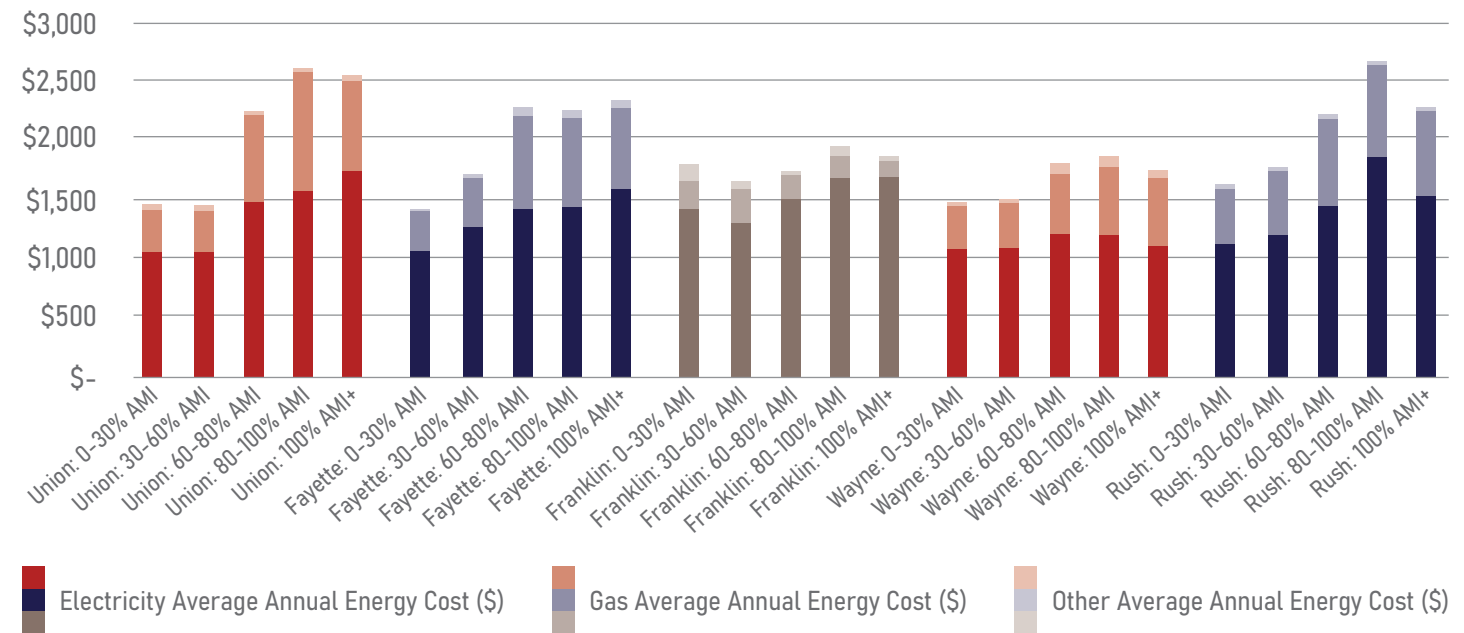
Source: Low-Income Energy Affordability Data (LEAD) - Census Decennial American Community Survey (2020)
* AMI: Average Median Income

Homeownership

Homeownership can serve as a pathway to financial well-being and stability as owners build equity, enjoy predictable payments, and improve their credit score.[53] Several stakeholders in Region 9, including individuals with lived experience, expressed interest in homeownership as a pathway to housing stability.

Resident Homeowners

The table below **(Table 12)** shows the percent of housing units that are owner-occupied in each county in Region 9.

Table 12. Resident homeownership

	2021	2022
Wayne	68.0%	68.4%
Rush	69.5%	71.2%
Union	78.2%	79.2%
Fayette	68.7%	69.5%
Franklin	81.6%	81.4%

Source: U.S. Census Bureau, 2017–2021 and 2018–2022 American Community Survey 5-Year Estimates

The Hidden Costs of Housing Instability

Recent research has found that those with a higher rent burden (above 30%) and/or experiences with being evicted are at an increased likelihood of death (mortality rate). Specifically, those who had an increase in rent burden to 50% of their income had an associated average higher mortality rate of 16%. Evictions were seen to have an even larger impact, with those that had an eviction judgment having an average 40% increase. This work highlights the critical importance of the connection between housing and health for the well-being of humans.[54] Addressing housing instability has measurable benefits for the community. Our interviews with Region 9 stakeholders yielded the following insights into the hidden costs of homelessness and housing instability, demonstrating the value of providing stable housing and community connections.

Human Lives & Human Potential

"An individual who was staying in one of these homeless tent communities – the gentleman passed away from hypothermia."

- Social Service Provider

"We had this horrific storm in which six inches fell at some kind of ungodly hour and two people were swept away. One body has been recovered and the other body to this day has not been recovered."

– Community Leader

"One guy actually froze to death on my front porch."

- Housing/Homeless Service Provider

" We're missing a resource by not helping these folks have what they need to bring their genius selves forward."

-Civic & Community Leader

Several stakeholders shared stories of individuals in Region 9 who lost their lives due to exposure while homeless and expressed an acute sense of regret over these outcomes. Individuals experiencing homelessness do face elevated risks and die prematurely far more often than those who remain housed.[55] Studies have found that the mortality rate is 3.5-4 times higher for homeless individuals than their housed counterparts.[56, 57] Those experiencing homelessness are exposed to extreme health inequities across a variety of health concerns, from acute to chronic health conditions.[58] They are exposed to more risk factors that place them at greater chance of infectious diseases, untreated chronic health conditions, mental illness, and substance disorders.[59] Furthermore, those who experience severe mental illness are more vulnerable to victimization, meaning they have an increased potential to be victims of violence (e.g., theft, physical violence, sexual harassment).[60] Those experiencing homelessness are also at increased potential for suicidality, leading to premature death.[61] These premature deaths – and the preoccupation with survival – represent a loss of human life and potential.

"We all have the capacity to be ingenious. Maybe that's the next really bright person who's living in a tent and is so fixated on keeping their feet warm at night that they don't think about whatever it is they're going to solve – for all of us. So, we're missing a resource by not helping these folks have what they need to bring their genius selves forward."

- Civic/Community Leader

"They [people experiencing homelessness] do have gifts."

– Social Service Provider

Stakeholders also expressed a recognition of the various strengths, talents, and gifts that those experiencing homelessness offer. Alongside this acknowledgment was an awareness that those experiencing homelessness are not being provided with the opportunity to tap into these talents. In turn, the loss of gifts that individuals hold not only harms the persons experiencing homelessness, but the broader community and world as well.

> "If people don't know where they're going to sleep at night or there are challenges with where they are staying, you know, health care becomes the last thing on their mind. So if we can't meet those basic needs, then there's no opportunity for us to help from a mental health standpoint or from a physical health standpoint."
> *– Social Service Provider*

> "I mean, that guy was sleeping in the elevator. It's like, yeah, he has a host of other issues, I mean, medical issues and emotional issues, but none of that mattered to him. None of that he even cared about addressing, you know, when you're sleeping in a parking garage. But once he got in a bed and he was warm, you know, then it was like, 'Oh, now we can talk about some other stuff.' "
> *– Social Service Provider*

Health and Health Care Costs

Another core concern for stakeholders was the negative health impacts for those experiencing homelessness. Stakeholders expressed that without housing, individuals experiencing homelessness are unable to address other health concerns, such as chronic health conditions, mental illness or injury. Therefore, stabilizing housing was expressed as a key first step before additional health concerns could be addressed.

Housing and health are inextricably linked. Stability, affordability, quality, and neighborhood features all influence a person's health while health conditions can affect the ability to maintain stable, quality housing.[62] The lack of stable and affordable housing has significant negative health impacts, especially when considering potential exposure to diseases and harsh environmental conditions.[63]

> "A safe place to live is really important for trauma and injury prevention and illness prevention. Having a warm place to avoid the elements when the weather starts to get bad…housing is really important for a lot of different reasons from a public health perspective. Like if a child is due for their vaccinations and we can't get a hold of them via phone…being able to send a postcard to an address."
> *– Social Service Provider*

At the same time, health care costs are elevated when individuals lack housing. Those without a home tend to use emergency room services more often than the general population and stay longer.[64] They more frequently seek medical treatment for instances of cold exposure injury, assaults, self-harm, burns and poisonings in comparison to their non-homeless peers.[65] Burns appear to occur due to the need for heat sources during cold winter months, leading to burn and fire risks.[66] These individuals are also less likely to engage with community healthcare centers, which limits the potential for preventative action or care.[67] Addressing housing needs – especially for the chronically homeless – holds the potential to both improve health while reducing costs overall.[68] Indeed, studies have found that housing interventions provide cost offsets, especially in relation to emergency department visits and shelter bed use. However, the net value of these offsets is highly dependent on the population served, context, and cost of the intervention.[69]

"There are so many kids that are homeless, and she'll [school educator] will say, now what's your address? And they [the child] lean up and they whisper, 'I don't have one' and they know that …there was something at the schools where they couldn't even get enrolled because they didn't have an address. Well, now the school has figured out some kind of a work around. And so, she works with a lot of these kids that they don't have a home."
– Civic/Community Leader

"So, for example, if there's a child in the household and… they're enrolled in school and… they don't have stable housing, or they're couch surfing or homeless… that child's already at a disadvantage compared to other children their age."
– Housing/Homeless Service Provider

Education & Child Welfare

Stakeholders expressed particular concern about the impact of homelessness and housing instability on children, their current well-being, and their prospects for the future. Housing instability and homelessness have been shown to negatively affect children's health and their educational attainment.[70] One measurement that could be useful in examining the impact of homelessness on students in Region 9 is the IREAD (reading levels) pass rates, which can be found in Appendix 4 of this document for each county. Homelessness can be considered an adverse childhood experience (ACE), making these children more likely to have negative long-term physical, mental and cognitive outcomes.[71] Children who have elevated ACEs scores are at a greater risk of being in contact with the justice system (e.g., the juvenile justice system), which negatively impacts their life trajectory.[72] Furthermore, lower educational attainment, paired with elevated ACEs score, has been associated with more arrests in adulthood, and more ACEs are associated with risk of future incarceration.[73]

"[I] believe the school [NAME OF SCHOOL] has a program as well during the summertime where the kids, you know, some of the kids don't get set down there. They're not getting breakfast or lunch. So, you know, when they go back to school, they're getting some of those things. So, in the summertime, we do have [name of school] community schools that comes down there and they'll pass out some snacks and some breakfast items and that kind of stuff."
– Civic/Community Leader

Since educational systems are one of the key points of contact that children interact with on a weekly basis, schools have become a place where homelessness is acutely seen and addressed within Region 9. One interviewee noted that even the simple need of having a residence to register your child(ren) for school is a barrier for families experiencing homelessness. Educational systems are required by the Federal McKinney-Vento Homeless Assistance Act to have a designated person who, among other tasks: raises awareness of student's rights to education, identifies students who are experiencing homelessness, supports students in need via referrals to services, provides relevant services and resources under their preview (e.g., transportation to school and extracurriculars) and accounts for the number of students that currently are experiencing homelessness.[74] A list of McKinney-Vento homeless liaisons for the county school cooperations in Region 9 are noted in appendix 3 of this document.

While schools in Region 9 have taken steps to help close the gap in needs for children in their communities, housing instability remains. Moreover, rural communities like those in Region 9 commonly lack specific services to address issues youth who experiencing homelessness need leading to those seeking assistance having to travel outside of their communities to obtain help or go without assistance.[75] These are areas of ongoing need, as recognized by stakeholders in the community.

Public Safety

"I've had no running water, no toilets. The toilet didn't work, so you had to urinate in the tub and rinse it down and then you had to defecate in a shopping bag and put it in the trashcan outside. For a while, [when I was staying with my sister] she didn't have any gas in her house, so she had to run space heaters and…we spent all of our time in just the living room. The other rooms were uninhabitable because of the cold."

– Individual with Lived Experience

Several individuals interviewed worried about public health and safety in light of the strategies homeless or housing insecure individuals might need to use to meet their basic needs. In particular, concerns about fires from alternative heating sources in the winter were highlighted by several participants. Stakeholders also raised concerns about what kinds of approaches might be taken towards those who are experiencing homelessness in the name of public safety. Since the 1990s, there has been an intensification of punitive anti-homelessness policies focused on the assumption that through such approaches individuals will be encouraged to seek social support services. Research shows these approaches can further entrench individuals into homelessness, create greater material hardship for those impacted, foster feelings of dehumanization and instill fear into those impacted.[76] In doing so, such tactics build mistrust toward seeking support from governmental systems and make it more difficult for those experiencing homelessness to get out of homelessness by creating additional financial instability.[77]

"We have a common goal which is to get the services that people need. And just because they could be in jail doesn't mean they should be in jail, you know if they are somewhere else. Like, what else can we do?"

– Civic/Community Leader

Stakeholders also mentioned punitive law enforcement approaches such as jailing those suffering from substance use disorder (SUD) due to the lack of accessible treatment services. Punitive policing policies towards those experiencing homelessness can also increase the policing costs through homeless camp sweeps, arrests and retention of individuals within the jail system.[78] More support services aimed at providing diversion from jails were mentioned by one stakeholder to address this issue and meet the common goal of ending homelessness. Therefore, stakeholders were invested in finding alternative pathways to both ensure the public is safe and assist those experiencing homelessness.

Economic Development

"You need more affordable housing... in this market nowadays, I mean, who's going to be able to afford [it]? The rents are just so high"

– Housing/Homeless Service Provider

Bringing employers and investments to any region depends upon having the right mix of infrastructure and people power to meet their needs and goals. Or, as one stakeholder put it, *"attracting people and businesses here successfully means having a healthy or, as I like to say, a vibrant community."*

Economic opportunities such as employment have continued to lag in rural communities since the 1980s when compared to urban areas.[79] Furthermore, those who are in their prime-working-age (ages 25-64) in rural U.S. communities experience higher rates of unemployment than urban peers. Core industries in rural America (i.e., agriculture, manufacturing) have declined in recent decades, with one report from researchers at Ball State University in 2022 indicating these sectors in Indiana have, "shed more than 32,000 jobs since 2001," leading to industry gaps in rural Indiana communities.[80] In some parts of Indiana, the warehousing and transportation industries have filled the economic gap from the loss of agriculture and manufacturing work. It is important to note that while these industries (warehousing & transportation) have brought jobs into rural areas of Indiana, these employment opportunities (e.g., stockers, material movers) tend to be low-wage positions that are at a high risk of being offshored or at a very high risk for automation.[81] The current influx of low-wage positions in rural Indiana areas such as Region 9 was noted by several stakeholders as an issue that contributes to issues of housing instability and homelessness.

"I think our number one challenge is our low wages, because the wages contribute to a whole host of other problems." –Civic/Community Leader

Stakeholders interviewed for this report are keenly aware of the impacts of such economic shifts on their communities either through the services they provide or lived experiences. Some of those interviewed tried to address these economic gaps, as mentioned by one interviewee regarding her efforts to bring better-paying jobs to her community.

"It's hard to have a stable job if you don't have a place to go home to and rest." –Housing/Homeless Service Provider

The lack of affordable, safe housing stock within Region 9 for those who are low-income and its costs in terms of economic development was also a recurring theme. Stakeholders indicated that there is simply not enough housing; housing that does exist for low-income households is subpar; rental units are too expensive (reinforcing the cyclical nature of wages and housing instability); and/or they experienced issues with property managers accepting Section 8 vouchers. This made attracting and retaining both investment and talent difficult. The lack of housing within rural communities can have a cyclical impact on job opportunities because instability in housing can make it difficult to concentrate in the workplace, further contributing to employment instability.

Conclusion

Stakeholders in Region 9 raised a wide array of legitimate concerns about the costs of failing to address housing instability and homelessness. While it will certainly require resources and community commitment to tackle these challenges, the consequences of underinvesting in efforts to address these challenges are significant.

> **"Attracting people and businesses here successfully means having a healthy or, as I like to say, a vibrant community."**

Community Strengths

Driving efforts to address homelessness and housing instability forward rests on the strengths within the current landscape. Stakeholders provided insight into what's currently working well within Region 9, suggesting a strong base from which to build a coordinated response.

Recognition of the Need

There is a clear recognition from those interviewed for this report that homelessness is a significant issue within their communities. Individuals at various levels of government, within agencies, and in the community at large have expressed an awareness of the current conditions of those experiencing homelessness within their counties. Counties in Region 9 are at a key turning point due to the overwhelming community acknowledgment of the need to address homelessness.

It is important to note that not all stakeholders felt that homelessness was completely acknowledged, however. They referenced individuals within the community who, according to one stakeholder, *"don't want to see those people down there. So that doesn't exist."* Work remains to be done to generate a full awareness of the need for intervention.

"I think a lot of people realize that there's a need. We're on the cusp of trying to figure something out. Everybody is trying to kind of we see that there's a need, but we're not really quite sure how to address it."

– Social Service Provider

"The strengths [are] that we now acknowledge the problem in most of our areas, and that has been a battle to overcome in itself... Openness to addressing the issue within our communities is a huge strength."

– Social Service Provider

"People recognize that we have a homeless issue."

– Social Service Provider

Sensitivity & Commitment to Support Individuals Who are Homeless

"Our community is sensitive to the homeless population. So, law enforcement will say... as long as they're not bothering anyone, they're not making a mess, they're not causing chaos and they're not breaking any laws, we're not going to bother them. So, I think maybe like the sensitivity, I think is a strength."

- Social Service Provider

Service providers also indicated an awareness of the current living conditions of those experiencing homelessness within their communities. They made efforts within their respective organizations to support these individuals in the capacities they have through resource navigation, providing services when able and guiding them through the system. These service providers go above and beyond the call of their job descriptions to support those struggling to find housing within their communities and are deeply invested.

"If I have the time, I walk them through it. Let me call you some landlords because I think it's overwhelming. There's a lot of landlords to call and I will sit down with them, basically hold their hand till they get a place. I've done inspections just to make sure because it takes too long for the housing authority to do them. So, I'll go and get a heads up to that landlord. This needs to be replaced."

– Housing/Homeless Service Provider

Stakeholders interviewed voiced that their respective communities were in the process of coming together to help support those experiencing homelessness in their towns, cities and counties.

"[Our] strengths are the community commitment to housing and homelessness."

– Social Service Provider

"Thankfully, no one is sharing the burden all by themselves and that we're doing it as a group and knowing that we're just going to keep chipping away at it. Chip, Chip, Chip, Chip."

- Civic/Community Leader

Community commitment is crucial to any effort, especially those aimed at addressing issues such homelessness. Building upon community commitment and moving forward with both a supportive lens towards those in need and each other (community leaders) will support direction formation.

While Insufficient, Valued Community Resources Exist

While there is a need for additional resources and financial support for housing and social service providers in Region 9, the resources that do exist are appreciated and seen as beneficial.

"Our strengths are we do have resources available. I mean, I know where to send them [those experiencing homelessness] to."

– Housing/Homeless Service Provider

"I was approved for more money than I dreamed through United Rural Development [note: likely referring to USDA Rural Housing Service]."

– Individual with Direct Experience of Housing Instability

Efforts are being made continually to create, expand and improve services across Region 9 and facilitate communication so those in need can access resources. While the community resources that do exist (when accessible) are a strength, there are still significant needs and challenges related to information sharing. A number of stakeholders recognized the Region 9 Regional Planning Council (RPC), which was established to formulate tailored responses to housing needs in Region 9, as a place where silos could be broken down and needed, important information could be shared to assist social service providers.

'We've Come a Long Way.' Progress has Been Made

Multiple stakeholders pointed to new programs or options within the community as signs of progress. For example, one community leader described the recent addition of recovery housing and treatment options, the syringe program, and increased expectations for employers who receive economic development incentives, noting: *"We've come a long way."*

There have been efforts made by multiple organizations and agencies to address the current gaps within their respective communities through the active seeking out of successful programs in other areas of Indiana. One community leader expressed their excitement for bringing in individuals to replicate successful programs that have been implemented elsewhere.

"And so, I have the lady that works. She started the [social service effort in a neighboring county] …She's done great. She's actually just finished a model of that [program] with [a local university] and she's presented at this state, this model and done well. She has agreed to come and start something similar here in [city of stakeholder] … I got her on the agenda for the ARPA funds, you know, which ultimately is going to help people with mental health, drug abuse, homeless people, because as much as you try and pull those apart, they all just come back together."

– Civic/Community Leader

Several stakeholders interviewed expressed similar excitement about new programs and efforts being made in their communities to address their particular needs. For instance, one community leader saw the potential to retrofit older homes for possible use as transitional housing:

"It's a great old house, about 180-year-old house that's been fully restored. That will be a recovery house, has a 90-day program and, you know, Medicaid eligible and all that."

– Civic/Community Leader

Alongside the recognition that progress has been made, which appeared to work as a motivating force for many stakeholders that engaged in providing social services for those experiencing homelessness, there was a clear commitment from the general communities of stakeholders to addressing the issue of homelessness.

Recommendations from Individuals with Direct Experience

Individuals who have experienced housing instability can offer unique and powerful insight into the challenges that make stable housing elusive and strategies that could prove most effective. Below, we summarize the stories and recommendations of several individuals in Region 9 who volunteered to share their experiences of homelessness or housing instability. We used pseudonyms to protect the anonymity of participants.

Cheryl – Wayne County

Cheryl's life changed when a disability meant she could no longer work. As the financial distress from lack of income compounded, she went through a divorce, lost her housing, lost her transportation, and became disconnected from her church community. Her family provided limited support while she awaited a Housing Choice Voucher and Social Security income. She received an eviction notice but was able to negotiate time to move and get it cleared from her record thanks to legal support. When that voucher finally came, Cheryl struggled to find a landlord who would accept it because of her two dogs, who she saw as the only family she had left.

Cheryl's Recommendations:

- Ensure that all tenants **know their rights and have access to legal services**
- Offer a **navigator** to support individuals attempting to use a Housing Choice Voucher or other source of rental assistance
- Recognize that the **transition from working to disability support** creates financial hardship
- Offer supports to **individuals with pets,** who have a more difficult time access housing and shelter supports

Dana – Wayne County

Dana experienced evictions and homelessness as a young woman struggling with addiction. She cycled in and out of low-wage jobs and apartments; "I've been in court with the judge saying you have until 5pm to get your [stuff] and get out." She couch surfed, slept in cars and vacant buildings, stayed in shelters, and, at times, lived on the streets out of a backpack. She recalled selling drugs just to have somewhere to stay. Pregnancy provided an opportunity turned her life around because she had to "provide for somebody else but myself." Clean and sober now, she still experiences challenges in HUD housing because child support is irregular and overdue power bills threaten her stability.

Dana's Recommendations:

- Provide **energy and rental assistance** to all who qualify
- Offer **a safety net** that individuals can tap once a year or so when they experience unexpected financial challenges
- Establish more **emergency shelter space** for women and children
- Help people who are homeless find jobs and **save for a down payment or first and last month rent**

Jason - Wayne County

Jason is currently living in a men's shelter that requires a commitment to clean living and sobriety. He has applied for housing assistance, but does not understand the form he received back or what it will mean for his future housing options. He anticipates living in an extended-stay motel and getting a fast food job; his options are limited because of his criminal record. Biking to work in the winter will prove challenging, as will earning enough after child support to remain stably housed.

Jason's Recommendations:

- Provide **transitional housing** to everyone leaving the shelter
- Offer **transportation to employment** to support individuals' ability to earn, remain stably housed and meet their family obligations
- Make notices from housing agencies and other supportive services **clear and easy to understand**

Carolyn – Fayette County

Carolyn lost her housing when she "got dragged into" a property manager-tenant dispute with one of her neighbors and was given only two weeks to move. She moved in with a family member, which she regrets because it damaged their relationship. Carolyn discovered a USDA program that provides support for homeownership and was able to purchase a low-cost home that requires substantial repairs, so she is trying to teach herself how to fix things.

Carolyn's Recommendations:

- Make sure individuals are aware of existing **homeownership opportunities**
- Provide services that help individuals **maintain their homes**
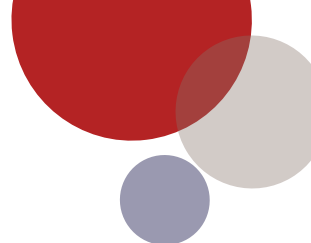
Joseph – Union County

When Joseph was renting and supporting his wife and kids, "I worked daylight to dark and it was still all we could do to survive. Sometimes I worked three jobs at once." He sought help with the Trustees office, who recommended they seek help from churches, but local churches refused to offer help as well. The financial hardship led to a divorce and Joseph "lost all interest in doing everything after that." He experienced eviction, lived in low-quality housing and extended-stay motels, and eventually saved up enough to buy a low-cost 'fixer upper' to live in.

Joseph's Recommendations:

- Require **township trustees to provide assistance** without regard to race, job status, or family status
- Make **property managers go through inspection** if they want to charge higher rent, and ensure that the inspector is different each time
- Ensure that property managers **promptly address issues like pests, failed heating systems and other habitability issues;** *"There are scumlords that, as long as they get that check, they could care less about the housing or the people in it,"* Joseph shared.
- Provide **support for expensive home repairs,** like replacing windows

Karen – Fayette County

Karen lives modestly on her Social Security Disability income after having to retire early because of health issues. "I would love to keep working," she shared. When her rent nearly doubled in a single year, she applied for a HUD voucher but learned that her apartment was not approved. Her daughter moved in with her to help with the rent and ultimately helped her purchase a home that was more affordable but lacked the maintenance services Karen depends on because of her health issues.

Karen's Recommendations:

- Treat people who are applying for assistance with respect. *"I was treated like scum,"* Karen shared
- Use the **"vacant and decaying" buildings** in the community to support the homeless
- Referring to scripture, Karen believes that God calls government leaders to ensure adequate housing for all. *"There would have to be a huge change in government for people to be taken care of adequately,"* Karen added
- Reduce the impact of poverty

Strategic Plan

The strategic plan for Region 9 establishes a vision, mission, goals, and strategies to guide the work ahead. It is designed to be responsive to the complex nature of housing instability and homelessness and is built to reflect stakeholder desires as well as system strengths and limitations. Meeting this ambitious vision will take the concerted effort of Regional Planning Council leaders and members.

Vision

All Region 9 residents will have access to safe, stable, quality, and affordable homes and community connections that allow them to be self-sufficient and active citizens.

Mission

The Region 9 Planning Council (Wayne, Rush, Union, Fayette, and Franklin) will work collaboratively to build the capacity of partners to improve access to quality housing and provide person-centered, need-based interventions to households that are currently experiencing or at risk of homelessness.
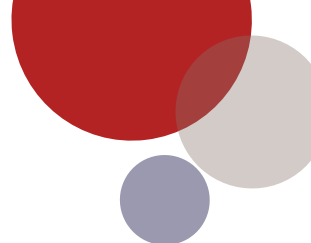
Goal 1: Efforts to End Homelessness are Well-Coordinated & Resourced

Rationale: Improving housing security across a diverse region requires effective collaboration, information-sharing, and a multi-pronged approach.

3-year Vision: In three years, the Regional Planning Council (RPC) will have a strong governance committee with approved bylaws and will have representation from each county, workgroups, professional development opportunities and funding.

Key Strategies

1. Share the role of the Balance of State Continuum of Care (BoSCoC), Regional Planning Councils (RPCs), and partner agencies as part of the Regional Planning Council (RPC). [Ongoing]
2. Provide education to the community about the role of the Regional Planning Council and the benefits of participation. [Ongoing]
3. Engage in outreach to bring stakeholders to the table, especially in underrepresented counties [Ongoing]
4. Provide professional development/learning opportunities for those working in the housing and homeless service sphere. [Ongoing]
5. Educate RPC members about funding opportunities to support housing and related services. [Ongoing]
6. Establish a subcommittee to review and propose changes to by-laws. [Short term]
7. Establish workgroups to make progress on priority areas. [Short term]
8. Fund a coordinator position. [Within three years]
9. Develop a web presence. [Within three years]

Goal 2: Homelessness is Acknowledged, Safe, and Short-Term

Rationale: Ending homelessness begins with acknowledging that it exists and providing resources to ensure that those who experience homelessness are safe and receive shelter quickly.

3-year Vision: All counties in the region participate in the Point-in-Time Count and have emergency shelter/warming options. A team of individuals will respond to instances of homelessness to provide rapid connection to available resources.

Key Strategies

1. Coordinate Point-in-Time Count efforts, including supporting counties that have not previously participated. [Ongoing]
2. Support capacity building for the formulation of county specific teams or work groups to lead Point-In-Time Counts. [Ongoing]
3. Support the establishment of warming & cooling stations. Collect and disseminate warming/cooling stations across the region. [Ongoing]
   a. Support the subsequent sharing of information to clients at these cooling/warming stations through referrals to relevant services. [Ongoing]
   b. Support the establishment of protocols for sharing information. [Ongoing]
4. Build a case conferencing committee and schedule. [Short-term]
5. Provide connections and support to encourage data sharing between agencies. [Ongoing]
6. Increase year-round street outreach efforts. [Within three years]

Goal 3: Homelessness is Prevented

Rationale: Ending homelessness for persons experiencing mental health challenges and addiction requires community collaboration and support. For the next three years, the RPC will prioritize individuals experiencing mental health needs or needing addiction services.

3-year Vision: Region 9 will have increased manpower and resources to address mental health needs and to provide addiction services.

Key Strategies

1. Form a prevention/outreach workgroup to address key strategy points 2-4 under this goal. [Short-term]
2. Identify and build out a community partner network (e.g., property managers, human resource and apartment managers, religious organizations, correctional facilities), with the goal of preventing homelessness through increasing awareness and access to resources for at risk individuals. [Ongoing]
3. Create materials or resources (e.g., consolidation of information, knowledge) for a homelessness prevention program and build awareness of existing mental health and addiction services. [Within three years]
4. Educate community partner network of homelessness prevention program. [Ongoing]

Goal 4: We Increase Choice & Affordability in Housing

Rationale: Promoting housing stability requires a focus on adding new beds and housing units and encourage property managers to participate in housing programs.

3-Year Vision: The region will approve and start new affordable housing developments, new transitional housing options will be established, individuals seeking housing will be supported by navigators, and more property managers will accept housing subsidies.

Key Strategies

1. Serve as a connection point for individuals or organizations seeking to establish new housing options or programs to expand access to housing in the region. [Ongoing]
2. Recruit property managers to accept HCV & other forms of assistance. [Ongoing]
3. Promote options for Regional Planning Council (RPC) members to attend the Indiana Supportive Housing Institute.[4] [Ongoing]
4. Organize advocacy to support affordable housing development. [Short-term]
5. Educate members about the opportunity to become a Community Housing Development Organization (CHODO).[5] [Within three years]

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[4] The Indiana Supportive Housing Institute is a yearly training event with the aim of navigating attendees through the process of developing affordable housing that has access to both supportive and preventative services related to homelessness.

[5] A Community Housing Development Organization (CHODO) is a private, community-based nonprofit organization with the core purpose of developing housing that is affordable for the area served

For the Future

Throughout the extensive research and collaborative efforts conducted for the creation of this report, participants shared insights and suggestions that were not explicitly incorporated into the strategic plan. These represent valuable additional ideas that can be considered for future initiatives. The following section explores several of these key suggestions mentioned by stakeholders interviewed during this project's research phase and additional research conducted by the INCAP Institute team.

Eviction Diversion Program

"If we can keep people from getting evicted to begin with, then we wouldn't have as many that are homeless."

Stakeholders discussed the negative impact of evictions and the potential value of implementing an eviction diversion program. Such programs intervene early to help prevent housing instability and an eviction filing on an individual's record. They typically provide social service support or connections for those in the program.[82, 83, 84] In addition, a key component of eviction diversion programs is the extension of time between conflict/issues occurring and the official filing of eviction paperwork, increasing the timeframe for cases. These programs have been implemented in other parts of Indiana - for instance, Allen County and Lawrence Township – as well as in other parts of the country; the National Center for State Courts has offered grants to support such efforts.[85] Of note, the Allen County eviction diversion program estimates that there was an 86% drop in evictions between 2019-2021 within the service area they support.[86]

Cross-Agency Data Sharing Platform

"All CoC providers would have access and enter data into HMIS.... Integrating by-name lists into the HMIS system with real time data."

Information sharing is a critical need for social service providers who support those experiencing homelessness. Many stakeholders noted the need for a system that would allow the sharing of client information to help them better support those in need. The Homeless Management Information System (HMIS) was mentioned to be overly restrictive, preventing the sharing of timely and essential information amongst service providers. Some providers did their best to work around the bottlenecking of information by requesting agencies to collect particular information and share back. *"I do have a little list that I have in my notebook, that I've given to other agencies that send them to me, like, hey, if you got time, can you run some of these five questions right with them to see where they need to go?"* A pilot program was launched in California back in 2021 to address the same concerns and focused on creating a cross-agency by name database, which could be examined for future efforts to help improve service access.[87]

Rehabilitation of Existing Properties

"Why are we not buying these houses? Getting contractors to come in and restore these homes and then hire those at risk [for homelessness]... working toward learning a trade that could help [them]."

Several stakeholders mentioned the vacant homes in Region 9 and the possible creation of a program to rehabilitate existing properties. In addition, several participants highlighted that this could also be an opportunity for skills-building to empower those at risk of or currently experiencing homelessness. Currently, HUD has funds set aside for the acquisition and rehabilitation of property to provide housing or supportive services to those experiencing homelessness. Rehabilitated homes could be used as emergency shelters, permanent transitional housing, or other forms of supportive housing options for those experiencing or at risk of homelessness.[88]

Housing Improvement Program

"We need to help overcome that divide right now between the property owners and those who are seeking housing... I think a great need is financial support and resources for our community... maybe government-sponsored programs or additional resources, not only for those that are seeking housing but for the property owners to help bridge that gap."

Another suggestion to facilitate increased access to quality housing in Region 9 is the formation of a Housing Improvement Program (HIP). The creation of a HIP can help property managers who are unable to pay for repairs for their rental units through the facilitation of rehabilitation funds to bring sub-par housing units up to existing building codes, add new units to current properties, or create a unit on a property, which the owner resides on. The creation of a HIP could help ensure that needed repairs are completed, units are expanded and housing unit capacity within communities is built up. Other states have HIPs, such as Vermont, which assist qualified landlords and requires them to provide 20% of matching funds, unbilled services, or owned materials for improvements. Funds are dispersed as grants to assist in these repairs, including updating water systems, plumbing, and outdated fixtures. These grants come with an agreement from landlords to retain rental unit prices at or below the HUD fair market rents for their county for five years. Those seeking to rehabilitate or create new housing units in buildings that currently have renters include requirements that landlords engage with their Coordinated Entry Lead Organizations to find renters for at least five years.[89] These programs can ensure that investments are made to support communities that have vacant or sub-par housing both rehabilitate those homes, as well as grow new rental units that are accessible to those in the community at an affordable rate. Of note – Indiana has implemented programs to support owner-occupied rehabilitation through the Office of Community Development and Rural Affairs.[90] These programs offered generous support for homeowners who needed financial assistance to repair heating/cooling units or roofs, replace water heaters or roofs or increase accessibility to their homes for ADA needs.

Resource Hub

"One stop shop, somebody that could help sit down and navigate people through, okay this is what you need. Let's sign you up for that today. Like meet you where you are in the moment and kind of be readily available."

Some stakeholders suggested forming a centralized area or a resource hub for those experiencing or at risk of experiencing homelessness. This approach provides ease of access for those in need of services alongside housing, such as mental health, social and non-profit services on site, and substance abuse counselors.[91] Taking a resource hub approach to centralizing both temporary housing and service providers in a core location could be a future consideration for Region 9 to pursue.

Housing Navigators

"Having someone, who... walks alongside a voucher holder and really supports them in that process of trying to find a placement."

Housing navigators support clients through their search process and help remove barriers to access. These persons engage with clients and other social service providers to ensure that those who, for example, have a housing voucher can find a unit. Therefore, some of their responsibilities would be to identify and work toward the removal of barriers to housing for clients, including issues related to evictions, criminal records, and credit reports. A housing navigator functions as a first line of defense for those facing discriminatory housing practices and is an educator, advocate and intermediary on behalf of the client.[92]

Transportation Support

"Let's get a fund established at our public transportation so that way there's cash always available, and if someone gets a phone call, they can transport someone to services and the money will be there."

Due to the rurality of Region 9, several stakeholders indicated the acute need for transportation support to help facilitate access to services for those experiencing homelessness. A few stakeholders mentioned resources were spread out across areas of their counties, which creates issues when trying to ensure connections for clients in need. Efforts have been made in other places in Indiana to address the issue of transportation broadly, such as the program called Catch-A-Ride, facilitated by LifeTime (covers Decatur, Ripley, Dearborn, Ohio, Jefferson, and Switzerland counties), which provides scheduled rides for anyone and any purposes, at a reduced cost.[93] Another stakeholder raised the idea of developing a program similar to Samaritan Car Care, which supports families in Kentucky in maintaining a working vehicle.[94]

Fair Housing Center

"I was treated like, you know, they were herding cattle over and they didn't have any humanity about them at all."

Fair Housing Centers are private non-profits focused on increasing housing opportunities for all through removing barriers through efforts that include advocacy, education, and enforcement. In Indiana, there is a Fair Housing Center of Central Indiana, which hosts educational training and supports non-discriminatory housing public policy.[95] The creation of a Fair Housing Center for Region 9 could assist in ensuring that processes are fair and supportive for all who are experiencing housing instability or homelessness.

Housing Ordinances

"If you're going to be a landlord, you have to have your house inspected and it should be by somebody in the same county."

An approach taken by local cities and governmental agencies to address the lack of habitable housing and chronically poor units is the formation of housing ordinances. These ordinances exist in many areas, including cities and county level enforcement, such as New Orleans, LA, Allegheny County, PA, and Tulsa, OK. [96, 97] Some of these efforts include proactive measures, as in the case of Tulsa, OK, where the housing ordinance is enforced by the health department. For this proactive program, code enforcers work alongside the assistant fire marshals to engage in proactive inspections of rentals with 4 or more units.[98] Other programs are more focused on responses to housing issues such as vermin, no heat or raw sewage.[99]

Some have a public facing component such as a property manager database that retains information for the public on poor managers, housing issues and known good property managers.[100, 101] Housing ordinances, therefore, can work as both a proactive and responsive approaches.

Appendix 1: Interview Questions

Indiana Community Action Poverty Institute staff used a semi-structured interview protocol to guide conversations with stakeholders. The questions served as a guide, but staff were also provided the flexibility to ask follow-up questions or follow a participant's train of thought.

Individuals with Direct Experience of Housing Instability

Experience of Housing Instability:

- One of the things we are interested in is people's experiences with housing instability. Can you tell us about your experience?

  Prompt for upstream factors/solutions:

  - What changed in your life to require you to experience instability / need housing assistance?

  - Can you tell me a bit about why you fell short on rent/were evicted

  - What caused your budget shortfall?

  - Can you imagine a program or service that might have prevented you from experiencing this? What would that look like?

Support Services

- Where did you go to seek support?

  For each resource they name:

  - Did that resource provide the help you needed?

  - What would have made that a more helpful resource?

  - How did you know about this resource?

Impacts

- While you were struggling with your housing, how did it affect your:
  - Relationships (partner, child, work, friends & family)

  - Physical health

  - Mental health

  - Budget

  - Spiritual life

  - Other areas I didn't ask about?

Other Experiences

- Have you ever had experiences with:
  - Poor housing quality

  - Going to court for an eviction

Imagined Future

- If you could imagine a world in which everyone had safe, stable housing – what would it take to get there?
- What does the ideal housing situation look like for you?

Unmet Needs

- As I mentioned, we are a program of the Community Action Association and community action agencies offer a variety of programs and services to help Hoosiers who struggle financially. Are there any unmet needs you have, so I can connect you to services in your community?
- Do you have any questions for me?

Other Key Stakeholders

Current Role & Housing Picture:

- Please tell me a little about your role and how it connects to housing stability.

Motivation

- As you think about your community, why does housing matter?
- What motivates you to be part of solutions to promote safe, stable housing?

Landscape

- **STRENGTHS:** As you think about the housing & homeless services landscape in your area, what are the strengths or resources?
- **NEEDS:** What does the community need to be more effective in providing safe, stable homes & community connections to all?

  For each identified need, possible probing questions:

  – Can you think of an example that will help me understand that need better?

  – What could you imagine would fulfill that need?

  – What's currently standing in the way of meeting that need?

- **KNOWLEDGE GAPS:** Are there things you wish you knew about housing & homelessness?
- **CONNECTION/COORDINATION:** Are there tools or strategies you can imagine that would increase the connectedness and knowledge of people who are working toward the goal of housing stability?

Imagined Future

- As you could imagine moving toward a reality in which everyone had safe, stable housing, what role do you see you and/or your organization playing in getting to that imagined future?

Catch All

- What else would you like to share with me about this topic?
- Do you have any questions for me?

Appendix 2: Housing Inventory Count Data (Detailed)

County	Type of Housing	Name of Project	Officially Reported Number of Beds – 2023 (BOS Data)	Estimated Actual Count – March 2024 *	Additional Relevant Information
Wayne	Emergency Shelter Projects	Hope House	5	8	N/A
		Refuge of Hope Homeless Shelter	4	11	N/A
	Permanent Supportive Housing Projects	Dunn S+C	17	16	Located in Gensis Apartments in Richmond
		Redwood Terrace Apartments	15	15	Target HUD defined homeless households. The individuals or families reside: · In places not meant for human habitation, such as cars, parks, sidewalks, abandoned buildings (on the street). ·In an emergency shelter. · In transitional housing for homeless persons who originally came from the streets or emergency shelters. · In any of the above places but is spending a short time (up to 60 consecutive days) in a hospital or other institution.
				34	***Not Under HUD Definition of Homelessness*** Target individuals being discharged within a week from an institution, such as state operated facilities, mental health or substance abuse treatment facility, Community Mental Health Center residential facility or a jail/prison, and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing. These are individuals who could live independently in the community, if provided with supportive housing and who would be at risk of street or sheltered homelessness, if discharged without supportive housing.

Appendix 2: Housing Inventory Count Data (Detailed) – Continued

County	Type of Housing	Name of Project	Officially Reported Number of Beds – 2023 (BOS Data)	Estimated Actual Count – March 2024 *	Additional Relevant Information
Wayne				11	***Not Under HUD Definition of Homelessness*** Individuals and families who are currently housed but are at imminent risk of becoming homeless. (No more than 18% of the units within a specific program can be subsidized with the IHCDA Project Based Voucher Program for individuals and families who are currently housed but at imminent risk.) Risk factors include but are not limited to: · Eviction within two weeks (including family and friends) · Residing in housing that has been condemned · Sudden and significant loss of income · Sudden and significant increase in utilities · Physical disabilities and other chronic health issues · Severe housing cost burden (greater than 50%) · Homeless in the last 12 months · Pending foreclosure of rental housing without resources to find new housing · Overcrowded housing
	Rapid Re-Housing Projects	St. Vincent de Paul SSVF RRH	3	10	They have indicated the capability of serving more individuals beyond this threshold of 10 beds and prioritize assisting homeless veterans.

Appendix 2: Housing Inventory Count Data (Detailed) – Continued

County	Type of Housing	Name of Project	Officially Reported Number of Beds – 2023 (BOS Data)	Estimated Actual Count – March 2024 *	Additional Relevant Information
Rush	NONE				
Union	NONE				
Fayatte	Emergency Shelter Projects	The Shelter Inc Connersville	12	12 (Winter) 6 (Spring, Summer & Fall)	The Shelter Inc. will be temporarily closing for renovations in April 2024, and expects to re-open in a larger space. The new space will increase their capacity substantially to the following estimations: · 22 Men Beds · 22 Women Beds · 3 Bedrooms for Families
		Dunn S+C- Alberta Hopper Apartments	**	1	Required to meet HUD defined homelessness. The additional units at Alberta Hopper is under a different program described as the HOME program. That program has income limits, although some tenants also qualify for tenant-based HUD.
Franklin	Transitional Housing Projects	Franklin Township Trustee TH	1	0/Unknown	In communications with multiple stakeholders and community leaders in Franklin County, there does not appear to be any beds or program named Franklin Township Trustee TH. While there are not resources specifically within Franklin County, individuals are commonly directed according to one stakeholder to organizations such as: · Central Access Point (CAP) Helpline (513-381-7233) Cincinnati, OH · Supportive Services for Veteran Families (SSVF), which is located in Wayne County, IN · Safe Passage, which focuses on Domestic Violence Victims and is located in Batesville, IN

*Information was collected via direct communication (email or phone) between members of the INCAP research team and service providers at these organizations.

Appendix 3: McKinney–Vento Region 9 Homeless Student Liaisons

County	Names of School Districts	Name of Liaison	Contact Information
Wayne	Richmond Community School Corporation	Elizabeth Markward	Office: (765) 973-3398 Fax: (765) 973-3471 elizabethm@rcs.k12.in.us
	Nettle Creek School Corporation	Brad Catey	Phone : (765) 487-4511 Email: bcatey@nettlecreek.k12.in.us
	Northeastern Wayne Schools	Dr. Matthew Hicks	Phone: (765) 847-2821
	Western Wayne Schools Corporation	Abby Wright	Phone: (765) 883-5930
	Centerville -Abington Community Schools	Sam Pritchard	Phone: (765) 966-3911 Email: spritchard@centerville.k12.in.us
Fayette	Fayette County School Corporation	Tricia Fields	Phone: 765-827-7100 Email: tfields@fayette.k12.in.us
Rush	Rush County Schools	Kayleigh Gordon	Gordonk@rushville.k12.in.us
Union	Union County-College Corner Joint School District	Linda Hufferd	Linda.hufferd@uc.k12.in.us
Franklin	Franklin County Community School Corporation	Dr. Tammy Chavis	Tchavis@fccs.k12.in.us

*Information was collected via online research and through direct communication (email or phone) between members of the INCAP Institute team and school corporations

Appendix 4: Department of Education IREAD Pass Rates Region 9

County	Names of School District	2023 IREAD Pass Rate Averages Across Schools[102]
Wayne	Richmond Community School Corporation	73.47%
	Nettle Creek School Corporation	91.50%
	Northeastern Wayne Schools	81.40%
	Western Wayne Schools Corporation	87.20%
	Centerville–Abington Community Schools	89.60%
Fayette	Fayette County School Corporation	77.60%
Rush	Rush County Schools	80.98%
Union	Union County-College Corner Joint School District	89.75%
Franklin	Franklin County Community School Corporation	85.10%

Source: Indiana Department of Education, 2024

Appendix 5: Comparison of CoC/RPC Structures & Meeting Schedules

	Indianapolis CoC	Region 5 Planning Council, Indiana	West Virginia CoC	Ohio BoS CoC

Steering Committee	Blueprint Council (Filled seats vary at a given time)[103]
	· City of Indianapolis (Funder)
	· Office of Public Health & Safety
	· Housing Authority
	· Direct Service Providers
	· Seats (4) for Systems
	  o Veterans
	  o Public Health
	  o FSSA
	  o Cabinet
	· Seats (4) for Funders
	· Faith Leader
	· Business Seat
	· University/Research/ Evaluation Rep.
	· Elected Providers (1 crisis, 1 housing)
	· Lived Experience (2- Paid)
		Small exec committee:
		· Co-chairs
		· Shelter Executive Directors (2)
		· Local government rep.
		· Township Trustee (Meets occasionally)
		
		Larger body:
		· Housing/ Homeless Providers
		· Mental Health, Addiction, Other Social Service
		· Veterans Affairs
		· Housing Authority
		· United Ways
		· CAP
		· McKinney-Vento Liaison
		· Domestic Violence Rep.
			Steering committee: Reps from designated orgs (see bylaws) & individuals, including:
			· Disability rep.
			· Youth rep. (Paid)
			· Veteran rep
			· Domestic Violence Rep.
			· Any other individual or org from the list in bylaws who commits to attending 2/3 meetings[104]
				Board:
				· One rep from each region
				· At-large members chosen by application once per year
				· Lived experience (Paid)
				· Up to 35 seats
				
				Regional:
				· Minimal requirements
				· Meet at least quarterly
				· Select representative to CoC

Meetings	Bimonthly & one yearly retreat[105] Quorum requirement of 8 members for Blueprint council meetings	Bimonthly to discuss current initiatives & provide education	Meets bimonthly Chairs of each subcommittee have a voting seat on the committee[106] Must have 8 present for voting, approving minutes	

Information was primarily collected via interviews with individuals engaged in these entities with secondary research conducted to corroborate findings.

Appendix 5: Comparison of CoC/RPC Structures & Meeting Schedules (Continued)

	Indianapolis CoC	Region 5 Planning Council, Indiana	West Virginia CoC	Ohio BoS CoC
Subcommittees/ Workgroups (WG)	• Coordinated Entry Systems (CES): CoC refinement (to plan new CE tool) • Sub-workgroup CES Measuring Service Needs for Youth & Young Adults • HMIS User Group • Quarterly HMIS Advisory WG • Data/HMIS (works with coordinator on PIT) • Housing Command Center • Case conferencing (weekly) • CoC non-conflicted funding (NOFO) WG • CoC NOFO Service Provider WG[107]	• PIT committee • HMIS committee • Case conferencing	• Outreach • Youth • Veteran • Victim Service Providers • HMIS end user • Rating & ranking (funding) • Might add aging	• Project Evaluation Workgroup: o Performance and outcomes – identify project level performance measures & reporting • Coordinated Entry Workgroup – designing a new assessment tool (currently) • Design project evaluation • Veterans' workgroup • Youth Action Board (compensation) • Lived Experience Action Board[108]
Funding	City applies for some & 501c3 coalition applies for private/ foundation They have several private funders on their blueprint council.[109]	Shares opportunities with general body & they apply	Started with coalition lead applying – just volunteer, now have a dedicated fundraiser, 501c3 status Managed care funding	

Information was primarily collected via interviews with individuals engaged in these entities with secondary research conducted to corroborate findings.

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