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*strategies*

THE COMMUNITY CONNECTION

**COLUMBUS AND FRANKLIN COUNTY**

**COMPREHENSIVE COMMUNITY ASSESSMENT TECHNICAL REPORT**

**Prepared for Community Shelter Board by Focus Strategies**

09 • 27 • 2024



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# INTRODUCTION AND OVERVIEW OF THE COMPREHENSIVE COMMUNITY ASSESSMENT

## **INTRODUCTION TO THE TECHNICAL REPORT**

Community Shelter Board (CSB), on behalf of key funders and leaders of homelessness response in the region - the City of Columbus, Franklin County, and the Columbus Partnership - commissioned Focus Strategies to conduct a Comprehensive Community Assessment (“Assessment”) for Columbus and Franklin County. Key findings from the Assessment and recommendations to create a more equitable, efficient, and effective homelessness response system are summarized in the final report.

This technical report is a companion document to the final report. It includes sections summarizing each major data collection activity and analysis conducted during the Assessment.

## **BACKGROUND ON THE COMMUNITY ASSESSMENT**

Over an almost two-year period (November 2022 through September 2024), Focus Strategies conducted a series of data collection and analysis efforts to assess the Columbus and Franklin County homelessness response system. Additional community feedback from people with lived experience of homelessness, CSB-contracted service providers, the Continuum of Care, and the community at-large was collected and analyzed by local firm RAMA Consulting and incorporated into the findings.

The Assessment was designed to understand and describe the “current state” of the homelessness response system in the community, combined with using custom statistical tools to model future system performance. The current state of the system was used to engage community leaders in the difficult trade-off discussions that would yield a “desired end state” or shared vision of the future of the community’s homelessness response system. That shared vision formed the foundation for critical policy and program development.

After discussing learnings on the current state of the system and community dynamics from early Assessment activities with CSB’s leadership team, Focus Strategies and CSB agreed that a broader engagement process than originally planned was needed to define the challenges



the Assessment was meant to address and develop a truly inclusive shared vision for how to address them.

In 2023, the project was extended and expanded to:

1. Broaden the Assessment Steering Committee to ensure a broader range of voices informed the progress and outcomes of the Assessment.<sup>1</sup>
2. Expand the breadth of local stakeholder engagement through a contract with RAMA Consulting, a Columbus-based firm specializing in community and stakeholder engagement.

The Assessment process, as amended above, included several data collection efforts and analyses designed to identify findings and inform recommendations related to the following questions:

- What is the current state of the homelessness response system in Franklin County, as articulated by representative community stakeholders and as reflected in the data?
- What are the primary concerns about activities and strategies currently underway to respond to homelessness and the housing needs of extremely low-income residents?
- What could work better to more equitably, efficiently, and effectively respond to homelessness now and into the future?
- What are the community's options for investing resources? What are the estimated impacts of those choices on the size of the unhoused population?
- What is the community's vision for its homelessness response in the future? What strategies are most likely to realize that vision?

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<sup>1</sup> The Assessment Steering Committee included members from local government, homelessness services and housing providers, advocacy and policy organizations, and other systems of care, including the behavioral health system. Additional information on the Steering Committee is included later in this document.



## **ASSESSMENT COMPONENTS**

The Assessment is based on information from six different components which informed recommendations. Details about the methods for each Assessment component and the recommendations follow. Each activity or analysis and the recommendations listed in this section has a corresponding summary report of findings included in this Technical Report.

### **1. Document Review**

Focus Strategies conducted a review of community and homelessness response system documents including major plans and reports on housing, homelessness, and related community issues; data and evaluation reports; program and system manuals; funding applications; and meeting minutes. Documents were read and analyzed to better understand policy priorities, current initiatives and implementation efforts; program and system performance; governance and decision-making structures; and system components, programs, and structures. The document review was completed in July 2023.

### **2. Steering Committee Interviews**

Small group interviews were conducted with members of the Steering Committee in July and August 2023. A total of 15 Steering Committee members or their designees participated in six interviews. Three interviews were conducted in small groups of 3 - 5 participants. Three individual interviews were conducted to accommodate scheduling challenges. The interviews used a semi-structured approach that enabled Focus Strategies to ask specific questions while allowing the conversations to surface new and nuanced information.

During the interviews, participants shared information on current strengths of the system and opportunities for improvement, their visions for the future, and insights on community dynamics. Interview facilitators took written notes during the interviews and interviews were also recorded. Notes from the interviews were analyzed to identify themes that emerged across interview groups. Findings from the Steering Committee interviews were shared with the Steering Committee in October 2023.



### 3. System Modeling

As part of the Assessment, Focus Strategies used the second generation of its tool, the System Performance Predictor model (SPP2),<sup>2</sup> to use local data to project future rates of homelessness. These projections were informed by anticipated changes to the economic and demographic landscape of the region and by the current resources and performance of the homelessness response system.

The modeling process included two phases. The *baseline model* used current system performance and assumed that the community's current housing affordability crisis will drive a decline in program outcomes and an increase in the number of people entering homelessness each year. *Future state models* used different scenarios to explore how rates of homelessness may change from the baseline model if the system invests in different strategies.

#### **Phase 1: Developing the Baseline Model**

To develop the baseline model in Phase 1, Focus Strategies gathered information and data about the context and performance of the homelessness response system as well as external factors, such as changes in rental vacancies, that may contribute to changes in inflow into homelessness over time. This provided Focus Strategies with an understanding of how the local homelessness response system operates and served as the basis for tailoring the model to reflect the current state of the system. Focus Strategies then conducted an initial run of the model with the provided data to identify any areas in which additional or revised data were needed.

The final step in the first phase was to calibrate the model parameters and validate the results. This step involved collaboratively reviewing and confirming measurements with CSB for the data inputs (such as determining how to accurately estimate the number of people newly homeless in the community each year), reviewing the internal consistency of modeling results, and fine tuning the baseline model to accurately reflect system flow and performance. The first phase resulted in projections of how the number of people experiencing homelessness in the community may change over time assuming the system continues to

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<sup>2</sup> The SPP2 builds on an earlier version of the System Performance Predictor, part of the System-Wide Analytics and Projection suite of tools jointly developed by Focus Strategies and the National Alliance to End Homelessness.





operate in its current state. The baseline model developed during Phase 1 was presented to the Steering Committee for discussion in August 2023.

## **Phase 2: Developing Future State Models and Analyzing Gaps**

The second phase of system modeling involved working with CSB and the Steering Committee to design scenarios that could achieve the community's desired future state system, calculating the impact of each scenario on the number of people experiencing homelessness, and estimating the resources needed to bridge the gaps between the baseline and future states. In Phase 2, Focus Strategies modeled several different scenarios which were informed by group discussions with the Steering Committee as well as community engagement efforts facilitated by RAMA. These scenarios included potential changes to system performance, capacity, and resources. Iterative versions of the future state models were presented March 2024 and June 2024, and a final version was selected by the Steering Committee in July 2024.

The final steps in Phase 2 included comparing the selected future state model to the baseline and estimating the net new development capital and operating and services costs (i.e., costs beyond the current and planned resources in the system) needed to achieve the projected outcomes. Focus Strategies used the modeling results and cost estimates to inform recommendations.

## **4. Comparable Communities Analysis**

Focus Strategies conducted an analysis to compare changes in local housing markets (median rent and rental vacancy rates), the inventory of shelter and permanent housing, and the number of people experiencing homelessness between Columbus and Franklin County and three comparable communities (Minneapolis/Hennepin County, Charlotte/Mecklenburg County, and Austin/Travis County). Comparable communities were selected based on similarities in total population size, total population growth, economic growth, rental market characteristics, homeless population size and per capita rate, and dedicated shelter and housing resources. This analysis provided context for understanding how other communities have adjusted their allocation of resources in the homelessness response system, particularly in the context of population growth and changes in the housing market. Findings from the comparable communities analysis were presented to the Steering Committee in October 2023.



## **5. Funding Model Analysis**

To respond to questions raised regarding the efficacy of the current funding structure for Columbus and Franklin County, Focus Strategies compiled and shared information on homelessness response funding models and integrated information on housing market trends, which are strong predictors of rates of homelessness. Findings from the analysis were shared with the Steering Committee in March 2024 and were used to inform Assessment recommendations related to how funding is secured and allocated in the community.

## **6. Community Engagement**

RAMA Consulting led community engagement efforts, which included conducting interviews and focus groups and administering community surveys to gather input from people with lived experience of homelessness, CSB-contracted providers, other organizations in the community serving people who are homeless or housing insecure, the Continuum of Care, and the community at-large. Community engagement activities were conducted from March - June 2024. RAMA summarized the information gathered and themes that emerged across the community engagement activities in a Key Themes Report. RAMA presented a summary of findings to the Steering Committee in June 2024. Findings from the community engagement activities provided information regarding experiences with the homelessness response system and informed recommendations related to improving the system to dynamically respond to community needs.

## **7. Assessment Recommendations**

Assessment recommendations were generated from findings across all of the above analyses. Focus Strategies compiled the recommendations into a separate document and included a recommended process for implementation. This document was completed in July 2024.

## **STEERING COMMITTEE**

A Steering Committee, composed of people with lived experience of homelessness and representatives and leaders from local government, businesses, and nonprofit service providers and advocacy organizations, guided the Assessment. The members of the Steering Committee were selected to ensure a broad range of voices informed the progress and outcomes of the Assessment. The Steering Committee met at strategic points in the



Assessment process, between June 2023 and August 2024, to define a desired future state for the community, review and discuss findings from analyses and associated recommendations, and plan for implementation of Assessment recommendations. A list of Steering Committee members is included below.

### **Assessment Steering Committee Members**

Barabara Benham, Huntington

Carlie Boos, Affordable Housing Alliance of Central Ohio

Susan Carroll-Boser, White Castle

Elizabeth Brown, YWCA Columbus

Tony Collins, YMCA of Central Ohio

Lisa Courtice, United Way of Central Ohio

The Honorable Erica Crawley, Franklin County Board of Commissioners

The Honorable Shannon Hardin, Columbus City Council

Stephanie Hightower, Columbus Urban League

Shannon TL Isom, Community Shelter Board

Chad Jester, Nationwide

Erika Clark Jones, ADAMH

Rachel Lustig, Lutheran Social Services of Central Ohio

Jeff Polesovsky, Columbus Partnership

Sheila Prillerman, Retired Veteran and Homeless Advocate

Sherrice Sledge-Thomas,<sup>3</sup> Columbus Chamber of Commerce

Michael Stevens, City of Columbus

Sonya Thesing, Huckleberry House

Kenneth Wilson, Franklin County Board of Commissioners

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<sup>3</sup> Sherrice Sledge-Thomas sat on the Assessment Steering Committee in her role of Vice-President of Diversity, Equity, Inclusion, and Access for the Columbus Chamber of Commerce. She transitioned into the role of Chief People + Culture Officer at Community Shelter Board in 2024.



# 1. DOCUMENT REVIEW SUMMARY

## INTRODUCTION

The information-gathering phase of the Comprehensive Community Assessment for Columbus and Franklin County included a review of critical planning documents and data reports for the homelessness response system and housing market. These documents included notes and minutes from Continuum of Care (CoC) meetings, funding Requests for Proposals released by Community Shelter Board (CSB), homelessness response system data reports, local and regional housing, anti-poverty, and community development and recovery plans, and others.

The document review process provided Focus Strategies with a baseline understanding of the policies, systems, programs, and entities impacting Central Ohio's response to homelessness and housing insecurity and illuminates opportunities to strengthen and improve community wellbeing. Through the document review, five major themes emerged:

- 1.** Some of the homelessness response system metrics show declining performance over recent years, particularly for interventions relying on leasing units on the private rental market. Planning documents demonstrate limited availability of affordable housing. Cumulatively, community plans and data report current efforts and conditions do not meet community needs.
- 2.** The community is working to turn the tide. Plans and documents sharing information about efforts underway indicate many leaders aim to improve community wellbeing by strengthening the homelessness response system and increasing the availability of affordable housing.
- 3.** Efforts to engage the community, noted in the documents, are inconsistent and described as top-down in their approach. In addition, those in decision-making roles do not appear to reflect and represent the demographics of the community.
- 4.** The relationship between homeless population dynamics and housing market conditions is typically strong but complex. Local planning, policy, and data documents usually focus on either homelessness or the housing market, suggesting homelessness and housing issues are addressed as separate concerns.



5. CSB's role as the coordinating entity of the homelessness response system along with their status as a Unified Funding Agency<sup>4</sup> (UFA) allow CSB to create an efficient and streamlined funding process for the homelessness response system.

## KEY FINDINGS

### A. Current Status and Performance of Homelessness Response and Affordable Housing

Several homelessness response system data and performance reports are publicly available on CSB's website and others were provided by CSB staff. Many other community planning documents included data and trends related to homelessness and housing. Several documents note that housing accessibility and affordability are not new issues but have impacted the community and homelessness response system performance for several years.

According to the *System & Program Indicator Report* for FY22, some indicators of program and system performance have declined over recent years.

- The system began counting exits to family as a successful housing outcome in FY15 and exits to friends as a successful housing outcome in FY18. Even with an expansion of the definition of successful outcomes, the percentage of households in emergency shelter achieving a successful housing outcome has decreased from a high of 38% in FY13 to 17% in FY22. This falls short of the system's goal of 30% achieving successful housing outcomes.
- The annual average length of stay in emergency shelter (for all populations) increased from a low of 41 days (in FY13, FY14, and FY15) to 66 days in FY2022. The increase is most noticeable in the family shelter system where the annual average length of stay increased from 20 days in FY13 to 73 days in FY22.
- Annual successful housing outcomes for rapid rehousing have decreased from 91% achieving successful outcomes in FY13 to 56% in FY22.

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<sup>4</sup> Unified Funding Agency (UFA) is a HUD-approved designation for Continuum of Care collaborative applicants. UFAs are the sole grant recipient for funds in the Continuum of Care and are responsible for executing and monitoring grant agreements with all funded programs in the CoC. Additional information on UFAs can be found at <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-ufas/what-is-a-ufa/>



- The annual occupancy rate of all permanent supportive housing units decreased from 100% occupancy in FY13 to 89% occupancy in FY22.

Members of the CoC report struggling to find landlords with market rentals to lease to households experiencing homelessness. This is also noted as a factor affecting the occupancy rate for scattered site permanent housing in the *System & Program Indicator Report*. Additional factors affecting the performance of the homelessness response system noted in the *System & Program Indicator Report* include issues securing documentation for people, such as social security cards and IDs, particularly when offices were closed to in-person visits during the COVID-19 pandemic, and difficulties keeping housing programs fully staffed.

Some components of the homelessness response system are meeting performance targets. The prevention system hit all performance targets for FY22, according to the *System & Program Indicator Report*. A record number of 1,105 households were served in FY22 and 91% of households had a successful housing outcome, exceeding the system's goal of 80% achieving successful housing outcomes. Permanent supportive housing also maintained high successful housing outcomes over time, with 96% of households in permanent supportive housing achieving successful housing outcomes in FY22.

Rates of homelessness have recently increased to the highest levels seen in the community. According to the 2023 Point-in-Time (PIT) Count, Columbus and Franklin County experienced a 22% increase in people experiencing homelessness from 2022 (from 1,839 people identified in 2022 to 2,337 in 2023). Just over 21% of people identified through the PIT were staying in unsheltered locations.

Historically, the community has invested in shelter and committed to ensuring no family is left unsheltered. Input from stakeholders collected through CSB's *Brand Realignment Assessment* in 2018 indicated the homeless response system's success with sheltering people has led to the community not recognizing homelessness as a critical issue because it is largely unseen. While these stakeholders communicated Central Ohio has much shelter, some distinguished Columbus and Franklin County's approach from other communities and characterized other communities' sheltering responses as "warehousing" people. Overall, the storyline conveyed by stakeholders was that Central Ohio was successful in sheltering people - especially families - and people were assisted to move on to permanent housing. As documented in recent performance reports, indicators related to permanent housing access



have declined. There is not more recent qualitative data available regarding leaders' and stakeholders' perceptions of the homelessness response system, and the narrative constructed through the *Brand Realignment Assessment* in 2018 no longer aligns with local data.

## **B. Efforts Underway**

The community has a strong commitment to data-informed planning as evidenced by the number of planning documents provided through the information-gathering stage of the community assessment. Focus Strategies received far more documents in response to our document request than are typically received from communities engaged in similar assessment processes. A total of 49 documents and websites were reviewed, while similar sized communities typically provide a dozen or fewer documents.

Analytic and planning work recently completed in the region deliver rich information about the regional housing market. The Mid-Ohio Regional Planning Commission (MORPC) and the Affordable Housing Alliance have both recently developed strategic plans. MORPC's *Regional Housing Strategy* spans the entire housing spectrum but highlights critical issues impacting low-income households, including a limited supply of low-income homes and housing instability among low-income households. The Affordable Housing Alliance's *Strategic Plan* specifically focuses on bridging the housing affordability gap in Central Ohio.

Through the document review, Focus Strategies also learned the City of Columbus is updating the zoning code. According to the City of Columbus's website, *Zone In Columbus*, the City has conducted assessments, worked with consultants to analyze current zoning issues, and engaged the public in the process. City Council is expected to review and consider a new code in spring 2024.

In addition to these documents, the *Analysis of Housing Need for the Columbus Region* released by the Building Industry Association of Central Ohio provides further estimates of housing development needs across a 10-county area in Central Ohio. The *Recovery and Resiliency Advisory Committee Final Report and Recommendations* highlights the need to address housing access and housing stability and reinforces the need to implement changes called for in housing plans, specifically MORPC's *Regional Housing Strategy*.



## C. Participation and Representation

Many community and CoC documents reference participation, inclusion, and equity. Collectively, these documents indicate the community would benefit from examining and restructuring participation strategies and tactics.

- CoC meeting minutes indicate there are many grassroots organizations that have not been historically involved in the CoC, and the CoC hosted a listening session with these organizations as part of the process to update the community plan in 2022.
- According to a DEI survey conducted by the CoC and shared with CoC members, white people are overrepresented in CoC membership compared to the population served and Black people are underrepresented. The CoC is intentionally recruiting individuals to build a more diverse membership. According to the CoC's *DEI Strategy - 2023 Progress Report*, the CoC recruited nine new members in 2023; of the new members, 67% are Black, 78% are female, and 11% identify as transgender. CoC membership is now closer to representing the demographics of Franklin County, but additional work is needed for CoC membership to reflect the demographic make-up of people experiencing homelessness in Central Ohio.
- *A Place to Call Home: A Framework for Action to Address Homelessness in Columbus and Franklin County, OH*, includes advancing equity as a goal area of the plan. Reducing disparities and ensuring equity in outcomes is also identified as a guiding principle. The *System & Program Indicator Report* has included data about who is accessing different programs by race and gender and provided information on the proportion of successful exits by race and gender for special populations including families, veterans, pregnant women, and transition age youth. Beginning in FY23, the *System & Program Indicator Report* also started reporting successful housing outcomes, broken down by race and gender, for single adults. Other performance indicators, such as length of stay in programs and rates of returns to homelessness, are not reported by demographic subpopulations.
- Membership on the CoC prescribed in the Charter includes many important players, although some valuable entities are missing. For example, disability advocates and organizations are not represented on the CoC and do not participate in coordinated entry according to the 2022 CoC application. According to the YWCA *Housing Justice Advocacy Platform*, people with disabilities are among those most marginalized from accessing affordable housing and could provide valuable insight to decision-making.





- According to *A Place To Call Home*, one performance indicator of the homelessness response system is "high client satisfaction." Performance information in the *System & Program Indicator Report* and *Program Evaluation* report use HMIS data; therefore, client satisfaction is not reported.
- The CoC has established a Citizen's Advisory Council (CAC) and Youth Action Board (YAB). Both groups participate in CoC membership and the CAC also participates in CoC Board and CSB Board. The involvement of CAC and YAB members is framed as participating in established forums. The degree to which people with lived experience can shape *how* they want to engage in decision-making and create those structures is unclear. The composition of the membership of these groups is unknown, based on the document review, and therefore the degree to which CAC and YAB membership reflect the population served is unknown.

#### **D. Distinct Homelessness and Affordable Housing Responses**

The homelessness response system and the network of affordable housing providers and funders appear to operate separately, although they are linked in their effects on the community. The impacts of limited availability of affordable housing are seen in homelessness system performance data, particularly related to scattered site permanent supportive housing and rapid rehousing which rely on renting properties on the private market.

According to MORPC's *Regional Housing Plan*, key factors impacting the availability of affordable housing for low-income households include:

- Inconsistent development requirements and policies across jurisdictions
- Difficulty ensuring long-term affordability of properties
- Local politics and neighborhood challenges to denser development and low-income developments

The *Regional Housing Plan* also cites a limited supply of rental assistance as an issue facing the housing landscape in Central Ohio. However, as noted in Section A, data from the homelessness response system indicate programs using tenant-based rental assistance to lease units in the private market have declined in performance.



The lack of affordable housing impacts racial groups differently. According to the Affordable Housing Alliance, in Central Ohio, Black renters have the highest rate of severe cost burden. As reported in the *System & Program Indicator Report*, Black individuals and households also disproportionately experience homelessness in Central Ohio. The City of Columbus is currently revising the zoning code. One goal of this process is to correct inequities from past community development policies that marginalized and harmed communities of color and particularly Black neighborhoods and communities.

Affordable housing is recognized as a critical need to support the homelessness response system. As is the case in most communities, strategic planning for homelessness response and for affordable housing are facilitated by different entities. Generally, the homelessness response system effects change through programmatic and administrative/program policy changes within the system, as evidenced in *A Place to Call Home*. As seen in affordable housing planning documents, affordable housing providers and policy experts, by contrast, often advocate for municipal, county, and state policy change.

## **E. Community Funding Structure**

CSB has substantial oversight and authority to allocate and administer funds for homelessness response, as compared to other homelessness response lead agencies across the country. This is due, in part, to their status as a Unified Funding Agency (UFA). As a UFA, CSB assumes greater responsibility for administration and oversight of federal funds but has greater flexibility to allocate resources.

CSB releases a single Gateway Application for funding for prevention and diversion, shelter and street outreach, and housing services. Over 13 sources of funding from federal, State, County, City, private, and non-profit entities are blended to award funds through this single funding opportunity to applicant organizations. As noted in the Gateway Application, this centralized funding process creates efficiency, establishes common standards, and provides a pathway for holding housing and service providers accountable for program outcomes.

In addition to the efficiency and coordination stemming from this funding structure, the Columbus and Franklin County Continuum of Care's application to HUD scored above the national median score, indicating the CoC has many effective practices, partnerships, and processes in place, as compared with other Continuums of Care.



## **CONCLUSION**

The Central Ohio region has a wealth of robust data, information, and planning and policy documents, which convey a commitment to understanding what is happening in the community, to addressing challenges the community is facing, and to using data to inform strategy. Entities in the region have developed several plans to respond to current and anticipated future concerns. These efforts are often collaborative, with multiple partners coming together to develop plans and strategies and create solutions to pressing community issues.



## 2. STEERING COMMITTEE INTERVIEWS SUMMARY

### BACKGROUND

Focus Strategies conducted a series of six virtual interviews in July and August 2023 with members and designees of the Comprehensive Community Assessment Steering Committee for Columbus and Franklin County.<sup>5</sup> The Assessment is a comprehensive analysis of the current homelessness response system and anticipated housing market changes. It includes recommendations for the region that, when implemented, will lead to a future where stable housing and effective, immediate crisis response are the norm for all. Steering Committee interviews provided valuable insights into the current state of the community, strengths and challenges, and opportunities to better meet emerging needs.

The Steering Committee includes members from the public, non-profit, and private sectors. A total of 15 Steering Committee members or their designees participated in interviews. Three interviews were conducted in small groups of 3 - 5 participants. Three individual interviews were conducted to accommodate scheduling challenges. The interviews used a semi-structured approach that enabled Focus Strategies to ask specific questions while allowing the conversation to surface nuanced community dynamics. This summary synthesizes the key themes from the interviews and reflects the opinions and views of the participants. Information gathered during the Steering Committee interviews informed the approach to later analyses and community engagement activities of the Comprehensive Community Assessment.

### SUMMARY

#### A. Growth of the Community

Participants in all interview sessions cited general population and economic growth as one of the most important strengths of the Columbus/Franklin County region. Interviewees noted that Columbus has been one of the fastest growing cities in the Midwest and in the country over the past decade, and that the region is projected to continue growing quickly for the foreseeable future. Participants asserted the growth is driven, in part, by a strong, diversified

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<sup>5</sup> A list of Steering Committee members and their designees, denoting those who participated in an interview, is provided at the end of this section.



economy that has attracted substantial investment from the business community, including development of new facilities and significant job creation.

Participants in each interview session also pointed to the challenges that growth brings. Interviewees expressed that general population growth brings concomitant growth in the number of people who are low-income, at-risk of homelessness, or experiencing homelessness. Correspondingly, there is greater need for services and support for people to access or retain housing. Some participants expressed that housing construction and wage growth have lagged overall economic growth, contributing to rising prices and reduced affordability. In addition, it was observed that growth has been uneven and has exacerbated racial and geographic disparities.

Participants in three interview sessions highlighted the challenges around homelessness that other fast-growing, mid-sized cities have faced and indicated that Columbus and Franklin County are at an inflection point. These participants noted the region is on the cusp of becoming a large metropolitan area and that with proper planning, some of the challenges of larger cities may be avoided. Planning for affordable housing development, workforce development, and related supports (e.g., childcare, behavioral health services), was seen as a crucial need in the community.

## **B. Partnerships and Collaboration**

Participants identified partnerships and collaboration as both a strength and challenge in the community. Participants in most interview sessions referenced the “Columbus Way” and felt the community has a collaborative, open atmosphere in which people from the public and private sectors come together to create strategies and solutions on a variety of issues. Participants highlighted a few agencies that operate with this collaborative approach, including the Community Shelter Board.

While collaboration was seen as a strength overall, participants in each interview session also identified challenges that inhibit effective partnerships. A few interviewees said the expectation for extensive collaboration can at times impede bold action as it is expected everyone is aligned before moving forward. Participants in three interview sessions indicated collaboration can lead to the creation of detailed plans, but the community often lacks follow through to implement those plans.



Participants in a few interview sessions discussed challenges working across sectors, particularly between non-profits and state and local governments. Some interviewees stated that government can be overly focused on short-term impacts, to the detriment of the long-term planning and stability needed to effectively address homelessness. Participants also discussed a lack of clarity from government funders and some tensions that emerge between funders and funded agencies. Tensions often stem from the administrative burden accompanying many funding streams and the challenges inherent in addressing deep-rooted problems in the community with often limited and precarious resources and competing priorities.

Participants in three interviews noted the way partnerships and collaboration occur in the community may exclude some voices and perspectives. Participants cited a need to build on the collaborative spirit of the community and expand the scope of collaboration to include representatives from related sectors (e.g., behavioral health), people with lived experience, and the broader community.

### **C. Homelessness, Housing, and Upstream Systems**

The need to broaden the conversation around homelessness to include affordable housing and other systems was another emergent theme. Some participants stated that homelessness does not occur in isolation and is inextricably linked to the failures of other systems, including housing and behavioral health, and voiced the need to move upstream to reduce the inflow into homelessness. Several interviewees felt that addressing issues like mental health, substance use, and violence was necessary to ensure housing solutions are sustainable. Other participants noted that while services and supports are important, mental health and substance use are not the primary causes of homelessness. Rather, these conditions are best addressed in a stable housing situation.

Several interviewees noted that affordable housing tends to dominate discussions in the community. Some participants stated that conversations tend to revolve around building market rate housing or units that are affordable to households just below the area median income, rather than focusing on solutions like subsidized housing and/or housing affordable to extremely low-income households. On the other hand, one participant observed that homelessness is moving from being seen as a human services issue into a housing and infrastructure issue. Some participants emphasized the need to more effectively demonstrate how the housing market impacts homelessness and address affordable housing and



homelessness concurrently. Others thought that homelessness is distinct from affordable housing and these issues should be addressed separately but with the same level of urgency and focus.

#### **D. Leadership and Accountability**

Opportunities and challenges around leadership and accountability were a frequent theme across interview sessions. Participants pointed to an influx of new leaders in the community and a need for region-wide vision, goals, and accountability structures.

Several interviewees highlighted the challenges tied to a recent infusion of new leaders in the non-profit sector, while also expressing the potential those changes had to transform the way that things get done in the community. According to some participants, leadership and power used to be more centralized and hierarchical, such that a few key players could get together to make things happen. More recently, there has been a diffusion of power as more new organizations have formed and new CEOs have come onboard. The infusion of new leaders has been particularly pronounced in the housing and homelessness sector, including new CEOs at the majority of agencies that provide shelter in the region. While participants expressed excitement around the energy and ideas that new leaders bring, some also expressed challenges related to the loss of institutional knowledge and the need to determine how to best move initiatives forward in this new era.

Relatedly, several participants wanted to see more accountability and leadership at the larger, 11-county regional level. While a few participants noted that organizations like the Mid-Ohio Regional Planning Commission and the Affordable Housing Alliance of Central Ohio provide regional leadership around affordable housing, some interviewees noted that there is no broader regional structure in place and no entity responsible for coordinating a response to homelessness across jurisdictions. Several participants felt suburban communities and counties need to come to the table, including providing more resources and sharing responsibility to effectively respond to homelessness.

The lack of a clear accountability structure is exacerbated by the disconnect between the homelessness and housing systems and the diffusion of funding and authority. Participants noted there are several disparate conversations about housing and homelessness, rather than providers and jurisdictions coming together to work on a unified approach. Similarly, some participants stated it can be difficult to determine who is in charge, given that funding,



resources, and oversight are flowing from more sources than before. For example, providers may now receive funding from CSB, the County, and the City, and each entity may have its own standards and reporting requirements. Participants observed the result is a more fragmented system and indicated a unifying vision in which each entity has a clear role is needed to drive accountability.

### **E. Community Perspectives and Equity**

Participants in most interview sessions expressed concern that the community as a whole does not have a sense of urgency around addressing homelessness. Some interviewees believed the lack of urgency is driven by racial and economic segregation, as some parts of the community may not be aware of the substantial challenges experienced in other parts of the community. Participants in a few interview sessions stated that homelessness tends to be more hidden in the region as compared to other cities across the country, and one participant indicated the large geographic area and lower density of Columbus relative to many other cities may partially explain why homelessness is less visible.

Participants pointed to the need for a new narrative that commands attention and helps people work together for the common good. Some interviewees highlighted the need to communicate and educate the community on how homelessness manifests in Columbus and Franklin County and the ways it is changing in both scale and acuity.

Participants in three interview sessions discussed how racial and economic segregation in the community may hinder efforts to build will and address homelessness. While overall, participants felt that Columbus and Franklin County exhibit the desire to be a welcoming community, they did not detail specific strategies and activities underway to disrupt the disproportionalities and disparities embedded in current systems.

### **F. Resources and Sustainability**

A final theme that emerged across interviews was challenges related to resources, particularly the lack of dedicated, long-term funding that can be deployed strategically. Participants recognized that substantial, dedicated funding is needed to effectively address homelessness but cautioned that identifying a funding source to address strategic and emerging needs may be difficult.

Some participants expressed there is an overreliance on and unrealistic expectation that the system can continue to operate effectively with a significant portion of funds raised from





private sources. It was noted that non-profits are being asked to do more with less and current funding structures result in challenges in achieving outcomes and competition for limited resources. Participants indicated this tension has resulted in a narrative in some parts of the community that believe non-profits are inefficient. These participants also noted system and program outcomes are negatively impacted by low pay among service provider staff, particularly for frontline staff working closely with people experiencing homelessness, because these staff are often housing insecure themselves and turnover is high. When frontline staff are disproportionately People of Color, as compared to the manager and executive levels, there is another disparity, for which solutions have not been identified. Participants in some interview sessions discussed the need to build political will and cross-sector buy-in to secure sustainable funding by creating a long-term and innovative strategy that is built on both high standards and trust.

## **CONCLUSION**

Through these interviews, Steering Committee members identified strengths and challenges in the community, along with emerging opportunities to effect change. Findings from the interviews informed other activities in the Comprehensive Community Assessment in two primary ways.

First, several interviewees shared initial thoughts and ideas regarding how the community could move forward to respond to homelessness more effectively and equitably. These ideas informed recommendations by providing valuable context on the viability or relevancy of different strategic options.

Second, while there were many points of agreement across interview sessions, on some topics, interviewees shared different perspectives. These different views offer opportunities for shared learning, which was an important part of the process to develop strategies that are grounded in community and take into account the breadth of different experiences and perspectives.



## STEERING COMMITTEE MEMBERS AND DESIGNEES

Name	Role(s)	Affiliation
Barbara Benham	Executive Vice President and Chief Public Affairs Officer, CSB Board Member	Huntington
Carlie Boos*	CEO	Affordable Housing Alliance of Central Ohio
Susan Carroll-Boser*	Chief Information Officer, CSB Board Member	White Castle, CSB Board Member
Elizabeth Brown*	President & CEO	YWCA Columbus
Tony Collins*	President/CEO	YMCA of Central Ohio
Lisa Courtice*	President & CEO	United Way of Central Ohio
The Honorable Erica Crawley	Commissioner	Franklin County Board of Commissioners
The Honorable Shannon Hardin	President	Columbus City Council
Mike Brown*	Chief of Staff for Council President Hardin	Columbus City Council
Chris Maitland*	Legislative Analyst	Columbus City Council
Stephanie Hightower	President & CEO	Columbus Urban League
Chad Jester*	Vice President of Corporate Citizenship & President of Nationwide Foundation	Nationwide
Erika Clark Jones*	CEO	ADAMH
Rachel Lustig*	President & CEO	Lutheran Social Services of Central Ohio
Kenny McDonald	President & CEO	Columbus Partnership
Jeff Polesovsky*	Vice President, Public Policy	Columbus Partnership
Sheila Prillerman	CSB Board Member	Retired Veteran & Advocate
Michael Stevens*	Director of Development, CSB Board Member	City of Columbus, CSB Board Member
Sonya Thesing*	Executive Director	Huckleberry House
Sherrice Thomas*	VP of Diversity, Equity, Inclusion & Access, CSB Board Member	Columbus Chamber, CSB Board Member
Kenneth Wilson*	County Administrator	Franklin County Board of Commissioners

\*Denotes Steering Committee members or their designees who participated in an interview.



## 3. SYSTEM MODELING PROCESS AND RESULTS

### INTRODUCTION TO SYSTEM MODELING

#### A. Background

As part of the Comprehensive Community Assessment, Focus Strategies used the second generation of its System Performance Predictor model (SPP2)<sup>6</sup> to develop projections of system outcomes. These projections are informed by anticipated changes to the economic and demographic landscape of the region and by the resources and current performance of the homelessness response system based on information provided by Community Shelter Board (CSB).

The SPP2 uses local data to understand what the homelessness response system is currently accomplishing and to plan and prioritize changes needed to bring about the greatest feasible reduction in homelessness. The SPP2 allows communities to make projections about the outcomes of changes to system inventory (number of beds and units) and system performance (lengths of time in programs and exit destinations). The model illustrates the potential impact of implementing specific strategies, which typically include adding new programs to serve people experiencing homelessness and/or increasing the rate of exits from programs within the homelessness response system and into housing in the community.

#### B. Overview of Modeling Approach

Quantitative modeling with the SPP2 is an approach for “peeking” into the future to estimate how the number of people experiencing homelessness in the community might increase or decrease as changes are made to the homelessness response system. The model does not generate a single correct answer to how a community should change its system inventory or system performance. Rather, it predicts the likely implications of different choices and supports intentional and deliberate community planning. Modeling informs decisions that impact the future; it does not tell the future.

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<sup>6</sup> The SPP2 builds on an earlier version of the System Performance Predictor, part of the System-Wide Analytics and Projection suite of tools jointly developed by Focus Strategies and the National Alliance to End Homelessness.



The modeling approach views the homelessness response system as a set of policies, processes, and programs that impact how people enter homelessness, move through the homelessness response system, and ultimately move back into housing in the community. The model represents the system as components (e.g., unsheltered homelessness, emergency shelter, permanent supportive housing) through which people move as they seek permanent housing either within the system or in housing elsewhere in the community. As people move through the system, they may enter temporary programs (such as emergency shelter), but the model continues to count them as homeless until they are permanently housed.

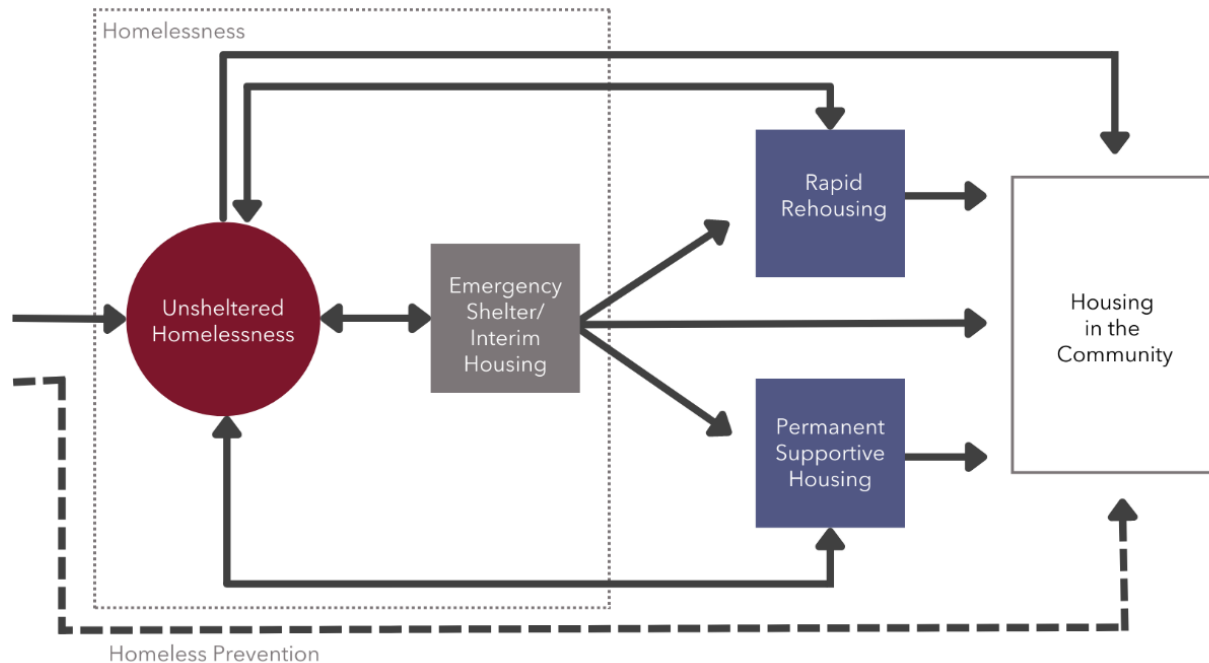
To predict changes in the size of the population experiencing homelessness, the model takes into consideration the following data points about the system and the inter-relationships between them:

- System capacity/inventory - defined as the number of beds, slots, or units for each system component at the end of the baseline year and projections about how that inventory will change over time.
- Utilization rates - defined as the percentage of inventory occupied by households.
- Initial population - defined as the number of households in each system component at the start of the modeling period.
- Inflow - defined as the number of households entering homelessness each year including assumptions about the rate at which people become newly homeless and the impacts of strategies to prevent people from entering homelessness.
- Lengths of stay - defined as the average number of days households spend in each system component.
- Unit turnover rates - defined as the percentage of units/slots that become available for new occupants each year.
- Exits outside the system - defined as the percent of exits to a destination outside of the homelessness response system (also called housing in the community), including housing in the marketplace with or without non-homeless system subsidies or with family and friends and institutional settings, and excluding exits to permanent housing that use a system resource.



Taken together, the data are used to paint a picture of system “flow” from entries into homelessness, into and among system components, and back into housing in the community, as illustrated in Figure 1 below. The model uses this information about how people flow through the system to predict how the number of people experiencing homelessness will change over time.

**Figure 1: System Flow Diagram**



System modeling supports community planning and can help improve housing equity through the testing of different strategy choices. The results generated by the model can be adopted as a universal community goal from which targeted strategies focused on equity and efficiency to achieve the overarching goal can then be developed. Decision-makers can weigh the costs of changing funding allocations, adding new resources like interim or permanent housing and/or developing new targeted strategies against the likely impacts that those changes will have on the rates of people experiencing homelessness over time. Through testing multiple scenarios, system modeling helps decision-makers determine the scale of investment needed and options to target those investments to achieve reductions in homelessness, advancements in housing equity, and improvements in other system goals.



## **METHODS AND DATA SOURCES**

### **A. Modeling Methods**

This analysis used a custom version of SPP2 specifically developed to model Columbus and Franklin County's homelessness response system. The analysis modeled the way people flow through the homelessness response system using differential equations, a mathematical language for describing dynamic rates of flow in complex systems. The building blocks of the model, which we refer to as "system components," are:

- Unsheltered homelessness (US),
- Emergency shelter (ES),
- Transitional housing (TH),
- Rapid rehousing (RRH), and
- Both site-based and scattered-site permanent supportive housing (PSH).

The model describes the homelessness response system in terms of the inflow into unsheltered homelessness and the outflows from each of the system components to the community, defined as housing or other living situations outside of the homelessness response system. The model also accounts for flows into and among the system components. Homelessness diversion and prevention are accounted for in the model as a net reduction in system inflow.

The model calculated all system flows on a monthly basis, with key outputs reported for each year. The model was developed for the calendar years 2023 to 2028 to align the key outputs with the annual Point-In-Time (PIT) Count held in January. When necessary, we converted inputs and outputs between calendar years and fiscal years.

The model's results are projections of the number of people experiencing homelessness in future PIT Counts. Because people experiencing homelessness are rehoused as households (that is, people who are in family households need only one unit for the entire household), system modeling is conducted at the household level. Household level PIT Count projections



are converted to total numbers of people based on ratios of persons per household from the 2022 PIT Count.<sup>7</sup>

The final analysis included two different modeled scenarios. The *Baseline Model* assumes that the homelessness response system continues operating with only the current inventory and any additions already in the planning pipeline. The *Future State Model* includes changes (called modeling targets) to system performance and capacity related to inflow, emergency shelter, rapid rehousing, and permanent supportive housing. Details on inputs and results for each model are provided in relevant sections below.

## **B. System Component Input Data Sources and Methods**

The initial model inputs, described in more detail below, reflected the state of Columbus and Franklin County's homelessness response system in 2023. Most inputs were calculated directly from the PIT Count, Housing Inventory Count (HIC), and data provided by CSB from their local Homeless Management Information System (HMIS). However, some information required for modeling were not directly captured in existing data systems and was estimated and refined by iteratively testing multiple inputs informed by research and prior work in other communities and assessing model outputs.

### **System inventory**

The first step in calculating inventory inputs by year was determining the number of slots/units currently in and already planned to be included in the system. Using data from the 2023 HIC data, we calculated starting inventory for the baseline year for emergency shelter, transitional housing, and permanent supportive housing by summing the total number of beds for households without children (i.e., adults) and the total number of units for households with children (i.e., families). Emergency shelter inventory included year-round units/beds only, including those dedicated for survivors of domestic violence, and excluded seasonal and overflow beds. Permanent supportive housing inventory was further subdivided into site-based (PSH SB) and scattered-site (PSH SS) units based on information from CSB. Inventory for rapid rehousing was provided by CSB and was defined as the total caseload capacity for adults and families reported by providers for the FY starting July 2023.

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<sup>7</sup> Estimates assume 1 person per unsheltered adult household, 1 person per sheltered adult household, 2 people per unsheltered family household, and 3.32 people per sheltered family household.



CSB provided data on planned inventory changes in the pipeline for FY2023 through FY2028. The pipeline included both planned expansion and closures for permanent supportive housing and transitional housing units. For the modeling, we accounted for all anticipated changes from the pipeline in the calendar year corresponding to the end of each fiscal year, with the exception of the final year. For the final year, we included half of the planned units in the pipeline because the 2028 PIT Count will occur approximately halfway through the fiscal year.

### **Initial population and system utilization**

The initial population is a snapshot of a point in time (i.e., the average number of households on a specific day), rather than the total number of households served over a specific time period, and estimates are the same in both the Baseline and Future State Models.

Initial population inputs for unsheltered homelessness are taken directly from the 2023 PIT Count for adults and families. The initial population for households receiving services in the system (i.e., emergency shelter, transitional housing, rapid rehousing, and permanent supportive housing) were calculated based on the daily average occupancy data from April 2022 through March 2023 provided by CSB.

System utilization rates were calculated separately for adult and family households using system inventory and the initial population. For each group, we calculated utilization by taking the number of households in the HIC point in time data and dividing by the number of beds or units in each project type. In cases where the initial population exceeded the inventory, utilization was set to 100%.<sup>8</sup>

### **Estimated annual inflow into homelessness**

The annual inflow into homelessness represents the number of households who enter homelessness during the year. Inflow into homelessness for the baseline year was estimated using HMIS data provided by CSB on the number of entries into shelter and enrollments in outreach programs from April 2022 to March 2023. Changes in inflow over time were based

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<sup>8</sup> Reported utilization may be greater than 100% when programs have overflow or seasonal capacity.





on estimated annual population growth for Franklin County from the Mid-Ohio Regional Planning Commission,<sup>9</sup> with an annual growth rate of 1.28% applied to each future year.

### **Average length of stay in emergency shelter, transitional housing, and unsheltered**

The baseline year average (mean) length of a stay in shelter for families was derived from CSB's FY2023 Third Quarter System & Program Indicator Report.<sup>10</sup> The average length of a stay in shelter for adults in emergency shelter was estimated based on exit data.<sup>11</sup> The length of stay for adults in emergency shelter was estimated by first multiplying the initial population in shelter by the percentage of exits from shelter to destinations outside of the homelessness response system from April 2022 to March 2023 data provided by CSB. This value was then multiplied by the number of days in a year (365) divided by the total number of households who exited the system from April 2022 to March 2023.

The average length of stay in transitional housing for the baseline year was provided by CSB for households who exited a program from April 2022 to March 2023.

Existing data systems do not capture the average length of time people spend unsheltered.<sup>12</sup> This value was estimated iteratively during the model calibration process based on prior work in other communities. The final value selected for the baseline year for adults was 42 days, which indicates that despite some adults experiencing unsheltered homelessness for long

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<sup>9</sup> The Mid-Ohio Regional Planning Commission (MORPC) 2018-2050 county growth projections estimated an increase of approximately 6.4% between 2020 and 2025 in Franklin County.

<sup>10</sup> CSB's published reports define the average length of shelter stay as the average cumulative days of shelter usage by unduplicated households. This means that all days for people with multiple stays in shelter are included in the numerator, while each household is only included once in the denominator. In effect, this is the average number of days households were engaged with any shelter during the period, rather than the average length of each separate enrollment (or stay) as is more typically used in the field. For the purposes of this report, we use the term "average length of a stay in shelter" where relevant for clarity for local readers.

<sup>11</sup> Analysis of exit data indicated that CSB's published lengths of stay for adults differed from the length of a single stay used in the model. Thus, the average length of a discrete stay was estimated. The published lengths of stay for families were generally consistent with exit data and were used directly in the model.

<sup>12</sup> CSB captures information about enrollment length in street outreach programs. For single adults this number was 67 days. However, this number may overstate the length of time people are unsheltered as those who engage in street outreach may be unsheltered longer than those who become unsheltered and leave that status before or without engaging with street outreach. The baseline model treats all people entering the system as at least briefly experiencing unsheltered homelessness, so this value has been estimated.



time periods, the majority of adults experience unsheltered homelessness briefly. Most families in Columbus/Franklin County are able to go straight into shelter or other programs and do not experience unsheltered homelessness, so the average length of time for families was set to 1 day, the minimum value for the model.

### **Rapid rehousing and permanent supportive housing unit annual turnover rates**

Permanent supportive housing annual turnover rates were provided by CSB. Rates were provided separately by population (adult and family) for site-based and scattered-site units.

The baseline unit turnover rate for rapid rehousing was derived from the average length of participation in CSB's annual System & Program Indicator Report for FY2022. To calculate turnover, we divided the average length of participation in days by 365. Estimates were calculated separately for adults and families.

### **Percent of exits to destinations outside the homelessness response system**

The percent of exits to destinations outside of the homelessness response system (i.e., to the community) for each system component was calculated using aggregated counts of households who exited the system component to each type of destination (e.g., emergency shelter, living with family/friends, rental units) from April 2022 to March 2023 provided by CSB.

For this analysis, exits *to the community* differs from exits to permanent destinations used in HUD system performance measures and from CSB's successful housing outcomes measure. The model instead uses an input that defines changes in system flow. That is, when a household leaves the homelessness response system, a new household can be served by the vacant bed or unit.

The input used in the model is the proportion of households who exit to all destinations outside of the homelessness response system including private rentals, staying with friends or family (permanent and temporary), subsidized housing not funded by the homelessness response system, and institutional settings like hospitals, nursing homes, and jails. Persons who leave a program into any condition considered homelessness are considered to still be in the homelessness response system. Estimates for the baseline year were calculated separately for adults and families for emergency shelter, transitional housing, rapid rehousing, and site-based and scattered-site permanent supportive housing. Some people leave unsheltered homelessness on their own without other system interventions, but the



system data does not cover this type of exit. Exits to the community from unsheltered homelessness were estimated iteratively during the model calibration process based on prior work and data from other communities.

### **Changes in system performance inputs over time**

Rental vacancy rates from the American Community Survey (ACS) were used to project future changes in rental vacancy rates. The projections informed estimates of change over time for length of stay, turnover rates, and exits to the community for emergency shelter, transitional housing, and rapid rehousing. Rental vacancy rates for 2013 through 2021 were obtained from 5-year estimates for Table DP04: Selected Housing Characteristics.

### **C. Cost Estimates**

The analysis also estimated the costs of expanding the homelessness response system with additional capacity and enhanced services based on the Future State Model. The model assumes that current costs to operate the system are sustained. Achieving the projected impact of the Future State Model requires additional funding over and above the system's current total budget. We estimated costs using data provided by CSB as well as supplemental analyses of available data, as described below. The analysis estimates costs separately for each intervention type (e.g., site-based PSH, emergency shelter) and household type (adult and family). Estimates were calculated separately for development capital and annual operating and services costs.

Development capital costs are one-time costs to create new units of permanent supportive housing. Site-based permanent supportive housing development costs are based on a review of applications for 4% and 9% Low Income Housing Tax Credit projects across Columbus/Franklin County region and the State of Ohio in 2024.

Annual operating and services costs for congregate shelter, transitional housing, rapid rehousing, and permanent supportive housing were provided by CSB. Annual operating and services costs include leases, services, maintenance, staffing, meals, ongoing rental subsidies, and other ongoing costs depending on the type of resource.

Because one component of the Future State Model (diversion services with financial assistance for adults) is not currently provided as a formal part of the system, costs for



diversion had to be estimated using data from other communities.<sup>13</sup> The estimated cost for the diversion programs was adjusted for inflation and converted based on regional price parity by state.<sup>14</sup>

Costs were estimated for each year in the Future State Model. Estimates for each successive year were derived by applying a 4% inflationary increase to the estimate for the prior year.<sup>15</sup> Development capital costs for a given year cover only new inventory additions (i.e., those that are not already in the pipeline). Annual operating and services costs are estimated cumulatively inclusive of all new inventory and/or enhanced services. For example, annual operating and services costs for year three include all inventory and services that came online from years one through three.

The model is designed to provide an estimate of new system costs beyond current operations and services if the system targets in the model are implemented. Large scale system change also requires additional investments that are not included in the estimates. These additional costs to scale and sustain system change include increases in workforce pay, system capacity building, technical assistance, costs to conduct regular program and system evaluations, and modifications to other system components such as the Coordinated Entry system.

## **BASELINE SYSTEM MODELING INPUTS AND PROJECTIONS**

As described above, the Baseline and Future State models require local inputs as well as assumptions about potential future conditions. The Baseline Model uses current system performance and assumes that the community's housing affordability crisis drives a decline in program outcomes and an increase in the number of people entering homelessness each

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<sup>13</sup> Building Changes; Homeless to Housing in a Hurry: Extending the Use of Diversion to Help Families Exit Homelessness. [https://buildingchanges.org/wp-content/uploads/2018/04/2018\\_DiversionOverview\\_FINAL.pdf](https://buildingchanges.org/wp-content/uploads/2018/04/2018_DiversionOverview_FINAL.pdf).

<sup>14</sup> United States Department of Commerce, Bureau of Economic Analysis; Real Personal Consumption Expenditures by State and Real Personal Income by State and Metropolitan Area, 2022; <https://www.bea.gov/news/2023/real-personal-consumption-expenditures-state-and-real-personal-income-state-and>.

<sup>15</sup> Estimates for non-congregate shelter for families were taken directly from CSB and were not adjusted over time.



year. Below are the inputs used in the Baseline Model and the projected results on the number of people experiencing homelessness.

## A. Baseline Model Inputs

### System inventory

The Baseline Model includes the number of system resources and anticipated inventory changes in the planning pipeline as of August 2023, including both planned expansion and closures.<sup>16</sup> Table 1 summarizes inventory by year and household type.

**Table 1: System Inventory for the Baseline Model**

Year	Household Type	Resource Type				
		ES	TH	RRH	PSH (SB)	PSH (SS)
<b>Initial Capacity</b>						
2023	Adult	668	86	610	1,075	1,512
	Family	144	29	467	26	243
<b>Future Capacity (including additions and closures)</b>						
Year 1	Adult	668	46	610	1,075	1,430
	Family	144	29	467	46	243
Year 2	Adult	668	46	610	1,146	1,430
	Family	144	29	467	46	243
Year 3	Adult	668	46	610	1,146	1,430
	Family	144	29	467	46	243
Year 4	Adult	668	46	610	1,146	1,430
	Family	144	29	467	46	243
Year 5	Adult	668	46	610	1,166	1,430
	Family	144	29	467	46	243

<sup>16</sup> The Baseline Model used CBS's current system inventory and the pipeline of planned inventory additions as of 08/18/2023.



### Initial population and system utilization

The model uses inputs on the initial population of households experiencing unsheltered homelessness and households receiving services in the system. Table 2 summarizes the initial population and system utilization used for the Baseline Model.

**Table 2: System Initial Population and Utilization**

System Component	Initial Population		Utilization	
	Adult	Family	Adult	Family
<b>Unsheltered Homelessness</b>	494	0	-	-
<b>Emergency Shelter</b>	778	151	100%	100%
<b>Transitional Housing</b>	52	18	60%	62%
<b>Rapid Rehousing</b>	430	255	70%	55%
<b>Permanent Supportive Housing (Site-based)</b>	1,051	79	98%	100%
<b>Permanent Supportive Housing (Scattered)</b>	1,105	205	73%	84%

### Estimated annual inflow into homelessness

The annual inflow into homelessness represents the number of households who enter homelessness during the year. Estimates for future years account for population growth. Table 3 summarizes the estimated annual inflow by year for the Baseline Model.

**Table 3: Estimated Annual Number of Households Entering Homelessness for the Baseline Model**

Year	Adult	Family
<b>Baseline</b>		
2023	5,060	773
<b>Future Years</b>		
Year 1	5,125	783
Year 2	5,191	793
Year 3	5,257	803
Year 4	5,324	813
Year 5	5,392	823



### Average length of stay in emergency shelter, transitional housing, and unsheltered

Estimates on the length of stay for the baseline year were derived from data from CSB or estimated iteratively during the modeling period based on prior work in other communities. Analysis showed that tightening rental vacancy rates in Franklin County were correlated with changes in length of stay and that the relationship varied by household and project type. Based on this analysis, we adjusted values for length of stay in future years. The final values used are shown in Table 4.

**Table 4: Average Length of Stay in Days for the Baseline Model**

Year	Household Type	Resource Type		
		Unsheltered	ES*	TH
<b>Baseline</b>				
2023	Adult	42	23	138
	Family	1	75	445
<b>Future Years</b>				
Year 1	Adult	43	23	146
	Family	1	81.5	484
Year 2	Adult	44	24	154
	Family	1	88	526
Year 3	Adult	45	25	163
	Family	1	94.5	572
Year 4	Adult	47	25	172
	Family	1	101	621
Year 5	Adult	48	26	182
	Family	1	107.5	675

\*Average length of stay for emergency shelter is for each discrete stay and may differ from CSB's published reports.

### Rapid rehousing and permanent supportive housing unit annual turnover rates

Permanent supportive housing annual turnover rates were provided by CSB and were assumed to be constant in future years. We adjusted the turnover rate for rapid rehousing in future years based on analysis of rental vacancy rates and final values are shown in Table 5.



**Table 5: Annual Unit Turnover Rates for the Baseline Model**

Year	Household Type	Resource Type		
		RRH	PSH (SB)	PSH (SS)
<b>Baseline</b>				
2023	Adult	224%	15%	10%
	Family	175%	21%	14%
<b>Future Years</b>				
Year 1	Adult	180%	15%	10%
	Family	180%	21%	14%
Year 2	Adult	173%	15%	10%
	Family	173%	21%	14%
Year 3	Adult	167%	15%	10%
	Family	167%	21%	14%
Year 4	Adult	161%	15%	10%
	Family	161%	21%	14%
Year 5	Adult	156%	15%	10%
	Family	156%	21%	14%

**Percent of exits to destinations outside the homelessness response system**

Rates of exits to the community for the baseline year were derived from data from CSB or estimated iteratively based on prior work and data from other communities. Rates of exit to the community in future years were assumed to be constant for unsheltered homelessness and site-based and scattered-site permanent housing. Rates in future years for emergency shelter, transitional housing, and rapid rehousing were decreased by 1 percentage point per year, based on analysis of rental vacancy rates. Final values for the Baseline Model are shown in Table 6.





**Table 6: Rates of Exits to Destinations Outside the Homelessness Response System for the Baseline Model**

Year	Household Type	Resource Type					
		US	ES	TH	RRH	PSH (SB)	PSH (SS)
<b>Baseline</b>							
2023	Adult	50%	20%	71%	52%	84%	84%
	Family	50%	58%	75%	75%	79%	79%
<b>Future Years</b>							
Year 1	Adult	50%	19%	70%	51%	84%	84%
	Family	50%	57%	74%	74%	79%	79%
Year 2	Adult	50%	18%	69%	50%	84%	84%
	Family	50%	56%	73%	73%	79%	79%
Year 3	Adult	50%	17%	68%	49%	84%	84%
	Family	50%	55%	72%	72%	79%	79%
Year 4	Adult	50%	16%	67%	48%	84%	84%
	Family	50%	54%	71%	71%	79%	79%
Year 5	Adult	50%	15%	66%	47%	84%	84%
	Family	50%	53%	70%	70%	79%	79%

**B. Baseline Model Projections**

Using the baseline system inventory and performance data above, the model calculated five-year projections for the number of people experiencing homelessness in the community. The model makes data-informed projections, not an exact forecast. Because the actual performance of the homelessness response system will vary from the assumptions in the model, the actual number of people experiencing homelessness may differ.

In the Baseline Model, approximately 2,629 people are projected to be experiencing homelessness by year five of the model, including 1,894 adults and 735 people in families. The overall numbers reflect an increase of about 12% compared to the 2023 PIT Count.

The increase is driven entirely by a rise in the number of adults experiencing unsheltered homelessness, which is projected to increase by 68% (about 338 more people). The Baseline Model projects that the number of adults and people in families experiencing sheltered



homelessness (i.e., in emergency shelter or transitional housing) will slightly decrease, and that the baseline system is sufficient to keep unsheltered homelessness among people in families at zero. PIT count projections for the Baseline Model are shown in Table 7 and visualized in Figure 1.

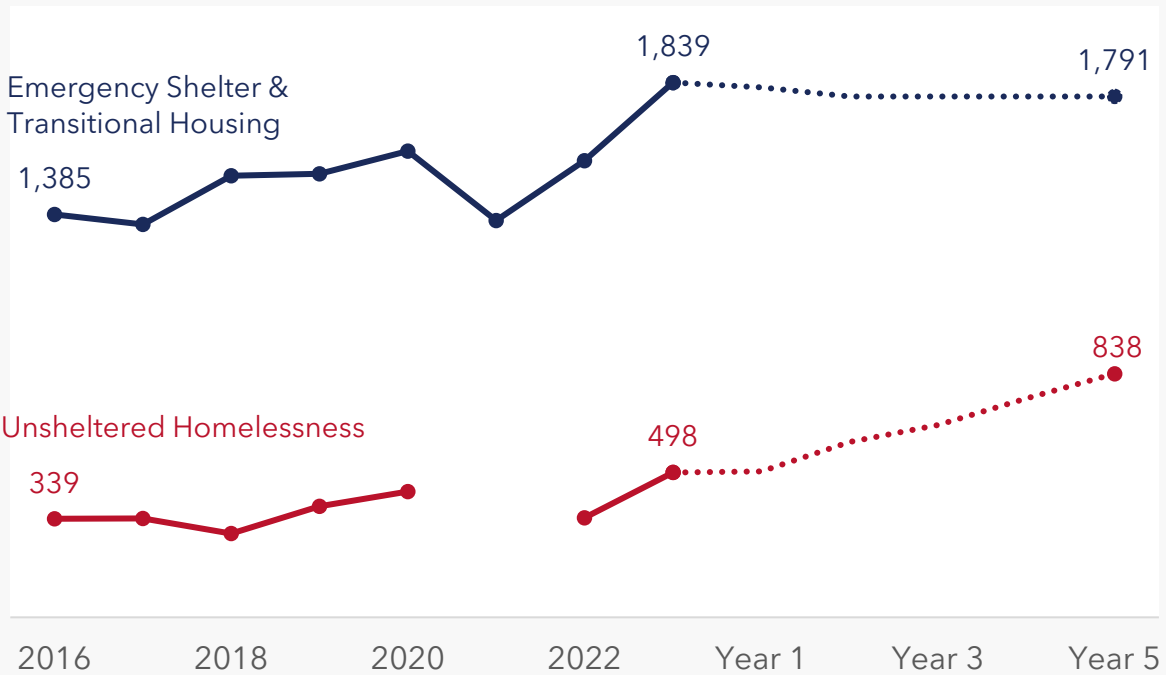
**Table 7: Projected PIT Counts of the Number of People Experiencing Homelessness in the Baseline Model**

Year	Adult*		Family		Total
	US	ES/TH	US	ES/TH	All
<b>Baseline</b>					
2023	498	1,089	0	750	2,337
<b>Future Years</b>					
Year 1	502	1,087	0	735	2,324
Year 2	603	1,056	0	735	2,394
Year 3	661	1,056	0	735	2,452
Year 4	753	1,056	0	735	2,544
Year 5	838	1,056	0	735	2,629

\*Counts for adults include all people in households not classified as families with children.



**Figure 1: Projected PIT Counts of the Number of People Experiencing Homelessness in the Baseline Model**



Note: Solid lines represent actual PIT count data from 2016 to 2023. The unsheltered count was not conducted in 2021 due to COVID-19. The dotted lines show the Baseline Model projection of the number of people experiencing homelessness in sheltered and unsheltered situations.

### **FUTURE STATE MODEL INPUTS AND PROJECTIONS**

The Future State Modeling process builds on the Baseline Model to project the impacts of making changes in program capacity and program outcomes for diversion, shelter, rapid rehousing, and permanent supportive housing programs. The changes (called modeling targets) for new inventory and for performance of system components in the Future State Model were developed using an iterative process informed by local data and best practices, feedback from the Assessment Steering Committee, and input from hundreds of community stakeholders engaged through interviews, focus groups, and surveys.



## A. Future State Model Inputs

### System Inventory and Utilization

Modeling targets for emergency shelter were based on estimates developed by CSB as part of a 2024 funding request to the City of Columbus and Franklin County. The Future State Model reflects the addition of non-congregate units for families and the addition of units for single adults by repurposing semi-congregate family units. The total number of shelter units for families decreases over time as the average length of stay decreases. The model also scales back the number of units for single adults beginning in year three. The overall impact of these changes results in an increase in total emergency shelter units during the first three years and a slight reduction in total units in years four and five compared to the baseline year.

To achieve a substantial reduction in homelessness and help shift system resources towards permanent housing, increases in rapid rehousing and permanent supportive housing units for single adults are included in the Future State Model. A total of 250 rapid rehousing slots for single adults are added in increments of 50 slots per year. A total of 375 units of site-based permanent supportive housing are added in increments of 125 units per year starting in year three.

Targeted utilization rates for rapid rehousing for both single adults and families are also increased in the Future State Model as part of overall system optimization and improvement. For both populations, the utilization rate target is increased to 90% by year two and remains at that rate. The modeling targets for system inventory and utilization rates are shown in Table 8.

**Table 8: System Inventory and Utilization Rate Modeling Targets for the Future State Model**

Year	Household Type	System Inventory			Utilization Rate
		ES	RRH	PSH (SB)	RRH
<b>Baseline Year</b>					
2023	Adult	668	610	1,075	70%
	Family	144	467	26	55%
<b>Future Years</b>					
Year 1	Adult	782	660	1,075	80%
	Family	170	467	46	75%



Year	Household Type	System Inventory			Utilization Rate
		ES	RRH	PSH (SB)	RRH
Year 2	Adult	782	710	1,146	90%
	Family	144	467	46	90%
Year 3	Adult	744	760	1,340	90%
	Family	110	467	46	90%
Year 4	Adult	706	810	1,465	90%
	Family	99	467	46	90%
Year 5	Adult	668	860	1,610	90%
	Family	66	467	46	90%

**Estimated annual inflow into homelessness**

Implementation of diversion for single adult households was added to the Future State Model to reduce the number of adults who enter homelessness each year. The inputs are based on a target reduction from the Baseline Model estimates of 12.5% in year one and 25% for each subsequent year. The modeling targets for inflow for single adults are shown in Table 9.

**Table 9: Estimated Annual Number of Households Entering Homelessness Modeling Targets for the Future State Model**

Year	Adult	Family
<b>Baseline</b>		
2023	5,060	773
<b>Future Years</b>		
Year 1	4,484	783
Year 2	3,893	793
Year 3	3,943	803
Year 4	3,993	813
Year 5	4,044	823

**Average length of stay in emergency shelter and annual turnover rates for rapid rehousing**

The Future State Model includes targets for the average length of an emergency shelter stay for adults and families resulting from system optimization. The average length of a discrete stay for adults is set to achieve a target of 30 days beginning in year one of the model. This is



an increase of seven days over the current estimated average but is consistent with the goal of increasing the rate of exits to permanent housing (shown in Table 11 below) by ensuring people in shelter have time to be supported to access and move into permanent housing.<sup>17</sup> The average length of stay for families is based on estimates developed by staff from CSB as part of a 2024 funding request to the City of Columbus and Franklin County and reflect a gradual reduction from 75 days to 30 days by year five of the model.

The annual turnover rate for rapid rehousing is set at 100% for both adults and families as part of system improvement and to better align with national best practices. This reflects an average length of participation of 12 months. The modeling targets for length of stay and turnover rates are shown in Table 10.

**Table 10: Average Length of Stay in Days and Annual Unit Turnover Rates Modeling Targets for the Future State Model**

Year	Household Type	Length of Stay	Turnover Rate
		ES*	RRH
<b>Baseline</b>			
2023	Adult	23	224%
	Family	75	175%
<b>Future Years</b>			
Year 1	Adult	30	100%
	Family	77	100%
Year 2	Adult	30	100%
	Family	65	100%
Year 3	Adult	30	100%
	Family	50	100%
Year 4	Adult	30	100%
	Family	45	100%
Year 5	Adult	30	100%
	Family	30	100%

\*Average length of stay for emergency shelter is for each discrete stay and may differ from CSB's published reports.

<sup>17</sup> The average length of stay for emergency shelter is for each discrete stay and may differ from CSB's published reports.



### Percent of exits to destinations outside the homelessness response system

The Future State Model includes targets for increased exit rates to the community for emergency shelter and rapid rehousing. Exit rates from emergency shelter for families are set at 58% for each model year, reflecting a stabilization of exits rates rather than the slight decline in the Baseline Model. Exit rates for single adults are set to increase to 25% by year five, with slight increases each year from the baseline.

Rates of exit to the community from rapid rehousing are set to achieve an 80% exit rate for both populations by year five of the model. This exit rate corresponds to performance benchmarks for rapid rehousing programs set by the National Alliance to End Homelessness.<sup>18</sup> The modeling target exit rates are shown in Table 11.

**Table 11: Rates of Exits to Destinations Outside the Homelessness Response System Modeling Targets for the Future State Model**

Year	Household Type	Resource Type	
		ES	RRH
<b>Baseline</b>			
2023	Adult	20%	52%
	Family	58%	75%
<b>Future Years</b>			
Year 1	Adult	21%	57%
	Family	58%	76%
Year 2	Adult	22%	63%
	Family	58%	77%
Year 3	Adult	23%	68%
	Family	58%	78%
Year 4	Adult	24%	74%
	Family	58%	79%
Year 5	Adult	25%	80%
	Family	58%	80%

<sup>18</sup> National Alliance to End Homelessness; Rapid Re-Housing Performance Benchmarks and Program Standards; <https://endhomelessness.org/resource/rapid-re-housing-performance-benchmarks-and-program-standards/>.



## B. Future State Model Projections

Using the modeling targets for inventory and performance data above, the Future State Model generated five-year projections for the number of people experiencing homelessness in the community during the PIT Count.

In the Future State Model, approximately 1,610 people are projected to be experiencing homelessness by year five of the model, including approximately 1,200 adults and 410 people in families. The overall total reflects a decrease of about 39% in year five compared to the Baseline Model.

The decrease in overall homelessness includes a 20% reduction in sheltered homelessness and an 80% reduction in unsheltered homelessness in year five compared to the Baseline Model. The decrease in unsheltered homelessness is entirely among single adults, as families are already at zero unsheltered and are projected to remain there. The decrease in sheltered homelessness is driven primarily by a 44% reduction in the number of families experiencing homelessness resulting from the decrease in family units over time as the system moves to non-congregate shelter and optimizes performance.

PIT count projections for the Baseline Model are shown in Table 12 and visualized in Figure 2.

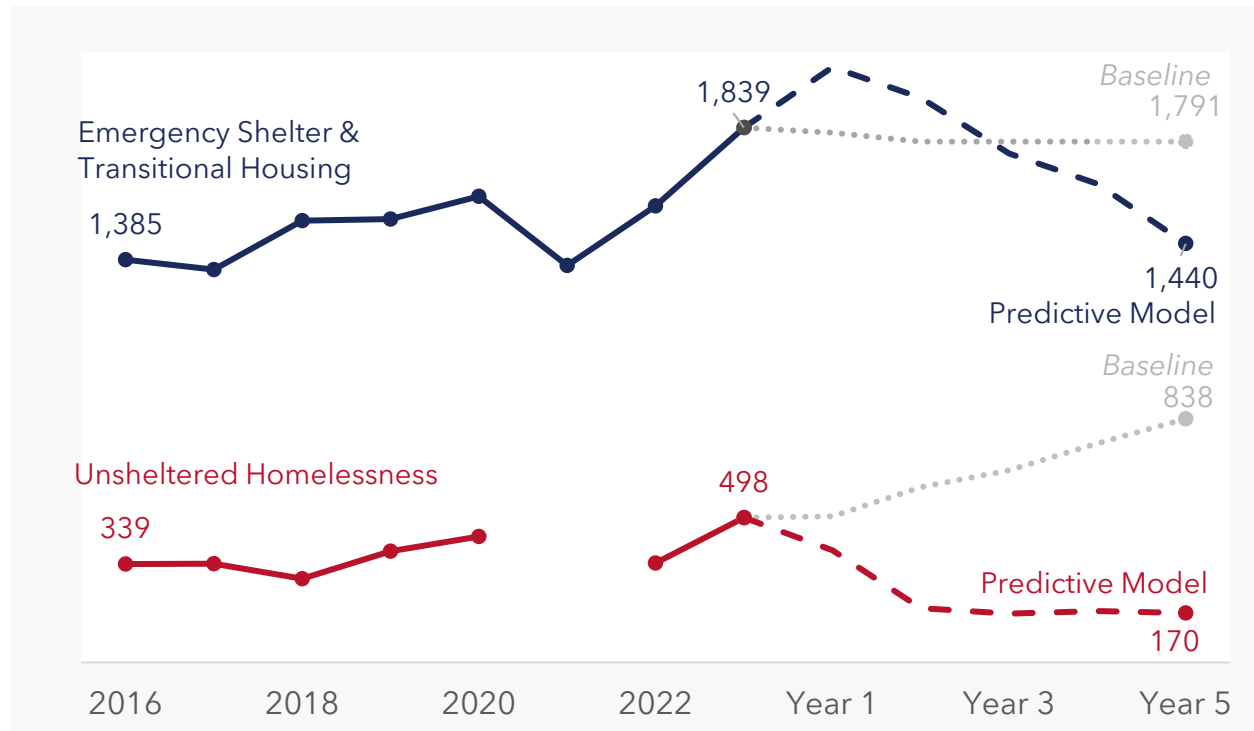
**Table 12: Projected PIT Counts of the Number of People Experiencing Homelessness for the Future State Model**

Year	Adult		Family		Total
	US	ES/TH	US	ES/TH	All
<b>Baseline</b>					
2023	498	1,089	0	750	2,337
<b>Future Years</b>					
Year 1	386	1,203	0	844	2,433
Year 2	187	1,203	0	739	2,129
Year 3	168	1,150	0	600	1,918
Year 4	177	1,098	0	548	1,823
Year 5	170	1,030	0	410	1,610





**Figure 2: Projected PIT Counts of the Number of People Experiencing Homelessness for the Future State Model**



Note: Solid lines represent actual PIT count data from 2016 to 2023. The unsheltered count was not conducted in 2021 due to COVID-19. The dotted lines show the Baseline Model projection of the number of people experiencing homelessness in sheltered and unsheltered situations, and the dashed lines show the results of the Future State Model.

### ESTIMATED COSTS

The modeling targets in the Future State model were used along with intervention cost figures to estimate the costs of expanding capacity and services and/or improving performance in diversion, shelter, rapid rehousing, and permanent supportive housing programs within Columbus and Franklin County’s homelessness response system

#### Development capital costs for permanent supportive housing units

Site-based permanent supportive housing development costs are based on a review of applications for 4% and 9% Low Income Housing Tax Credit projects in the Columbus/Franklin County region and across the State of Ohio in 2024. The estimate reflects the average per-unit cost for new construction.



The per-unit development cost is estimated at \$325,000 in year one. New units in the model for single adults are added in increments of 125 per year beginning in year three. Thus, all development costs accrue in model years three through five. The total estimated development capital cost is approximately \$137.2 million. The estimated development capital costs by year are shown in Table 13.

**Table 13: Estimated Development Capital Costs for Site-based PSH Units for Adults**

Year	Cost per Unit	Net New Units	Total Cost
Year 1	\$325,000	-	-
Year 2	\$338,000	-	-
Year 3	\$351,520	125	\$43,940,000
Year 4	\$365,581	125	\$45,697,600
Year 5	\$380,204	125	\$47,525,504
<b>Total</b>		<b>375</b>	<b>\$137,163,104</b>

**Diversion for single adults**

Costs for diversion were estimated using data from an analysis of pilot programs in other communities and were adjusted for inflation and converted based on regional price parity by state. The estimated cost per adult household successfully diverted was set at \$1,800 in year one. The total annual estimate was derived by multiplying the number of adults to be diverted each year in the model by the per-household cost.

**Congregate and non-congregate emergency shelter**

The costs to implement non-congregate shelter for families were taken from estimates developed by staff from CSB as part of a 2024 funding request to the City of Columbus and Franklin County. The estimates include the total cost to lease hotel units and provide operations and services. The costs decrease over time as the number of leased units declines. The estimate in year one also includes savings from eliminating the need for overflow shelter capacity.

Operating and services costs of congregate emergency shelter beds for single adults were provided by CSB. The annual operating and services cost per bed in year one was \$21,685. The model includes a reduction in the total number of beds for single adults beginning in year three. These reductions are reflected as cost savings in the estimates for this component.



### **Rapid rehousing expansion and enhanced services**

Costs for RRH were provided by staff from CSB for single adult and family households for the average length of stay at the time of the estimates of approximately four months. The costs from CSB were multiplied by three to get estimated costs for an average program stay extending to a full year (i.e., 12 months).

The full-year costs were increased by approximately 30% to provide an enhanced service model (e.g., increased subsidies, improved landlord incentives) needed to achieve the improved outcomes included in the Future State Model. The estimated annual costs per household were set at \$18,000 for single adults and \$20,000 for families in year one.

The estimates include enhanced services costs for the existing RRH inventory in addition to new RRH capacity. The overall annual estimates were derived by summing the additional costs for enhanced services multiplied by the number of existing RRH slots for each household type and the cost to add 50 new slots per year for single adults. The estimates also account for increased utilization rates over time.

### **Permanent supportive housing operations and services**

Costs for services and operations of site-based permanent supportive housing for single adults was provided by staff from CSB. The estimates include the full per unit costs to operate and provide services, regardless of funding source. In the current system, a portion of the costs are covered by project-based vouchers from HUD. If, consistent with current practice, vouchers are available for the new site-based units then costs will be substantially lower than the estimates included here.

### **Total operating and services costs**

The annual and total estimated costs by system component and overall are shown in Table 14. The net new costs (i.e., costs beyond current and planned operating and services costs) resulting from the modeled system changes start at about \$15.2 million annually in year one and increase to approximately \$21 million annually in year five.



**Table 14: Estimated Additional Annual Operating and Services Costs**

<b>Sys. Comp.</b>	<b>HH Type</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>	<b>Year 5</b>
Diversion	Adults	\$1,152,000	\$2,429,856	\$2,558,200	\$2,696,974	\$2,838,545
	Fam.	-	-	-	-	-
Cong. Shelter	Adults	-	-	(\$891,271)	(\$1,853,843)	(\$2,891,996)
	Fam.	-	-	-	-	-
Non-cong. Shelter	Adults	-	-	-	-	-
	Fam.	\$9,460,000	\$7,350,000	\$6,750,000	\$5,360,000	\$3,570,000
RRH	Adults	\$2,923,248	\$4,239,200	\$5,382,208	\$6,609,874	\$7,927,142
	Fam.	\$1,644,478	\$1,920,610	\$1,997,434	\$2,077,331	\$2,160,425
Site-based PSH	Adults	-	-	\$2,279,472	\$4,741,302	\$7,396,431
	Fam.	-	-	-	-	-
<i>Total Cost</i>	<i>Adults</i>	<i>\$4,075,248</i>	<i>\$6,669,056</i>	<i>\$9,328,610</i>	<i>\$12,194,306</i>	<i>\$15,270,122</i>
	<i>Fam.</i>	<i>\$11,104,478</i>	<i>\$9,270,610</i>	<i>\$8,747,434</i>	<i>\$7,437,331</i>	<i>\$5,730,425</i>
<b>Grand Total</b>		<b>\$15,179,726</b>	<b>\$15,939,666</b>	<b>\$18,076,044</b>	<b>\$19,631,638</b>	<b>\$21,000,546</b>

Note: Cost estimates represent net new costs resulting from the modeled system changes, including a subset of cost estimates for non-congregate shelter from CSB's FY24-25 budget request. The estimates represent additional costs beyond current and planned operating and services costs.



## 4. ANALYSIS OF COMPARABLE COMMUNITIES

### METHOD

Communities across the country have faced similar challenges to those Columbus/Franklin County currently faces. Exploring how other similar communities have responded to homelessness may provide information that can guide Columbus/Franklin County's path forward. To this end, Focus Strategies analyzed county-level data to identify communities with comparable growth, housing markets, and homelessness response systems.

National data<sup>19</sup> were analyzed at the county level for similarities to Franklin County in:

- Total population size,
- Total population growth,
- Economic growth,
- Rental market characteristics,
- Homeless population size and per capita rate, and
- The reported inventory of dedicated shelter and housing resources.

Based on this analysis, three comparable communities were identified:

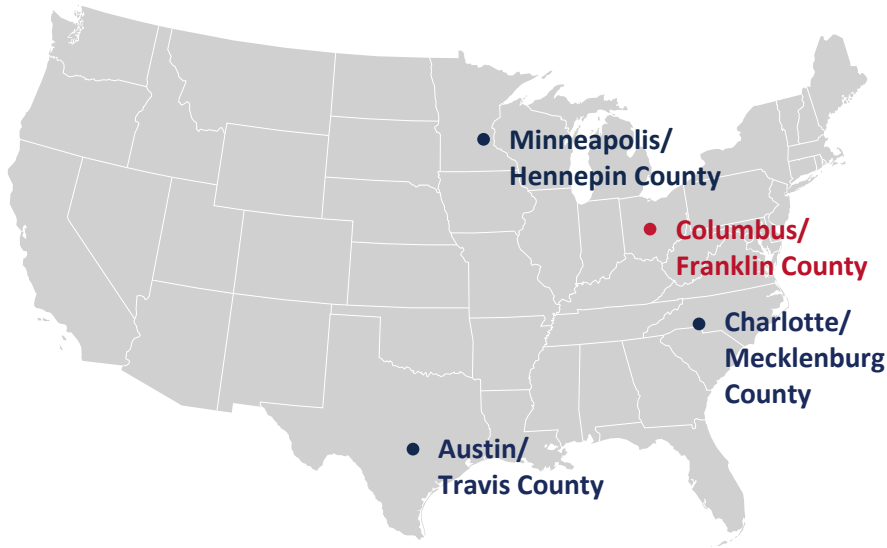
- Minneapolis/Hennepin County, MN
- Charlotte/Mecklenburg County, NC and
- Austin/Travis County, TX.

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<sup>19</sup> U.S. Census Bureau, ACS 2013-2021 5-year estimates, Tables DP04: Selected Housing Characteristics, DP05: Demographic and Housing Estimates, B25064 Median Gross Rent (Dollars), accessed September 8 - 15, 2023, [www.data.census.gov](http://www.data.census.gov); U.S. Bureau of Economic Analysis, Gross Domestic Product by County and Metropolitan Area, 2022, accessed September 15, 2023, [www.bea.gov/data/gdp](http://www.bea.gov/data/gdp); U.S. Department of Housing and Urban Development, PIT and HIC Data Since 2007, accessed September 8 - 15, 2023, [www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007](http://www.hudexchange.info/resource/3031/pit-and-hic-data-since-2007).

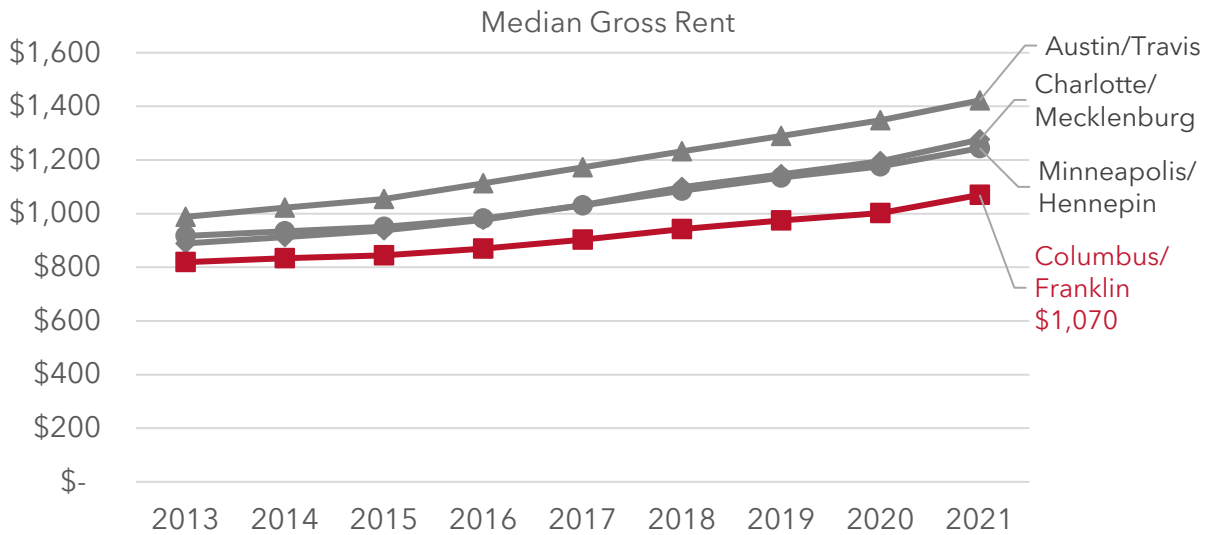


## Comparable Communities for Comprehensive Community Assessment



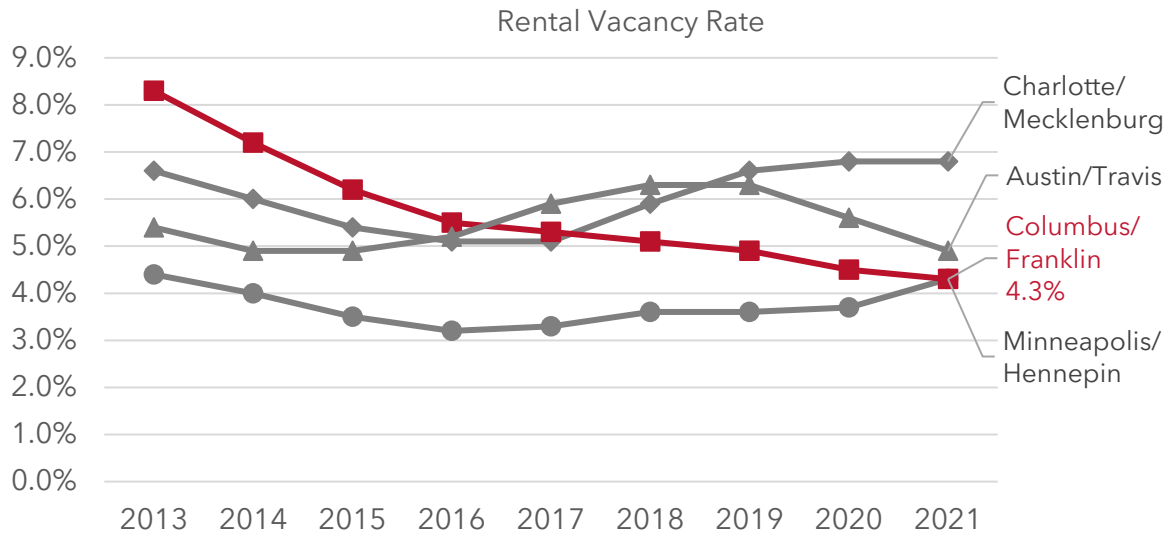
### MEDIAN RENT

Franklin County and the three comparable counties had similar increases in median gross rent between 2013 and 2021. Franklin County has the lowest median gross rent and experienced a lower increase (\$251 per month) compared to the three other counties.



## RENTAL VACANCY RATE

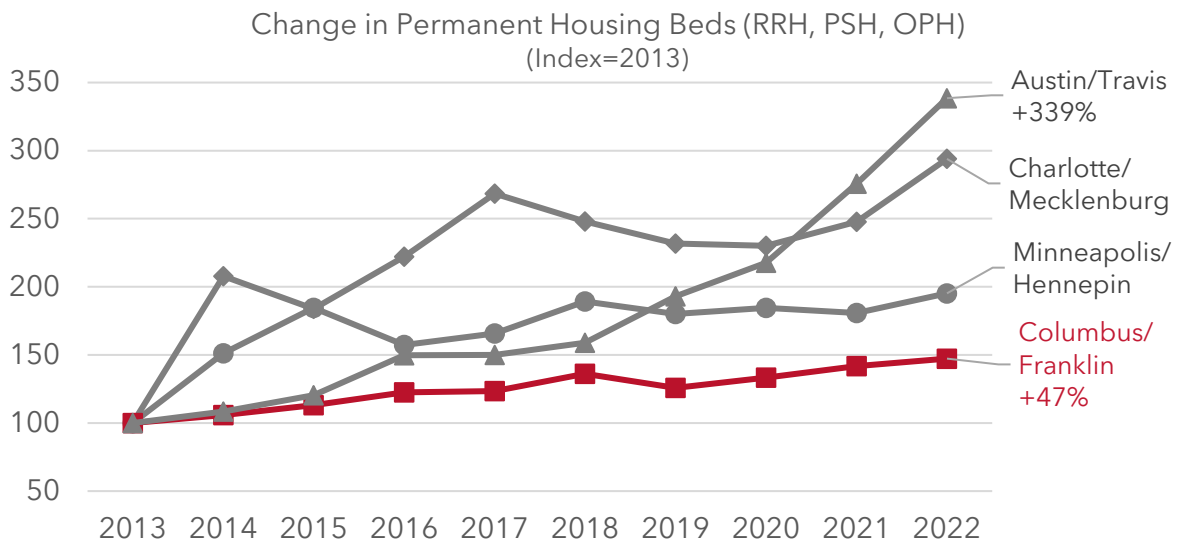
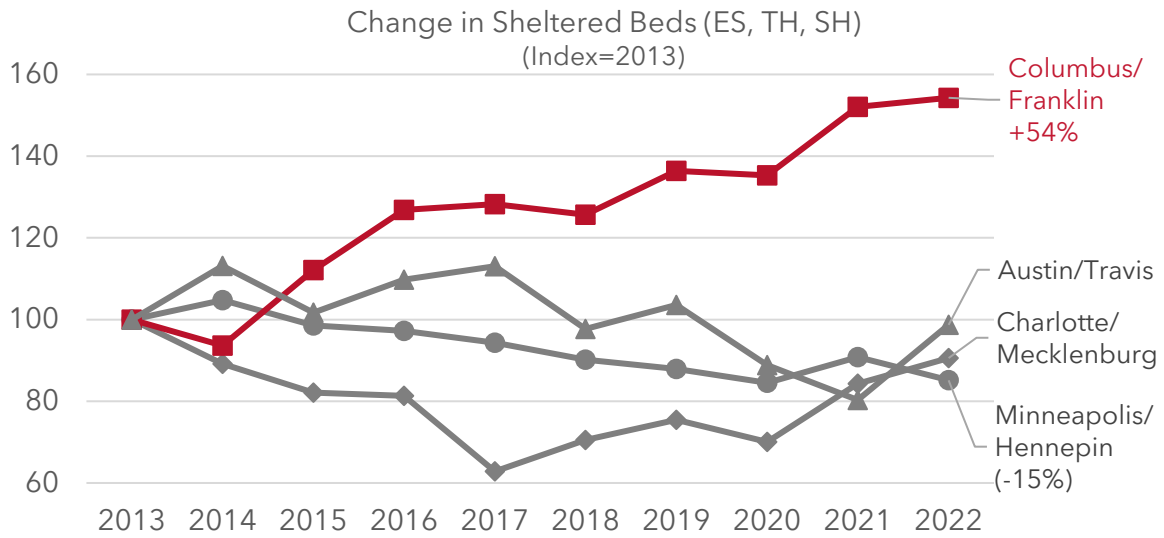
Franklin County experienced the greatest change in rental vacancy rate, declining four percentage points (8.3% to 4.3%) from 2013 to 2021. Travis County saw an increase in vacancies from 2015-2019 but has seen a sharp decline in vacancy rates since 2019, while Mecklenburg County had a reverse pattern, with vacancy rates decreasing through 2017 but rising since that time. Hennepin County has had vacancy rates below 5% throughout this period.



## SHELTER AND HOUSING

From 2013 to 2022, Columbus/Franklin County homelessness response system expanded shelter & housing proportional to one another, while the other three counties decreased the amount of shelter but expanded permanent housing. Mecklenburg County nearly tripled and Travis County more than tripled the amount of permanent housing in their systems during that time period. The charts below show the percentage change in shelter and permanent housing beds from the baseline year of 2013.



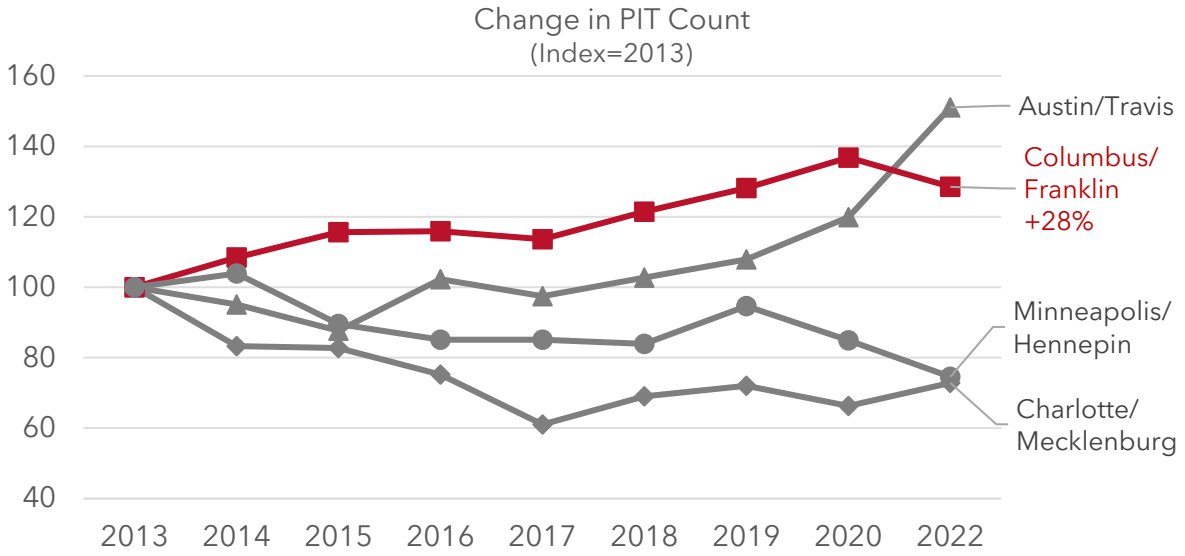


**POINT-IN-TIME COUNT**

Columbus/Franklin County CoC experienced a steady increase in homelessness over the past decade. The population experiencing homelessness declined in the CoCs for both Mecklenburg and Hennepin Counties over the same period, while it increased dramatically in Travis County.







Strategies for reducing homelessness must be community- and context-specific. This analysis provides context for understanding how comparable communities with similar challenges and changes in local housing markets have adjusted their allocation of resources in the homelessness response system



## 5. FUNDING MODEL ANALYSIS

### INTRODUCTION

The purpose of this document is to contextualize local homelessness trends and to describe the impact of the current funding model for Columbus/Franklin County. This context informed discussions on optimizing the homelessness response system given anticipated changes in community and economic conditions.

The most successful homelessness response systems have funders united in purpose and aligned in priorities. Long term, the most effective strategies for achieving sustainable results are to:

1. Increase the supply of affordable housing,
2. Fund the homelessness response system at scale, which means at the level required to meet current needs as well as plan for the resource level needed to meet anticipated and changing needs associated with population growth without concurrent levels of housing production, and
3. Use data to hold the system accountable by determining the level of resources and performance required to sustain results on an ongoing basis.

### LOCAL CONTEXT

Because housing market conditions are the strongest predictors of homelessness rates,<sup>1</sup> the most impactful and long-term solutions to homelessness are at the housing market level

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<sup>1</sup> Gregg Colburn and Clayton Page Aldern, *Homelessness is a Housing Problem* (University of California Press, 2022); Maria Hanratty, "Do Local Economic Conditions Affect Homelessness? Impact of Area Housing Market Factors, Unemployment, and Poverty on Community Homeless Rates," *Housing Policy Debate*, 27, no. 4, 640-655; Barret A. Lee et al, "Determinants of Homelessness in Metropolitan Areas," *Journal of Urban Affairs*, 25, no. 3, 335-356.

<sup>2</sup> U.S. Census Bureau, ACS 2017 and ACS 2022 5-year estimates, B25064: Median Gross Rent (Dollars), accessed March 6, 2024, [www.data.census.gov](http://www.data.census.gov); U.S. Census Bureau, ACS 2017 and ACS 2022 5-year estimates, B25031: Median Gross Rent by Bedrooms, accessed February 26, 2024, [www.data.census.gov](http://www.data.census.gov).

<sup>3</sup> U.S. Census Bureau, "Housing Vacancies and Homeownership: Annual Statistics: 2022, Table 6," accessed February 21, 2024, <https://www.census.gov/housing/hvs/data/prevann.html>; U.S. Census Bureau, "Housing Vacancies and Homeownership: Annual Statistics: 2022, Table 3," accessed February 26, 2024, <https://www.census.gov/housing/hvs/data/prevann.html>.



rather than at the level of crisis response. Homelessness rates (and the resources needed to reduce homelessness), are strongly linked to the cost and availability of affordable housing. Many communities have been unable to reduce homelessness despite increases in federal funding because of a shortage of affordable housing at the lowest income levels, increased median rents, and, in many markets, lower vacancy rates.

Compared to national trends, the Columbus metropolitan region has experienced more acute challenges with housing affordability over the past several years, including the following:



Median gross rent has increased by 34% from \$887 in 2017 to \$1,186 in 2022. Over the same period, the national median gross rent increased less steeply, by 29%.<sup>2</sup>



Rental vacancy rates fell by 40% from 6.3% in 2017 to 3.8% in 2022. Over the same period, national vacancy rates fell less severely, by 19%.<sup>3</sup>



Only 30 housing units are available per 100 extremely low-income households compared with 33 housing units nationally.<sup>4</sup>

**Given the Columbus and Franklin County regional housing context, it is not surprising that need is rising. Homelessness response system components will need to be scaled to match.**

## HOMELESSNESS RESPONSE FUNDING MODELS

Community Shelter Board (CSB) is one of only 14 collaborative applicants for HUD CoC funds designated as a unified funding agency (UFA) in the nation. UFAs are considered advantageous because local leadership makes funding allocations in alignment with local goals and informed by local data. The next table provides federal funding information for mid- to large-size urban CoCs designated as UFAs. The far-right column includes each CoC's federal award as a percentage of their Preliminary Pro Rata Need (PPRN), a needs-based

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<sup>4</sup> National Low Income Housing Coalition, "The Gap: A Shortage of Affordable Homes," March 2023, <https://nlihc.org/gap>.



formula based on population, poverty rates, overcrowding rates, and other factors. A higher percentage indicates the CoC has successfully maximized funding opportunities and performed well across a variety of system performance measures. **The Columbus/Franklin County CoC outperforms almost all other UFAs.**

CoC/Region with a UFA	Collaborative Applicant Type	Federal CoC funding FY2023 <sup>5</sup>	FY2023 CoC Award as % of PPRN <sup>6</sup>
Everett/Snohomish County (WA)	County Agency	\$16,098,480	431%
Columbus/Franklin County (OH)	Nonprofit	\$24,089,917	247%
Albany City & County (NY)	Nonprofit	\$8,115,776	211%
Cincinnati/Hamilton County (OH)	Nonprofit	\$28,987,595	195%
Long Beach (CA)	City Agency	\$10,250,815	194%
Springfield/Hampden County (MA)	City Agency	\$7,534,592	138%
Spokane City & County (WA)	City Agency	\$6,333,005	130%
Jefferson, Lewis, St. Lawrence Counties (NY)	Nonprofit	\$2,100,877	123%
Pittsburgh/Allegheny County (PA)	County Agency	\$26,279,627	94%
Rockland County (NY)	Nonprofit	\$2,017,974	77%

<sup>5</sup> HUD, "FY2023 Total Award by CoC," accessed February 29, 2024, [https://www.hud.gov/program\\_offices/comm\\_planning/coc/fy\\_2023\\_coc\\_competition](https://www.hud.gov/program_offices/comm_planning/coc/fy_2023_coc_competition).

<sup>6</sup> HUD, "FY 2023 Continuum of Care (CoC) Program Competition NOFO: CoC Estimated Annual Renewal Demand Report (Revised 9-5-2023): UFA Designated Collaborative Applicants," accessed February 26, 2024, <https://www.hud.gov/sites/dfiles/CPD/documents/CoC/FY-2023-CoC-Estimated-ARD-Report-UFA-Revised-9-5-23.pdf>



## 6. COMMUNITY ENGAGEMENT KEY THEMES REPORT

*The Community Engagement Key Themes Report on the following pages was completed by RAMA Consulting in June 2024.*





# A PLACE TO CALL HOME FOR EVERYONE

A COMPREHENSIVE COMMUNITY ASSESSMENT ON  
HOMELESSNESS IN COLUMBUS & FRANKLIN COUNTY

 June 2024

**RAMA**  
ENGAGEMENT THAT INSPIRES

## INTRODUCTION

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Community Shelter Board enlisted the support of Focus Strategies and RAMA Consulting to conduct a Community Assessment on Homelessness in Columbus and Franklin County. The purpose of this Assessment is to answer the following questions:

- What is the current state of the homelessness response system?
- What are the primary concerns about current activities and strategies?
- What could work better to more equitably, efficiently, and effectively respond to homelessness now and into the future?
- What are the options for investing resources? What are the estimated impacts of those choices given anticipated community changes?
- What is the community's vision for homelessness response for the future? What strategies are most likely to result in that vision?

Community input was determined to be a critical piece of this Assessment, to ensure that recommendations reflect the needs and desires of the people directly impacted by the homelessness response system. RAMA worked to gather input from key system stakeholders including CSB Providers, Continuum of Care Members, local organizations serving housing-insecure populations, people with lived experience of homelessness, and the community at-large.

Collectively, this effort aims to analyze comprehensive data on the current response to homelessness in Columbus and Franklin County, Ohio and shape strategies to support those in need and create a more inclusive community for everyone. The following report summarizes what we heard from over 600 people who shared their personal and professional experiences with us.

***We thank all those who shared their time and energy with us to develop this report.***





## METHODOLOGY

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### Community Survey

A general community survey was conducted to ensure a broad perspective on an issue that impacts all Franklin County stakeholders. Survey questions gauged current perceptions of homelessness and services and solicited suggestions for improvements.

This survey was conducted electronically and was open for 60 days. It was distributed to CSB’s email subscribers and promoted through a social media campaign on Meta platforms (Facebook, Instagram). Over 1,500 individuals engaged with the ad, with a Click-through Rate (CTR) of 0.96% (1% is typical for community survey efforts).

We collected 546 responses from individuals across Franklin County:

- 16% indicated they are currently or have previously experienced homelessness
- 36% stated they have a friend or family member who is/has experienced homelessness
- 36% stated they volunteer or work with individuals experiencing homelessness
- 35% did not have a personal connection to homelessness
- *\*Respondents could check more than one response*

### Demographics

- 70% Female, 23% Male, 5% Gender Expansive
- Average Age of Respondents: 50 years old

People of color were moderately underrepresented in this survey, when compared to Franklin County demographic data.

#### Survey Respondents

- White: 70%
- Black/AA: 21%
- Asian: 0.7%
- Hispanic/Latinx: 1.4%
- Two or more races: 2.8%
- Undisclosed: 4.2%

#### Franklin County Demographic Data

- White: 65%
- Black/AA: 24.9%
- Asian: 6%
- Hispanic/Latinx: 6.4%
- Two or more races: 3.6%

93% of survey respondents strongly agreed that, when compared to other issues facing our community, addressing homelessness should be a top priority. However, given that 65% of survey respondents indicated they had some personal connection to homelessness, this number may not be fully representative of the broader community.

### Provider Surveys

An anonymous electronic survey was distributed to 16 Community Shelter Board (CSB) providers. CSB providers are contracted partners who deliver programs and services to people experiencing homelessness in Columbus and Franklin County. This survey focused on the experiences and challenges of direct service provision, as well as identifying opportunities to address homelessness.





To capture a broad range of viewpoints, we requested a minimum of two individuals from each organization to complete the survey. We invited a member of the executive leadership team, who could provide strategic insights and a high-level view of the organization, and a program director or team lead, who was more closely involved in frontline service work and could share firsthand experiences and perspectives of direct service workers.

We received 29 survey responses from:

- 15 Executive Directors/CEOs
- 9 Program Directors
- 5 Direct Service Supervisors
- 16 Providers indicated they provide Emergency Shelter services
- 14 Providers indicated they provide Rapid Rehousing services
- 18 Providers indicated they provide Permanent Supportive Housing
- 7 Providers indicated they provide Prevention services
- 2 Providers indicated they provide Street Outreach
- Additional services provided were identified as:
  - Legal, Clinical-Therapy, Advocacy, Housing Counseling, Home Visitation
  - Crisis services in coordination with National Center of Education Statistics (NCES)
  - Short term housing assistance
  - Affordable Housing Development, Direct Services, Youth Development programming, infant and early childhood development programming
  - Transitional Housing
  - Coordinated Point of Access/Homeless Hotline

### Continuum of Care (CoC) Survey

The Columbus and Franklin County, Ohio Continuum of Care (CoC) provides stewardship for all the strategies developed under our community’s strategic framework for action to respond to homelessness. They:

- provide funding for the capital, services, and operations of housing in Columbus and Franklin County;
- coordinate activities for the community plan to address homelessness;
- promote collaboration to achieve goals and strategies; and
- secure resources for programs and projects.

Membership on the CoC is broad and inclusive, with representation from the private sector, public sector, homeless service providers, faith-based organizations, public housing agencies, schools, hospitals, mental health agencies, law enforcement, and other stakeholders.

An electronic survey was distributed to all 41 CoC members to identify challenges and opportunities for systems coordination, gaps in services, and emerging best practices. Seventeen CoC members completed the survey representing:



- 9 Local Government
- 1 Youth Provider
- 1 Law Enforcement
- 3 Community Advocates
- 1 Domestic Violence Provider

### Non-CSB Provider Organizational Interviews

RAMA conducted eleven interviews with local agencies that serve people at-risk of or currently experiencing homelessness. These organizations were not current CSB provider agencies; their input builds a more comprehensive picture of gaps in services and opportunities for increased collaboration in the community. Phone interviews were conducted with:

- Home for Families
- IMPACT Community Action Agency
- Kaleidoscope Youth Center
- Jordans Crossing
- Make-A-Day
- Jewish Family Services
- NAACP (Columbus Chapter)
- Open Shelter
- PEER Recovery Center
- Star House
- Revive Church Hilltop

### Focus Groups

Focus groups were used to gain further insights into the lived experiences of individuals who were currently or had experienced housing insecurity. To ensure easy accessibility, RAMA coordinated with local organizations and case managers to perform focus groups where people were naturally gathered. All participants were provided with an onsite meal and a \$20 gift card to acknowledge their time.

Four focus groups were scheduled in coordination with Make-A-Day, Open Shelter, Kaleidoscope Youth Center, and Franklin County Area on Aging. A total of 21 individuals participated in these focus groups: 42% were people of color, 33% were male, 38% female, and 29% were transgender/gender fluid. Though participation in these groups was underwhelming, it should be noted that this assessment includes the voices of at least 110 individuals who have or currently are experiencing homelessness, with most providing input via the community survey.

Standard qualitative thematic analysis was used to aggregate responses gathered via interviews, focus groups, and surveys for each stakeholder group and then themes were compared for similarities and differences to better understand the current state of our homelessness response system and opportunities for improvement.



## KEY FINDINGS

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This section details the varied stakeholder perspectives regarding the current state of our homelessness response system as well as opportunities for improvements. By synthesizing this data from a wide variety of individuals, we gained insight into the current state of Franklin County’s homelessness response system as well as the opportunities for future, impactful improvements.

### Strengths of the Current System

The three groups—CSB Providers, non-CSB provider organizations, and Continuum of Care members—valued collaboration and communication among service providers and recognized the dedication of individuals involved. Differences in focus emerged:

- Non-CSB provider organizations emphasized outreach and relationship-building.
- CSB Providers highlighted coordinated entry and data-driven decisions.
- Continuum of Care members stressed diversity, equity, and local partnerships.

Each group acknowledged the positive impact of partnerships, underscoring different strengths within their contexts.

### *Non-CSB Provider Organizations*

Organizations serving individuals experiencing homelessness praised the effectiveness of outreach efforts and the importance of building strong relationships with those they serve. They highlighted how navigators and caseworkers play a critical role in supporting individuals on their journey, with effective caseworkers being particularly valued for their ability to connect and provide support. Additionally, these organizations emphasized successful collaborations with partner agencies such as churches and food pantries, which have proven essential in addressing homelessness. The positive impact of identifying housing needs and investing in housing creation was also noted, despite the acknowledgment that the investment is not yet sufficient to meet the community's needs.

The new leadership at CSB has provided a renewed sense of hope and drive for future programs, with respondents noting positive changes and responsiveness from government funders and City Council. Furthermore, organizations highlighted instances where shelters made special arrangements for vulnerable individuals, such as those with special needs or registered sex offenders, showcasing a compassionate and flexible approach to providing shelter and support.

### *CSB Providers*

Providers of homeless services identified strong coordination and collaboration among providers as a major strength in the current response to homelessness. They praised the efficiency of CSB and the effectiveness of the coordinated entry process and data collection through Clarity (the local Homeless Management Information System), which have been instrumental in addressing homelessness. The success of prevention activities and specific programming for pregnant women and transition-age youth was also highlighted, along with the effectiveness of the referral process and case management services.

Improved partnerships and communication among service providers were seen as positive developments, noting collaboration with community service providers playing a crucial role in supporting residents towards self-sufficiency. Despite minimal funding and intense pressure, shelter providers were



commended for maintaining operations and ensuring that new housing options and successful warming center pilots were available. Providers also mentioned their willingness to adopt innovative approaches and think outside traditional methods, highlighting the effectiveness of the Unified Supportive Housing System and collaboration with housing authorities and mental health systems as critical to their success.

### ***Continuum of Care Members***

Members of the Continuum of Care emphasized the strong desire for collaboration and effective communication with community partners as significant strengths in the current homelessness response. They appreciated the presence of caring and dedicated individuals who support the homelessness response system, noting the strong intent to cooperate among service providers. The new focus on diversity and equity to address racial disparities in the sheltered population was seen as a positive initiative, with CBS's willingness to think outside the box and attempt new strategies being particularly appreciated.

The availability of resources, including shelters and overflow options, was highlighted as a strength, along with the resource-rich environment provided by facilities like Star House for teens. Strong local partnerships and a legacy of excellence in service provision were noted as beneficial, and the use of data-driven decision-making to improve homelessness response strategies was also mentioned as a positive aspect of the current system.

### **Challenges in the Current Homelessness Response System**

We asked stakeholders about the most pressing challenges in addressing homelessness. Nearly all agreed that a critical shortage of affordable housing is the top issue, as well as a need for better coordination and systemic support. However, non-CSB provider organizations also emphasized immediate access to safety and trauma-informed services, while CSB providers focused on sustainable funding and racial disparities. Continuum of Care members highlighted the rise in unsheltered homelessness and the specific needs of vulnerable or underserved populations.

### ***Non-CSB Provider Organizations***

Organizations serving individuals experiencing homelessness that are not currently funded through CSB identified a severe lack of affordable housing as the most pressing challenge in the community. This theme, mentioned fifteen times, underscores the difficulty in securing housing for those with substance use histories and the imbalance between the demand and supply of low-income housing units. Many emphasized the critical need for more affordable housing options, as the existing supply falls short of meeting the needs of the community.

Systemic barriers, referenced eight times, also emerged as significant hurdles. These include the complex navigation of systems, particularly for young adults aged 18 and above, and the need for flexible therapy services tailored to transient populations. The challenges in obtaining required documentation and identity verification further complicate access to housing and services.

Immediate access to safety was highlighted six times, with the importance of places like Star House that provide round-the-clock services emphasized. The pressure from neighbors who do not want to see people



sleeping outside and the lack of safe places for individuals experiencing homelessness to stay were also noted.

Mental health and substance use issues were mentioned five times, stressing the need for services that address complex trauma and the effects of violence. There is a significant demand for mental health and addiction services that cater to the unique needs of individuals experiencing homelessness.

Finally, the need for better coordination and comprehensive planning was discussed four times. Respondents called for improved coordination among service providers and a “standardized process”, such as standard data protocols or metrics, for addressing homelessness, emphasizing the importance of a comprehensive plan to tackle the issue effectively.

### ***CSB Providers***

CSB Providers also pointed to the lack of affordable housing as the foremost challenge, with fourteen references to this issue. They highlighted specific barriers, such as landlords' reluctance to accept individuals with histories of incarceration or substance use, which exacerbate the housing crisis.

Funding gaps were identified as a critical issue ten times. Providers stressed the need for adequate and sustainable funding to address homelessness, noting the significant public funding gaps at City and County levels.

Mental health and addiction services were mentioned seven times as another pressing challenge. Providers expressed concerns about the inadequacy of these services and the recurring cycle of individuals being treated and discharged without substantial improvement.

The need for better coordination and strategic use of housing stock was highlighted six times. Suggestions included more strategic use of existing housing stock, such as shared living arrangements, and better coordination between different service systems like mental health and homeless services.

Systemic racial discrimination and disparities were noted five times. Providers emphasized the over-representation of Black and brown individuals in the homeless system compared to the general public and the lack of progress in addressing systemic racial discrimination.

### ***Continuum of Care Members***

Members of the Continuum of Care identified the shortage of affordable housing as the most pressing challenge, with eight references. They discussed the lack of permanent supportive housing and deeply affordable housing, as well as issues related to the availability of affordable housing units and initial payment assistance.

Service delivery barriers were highlighted seven times. Members pointed out long wait times and noted that once the shelter is full, other options are not identified as standard protocol, creating additional barriers.

The increase in unsheltered homelessness was identified as a major issue six times. Members emphasized the unique needs of older adults and the importance of considering these needs in planning.

The need for better coordination and elevation of best practices was mentioned five times. Members noted the struggle to promote best practices in homelessness response strategies to the broader public and



private partners and the need for better coordination and awareness of interventions happening throughout the system.

Lastly, the importance of flexibility and person-centric services was highlighted four times. Members stressed the need for services that are flexible and centered around the individual's needs, mentioning specific populations with limited service options, such as the LGBTQ+ community and people with disabilities.

### ***Individuals Experiencing Homelessness***

People experiencing homelessness noted that barriers to overcoming homelessness include lack of access to living-wage employment and eviction histories. Providers and organizations noted additional challenges such as issues with technology, literacy, general life skills, and continued substance abuse. Mental health and substance use were significant concerns, with both individuals experiencing homelessness and provider agencies highlighting a critical gap in services for those dealing with mental health issues and substance abuse. They emphasized the need for integrated mental health services that address complex trauma and the importance of having more advocates for people struggling with mental health.

Navigating the system to access housing services is often difficult due to complex application processes, long waitlists, strict eligibility criteria, and lack of transportation. A significant barrier to accessing services is the lack of proper identification or birth certificates, compounded by lack of transportation, access to technology, or family members necessary for documentation, particularly for youth. The lengthy and complicated process can cause people to lose hope, particularly when they are already dealing with other challenges.

### **Service Experiences**

We asked individuals experiencing homelessness or housing insecurity to share their experiences with service delivery. Due to limited data, we have also included responses from organization interviews and CSB Provider comments, who relayed anecdotes and experiences from their direct service work with individuals.

Emergency shelters are often the first point of entry into the homelessness response system, and congregate shelters were described as overcrowded and having restrictive rules, such as a lack of privacy, curfews, and prohibitions on pets and substance use. Additionally, congregate shelters cannot always accommodate other types of families, such as childless heterosexual couples. Safety in shelters was another frequently referenced issue and was particularly pronounced among LGBTQ+ individuals, who expressed concerns about harassment, disrespect from staff, and theft. It was reported during the focus groups and organizational interviews that these factors deter many people from using shelters.

Relationships with staff stood out as a significant factor during focus groups. Eleven individuals experiencing homelessness reported feeling unseen and unheard, noting that staff seemed judgmental or lacked patience. In contrast, services that fostered a sense of community, using recreational opportunities such as meal gatherings and salon services, were more engaging, reduced stigma, and allowed relationships to develop. Positive experiences were conveyed by individuals involved in longer-term



services (such as transitional housing), where those relationships could develop over time. Additionally, seven focus group participants noted that when staff shared their background, they were more comfortable and willing to engage with the services.

## Emerging Needs

### *Underserved Populations*

Through surveys and interviews, we asked all stakeholders what demographics are currently being left behind or not served well by the current homelessness response system. Survey respondents could choose from a multiple-choice list, as well as write in a response (more than one response was allowed). This data was aggregated to develop a prioritized list based on how many respondents referenced the specific demographic as being underserved. It should be noted that among CSB Providers, non-CSB provider organizations, and CoC members, the responses were fairly even with no clear prioritization – likely due to their specific professional connections to certain populations. However, among the community survey, childless adults and couples received the most mentions (54.5% of all respondents), followed by LGBTQ+ populations (41%).

Demographics seen as underserved (in order of magnitude):

- |                                  |  |                                    |
|----------------------------------|--|------------------------------------|
| 1. Childless Adults /<br>Couples | 7. Older Adults / People<br>with disabilities                | 11. Veterans                       |
| 2. LGBTQ+                        | 8. Pregnant  | 12. Black Men                      |
| 3. Families with Children        | 9. Latinx<br>individuals/families                            | 13. Abuse/trafficking<br>survivors |
| 4. Youth                         | 10. Mental Health /Alcohol<br>and other Drug Abuse<br>issues | 14. Post-release offenders         |
| 5. Immigrants                    |  |                                    |
| 6. Black Women                   |  |                                    |

Written and verbal comments additionally stressed the need to better serve neurodivergent individuals, the transgender community, and foster care youth transitioning out of the system, all of whom are at higher risk of homelessness. There were also five references regarding trauma-informed care, while beneficial, needing to be expanded to offer varied support that helps individuals reset and rediscover themselves after experiencing homelessness. Accessibility of services for individuals with a disability came up frequently during focus groups. One individual noted that the bunk beds offered in congregate shelter were difficult for those with mobility issues. Another individual shared that the emergency shelter building had too many stairs, so they were placed in a motel. However, that option felt too isolating and detrimental to their mental health. Above all, focus group participants stressed the need for flexibility to meet the needs of the individual when possible.





### Concerns About the Future

All stakeholder groups overwhelmingly stressed the urgent need for a comprehensive action plan, with a particular focus on increasing the availability of affordable housing. The influx of large companies like IBM, Google, Amazon, Intel, and Honda is seen as pushing residents out and exacerbating gentrification, leading to significant increases in property values and diminishing opportunities for generational wealth and homeownership. Stakeholder groups emphasized the necessity of not just subsidized housing but new buildings to drive down overall housing costs through increased supply. There is a rising concern that middle-income workers from these companies will consume available affordable housing, pushing out low-income residents and potentially leading to a surge in homelessness if housing capacity is not expanded. Pressure on and incentives for developers to allocate a portion of new developments to affordable housing were seen as essential.

### Challenges and Opportunities in Service Delivery and Coordination

Due to the complexity of homelessness, coordination among service providers in Columbus and Franklin County is crucial for effective service delivery. We asked CSB Providers and Continuum of Care members about current coordination challenges and improvement opportunities. Both groups identified the lack of affordable housing and the need for better collaboration as major issues. Providers emphasized sustainable funding and a person-centered approach, while CoC members focused on community resistance and advocacy barriers. Both groups see opportunities in streamlining processes, enhancing communication, and fostering collaboration to improve homelessness services.

#### ***CSB Provider Responses***

Providers of homeless services highlighted several key challenges and opportunities within the current system. A prominent theme, mentioned 16 times, was the lack of affordable housing, which significantly hampers efforts to address homelessness. Providers noted that without sufficient affordable housing stock and incentives for landlords to accept Section 8 vouchers, the system is unable to efficiently house everyone experiencing homelessness.

Another frequently referenced issue, mentioned 14 times, was the fragmentation and lack of coordination among service providers. This fragmentation leads to inefficiencies and gaps in services, with providers often operating in silos rather than collaborating effectively. There is a strong need for incentives to encourage agencies to work together to maximize transformative impact. Additionally, the system's reliance on data and process-heavy interventions, rather than person-centered solutions, was criticized for creating a rigid and punitive environment that does not adapt well to the unique needs of individuals and families.

Providers also pointed out, in 10 references, the inadequacy of current funding levels. Sustainable and predictable funding is necessary to support innovative solutions and pilot programs. The need for higher wages for frontline workers was emphasized, recognizing the challenges of expecting a marginalized, underpaid workforce to serve a marginalized, overlooked population.

Several providers suggested specific changes to improve program effectiveness, referenced 8 times. These included simplifying complex application processes, expunging eviction records, providing longer-term





subsidies for stability, and integrating case management software into the HMIS system. There was also a call for a more flexible and responsive approach to funding, which would allow for aftercare support and prevent further episodes of homelessness.

### ***Continuum of Care Responses***

Continuum of Care (CoC) members echoed some of the concerns of providers but also focused on specific challenges related to advocacy and systemic barriers. The lack of empathy and support from the community, mentioned 12 times, was identified as a significant hurdle. Misunderstandings and misinformation about affordable housing, as well as NIMBYism (Not In My Back Yard), were noted as obstacles that hinder advocacy efforts.

Rising costs of building new housing units and insufficient funds to develop subsidized housing were mentioned 10 times as major barriers to increasing the affordable housing stock. CoC members also highlighted the complexity of navigating multiple agencies with different requirements for receiving services, which can be daunting for families in crisis.

Opportunities for enhancing services and improving coordination among CoC members, referenced 8 times, included improving communication and collaboration outside of regular quarterly meetings. Identifying and sharing resources, encouraging increased collaboration to avoid duplication of services, and enhancing member knowledge of the current system were seen as crucial steps. Ensuring that meetings are accessible to all members, considering barriers like transportation, was also emphasized.



## GOALS AND OPPORTUNITIES

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In examining the priorities for better serving homeless populations across four distinct groups – the Continuum of Care, people experiencing homelessness, CSB providers and other organizations – several key themes emerge, revealing both commonalities and unique perspectives.

**Affordable Housing** stands out as the most critical priority across all four groups. The CoC, people experiencing homelessness, and providers alike emphasize the urgent need to increase the supply of affordable housing. The CoC highlights the importance of addressing the supply and demand imbalance, noting there is simply not enough affordable housing to meet the needs of everyone. Similarly, people experiencing homelessness stress the availability of affordable housing and permanent supportive services, expressing the need for immediate and accessible solutions. Providers echo these sentiments, advocating for more affordable housing options, particularly for very low-income households. The consistent emphasis on affordable housing across all groups underscores its foundational role in addressing homelessness effectively.

**Increased Funding** is another recurrent theme mentioned by all groups. The CoC calls for increased and sustainable funding to support housing and homelessness programs, recognizing that financial resources are crucial for long-term solutions. People experiencing homelessness also highlight the need for more funding, particularly for supportive housing programs and renovations that allow people to stay in their homes, emphasizing the importance of timely and effective financial assistance. Providers stress the necessity of increased funding to ensure the sustainability of their efforts and to cover the comprehensive needs of the homeless population. The alignment on the need for robust funding reflects a shared understanding that financial investment is essential for meaningful progress.

**Mental Health Services** are identified as a critical need by all stakeholders. The CoC points out the necessity for better access to mental health services and treatment, acknowledging the significant role mental health plays in homelessness. People who are homeless call for more accessible and functional mental health resources, highlighting the barriers they face in receiving appropriate care. Providers, both CSB and non-CSB, emphasize the need for more effective mental health services, recognizing that many individuals experiencing homelessness struggle with mental health issues. The unanimous call for enhanced mental health services across all groups highlights the interconnectedness of mental health and homelessness and the need for integrated support systems.

While these common themes underscore shared priorities, each group also brings unique perspectives to the table. **Shelters** are a significant focus for people experiencing homelessness, who stress the need for more beds and better-designed shelters to accommodate unique needs, avoid overflow, and ensure safe, dignified living conditions.

**Community Collaboration and Awareness** is particularly emphasized by the CoC and providers. The CoC underscores the importance of broad-based local community buy-in and advocacy, while providers highlight the need for better collaboration between community agencies.

**Education and Workforce Development** are prioritized by the CoC, which calls for financial literacy, workforce development, and life skills training as preventive measures against homelessness. This perspective is less prominent among people who are experiencing homelessness and providers, who may be more focused on immediate housing and service needs.



**Government and Policy Changes** are notably emphasized by providers, who advocate for regulatory reform and better government collaboration to reduce barriers. This focus on systemic changes reflects providers' understanding of the broader structural issues contributing to homelessness, a theme less prominently mentioned by CoC members and people who are homeless.

In conclusion, while affordable housing, funding, and mental health services are universally acknowledged as critical priorities, the perspectives of each group offer valuable insights into the multifaceted nature of homelessness. Addressing immediate needs, such as shelter conditions, alongside long-term strategies involving community collaboration, education, and policy reform, will be essential for creating comprehensive solutions to homelessness. Recognizing and integrating these diverse perspectives will be crucial for developing effective and sustainable approaches to support homeless populations.

### **Best Practices**

Continuum of Care members and CSB Providers offered a range of best practices for improving homelessness response and prevention, focusing on specialized approaches, direct cash interventions, integrated services, and creative housing solutions.

#### ***Specialized Approaches***

Continuum of Care members emphasized the need for specialized approaches for specific populations, such as older adults, couples, and individuals with pets. They suggested utilizing diversion strategies to better connect individuals with family and support systems. Additionally, providing opportunities for couples to stay together and creating spaces where individuals can board their pets were highlighted as essential steps to improve shelter accessibility.

#### ***Direct Cash Interventions and Eviction Prevention***

Both groups highlighted the effectiveness of direct cash interventions for families and individuals in need and consistent resources for eviction prevention. Programs like PRC (Prevention, Retention & Contingency) Impact were mentioned as successful models. These interventions can provide immediate financial support to prevent homelessness and help families maintain their housing stability. Continuum of Care members also noted the importance of critical time intervention (CTI) during the transition from homelessness to housing, recognizing this period as crucial for providing support.

#### ***Integrated Services and Strategic Partnerships***

The utilization of a voucher system for rent and utilities, along with bridging gaps between agencies such as Franklin County Children Services (FCCS) and the shelter system, were noted as best practices. Continuum of Care members stressed the importance of partnerships with community-based services to prevent recidivism and maintain housing stability. Ensuring that housing is located near essential services such as transportation, grocery stores, and medical facilities was also emphasized, along with the provision of on-site services to support families in maintaining their housing.

#### ***Trauma-Informed and Harm Reduction Approaches***

CSB Providers strongly advocated for system-wide trauma-informed training and the implementation of harm reduction strategies. They emphasized the importance of blending harm reduction with the Housing First approach, especially in congregate shelters. This approach is crucial for effectively supporting



individuals with complex needs while maintaining flexibility to meet the diverse needs of the homeless population.

### ***Integrated and Community-Based Services***

Smaller, neighborhood-based shelters with on-site wrap-around services were recommended as effective models. Providers called for upstream universal prevention, which requires true collaboration between schools, healthcare providers, and landlords. This approach aims to provide housing assistance to families and individuals beginning to experience housing instability, preventing them from becoming homeless.

### ***Rapid Rehousing and Housing First Models***

Providers emphasized the need for true rapid rehousing and Housing First models, stressing that all partner agencies must fully adhere to these models to avoid friction within the system. They also called for more equitable tools to target homelessness prevention assistance, ensuring support is directed to those most at risk of becoming homeless.

### ***Support for Children and Families***

A funded approach to support children within families experiencing homelessness was highlighted as crucial. This includes providing childcare and mental health care, as well as creating positive care environments for older children. Alternative options to congregate shelters for families, using a 2Generation or Whole Family approach, were also recommended to better serve families experiencing homelessness.

### ***Collaboration and Predictable Funding***

Committed government partners and secure, predictable funding were emphasized as necessary for an effective homelessness response. Both groups stressed the importance of learning from best practices in other communities and adopting proven methods. Providers suggested that collaboration among various stakeholders and a focus on long-term, sustainable funding are essential for addressing homelessness effectively.

### ***Creative Housing Solutions***

Innovative housing solutions, such as tiny houses and converting abandoned buildings into affordable housing, were recommended. The West Coast's approach to opioid addiction treatment, which includes starting Medication-Assisted Treatment (MAT) in the emergency room, was highlighted as a model to consider for addressing addiction-related homelessness.

In summary, Continuum of Care members and providers stressed the importance of specialized, trauma-informed, and harm reduction approaches, direct cash interventions, integrated services, and creative housing solutions. They emphasized the need for consistent and flexible funding, collaboration among various stakeholders, and the adoption of best practices from other successful programs. These strategies aim to provide a comprehensive and effective response to homelessness, addressing both immediate needs and long-term stability.



## CONCLUSION

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The findings from this Community Engagement Report, part of the comprehensive Community Assessment on Homelessness in Columbus and Franklin County, highlight the multifaceted nature of homelessness and the urgent need for a coordinated, innovative response. Across all stakeholder groups—organizations serving people experiencing homelessness, CSB providers, Continuum of Care members, and individuals experiencing homelessness—there is a clear consensus on the critical importance of increasing affordable housing and enhancing funding for homelessness services. Additionally, there is a strong emphasis on the necessity of trauma-informed, harm reduction approaches, and the integration of mental health services to address the complex needs of individuals facing homelessness.

While common themes such as the need for affordable housing, sustainable funding, and improved mental health services were universally acknowledged, the perspectives from each group offered unique insights into specific challenges and opportunities. For example, individuals experiencing homelessness emphasized the immediate need for more shelter beds and better-designed facilities, while providers and Continuum of Care members focused on systemic changes, including better coordination, advocacy, and community collaboration.

Moving forward, it is essential to build on the strengths identified in this assessment, such as effective partnerships and communication among service providers, and to address the highlighted challenges through comprehensive, data-driven strategies. By adopting best practices from other successful programs and fostering a community-wide commitment to addressing homelessness, Columbus and Franklin County can make significant strides towards ensuring that all residents have access to safe, affordable housing and the support services they need to thrive.



## 7. COMMUNITY ASSESSMENT RECOMMENDATIONS

The Comprehensive Community Assessment analyzes the design and functioning of the community's homelessness response system, including performance strengths and weaknesses within the current and anticipated local housing market context. Early in the assessment process, stakeholder engagement was identified as a system gap. As a result, community and stakeholder perceptions of system performance were also collected and analyzed. Based on Assessment findings and informed by best practices and emerging research, Focus Strategies developed a set of recommendations to change system practices and design toward the goal of scaling the homelessness response system and reducing projected rates of homelessness over the coming years.

It is important to note that the community, like most communities in the country, is currently using COVID-19 related funding sources to fund core homeless system operations, such as emergency shelter. Those funds typically expire in 2026 and there are no additional federal resources anticipated to fill those gaps. The recommendations provided in this document, and in the companion Comprehensive Community Assessment Report, require additional resources beyond the currently funded level. In other words, to reduce homelessness over the coming years, funding currently provided by COVID-19 related resources will have to be replaced, as well as significant additional resources committed to homelessness prevention/diversion, system updates and improvements, and housing and related services costs.

Community leadership has indicated that reducing homelessness and addressing the housing crisis are important goals. Specifically, leadership is committed to a future for the region that maintains the best elements of a mid-size city while growing at a significant rate. "Big city problems," including significant visible homelessness, are seen as problems important to avoid in the best interests of community wellbeing for all. Given the trajectory of the housing market, avoiding such challenges will require a bias toward action. Implementing new strategies or modifying current practices requires a change management approach.

An effective change management approach for the Columbus and Franklin County community emphasizes implementation, with a strong orientation to continuous improvement. We recommend the public and private local funders of the Continuum of Care



(CoC)<sup>20</sup> and Community Shelter Board (CSB) embrace a Plan, Do, Study, Act (PDSA) process. This process assumes change requires planning, implementing, learning, and adjusting to achieve improvements. The current system has the system components needed to be successful but does not have the resources to achieve scale nor implementation for all populations experiencing homelessness. The current system also does not demonstrate adequate flexibility to deviate from current norms, learn, and implement improvements continuously. A PDSA process, when embraced by funders, can create significant opportunity to drive inclusive positive change. A brief overview of PDSA steps is included at the end of this section.

## **SYSTEM CHANGE RECOMMENDATIONS**

Recommendations are informed by the system modeling projections and system findings. As detailed in the Assessment report and in the System Modeling Process and Results section of the Technical Report, the baseline model projects growth in homelessness, including a 68% increase in unsheltered homelessness if the community continues on its current path. An iterative process was used to develop the future state model informed by local data and best practices, feedback from the Assessment Steering Committee, and input from hundreds of community stakeholders engaged through interviews, focus groups, and surveys. The future state modeling process built on the baseline model to project the impacts of making changes in program capacity and program outcomes for prevention and diversion, shelter, rapid rehousing, and permanent supportive housing programs. Changing any of these system components can have impact, but transformation requires coordinated adjustments across multiple components of the homelessness response system. The future state modeling targets for system capacity and performance are summarized in Table 1.

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<sup>20</sup> A Continuum of Care (CoC) is a group of organizations, government agencies, and individuals charged with coordinating the homelessness response system in a given region. The Community Shelter Board leads the CoC for Columbus and Franklin County and is responsible for applying for federal funding to respond to homelessness, allocating funding in alignment with community goals and federal priorities, ensuring compliance with federal regulations and requirements, overseeing the implementation of the homelessness response system, and managing a coordinated data system, among other responsibilities.



**Table 1. Future State Modeling Targets**

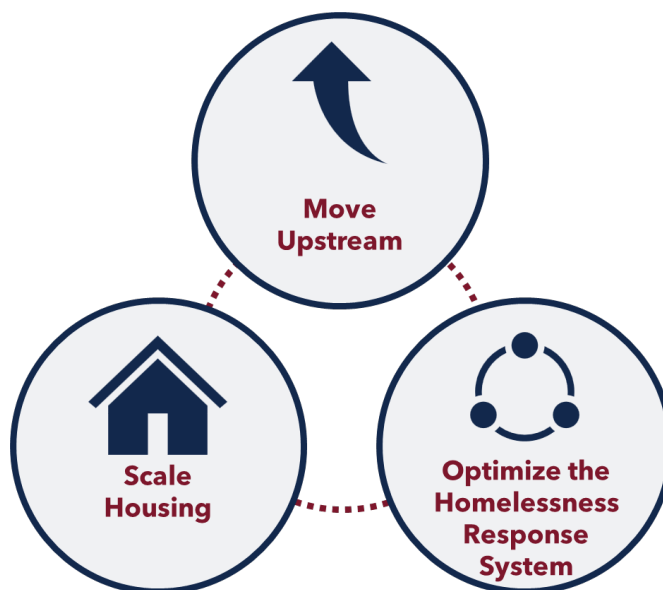
<b>Move Upstream</b>	Divert at least 25% of single adult households per year from further services within the homelessness response system
<b>Optimize the System</b>	Move to non-congregate shelter options for families and repurpose existing semi-congregate spaces
	Achieve an average length of time for a discrete stay in shelter of 30 days
	Increase the percentage of single adults accessing permanent housing from shelter to 25%
	Increase utilization rates for rapid rehousing to at least 90%
	Extend the average length of stay in rapid rehousing to 12 months
<b>Scale Housing</b>	Add at least 250 slots of rapid rehousing for single adults over a five-year period
	Add at least 375 units of permanent supportive housing for single adults over a five-year period

Recommendations reflect changes in capacity and performance in the homelessness response system that can result in reductions in rates of homelessness from the baseline model, improve the efficacy of the homelessness response system, advance equity, and ensure the homelessness response system’s design and implementation is grounded in and responsive to the community. They include strategies to realize the community’s desired future state, organized around moving upstream, optimizing the performance and outcomes of the system, scaling permanent housing options, and expanding practices of continuous learning, engagement with the community, and exploring opportunities to improve equity (see Figure 1).





**Figure 1. Diagram of Recommendations**



**A. Move Upstream**



**Recommendation 1:** *Implement evidence-based diversion practices for single adults, to divert at least 25% of households per year from further services within the homelessness response system*

Thousands of households each year enter the homelessness response system. One of the most efficient methods to reduce homelessness is ensuring fewer people become homeless and access the homelessness response system. Diversion is an evidence-based practice that involves supporting households seeking shelter or assistance from the homelessness response system to find safe alternatives to accessing shelter to resolve their housing crisis. Resolutions often include one-time financial assistance for deposits, rental arrears, or moving expenses. If a household is staying with friends or family members, financial assistance can be used to pay for groceries, gas, or a share of utilities to help and incentivize the host household.

The current system includes multiple opportunities to divert families; comparable opportunities for single adults do not exist. To decrease the rate of homelessness overall, robust diversion is needed to decrease inflow into the homelessness response system. It is



recommended the system implement evidence-based diversion practices, specifically for single adults.

In addition to implementing robust diversion, many households experiencing homelessness do not require long-term supportive services to gain and retain housing. These households could benefit from a rapid exit strategy. Rapid exit operates similarly to diversion but focuses on people already staying in shelters or staying outside in unsheltered locations. Providing housing-focused services and short-term financial assistance can be enough for many households to resolve their own homelessness. Both families and single adults can benefit from diversion and rapid exit strategies. To scale the homelessness response system to meet current needs, beginning to implement these strategies specifically for single adults is needed.

***Recommendation 2:*** Use underutilized Direct Client Assistance funds to support additional diversion and to expand rapid exit strategies for single adults

One possible source of funding to expand diversion and rapid exit strategies is the Direct Client Assistance (DCA) program. DCA funds have been underspent. Redirecting any flexible DCA funds for diversion and rapid exit, particularly for single adults, can fill a gap in the system and ensure resources are fully utilized. This may require updating program guidelines for DCA assistance by expanding the allowable costs to include items like grocery cards or minor home repairs for a host household. In addition, this requires removing the program requirement that households must demonstrate they can sustain housing once assistance ends. Some people may not be able to identify a clear path to sustain housing while they are searching, but once in housing they find a way to continue to pay for their housing expenses.

Initial steps to move upstream can include:

- Inventory available funds that could be used for diversion or rapid exit strategies for single adults
- Assess the criteria of DCA funding sources to determine where there is flexibility to pay for different costs
- Identify agencies in the homelessness response system where diversion and rapid exit strategies could be implemented for single adults



- Meet with system providers to understand what support, in addition to resources, is needed for organizations to provide diversion and rapid exit to single adults

## B. Optimize the System



System optimization involves improving performance and outcomes of the system. These changes can increase the number of people served and supported to move back into permanent housing by improving the flow through the system, ensuring that if people must stay in shelter those stays are short and people are connected quickly to permanent housing. Recommendations focus on opportunities to optimize system performance and outcomes in shelter and rapid rehousing.

### Optimize the Shelter System

**Recommendation 3:** *Achieve an average length of time for a discrete stay in shelter of 30 days and improve the proportion of single adults accessing permanent housing from shelter to 25%*

Improving performance of shelters requires achieving an average length of a discrete stay of 30 days for all households.<sup>21</sup> This would be achieved by implementing strategies to help people in shelters move quickly out of shelter and into permanent housing. This should be treated as an average and not a limit; some people may require more time in shelters, and stays should not be capped.

A 30-day average length of a discrete stay is an increase of seven days over the current average stay for single adults but is consistent with the goal of increasing exits to permanent

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<sup>21</sup> CSB's published reports define the average length of shelter stay as the average cumulative days of shelter usage by unduplicated households. This means that all days for people with multiple stays in shelter are included in the numerator, while each household is only included once in the denominator. In effect, this is the average number of days households were engaged with any shelter during the period, rather than the average length of each separate enrollment (or stay) as is more typically used in the field. For the purposes of this report, we use the term "average length of a stay in shelter" where relevant for clarity for local readers.



housing by ensuring people in shelter have time to be supported to access and move into permanent housing. The average length of stay for families is based on estimates developed by staff from CSB as part of a 2024 funding request to the City of Columbus and Franklin County and reflect a gradual reduction from 75 days to 30 days by Year 5 of the model. To complement this length of stay target, shelter providers should also aim for at least 25% of single adults accessing shelter to exit the shelter into permanent housing. Combined, these recommended performance targets reflect a shelter model in which households have safe places to stay temporarily and are able to move relatively quickly out of shelter and into permanent housing, ensuring available shelter units can turnover for the next household in need.

***Recommendation 4:*** *Move to non-congregate shelter options for families, using motels and hotels, and repurpose existing semi-congregate spaces to shelter couples, LGBTQ+, and other vulnerable individuals*

Optimizing the shelter system also includes ensuring shelter options are safe and accessible to a diverse population. The desire for safe shelter was expressed by people experiencing homelessness engaged during the Assessment. Expanding shelter options to include non-congregate and semi-congregate spaces can better meet varied community preferences.

Making these changes to shelter configurations will result in a temporary increase in shelter capacity while the system scales permanent housing options. Over time, the system can reduce shelter capacity for families while also reducing rates of homelessness because of corresponding investments in strategies to move resources upstream and scale permanent housing.

***Recommendation 5:*** *Identify replacement funds for expiring and one-time shelter funding*

An optimized homelessness response system requires ensuring the system can operate at its existing capacity and scale to meet the current and future needs of the community. The homelessness response system, and the shelter system specifically, is relying on one-time funding to maintain current operations. It is recommended community funders identify sustainable, reliable funding to ensure the current shelter capacity is retained and to prevent disruptions to services while working to scale the homelessness response system.



## **Optimize the Permanent Housing System**

CSB providers and staff state that as rents have increased, it has become more difficult for housing programs relying on the private rental market, including rapid rehousing and scattered site permanent supportive housing, to support people to access and retain housing. This is a common experience across the country as rental markets have gotten more expensive and vacancy rates have continued to tighten. To improve program performance to the degree needed to achieve the outcomes illustrated in the future state model, program models must be calibrated to housing market conditions. This includes updating strategies for housing subsidies, including extending the duration of the subsidy available and developing shallow subsidies that can be added after RRH is over for some households.

***Recommendation 6:*** *Improve performance of rapid rehousing including increasing utilization rates to at least 90%, extending the average length of stay to 12 months, and improving the percentage of households who exit the program to permanent housing to 80%*

Households in time-limited subsidy programs are requiring more time to stabilize in housing and increase their income to assume full responsibility for rental expenses. In addition, providing longer term subsidies may encourage more landlords to rent to households using temporary rental assistance because payment over a longer period of time is assured. The future state model calls for encouraging longer lengths of stay in rapid rehousing programs overall, with an average length of stay of 12 months. Some households may require less support, and others will require more than 12 months of support. Extending the potential duration of these subsidies may improve households' opportunities for success and improve program outcomes.

To complement changes in the length of stay in RRH programs, it is recommended to increase utilization rates of RRH to at least 90% and improve exits from RRH to at least 80%. These performance standards align with nationally-adopted best practices.

***Recommendation 7:*** *Implement shallow subsidies*

Given rising housing costs and the lack of dedicated affordable units, some households may require longer-term financial support to retain housing. Shallow subsidies refer to subsidies that are generally either a fixed monthly amount or cover a percentage of the rent. These are compared to "deep" subsidies that are associated with programs like the Housing Choice



Voucher program in which households pay a percentage of their income toward rent and the program pays the difference. Deep subsidies usually provide more financial assistance than shallow ones and change as a household's income changes, while shallow subsidies tend to be smaller and do not change with income. Shallow subsidies can be provided for a defined or indefinite length of time. A shallow subsidy program can be used by households requiring less subsidy to maintain their housing and can be used as a step-down from rapid rehousing programs.

***Recommendation 8: Increase landlord engagement strategies***

To achieve the performance outcomes included in the predictive model, strong partnerships with landlords are needed. Increasing participation of landlords may require increasing incentives and expanding risk mitigation funds available to landlords to repair units from damage and wear. Adjustments to landlord engagement strategies should be sized to the housing market, with deeper incentives required for a market that is more expensive with fewer vacancies. In addition, CSB can follow through and expand on suggestions from landlords. CSB is actively working to respond to landlord concerns, including by developing a training for tenants to promote timely communication, as landlords have suggested. Building on these efforts to implement strategies to respond to landlord needs can strengthen the system's ability to recruit and retain landlords. As with other recommended strategies, landlord engagement strategies should be regularly assessed and adjusted to ensure the types and size of incentives provided to landlords are calibrated to the housing market and are contributing to improved program outcomes.

Initial steps to optimize the system can include:

- Identify replacement funds for COVID-19 related sources that are expiring
- Modify program guidelines and communicate new expectations on providing longer subsidies to rapid rehousing providers
- Identify potential sources of funding, including assessing the interest of local funders, for shallow subsidies
- Meet with staff in contact with private landlords to gather information on the feedback landlords are providing regarding current experiences in partnering with CSB housing providers



- Gather additional input from private landlords or landlord associations, particularly those who do not regularly attend learning exchanges, to develop additional ideas for refining and increasing incentive strategies and secure additional participating landlords
- Research additional engagement strategies, including talking with other communities with challenging housing markets and robust landlord engagement programs, especially communities on the West Coast with years of experience operating in market conditions similar to those projected for Columbus and Franklin County in the coming years
- Identify potential sources of funding, including assessing the interest of local funders, for increased landlord subsidies or capitalizing revolving mitigation funds

### C. Scale Housing



**Recommendation 9:** Add at least 250 slots of rapid rehousing over a five-year period

**Recommendation 10:** Add at least 375 units of permanent supportive housing over a five-year period

Sufficient permanent housing resources are needed for people to move out of homelessness. This includes rapid rehousing and permanent supportive housing. As rapid rehousing turns over more frequently, scaling rapid rehousing will help ensure there is continuous through-flow to the homelessness response system. Scaling permanent supportive housing contributes to community-wide efforts to increase the supply of affordable housing as each unit is typically restricted as deeply affordable for at least 20 years. Adding these resources for single adults will help scale the system to more closely match current and anticipated needs.

**Recommendation 11:** Over time, shift the resource strategy to invest more heavily in permanent housing solutions

Adding the new units of housing recommended above will help shift the focus of the system to invest more heavily in permanent housing strategies. Over time, the community should



maintain a commitment to investing in permanent housing options to yield desired outcomes.

**Recommendation 12:** *Leverage the benefits of having a Unified Funding Agency*

To ensure an efficient and coordinated effort to scale the system, community partners should leverage the benefits of having a Unified Funding Agency, and recommit to a centralized, focused approach in which local and federal funds are invested under local control to achieve local goals. Using CSB to channel new and existing resources, report results, and be held accountable for scaling the system as the community grows can aid the community to strategically and collaboratively invest in the interventions needed to reach community targets.

Initial steps to scale housing can include:

- Meet with providers to understand the support needed for providers to expand the capacity of permanent housing programs
- Meet with funders to align long-term visions and recommit to a shared funding strategy

**D. Enhance Equity, Learning, and Engagement**



Recommendations to enhance equity, learning, and engagement focus on engaging people with lived experience in system design and implementation, implementing strategies to advance equity, and restructuring data reporting to promote continuous system improvement.

**Recommendation 13:** *Engage a diverse group of people with lived experience in the design and implementation of system components, processes, and procedures*

As previously described, the homelessness response system has some opportunities for people with lived experience of homelessness to inform decision-making. One of the first findings from the Assessment was a recognition the system is not regularly providing opportunities for communities disproportionately impacted by homelessness and people with lived experience of homelessness to participate in the design, implementation, and





evaluation of the homelessness response system. This finding led to CSB revising the scope of the Assessment to integrate more opportunities to engage the community. While the engagement activities completed as part of the Assessment are a good step, regular, robust, varied, and authentic engagement is needed as a core element of system decision making. Including these perspectives can help the homelessness response system identify how to streamline and improve system practices and processes to make the system easier to navigate, more responsive to community needs, and more efficient.

Communities across the country are exploring different strategies to engage people with lived experience of homelessness. Examples include developing employment pathways and creating incentives to hire people with lived experience of homelessness who may require additional training to develop other required job skills; restructuring processes for developing policies and procedures so people with lived experience are involved early in the process; and hiring people with lived experience as consultants to liaise with other people experiencing homelessness, allowing the organization to bring more people into community processes. CSB should examine the participation rates and the efficacy of its currently available engagement opportunities and begin implementing other strategies as needed to achieve robust participation.

**Recommendation 14:** *Examine workforce pay practices and identify strategies to improve pay equity*

During the Assessment process, Steering Committee members expressed concern that frontline workers in the homelessness response system may not make a living wage. In addition, frontline staff are often women of color, making pay equity a matter of race and gender equity. Additional exploration is needed to understand the extent of pay equity issues in the homelessness response system, with the goal of implementing strategies to improve pay equity and build a more stable workforce.

**Recommendation 15:** *Restructure data reporting and evaluations to reflect the information needed to drive system and program improvements*

Using data effectively requires reporting metrics and findings from evaluations in a manner that is easy to digest and directs the reader to identify areas of potential growth or opportunity. CSB has a long-established commitment to collecting and reporting on



outcomes. Two recommendations to begin improving data reporting with the goals of learning and system improvement involve:

- 1) integrating qualitative data, and;
- 2) reporting metrics in ways that more clearly demonstrate disparities and inequities in the system.

Current reporting focuses on quantitative analysis but lack perspectives from people enrolled in programs and accessing services through the homelessness response system. Qualitative results provide meaning and direction, including the impact of current practices on individuals and families, which is critical information to identify needed program and system improvements. An effort to expand reporting in this way would be consistent with the recommendation regarding better engaging people with lived experience in the design, implementation, and evaluation of the system.

In addition, data on outcomes for different demographic groups is not presented in a way that is easily interpretable. Community leaders have expressed a desire to create a community that is equitable. Understanding inequities in the homelessness response system from different angles is needed to develop strategies that can advance equity and contribute to this important community goal. Reporting demographic breakdowns across metrics will provide more useful information about where the system may be reducing disparities and where inequities may currently be exacerbated.

Along with improvements to regular reporting structures, periodic evaluations of system programs and components can allow CSB, providers, and stakeholders to analyze each program type or system component in greater detail and identify modifications to achieve outcome goals and meet the needs of the community. As pointed out in this assessment, local program models and system components have continued to operate without much change, though housing market conditions and national best practices have shifted in some areas. Regular, robust evaluation can identify areas in need of improvement earlier. With each modification, the system should continuously monitor, evaluate, and assess what further adjustments are needed to optimize the system. By going through this process, the system can adopt a culture of learning that is grounded in action. Funder expectations and resources for evaluation do not appear to be in place currently but will be needed to successfully scale.



Initial steps to enhance learning, equity, and engagement can include:

- Inventory current opportunities in place at the system level and in provider organizations for people with lived experience to participate in the homelessness response system
- In partnership with people with lived experience who can serve as consultants, develop additional opportunities to engage people that can be tested and refined in accordance with feedback and input received through initial efforts
- Inventory pay scales and practices among providers
- Inventory the current metrics collected and reported, including identifying any data points reported in multiple places
- Survey staff, providers, and stakeholders to identify data reporting and analyses needed for different groups to understand how the system is performing
- Adjust current data reporting to show demographic breakdowns in the population served and across multiple outputs or outcomes clearly and in a centralized place in reports
- In partnership with people with lived experience, develop a strategy for collecting data from people accessing services through the system
- Develop potential metrics or new reporting structures, aligned with community objectives and priorities; engage providers in reviewing proposed reports before finalizing

### **PLAN, DO, STUDY, ACT**

Plan, Do, Study, Act (PDSA) is a change process that promotes continuous learning and improvement which may be a valuable approach for Columbus and Franklin County to adopt for this work to ensure that action is taken as quickly as possible. Descriptions of each step are below. Additional resources on the PDSA process can be found at the end of this document.

**Plan:** The planning step involves identifying objectives and intended outcomes of the change in strategy and documenting the process for implementing changes, including who will be responsible for different steps or components of the process. During this stage, it may be helpful to identify anticipated sticking points in the process. These can be potential



technical challenges as well as challenges related to changing perceptions or adjusting to new ways of operating.

**Do:** The doing step involves following the plan developed in the first phase to implement the change. During implementation, the organization leading efforts should gather data to measure outputs and outcomes of the change (both intended and unintended) and understand where implementation is proceeding as expected and where challenges have arisen.

**Study:** The studying step provides space to analyze data collected and understand the impacts of implementing the change. Things to study may include changes in program outcomes, changes in system outcomes that can be tied to the implemented strategy, impacts to other system components, effects to system providers (e.g., related to administrative requirements or processes), and impacts on the experiences of people using the homelessness response system.

**Act:** The acting step involves codifying and institutionalizing changes determined to be effective in achieving the intended outcomes as well as assessing the systems' readiness for future change. This information can help system and community leaders plan for the next iteration of change.

The length of each step and the total duration of the PDSA cycle will shift depending on the complexity of the change. To maintain a bias toward action, we recommend CSB and community partners move as quickly as is reasonable into the *doing* step for each activity. This will enable the community to try different strategies, learn from each iteration, and move more swiftly toward its goals.

### **Additional Resources**

Using PDSA Cycles in Community Settings: Case Studies of Plan, Do, Study, Act Cycles, from the Institute for Healthcare Improvement:

[\*\*100MLives\\_UsingPDSACyclesinCommunitySettings.pdf \(ihi.org\)\*\*](#)

The W. Edwards Deming Institute:

[\*\*PDSA Cycle - The W. Edwards Deming Institute\*\*](#)



Health Literacy Universal Precautions Toolkit, 3<sup>rd</sup> Edition: Plan-Do-Study-Act Worksheet, Directions, and Examples, from the Agency for Healthcare Research and Quality:

**[Plan-Do-Study-Act Worksheet, Directions, and Examples | Agency for Healthcare Research and Quality \(ahrq.gov\)](https://www.aHRQ.gov)**

