

# The Way Home



**Ten-Year Plan to Address  
Homelessness &  
Housing Insecurity (2024-2034)**  
by Collaborative Housing Solutions of NW Montana

## **To the Citizens of Northwest Montana,**

It is with great pleasure that we present this plan to address homelessness and housing insecurity to our community. In 2014, Collaborative Housing Solutions (CHS) of Northwest Montana (*formerly Flathead H.I.R.E.*) released a 'Five-Year Plan to Address Homelessness' (2014-2019), entitled *Finding the Way Home*. Ten years ago, the issues surrounding homelessness and housing insecurity were not new to us, but these issues were often siloed and solutions were implemented without community-wide collaboration. The "Five-Year Plan" was intended to help educate the general public and potential stakeholders by defining homelessness, assessing the cost of homelessness, the need and, lastly, our goals and action steps. This provided the CHS with a tool to assess and address the multiple issues surrounding homelessness and housing insecurity in Northwest Montana through a coordinated, community effort.

As that five-year window ended, we reflected on our accomplishments as well as areas where work is still needed. Building from our collective experience and work to that point, we started to construct the 2020 'Seven-Year Plan to End Homelessness'. The completion of this plan was put on hold as the world experienced drastic changes due to the COVID-19 Pandemic. The changes that occurred during the Pandemic affected everyone's ability to support themselves, and when combined with the housing market boom, many folks experienced housing insecurity that had never before. For the seniors, veterans, persons with a disabling condition(s), families and young adults living on a fixed and/or low-income that were struggling beforehand, this often meant a loss of housing with nowhere to go.

The fight to prevent and reduce homelessness and housing insecurity requires understanding, critical thinking, persistence and community-wide action. Our intent is to create long-lasting, community-based solutions that will reduce homelessness and housing insecurity in Northwest Montana. The 'Ten-Year Plan to Address Homelessness and Housing Insecurity' will provide the definitions of 'Homeless', the current state of homelessness, a summary of community needs and gaps and community-based solutions through the CHS Goals and Strategic Plan.

Thank you for your involvement and interest in becoming part of a local solution to these critical issues facing the entire nation. It is an honor to work with and rely on our community for the support needed to address and remedy homelessness and housing stability in Northwest Montana.

### **Collaborative Housing Solutions of NW Montana**



### **What is Collaborative Housing Solution of Northwest Montana?**

CHS is the local Continuum of Care for homelessness and housing insecurity. A Continuum of Care (CoC) is a group of various types of community stakeholders that develop and implement "a community plan to organize and deliver housing and services to meet the specific needs of persons who are homeless as they move to stable housing and maximize self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness."<sup>1</sup>

A local CoC is also required by the U.S. Department of Housing and Urban Development (HUD) for a service provider or agency to receive program funding from the Continuum of Care Grant. The general idea is that HUD funded programs will not be specific enough to address unique local needs appropriately across the

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<sup>1</sup> "What is a Continuum of Care?" *Endhomelessness.org*. National Alliance to End Homelessness, January 14, 2010.

nation. A community must show they have a plan in place to address the issues surrounding homelessness and housing insecurity that emphasizes local resources and solutions over standard, federal housing programs.

### **Defining Homeless (Unhoused)**

When trying to address homelessness, it is important to understand what defines someone as ‘Homeless’, or unhoused. Most people might generally consider it to mean someone that has no place to stay. Merriam-Webster simply defines it as, “having no home or permanent place of residence.”<sup>2</sup> While these definitions provide a basic sense of the word, they do not necessarily include the specific circumstances and situations that can qualify someone as ‘Homeless’ for standard housing programs and services.

The previous definition of ‘Homeless’, known as the McKinney-Vento definition, led to a service provider network that evolved into an effective system of treating homelessness. However, it still allowed for shortcomings in the ability to prevent homelessness in the first place, with reported homeless rates increasing year after year. Accordingly, changes were made to the definition to allow for new policies and funding directed toward all homeless and at-risk populations. In 2009, the U.S. Department of Housing and Urban Development (HUD) redefined homelessness by issuing the final regulation to implement changes to the definition of homelessness contained in the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act).<sup>3</sup>

The current working definition of homelessness consists of four broad categories, including:

1. **Literally Homeless: consisting of individuals and families who lack a fixed, regular, and adequate nighttime residence.**

This may mean that the individual or family has a primary nighttime residence that is a public or private place not meant for human habitation, is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs); or is exiting an institution where they have resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

2. **Imminent Risk of Homelessness: including individuals or families who will imminently lose their primary nighttime resident, provided that:**

Residence will be lost within 14 days of the date of application for homeless assistance; no subsequent residence has been identified; and the individual or family lacks the resources or support networks needed to obtain other permanent housing.

3. **Homeless under other Federal statutes: comprised of unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:**

Are defined as homeless under the other listed federal statutes; have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; have experienced persistent insecurity as measured by two moves or more during the preceding 60 days; and can be expected to continue in such status for an extended period of time due to special needs or barriers.

4. **Fleeing/Attempting to Flee Domestic Violence: this includes an individual or family who:**

Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual’s or family’s primary nighttime residence

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<sup>2</sup> “Homeless,” *Merriam-Webster.com*. May 20, 2020.

<sup>3</sup> Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, S. 808/H.R. 1877 (2009).

or has made the individual or family afraid to return to their primary nighttime residence; has no other residence; and lacks the resources or support networks to obtain other permanent housing.

As of March 8, 2019, HUD has expanded categories of homeless to include experiences of those who:

1. Are trading sex for housing,
2. Are staying with friends, but cannot stay there for longer than 14 days,
3. Are being trafficked,
4. Or left home because of physical, emotional, or financial abuse or threats of abuse and have no safe, alternative housing.<sup>4</sup>

### **Chronically Homeless**

The term ‘Chronically Homeless’ is easily, and often misunderstood. The most common misunderstanding is that someone that is chronically homeless is simply someone that chooses to be homeless. Unfortunately, it is nearly always the complete opposite, and refers to some of the most vulnerable people in a community that have fallen through the gaps. Below is the HUD definition of ‘Chronically Homeless’.

- A homeless individual **with a disability** as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who:
  - Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and
  - Has been homeless and living as described for at least 12 months\* or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described.
- An individual who has been residing in an institutional care facility for less, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility\*\*; or
- A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

\*A “break” in homeless is considered to be 7 or more nights.

\*\*An individual residing in an institutional care facility does not constitute a break in homelessness.<sup>5</sup>

### **State of Homelessness in NW Montana (2024)**

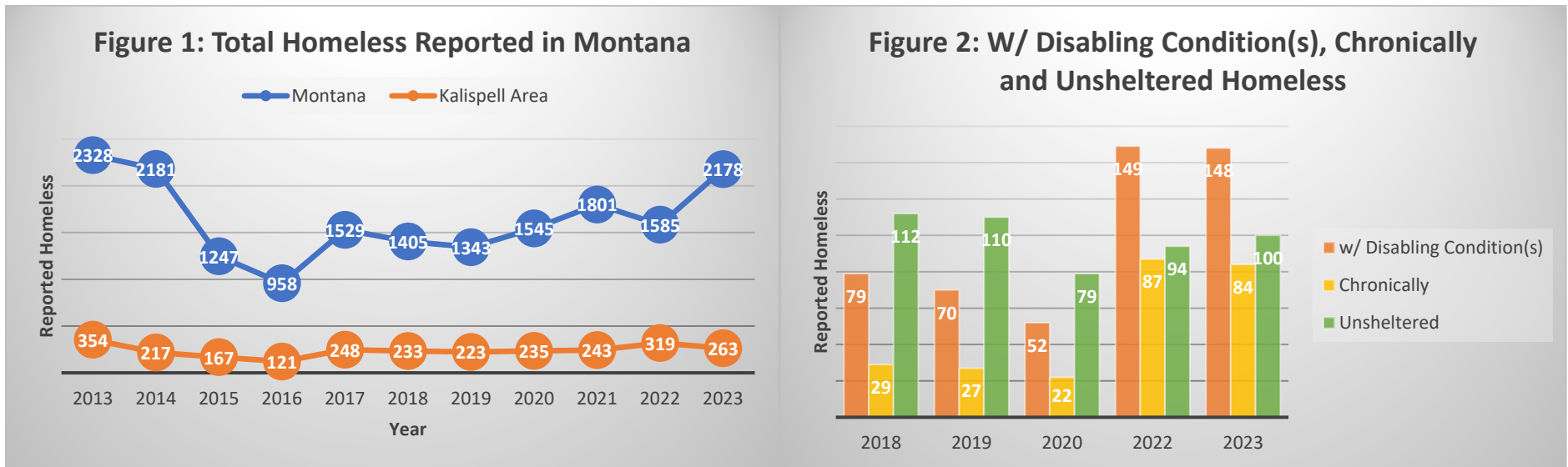
Homelessness is nothing new to Northwest Montana. It is and always has been around all of Montana since people started living here. The type of homelessness and factors leading to homelessness and housing insecurity are key in determining the current state of homelessness. In 2013, the State of Montana had 2328 homeless individuals with 354 identified in the Kalispell Area. In 2023, there were a total of 2178 homeless individuals with 263 identified in the Kalispell Area. *Figure 1* illustrates the overall homeless population for the State of Montana and the Kalispell Area from 2013 through 2023. In 2022, Northwest Montana had the second largest homeless population identified in the State of Montana with 319 and 20 percent of the total population (Missoula was the largest with 325 homeless individuals).<sup>6</sup> These numbers clearly indicate that homelessness has been a concern for at least the past decade, and while the eye test shows that

<sup>4</sup> “HUDs Definition of Homelessness: Resources and Guidance.” HUD Exchange. 2024 U.S. Department of Housing and Urban Development, March 8, 2019.

<sup>5</sup> “Definition of Chronic Homelessness: How is chronic homelessness defined?” HUD Exchange. 2024 U.S. Department of Housing and Urban Development, December 4, 2015

<sup>6</sup> “Montana Homeless Data.” Montana Homeless Point-In-Time. The Montana the Continuum of Care Coalition.

homelessness has become a bigger issue more recently, the recent data shows the amount of homeless individuals in Montana, and, more specifically in Northwest Montana, is noticeably less (about 26 percent less in 2023 than in 2013; *see Figure 1*). It is important to note that the definition of ‘Homeless’ utilized for the Point-in-Time Survey was changed from the McKinney-Vento Act definition (includes self-paying for a motel, couch surfing, etc.) to the ‘Literally Homeless’ definition (Category 1) after 2013, and was fully implemented across Montana by the 2015 Survey.



A main cause of the visible increase in homelessness is due to a shift in the type of individuals and families that have become in recent years at an alarming rate. *Figure 2* outlines the recent trends in individuals experiencing homelessness that had one or more disabling conditions, were chronically homeless, or were unsheltered. While not all chronically homeless folks are living unsheltered, they are all living with one or more disabling conditions.

According to PiT Survey data from January 2020, and just prior to the COVID-19 Pandemic officially entering the United States of America, 52 individuals identified themselves as living with a disabling condition(s). That same year, only 22 individuals, or 9.4 percent of the total homeless individuals in the Kalispell Area identified themselves as chronically homeless. This would change dramatically as the effects of the COVID-19 Pandemic made it more difficult for emergency shelters to operate, for general healthcare providers to keep regular appointments, and often a temporary or permanent reduction or shutdown of services provided by behavioral healthcare providers (case management providers). Another contributing factor to the current State of Homelessness was the government-wide department budget cuts made by the State of Montana in 2017 significantly reduced case management services. In just two years the total amount of homeless individuals living with a disabling condition(s) would almost triple with 149(2022), and in 2023 more than 56 percent of the individuals in the Kalispell Area were in this demographic. More concerning was the 395 percent increase in the chronically homeless population between 2020 and 2022(87 chronically homeless), with this demographic making up nearly 32 percent of the total homeless population in the Kalispell Area in 2023. This is not unique to the Kalispell Area (3<sup>rd</sup> Largest in Montana) with other significant increases in the chronically homeless population across Montana at a rate that ranks 1<sup>st</sup> in the country. Since 2007, Montana has seen a 551 percent increase in the chronically homeless population with the next closest state being Rhode Island at 334

percent increase. Much of this increase has occurred just since 2020, and is evident with ranking 3<sup>rd</sup> in the nation with a 57 percent increase Montana experienced between 2022 and 2023.<sup>7</sup>

There is a direct correlation between what the community is seeing in recent years with more homeless individuals utilizing and occupying public space and parks and the spike in the chronically homeless population. This means that a vast majority of the homeless individuals that are living on the street live with a disabling condition(s) and have been homeless for at least one year. Many of these people are living with no-to-low, often fixed income, have no family or friend support network, no behavioral or general healthcare provider and have experienced severe trauma in some form. The increase of seniors experiencing homelessness further compounds the issues of vulnerability and barriers to stability for the local homeless population. Data from the PiT Survey has not reported out numbers on senior homeless, but does for young adults (18-24 years old) and children.

The focus of HUD and the Department of Veteran Affairs recent efforts, grants and programming has been to “End” youth, family and veteran homelessness. However, senior homelessness has been on the rise since 2020, similarly to the increases seen with homeless persons living with a disabling condition(s) and/or chronically homeless. This increase is evident in the numbers served by local shelters and housing program providers, and is directly connected to the combination of the local housing market boom and a senior population that grows daily, and lives on a fixed income with limited local resources and services available. A local shelter that has everyone in one room with a 50-bed capacity reported that, from October 2022 through April 2023, at least 68 different individuals over the age of 55, and at least 22 over the age of 65 sought shelter.<sup>8</sup> From 2021-2023, a local housing program provider saw a 303 percent increase in applications (264 total applications) from seniors seeking emergency rental assistance when compared to the previous 3-year period (2018-2020).<sup>9</sup>

Kalispell is the regional hub of services, resources and commodities. It has the 5<sup>th</sup> largest population for city or town in Montana, yet the homeless population has ranked 3<sup>rd</sup> (2023) or 2<sup>nd</sup> (2022) in the State over the past decade. *Table 3* below details the 2023 rankings for demographic that was reported in the Montana PiT Survey data, and indicates that the Kalispell Area is experiencing a disproportionate level of homelessness across the board relative to overall population size and available services and resources.<sup>10</sup>

**Table 1: 2023 Point-in-Time Survey Data**

Population	Total Homeless	Unsheltered	Native American	Chronically Homeless	w/ Disabling Condition	Veterans	Youth (18-24)	Children (0-17)
<b>2023 PiT Count</b>	263	100	76	84	148	45	38	32
<b>State Rank</b>	3 <sup>rd</sup>	3 <sup>rd</sup>	3 <sup>rd</sup>	3 <sup>rd</sup>	3 <sup>rd</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>

The general takeaway to this summarized ‘State of Homeless’ is that the Kalispell Area has experienced a significant shift in the type of homelessness that individuals and households are experiencing. This shift has been to a much more vulnerable type of homelessness than in previous years with more seniors,

<sup>7</sup> “The 2023 Annual Homelessness Report to Congress.” *Huduser.gov*. The U.S. Department of Housing and Urban Development: Office of Community Planning and Development, December 2023.

<sup>8</sup> Flathead Warming Center. (2024). ESG CAPER: Flathead Warming Center (Dataset for 10.1.2022-04.30.2023). ServicePoint-PATHWAYS MISI

<sup>9</sup> Community Action Partnership of NW Montana. (2024). CAPNM Applications Received Data Mining (Dataset for 2018-2023). Community Action Partnership Emergency Housing Programs

<sup>10</sup> Montana Continuum of Care Coalition. (2023). 2023 Montana Point-in-Time Data. National Point-in-Time Survey



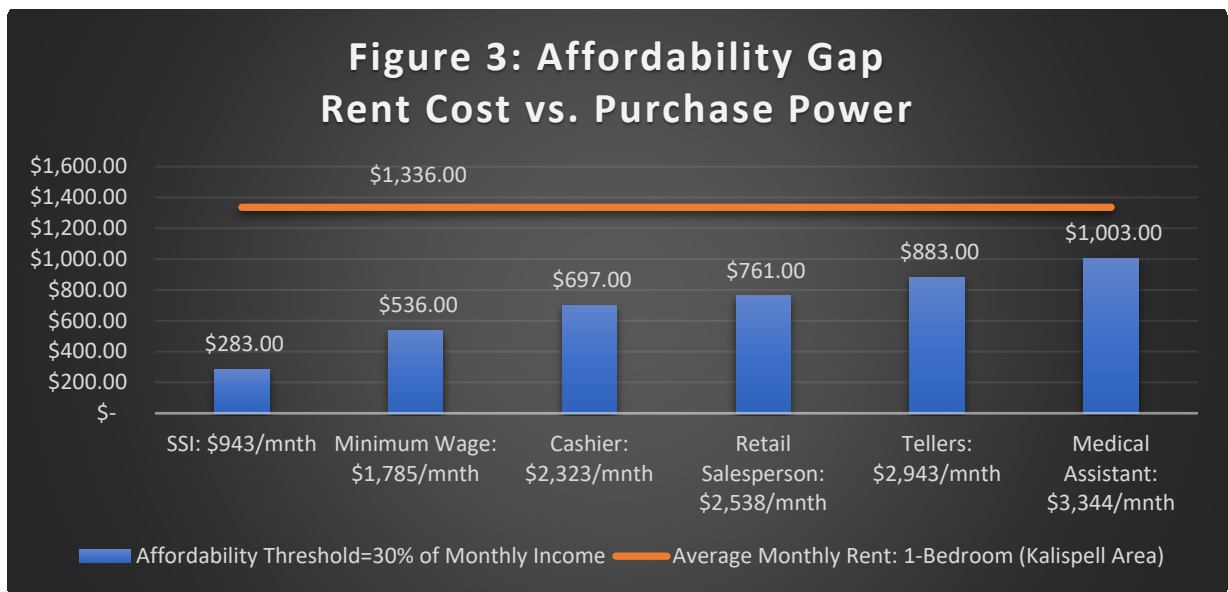
youth and/or persons with a disabling condition(s) experiencing homelessness at the same time than ever before in Northwest Montana, and the rest of the State. Due to inadequate supportive services and affordable housing options available, this trend appears to be going in the wrong direction.

## Need

The In a general sense, defining the need for a plan to address homelessness and housing insecurity in Northwest Montana begins with the basic matter of supply and demand. In Northwest Montana, the supply of supportive services and affordable housing falls substantially short of meeting the demand. The previous plan noted the same needs that will be outlined in this plan with some minor updates and specifications. Unfortunately, since most of the needs ten years ago still continue to be a concern, the issues are much greater issues currently with the significant increase recently in vulnerable populations experiencing homelessness.

### The Gap: Income and Affordable Housing

Affordable housing is a term with many definitions. In broad terms, it means a housing cost that allows a household to afford necessary bills, groceries, transportation, save for emergencies and have enough left over for some quality of life. Most commonly, affordable housing is thought to be a rental unit that costs no more than approximately 30 percent of a household's income, but this definition is only true for households living above the low-income threshold.



To give a snapshot of the issue, in March 2024 the average monthly cost of rent for a 1-bedroom unit in the Kalispell Area was approximately \$1,336.<sup>11</sup> Figure 3 shows the affordability gap between this average monthly cost for a 1-bedroom unit and the average pay listed for jobs by the Department of Labor and Industry for the Kalispell Area in March 2024.<sup>12</sup> This sample of data demonstrates the disparity between income for critical jobs in the community and the cost of available housing. Fortunately, the average monthly pay for an available cashier position is \$2,323 and allows them to pay about 58 percent of their income for housing that likely does not include utilities in the base cost. That would leave around \$987 a month to spend on groceries, bills, transportation and other needs. Even a

job that earns \$40,000 per year pays 40 percent of their income for the average 1-bedroom unit.

Employers have attempted to address the gap through wage increases in an attempt to maintain employees. It is not realistic to expect all employers to continue raising wages at a rate that would make housing in Northwest Montana affordable. However, there is a clear need for employers to pay entry-level, full-time

<sup>11</sup> Zumper. (March 2024). "Average Rent for 1-Bedroom Unit-Kalispell March 2024". <<https://www.zumper.com/rent-research/kalispell-mt>>

<sup>12</sup> Montana Department of Labor & Industry. "Informational Wage Rates by Occupation," March 2024. <<https://dli.mt.gov/data-dashboards/Job-Postings>>

positions a “living wage”. “While there is no universally agreed definition of a living wage as a concept and no universally accepted monetary amount...it is a wage that enables workers and their families to meet their basic needs.”<sup>13</sup> Income will always be a critical piece to the affordability gap, but affordable housing is even more impactful.

Affordable housing continues to be the largest issue in homelessness and housing insecurity. The need is straightforward, more affordable housing options, and the damage from the strain has been seen in the departure of numerous families born and raised in Northwest Montana that could no longer afford to live in their home communities. Programs such as the Housing Choice Voucher (HCV) program, which reduces a household’s rental obligation to an “affordable” rate, are great resources, but are hard to utilize due to having strict payment standards that are based on Fair Market Rent rates that are well below current average rent costs. The argument of simple supply and demand, where increasing housing in general will drive down the housing market, is debated and practiced across the nation, yet homelessness continues to rise as well. Supply and demand with housing stock must be layered to appropriately address housing insecurity. Communities must plan with housing developers to build new housing that is affordable for the current residents and their different socioeconomic statuses rather than potential future residents.

### **Shelter**

Increasing emergency shelter space was outlined as a top need and goal for addressing homelessness in the previous plan, and local shelter organizations in the community have created entirely new shelter spaces, more plans for expanding new shelter space and alternatives. Still, one hundred people slept outside on January 26, 2023 (PiT Survey date), and Northwest Montana continues to have one of the largest unsheltered populations in Montana. At this time, there are two year-round shelters (A Ray of Hope/Peggy’s House and Samaritan House), one seasonal shelter (Flathead Warming Center) one domestic violence shelter (Abbie Shelter) and one youth shelter (Sparrow’s Nest). NIMBY (Not in My Backyard) and the narrative of building shelter space brings more non-local homeless to the community is a common misconception. While Northwest Montana is one of the most beautiful places in the world to live, it is very difficult to live here without shelter or a stable place to stay, and very rarely is it a choice people make. Non-local homeless do not come to this area because there is a shelter bed available, but usually are passing through to camp outdoors similar to many other housed visitors during tourist season. These ‘campers’ typically leave the area before the start of the harsh winter weather season, and very rarely seek local resources while in the area.

How many more emergency shelter beds do we need?

Well, simply 100 beds for the 100 unsheltered, right? Not quite. ‘What type of emergency shelter beds’, and then ‘how many’, is the correct order of questioning for assessing the emergency shelter need. More non-congregate and demographic specific (senior, LGBTQIA2S+, family, youth, minor, sober, etc.) shelter space is the ideal type of shelter space needed to more appropriately help stabilize individuals and households experiencing homelessness. These households that include vulnerable populations need a protected, safe shelter space to stay that integrates and/or directly connects with supportive services. Current shelter partners have already begun incorporating these elements into their present and future programming and expansion plans.

### **Behavioral Health (Mental Health, Substance Use and Intellectual Disabling Conditions)**

Many individuals and households experiencing homelessness struggle with a behavioral health condition(s). Community-based services, such as case management, in-home care and supportive services, medication management and counseling are limited relative to the need of our local population that live

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<sup>13</sup> “Living Wage,” UN Global Compact, accessed March 2024, <https://unglobalcompact.org/what-is-gc/our-work/livingwages>.



with behavioral health conditions. The need is further exaggerated in frontier communities that face significant barriers to accessing basic behavioral healthcare. Short-term, crisis stabilization and inpatient supportive housing programs and services are currently a top need across Northwest Montana, especially as the gap in access to and supply of basic behavioral healthcare increases. Many individuals and households struggle with multiple behavioral health conditions or disorders, and it is critical to integrate the different types of behavioral healthcare services to appropriately address what is needed to help with stabilization. Without collaboration when addressing these crises, our community will continue to fall short of the need and see this result in more vulnerable individuals and households entering into homelessness.

### **Domestic Violence**

According to the National Network to End Domestic Violence, “domestic violence is a leading cause for homelessness for women and their children.”<sup>14</sup> In the U.S., the health, safety and equity of women and girls are threatened by two overlapping public health crises: intimate partner violence (IPV) and gun violence. More than half of the female homicide victims are killed by a current or male intimate partner,<sup>15</sup> and 96 percent of murder-suicide victims are female.<sup>16</sup> Montana is no different from the rest of the nation in these regards, and may even have higher rates than the national average. Abbie Shelter, the Violence Free Crisis Line, Safe Harbor and numerous community groups and organizations across Northwest Montana that provide a great combination of emergency shelter, services and supports to households fleeing, attempting to flee, and/or survivors of domestic violence. Unfortunately, these issues are not going away or diminishing anytime soon, and Northwest Montana needs to continue adding more emergency shelter and services, and easier access to shelter and services in both rural and frontier communities.

### **Veterans**

Northwest Montana is not only home to one of the largest veteran populations in the entire state, but also to one of the largest homeless veteran populations in the nation. HUD and the Department of Veteran Affairs (VA) have recently committed to ‘end’ veteran homelessness through the Veteran Affairs Supportive Housing (VASH) voucher program, and an increase in funding and flexibilities in the eligibility requirements for the Supportive Services for Veteran Families (SSVF) program (Volunteers of America and Veterans, Inc. are local providers). Additionally, an emergency shelter program for veterans currently exists through a coordinated effort between the VA and the Samaritan House. This provides dedicated beds and shelter space for veterans at the Samaritan House.

The current need for veterans experiencing homelessness: emergency shelter space and more permanent supportive housing program options for hard-to-serve, or veteran’s with aggressive behaviors and/or criminal backgrounds.

### **Senior**

The increase in seniors experiencing homelessness and housing instability is alarming, and unprecedented. Fixed incomes, rent increases and limited supports and services have enabled this vulnerable population to struggle in a way that many had never experienced or were prepared to handle. The result is more homeless seniors on the streets and in emergency shelters. In the past 10 years (2014-2024) there have only been two low-income apartment complexes

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<sup>14</sup> *Domestic Violence, Housing, and Homelessness*, National Network to End Domestic Violence, 2018, available at < [https://nnedv.org/wp-content/uploads/2019/07/Library\\_TH\\_2018\\_DV\\_Housing\\_Homelessness.pdf](https://nnedv.org/wp-content/uploads/2019/07/Library_TH_2018_DV_Housing_Homelessness.pdf)>

<sup>15</sup> Centers for Disease Control and Prevention, “Fast Facts: Preventing Intimate Partner Violence,” available at <<https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html>>

<sup>16</sup> *American Roulette: Murder-Suicide in the United States*, Violence Policy Center, 2018, available at <<https://vpc.org/studies/amroul2018.pdf>>

targeting seniors built, which provides affordable housing to only a fraction of the thousands of low-income senior households in Northwest Montana struggling to maintain housing. The need here is for dedicated shelter space for this vulnerable population and new, low-income housing built to ensure this population has a place to live.

### **Youth**

Minors and young adults are experiencing homelessness and housing instability is an unsettling issue that continues in Northwest Montana. Many youth and minors that struggle with these issues do not have the necessary life skills, coping mechanisms and/or a support network that enables them to be successful independently. Broken homes, parenting styles and foster care regularly fall short of properly preparing these young individuals to obtain and maintain housing and independence. HUD has recognized that there is now a delay in natural self-sufficiency among young persons (18-24 years old), especially that did not receive the level of support and guidance needed prior to entering adulthood. HUD created the Youth Homeless Demonstration Project grant to open doors to providers for different types of programming that focuses on providing support and services that promote development and self-sufficiency. Additionally, the HUD Foster Youth to Independence initiative allows for the Housing Choice Voucher to be utilized specifically by a public housing authority for persons that have lived in foster care at any time as a minor.

### **Prevention**

Prevention is the most cost-effective way to address homelessness by stopping it from happening. The cost it takes for someone to get out of homelessness costs the individual or household experiencing it, but also it very costly to the community itself. For persons experiencing homelessness, emergency and urgent care services become primary care providers, law enforcement become human shepherds moving the homeless individuals from one location to the next and the justice and jail system become revolving doors. Diversion programs promote self-resolution first. If self-resolution is not an option, preventing homelessness by providing some minor financial assistance and/or service the resolves the short-term and long-term issue prevent much larger costs to the community down the road. Funding for a diversion program is needed, and has been an effective option utilized locally in the past with the help of Neighbors in Need, but that is group is no longer in operation.

### **Awareness**

A clear issue surrounding homelessness is misinformation or disinformation. Many of the folks experiencing homelessness are not able to just walk into a place of employment, secure and maintain a job, save enough funds to pay first, last and a security deposit (approx. \$4,008 for 1-bedroom unit average cost) all while living on the street with more than 50 percent living with a disabling condition(s). It's not easy to be homeless, and even harder to stop being homeless, but many in the general public do not understand this. They do not understand the struggle a single-parent household endures trying to make ends meet, and then what to do when they don't. Many are fortunate to have family and/or friends that would help them out with funds, or a place to stay, while many people experiencing homelessness do not have that option. Making sure the public is aware of the issues surrounding homelessness and housing instability is key to getting the community support necessary to address other needs.

### **Crisis Response**

With the indicated increase in chronically, unsheltered homeless individuals, it is not hard to correlate the rise in calls to law enforcement to assist with behavioral health crises. This is not what law enforcement was designed for, and often no crisis resolution is met unless someone is jailed or passed on to another provider.

Appropriate crisis stabilization and response is critical to alleviating the prominent issues surrounding anti-social behaviors and improving community member comfort levels (not actual safety levels). Adding or increasing the capacity of these services would make our communities safer and healthier for everyone.

All of Northwest Montana needs easy access to a crisis stabilization facility and crisis response/action team(s) to reduce the negative impacts crises have on the individual or household experiencing the crisis and the community as a whole.

## **Goals and Strategies**

### **Increase emergency shelter space and the number of beds available to accommodate all of the persons experiencing homeless in Northwest Montana.**

Data consistently illustrates that about half of the local homeless population is unsheltered, and is disproportionately one of the largest in Montana. (2018-2023 MT Point-in-Time (PiT) Survey Data) Homelessness in Northwest Montana encompasses veterans, families, children, youth, domestic violence victims and survivors, persons with disabling conditions, seniors and all other individuals. In the best interest of our community, we must provide a robust emergency shelter system with an adequate number of beds in a safe and appropriate shelter space(s) for all demographics.

<b>Strategies:</b>	
<b>1.1</b>	Using data (annual PiT count) and organizations individual data collected to clarify where our counties biggest needs are such as: gender, families, youth, LGBTQ+, elderly, veteran, etc. and analyze where our gaps are within individual shelters and how to maintain or increase capacity for those as needed.
<b>1.2</b>	Acquire and finalize at least two locations (shelter + vehicle sheltering location) to use as emergency shelters. These places should have adequate utilities and resources i.e.- bathrooms, showers, kitchen. Create an outline for a possible outdoor shelter and space for vehicle sheltering.
<b>1.3</b>	Create emergency shelter plan, identify leadership, acquire necessary shelter resources (cots, bedding, clothing, hygiene), employee training.
<b>1.4</b>	Acquire and create a budget with funding that will support the emergency shelter for up to 3 months.
<b>1.5</b>	Create quarterly city council discussions and summaries to update our valley’s leadership on needs within the homeless community.
<b>Accountability:</b>	
<b>1</b>	Shelter Subcommittee meets every other month between CHS meetings to report organizations check list (to be created). Checklist will include data and updates from most recent shelter.
<b>2</b>	Samaritan House is currently the main location for our emergency shelter. This can continue until 2024 but afterwards will need to be evaluated. Shelter Subcommittee will stay in direct contact with Samaritan House leadership on any updates needed for maintaining the emergency shelter location.
<b>3</b>	Assigning leadership in which someone is the direct liaison between CHS Shelter Subcommittee and City Council. This person will be responsible for setting up meetings or reporting needs and data to city leadership.

4	Annual debrief of PiT count data within the Shelter subcommittee and comparing data between shelters to identify hard gaps and needs that need to be addressed.
5	Work closely with Crisis Response Subcommittee to ensure emergency shelter plan and crisis response are finalized. Begin discussing with executive committee how to create funding for emergency shelter.

**Efficient coordination and communication between social service providers and the community with an emphasis on coordinated points of entry and preventive measures.**

Research and data strongly support the conclusion that when homelessness is prevented, the entire community benefits economically. To address homelessness in Northwest Montana, we use a coordinated approach, moving from a collection of individual programs to a community-wide response that is strategic and data driven. Our local approach, called the Coordinated Entry System (CES), allows our community to quickly identify, assess, refer and connect individuals and households in crisis to housing and assistance, no matter where they show up to ask for help. CES fosters a more efficient assistance systems for those experiencing housing insecurity by:

- Helping people move through the system faster to housing;
- Reducing new entries into homelessness by consistently offering prevention and diversion resources upfront; and
- Improving data collection and quality, and providing accurate information on what kind of assistance consumers need.

<b>Strategies:</b>	
1.1	Collaborate with the 2-1-1, essential community services, toll-free phone system that will quickly connect folks to services that meet immediate needs and enter those experiencing housing insecurity into CES.
1.2	Provide easy and equitable access to CES for all demographics throughout Northwest Montana.
1.3	Build capacity and increase efficacy of homeless prevention efforts and services, as it relates to CES, to help households maintain stable housing.
1.4	Create and implement a diversion system that emphasizes prevention and reduces homelessness by including natural supports, pursuing potential funding sources, and working with local resources and services to meet immediate and basic needs.
1.5	Reduce and prevent homelessness for households that are fleeing or attempting to flee domestic violence while implementing practices that focus on privacy protections for these households.
1.6	Develop and assist in the implementation of a behavioral health plan for all appropriate CES participants that have been prioritized for a permanent supportive housing program.
<b>Accountability:</b>	
1	The CES subcommittee will check-in weekly with 2-1-1 system operator(s) to ensure referrals are being matched appropriately to services, and entered into CES.
2	Increase Coordinated Entry Access Points to better serve disproportionately represented groups within the local homeless population.

3	CES Dashboard data will be reported at each Collaborative Housing Solutions (CHS) meeting.
4	Develop and utilize a homeless prevention assessment tool and establish regular case conferencing efforts, through CES.
5	Create a behavioral health plan with local mental health providers that will be reviewed annually, and utilized to provide appropriate supports and promote self-care.
6	Annually review CES policy and procedures, and update as needed. Policy and procedures include reviewing client feedback, assessment tools, etc.

**Increase affordable and supportive, permanent housing opportunities for people who are homeless or at risk of homelessness.**

The general definition of affordable housing (rent and utilities equal to or less than 30% gross income (HUD) is more suitable to households earning a ‘living wage’, or the amount of income needed to afford a decent standard of living. Housing that is affordable for working-class, low-income, fixed-income and severely disabled households must be prioritized to counter the clear and obvious shortages in overall housing stock. We will create affordable, permanent housing opportunities through initiatives targeting: local regulation and zoning, new housing developments, permanent housing programs, maintaining current affordable housing units, and supportive housing solutions for the hardest-to-serve folks.

<b>Strategies:</b>	
1.1	<b>Group Collaboration and Partnership:</b> Create opportunities for housing providers, developers, nonprofits, and government entities to share resources and knowledge in order to build capacity. Advocate for one another’s projects during the approval process. Increase partnership and innovation by collaborating on projects that otherwise could not/would not be built.
1.2	<b>Gaps and Needs Assessment:</b> Document existing state of affordable housing resources and demographics to provide baseline to policymakers and rationale for further interventions. Utilize existing economic data as well as group resources.
1.3	<b>Build development and housing affordability toolkit</b> utilizing the interventions highlighted in the gaps & needs assessment. Develop implementation strategies for subcommittee and recommendations to cities and county. Engage mix of simple, short-term “low hanging fruit” and longer-term strategies. Create public and policymaker focused documents.
1.4	<b>Create a coordinated legislative plan</b> for engaging cities, county, and legislature. Identify which toolkit interventions fit each level of government. Coordinate communication with state legislators and each organization’s lobbying efforts to maximize influence and results.
1.5	<b>Communicate efforts to stakeholders and the public.</b> Interface with the “Increasing Public Awareness/Community Involvement” subcommittee to help create and distribute key documents. Work towards more regular public events surrounding affordable housing.
<b>Accountability:</b>	

1	<b>Project Support:</b> Projects by Committee members or partners should be announced to the group with appropriate detail ahead of filing to ensure support can be lined up early in the process.
2	<b>Gaps and Needs Assessment:</b> Create a Gaps & Needs Assessment by gathering existing Flathead County data from group members and research organizations.  <b>Timeline:</b> Data to be supplied by all members and sources by April 30. Data will be accumulated and rough draft of document created by NWMTCCLT's Lead for America Fellow with first draft available June 1. Refining and completion of document to be done by NWMTCCLT and Housing Whitefish Summer 2023.
3	<b>Affordability Toolkit</b> to be prepared for 2025 legislative session with organized legislative plan beginning after Gaps and Needs Assessment is complete. Requires PHC to reconvene when Gaps and Needs Assessment is complete to strategize next steps and milestones.
4	<b>PR promotion in collaboration with Public Awareness/Community Involvement Committee</b> of completion of Gaps and Needs Assessment, construction projects with widespread support within the CHS, Annual Housing Panel event or other.

**Increasing public awareness and community involvement as they are paramount to ending homelessness in Northwest Montana.**

Perception is reality, and so if the community is not aware of the issues surrounding homelessness in Northwest Montana, then effective measures will never be taken. The Northwest Montana community will receive access to relevant training and education available to help people avoid the conditions leading to homelessness and the misconceptions that often follow. This also includes organizing and hosting events such as the annual Project Homeless Connect (i.e. Winter Warm-up), which provides much needed services to hundreds of individuals and families that are homeless or at-risk of being homeless.

<b>Strategies:</b>	
1.1	Establish community voice and education opportunities for Collaborative Housing Solutions.
1.2	Create opportunities to work on inner agency communication.
1.3	Recruit community support for plan and elements through social media and earned media.
1.4	Support a dynamic communication hub (211, 988, Violence Free Crisis Line, etc.) for the community to access appropriate resources and services.
<b>Accountability:</b>	
1	Provide community voice and education opportunities for the community and CHS through regularly occurring forums, such as the Real Conversation series.
2	Host regular events, such as Lunch & Learns, focused on inter-agency communication, resource leveraging and education.
3	Establish and maintain an active presence social media presence. Cultivate earned media connections to elevate collaborative initiatives and community education.



<b>4</b>	Support and promote a dynamic variety of resource and crisis lines, websites and applications that enable self-sufficiency and crisis-resolution.
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**Crisis Response System**

The crisis response system will quickly identify and connect people who are experiencing or are at risk of experiencing homelessness to the Homeless Outreach Team, local Coordinated Entry System, appropriate emergency services and shelter, housing assistance and other services.

<b>Strategies:</b>	
<b>1.1</b>	Support the current crisis response system and build capacity to better serve acute healthcare (behavioral and physical) needs through an established Crisis Response Team(s).
<b>1.2</b>	Increase capacity to better serve the immediate needs of the unsheltered homeless population by pooling funds and local resources to develop and support the local Homeless Outreach Team(s) and a crisis response shelter.
<b>1.3</b>	Coordinate and support efforts to develop local medical mobile units to provide preventative healthcare.
<b>1.4</b>	Collaborate outreach and crisis response efforts with the 211 system to quickly and appropriately serve folks experiencing a crisis and/or housing insecurity.
<b>1.5</b>	Expand Homeless Outreach and Crisis Response Team(s) to other communities in Northwest Montana as needed.
<b>Accountability:</b>	
<b>1</b>	Elect a representative of the subcommittee to attend annual Crisis Intervention Team (CIT) training and monthly CIT meetings.
<b>2</b>	Develop an internal subcommittee that will raise funding to increase the capacity of the Homeless Outreach Team, host annual community volunteer outreach events and collaborate with other CHS subcommittees on a crisis shelter plan. Update CHS group at bi-monthly meetings.
<b>3</b>	Develop an assessment and annually review committee progress, client feedback, etc.
<b>4</b>	The Homeless Outreach Team and/or subcommittee representatives will coordinate with the 2-1-1 program and the Coordinated Entry System to regularly meet to ensure that folks experiencing crisis and/or housing insecurity are both served appropriately and held accountable. Update CHS group on current state at bi-monthly meetings.
<b>5</b>	Local Homeless Outreach Team leads will meet monthly to support expansion of homeless outreach efforts throughout Northwest Montana.

## **Collaborative Housing Solutions of NW Montana Credits:**

**Left image on cover page: photo by Casey Kreider/Daily Interlake via**

**<https://dailyinterlake.com/news/2023/oct/03/flathead-warming-center-prepares-fifth-winter-seas/>**

**Right image on cover page: photo courtesy of Samaritan House**

**Special thanks to, and recognition of Keaden Morisaki for his contributions in writing and data research.**

**Please feel free to access (website link/QR Cod) for more information about CHS, how to get involved and/or contact information.**