Grand Junction Area Unhoused Strategy

Draft for review

Prepared by

jg | RESEARCH & EVALUATION

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This report represented the completion of a two-phase project. In collaboration with OMNI institute, the second phase of the project builds upon the findings from the Unhoused Needs Assessment to identify and prioritize strategy recommendations for the City of Grand Junction and partners to address the needs identified.

Purpose

This Unhoused Strategy expands on the Unhoused Needs Assessment (UHNA) by identifying strategies to fill key gaps and address significant needs of people experiencing houselessness (PEH) in the Grand Junction area in support of reaching the community goal of functional zero. Recommended actions and timelines are provided for each strategy as guidance on how the city and partners can implement each strategy given context-specific barriers that may hinder implementation as well as opportunities that can facilitate implementation. The strategies align with and support the community vision for Grand Junction and Mesa County outlined in existing strategic plans. Additional information on the strategic development process and strategic alignment can be found in the Appendix sections C and D.

Key performance measures[1] of the Unhoused Strategy that can be used to track and monitor progress toward key goals include:

1. **Reduce the overall number of PEH**
2. **Reduce the length of time individuals remain unhoused**
3. **Reduce the number of people who enter first-time houselessness**
4. **Reduce the number of people who return to houselessness after exiting to permanent housing**
5. **Increase the number of people exiting houselessness into permanent housing**
6. **Increase successful placements of unsheltered PEH into both transitional and permanent housing from street outreach**
7. **Increase successful referrals of PEH to behavioral health treatment and supportive services**

[1] Adapted from U.S. Department of Housing and Urban Development System Performance Measures for Continuum of Care

Key Unhoused Needs

The Grand Junction Unhoused Needs Assessment (UHNA) report provides a comprehensive overview of the characteristics of PEH, economic conditions related to the unhoused population, demand and capacity of existing housing and supportive services, estimated cost impacts from prevention and support services, and key gaps and needs within the care continuum. It is estimated that 2,300 individuals are experiencing houselessness in the Grand Junction area, the majority of whom are unsheltered.

Key needs are summarized below to provide context for the strategic recommendations.

Shortage of affordable housing units for households earning less than $52,200 or 60% AMI. In 2019, the City of Grand Junction completed a Housing Assessment and estimated approximately 3,300 housing units were needed. Rental prices have increased approximately 55-60% in Grand Junction since 2019. Wage growth has not kept pace with the increased housing costs, causing the average rent-to-income ratio among Mesa County residents to approach the cost-burdened threshold of 30%.

Financial resources to prevent at-risk populations from entering houselessness, such as one-time rental assistance, could have substantial cost-savings to the community while successfully keeping residents stably housed.

Access to supportive resources and basic needs. Looking at existing supportive services available to PEH in the area, there is a notable need to improve the availability and accessibility of mental health and substance use treatment services, particularly for chronically unhoused individuals. Additionally, PEH noted considerable challenges to meeting their everyday basic needs, such as reliable access to food, water, bathrooms, and transportation.

Housing options to meet current and future demands among PEH. Currently, there are notable gaps and shortages along the housing continuum (Appendix A), particularly in interim, transitional, and permanent supportive housing, to meet the immediate need for housing while more long-term housing units are being constructed.

Coordination and collaboration of service providers and improvement of system of care for PEH. Service providers noted challenges resulting from a lack of a shared vision, strategic plan, and collaboration between service providers which leads to inefficiencies in data collection, coordination, and funding and capacity within agencies. The coordinated entry system is not being utilized as efficiently and effectively as it could be to support PEH in accessing housing and support services. Communication and coordination between first responders/law enforcement and service providers could also be improved to better connect the PEH they engage with appropriate services and care.

Key needs to address:

- **Shortage of affordable housing**
- **Shelter and housing options for acute need**
- **Housing instability and displacement**
- **Access to supportive services and basic needs**
- **System improvement, coordination, and collaboration**

Barriers Analysis

Throughout the strategy development and prioritization process, stakeholders consistently identified four key barriers to implementation across the seven strategies. The city and its partners will need to make dedicated and ongoing efforts to overcome these barriers, which can generate significant opportunities to make progress on all the recommended strategies.

Limited funding

Implementation of the unhoused strategies will require significant financial resources. Securing adequate funding is already a challenge among service providers, and the city and county are limited in the types and amounts of funding that they can leverage for unhoused initiatives. The relative cost of the recommended strategies vary considerably, likely impacting the timeline and priority for implementation of each.

Gaps in service provider capacity

The unhoused strategies represent a community-wide effort to prevent and respond to houselessness, relying on the engagement, buy-in, and commitment of service providers. Currently, service providers struggle with adequate staff capacity to effectively operate existing services, which presents considerable challenges in considering the expansion of services for PEH and individuals at risk of houselessness. The capacity of service providers will likely present an ongoing and significant challenge to successful long-term implementation of the strategies.

Variable community support

Implementation actions that require public resources will likely receive pushback from members of the community who may not see addressing houselessness as a priority and/or as a responsibility of local government. Strategies involving the development or expansion of facilities and housing units for PEH may struggle to receive buy-in from neighboring residents with a “not in my backyard (NIMBY)” attitude toward development of this kind.

Lack of integration and collaboration across services

While there are several services available for PEH and individuals at risk of houselessness in Grand Junction and Mesa County, they are not well integrated across types of services, resulting in inefficiencies in service provision and challenges in developing collaborative working relationships among service providers. Successful implementation of the unhoused strategies relies upon improving integration and collaboration across services, as an integrated system is the foundation for effective service delivery and access and optimal use of the community’s available resources.

Recommended Strategies

Through the Unhoused Needs Assessment and subsequent strategy planning sessions with key stakeholders, seven recommended strategies emerged. This section includes a detailed description of each strategy, with a summary of all strategies presented in Table 1.

Table 1. Recommended strategies

Strategy	Need(s) addressed	Key subpopulation(s) served*	Timeline
1. Establish a community-wide framework for enhancing Coordinated Entry and System of Care Processes.	Coordination and collaboration of service providers and improvement of support system for PEH	-	6 months–1 year
2. Establish a flexible city-county housing fund to support housing security and increase coordination between services and collaboration among service providers.	Financial resources to prevent at-risk populations from entering houselessness	At risk of houselessness, doubled-up	1–2 years
	Coordination and collaboration of service providers and improvement of support system for PEH		
3. Increase access to prevention, diversion, and housing navigation services.	Financial resources to prevent at-risk populations from entering houselessness	At risk of houselessness, doubled-up, chronically unhoused	1–2 years
	Access to supportive resources and basic needs		
4. Expand accessibility to basic needs and hygiene.	Access to supportive resources and basic needs	Chronically unhoused, unsheltered	6 months–1 year
5. Expand mental health care services and substance use treatment options for PEH.	Access to supportive resources and basic needs	Individuals with disability, SUD	1–2 years
6. Increase accessibility and expand transportation services for PEH.	Access to supportive resources and basic needs	All	2–4 years
7. Increase non-market housing options including interim housing and shelter units.	Housing options to meet current and future demands among PEH	All	2–4 years

**Key subpopulations are defined in Appendix B*

Strategy 1. Establish a community-wide framework for enhancing Coordinated Entry and System of Care Processes

The Grand Junction area currently has a coordinated entry system (CES)—a national best practice that aims to quickly and equitably coordinate access, assessment, prioritization, and referrals to housing and services for people experiencing or at imminent-risk of houselessness. Further investment in the system is needed to realize system-wide, community-driven goals. A commitment to strengthening key elements of CES requires that elements of the system are evaluated and improved based on increased stakeholder engagement including the perspectives of individuals with lived experience of houselessness, service providers, faith leaders, first responders, etc.

Benefits. Streamlines efforts, avoids duplication of services, and ensures a more efficient and effective use of funds. Dedicated inclusion of PEH perspectives can inform decisions and identify actions with a greater likelihood of success. Keeps stakeholders well-informed and brings diverse stakeholder perspectives together to generate a unified, supported approach to implementation of system improvements and communication to policymakers. Expands the reach of the CES by more closely involving county partners and other municipalities (e.g. – Clifton, Fruita, Palisade).

Barriers. Limited staff capacity and collaboration between providers and insufficient understanding of the CES processes. Differing priorities and commitment among stakeholders. Under-resourced and limited access points of entry.

Expected outcomes and keys to success. Builds community support for strategy implementation and increases awareness and understanding about houselessness and community efforts to address it. Improves access to services and responsiveness to the needs of community. Works best to utilize a centralized access point like the new Resource Center and explore "hub and spoke" models of coordinated entry access.

Recommended actions.

- **Establish a Coordinated Entry Leadership Team representing various key stakeholders to guide the refinement and ongoing decision-making process. This team should include individuals with expertise in houselessness, data analysis, service provision, and community engagement, with a particular emphasis on individuals with lived experience of houselessness.**
- **Establish clear and measurable performance metrics to track the effectiveness of the CES. Metrics may include housing placement rates, time to housing, and improvements in participants' well-being.**
- **Implement a systematic process for continuous improvement: regularly review data, seek feedback from stakeholders, and conduct after-action reviews to identify areas for enhancement. Use this information to adjust policies and practices accordingly.**
- **Strengthen data collection and analysis capabilities to inform decision-making by developing protocols for consistent data entry; integration of data systems; and frequent evaluation of trends, gaps, and areas for improvement.**
- **Provide training and education for all stakeholders involved in the CES, including frontline staff, case managers, outreach workers, community partners, and community members more broadly, to ensure a shared understanding of best practices and the system's function and purpose.**
- **Create a formalized PEH Advisory Group to identify needs, give feedback on metrics and system issues, and inform practices of CES and ongoing efforts.**

Strategy 2. Establish a flexible city-county housing fund to support housing security and increase coordination between services and collaboration among service providers

The City of Grand Junction and Mesa County have distinct responsibilities for addressing houselessness within the same geographic area. An expanded city-county partnership focused on houselessness will help both entities serve in their leadership capacity to advance their housing goals by leveraging their distinct resources, expertise, and policy tools in support of on-the-ground service provision and cost-effective financial assistance. A flexible pool of funds that can be applied to a variety of housing-related needs could support individuals and households in maintaining stable housing, and it could support providers to operate services effectively and collaboratively. This type of adaptable fund can serve as a unique opportunity to meet a variety of financial needs related to preventing and minimizing the impacts of houselessness.

Benefits. Bridges the gap in houselessness service operations and incentivizes collaboration among service providers to minimize the impacts of houselessness and maximize the capacity of service providers. Increasing housing stability reduces the need for utilization of interim housing and other services including emergency services and law enforcement involvement.

Barriers. Lack of available funds and competition among providers for existing funding sources. Complicated and varied administrative processes, policy, and regulations can impede efficiency of implementation. Lack of community support and NIMBYism.

Expected outcomes and keys to success. Enhances city-county collaboration. Leverages and pools diverse funding sources in one broadly accessible fund to implement prevention and early intervention measures and expand into new service areas needed to mitigate houselessness. Works best if the funding framework is flexible and as unrestricted as possible while data collection and accountability remain high priorities to incentivize collaboration among service providers. A transparent, collaborative process will need to be developed for review and selection of funding requests. One priority will be to ensure there are mechanisms of accountability that promote independence among individuals who receive financial supports. Efficiency should be tied to supportive services addressing underlying issues, such as mental health, addiction, or employment, to maintain stable housing. Requires staff capacity to manage and allocate resources.

Recommended actions.

- **Align with Grand Junction Housing Strategies 7 and 8 to direct financial resources toward preventing houselessness and encourage collaborative efforts among service providers.**
- **Explore public-private partnerships with government agencies, non-profit organizations, philanthropic groups, and private businesses to pool resources and create a more robust and sustainable flexible housing fund.**
- **Develop innovative long-term assistance models that can allow individuals to pay back assistance based on their financial capacity to improve sustainability (i.e. "recycle" funds for future use).**

Strategy 3. Increase access to prevention, diversion, and housing navigation services

A high proportion of Grand Junction and Mesa County residents are at risk of losing stable housing and entering houselessness. Efforts to prevent and divert at-risk individuals and families from entering houselessness can be highly cost-effective, as the costs required to exit houselessness typically far outweigh the costs associated with maintaining stable housing. Additionally, for those already experiencing houselessness, the resources, time, and eligibility requirements associated with accessing housing can be prohibitive, underscoring a need for assistance in accessing supportive housing programs and housing itself. Several providers in the Grand Junction area offer financial training and education, legal services, case management, etc. to PEH and individuals at risk of houselessness, but access to, engagement in, and coordination across these services could be improved to maximize the benefit to both PEH and individuals at risk of losing housing.

Benefits. Improved coordination and outreach in these existing services could have a significant impact on individuals and families to maintain housing stability, effectively prevent individuals from entering houselessness, and better support PEH in effectively accessing housing.

Barriers. Lack of financial resources limits the effectiveness of eviction prevention and/or diversion efforts. Agencies are siloed and/or lack the capacity to expand education and outreach. Limited access in key under-resourced areas

Expected Outcomes and keys to success. Presents the greatest opportunity to reduce inflow into houselessness and minimize costs in crisis services and barriers to exiting houselessness. Minimizes trauma caused by loss of housing or the experience of houselessness and increases the ability to find and more readily access available housing. Works best if resources grow over time in coordination with other system components for maximum effectiveness.

Recommended actions.

- **Provide comprehensive and aligned outreach (e.g. – increase the number of staff dedicated to improving and coordinating access of prevention and housing navigation services).**
- **As part of the CES evaluation process and next steps, integrate diversion into the policies and procedures for CES administration in line with national best practices. Increase availability of housing problem-solving and diversion services for all people engaged with the CES.**
- **Coordinate the development and implementation of the diversion strategy with other strategies, including the CES evaluation and flexible housing fund.**
- **Coordinate and leverage existing prevention resources across city-county to connect households at imminent risk of houselessness with stabilization resources.**
- **Expand programs to provide workforce and vocational training and education for PEH.**
- **Integrate housing navigation with existing case management services.**
- **Expand outreach efforts through the City of Grand Junction's Neighbor-2-Neighbor program, Resource Center, and other service providers to include prevention and diversion services.**
- **Utilize existing housing-related screening processes implemented by health care or emergency service providers to identify individuals at risk of losing housing.**

Strategy 4. Expand accessibility to basic needs and hygiene

Given the high proportion of PEH in the Grand Junction area who are unsheltered, there is an immediate and critical need to expand facilities that provide for basic needs and hygiene such as bathrooms, drinking water, food, laundry, showers, and climate-controlled environments. PEH need to have consistent, reliable (24/7) access to facilities to care for their basic needs and be able to survive unsheltered conditions. Further, these types of facilities should be appropriately distributed geographically across areas where unsheltered individuals typically spend the night and access supportive services while balancing placement with community member support or resistance.

Benefits. Service providers and community members already provide basic need and hygiene services. Coordination can improve distribution and accessibility. Utilization of the Resource Center can provide a safe space.

Barriers. Lack of support from community to support basic needs is likely due to misinformation and not understanding the needs, safety concerns, and lack of availability of resources. Financial resources and capacity of providers.

Expected outcomes and keys to success. PEH, especially those who are unsheltered, in the Grand Junction area have consistent access to facilities to meet their basic needs and maintain hygiene, supporting better health and safety outcomes, reducing unnecessary interactions with law enforcement/ first responders, and spreading out the demand on services.

Recommended actions.

- **Identify and expand location(s) throughout county for high-risk geographic areas, areas accessible by public transportation, and proximity to other services/agencies.**
- **Identify potential sources of funding.**
- **Improve coordination across providers, organizations, and community groups that are already providing some basic needs and hygiene.**
- **Leverage existing service providers and faith communities that are actively offering these services.**
- **Incorporate needs of PEH in ongoing efforts to redevelop city park and other public facilities.**

Strategy 5. Expand mental health care services and substance use treatment options for PEH

Mental health conditions and substance use disorder (SUD) among PEH are often compounded, or even catalyzed, by the experience of being unhoused and can serve as a significant barrier to accessing supportive services and housing. While there are a variety of mental and health and substance use treatment providers in the Grand Junction area, accessibility of these services among PEH can be challenging for a variety of reasons and the effectiveness of treatment is limited by individuals' lack of stable housing. A comprehensive and coordinated approach is needed to create a more accessible, coordinated, and effective system of mental health services and substance use treatment for PEH, especially for individuals who are chronically unhoused and/or unsheltered. Leveraging existing program models (i.e, MAC) can ensure efficient use of existing resources while increasing awccess.

Benefits. Builds upon the success of ongoing programs such as the Multi-agency Collaboration (MAC) and leverages new and existing resources/partners such as Veteran's Affairs and Colorado Mesa University. Fosters coordination between service providers. Builds capacity for better integration of referrals and coordinated entry.

Barriers. Stigma and discrimination preventing PEH from accessing services. Location of services and requirements of programs. Lack of housing for individuals to participate in recovery and limited integration between services and medical providers.

Expected outcomes and keys to success. Reduction in substance abuse and addiction leading to more stabilized housing situations. Addresses underlying issues and improves quality of life. Decreases involvement with the criminal justice system. Reduces emergency room and crisis response. Positive impacts on long-term health and costs. Works best when implemented in tandem with housing options.

Recommended actions.

- **Integrate mental health, SUD treatment, and other recovery-oriented services with interim housing options, recognizing and prioritizing that stable housing is a foundation for addressing mental health and substance use concerns.**
- **Cross-train behavioral health case managers to provide housing navigation support, and housing providers to provide behavioral health service referral.**
- **Assist PEH in enrollment for health insurance, Medicaid, SSI/SSDI, and other public assistance benefits.**
- **Explore mobile clinics and outreach teams that can reach PEH in various settings, such as shelters, streets, and community centers.**
- **Ensure treatment services are flexible and culturally competent, considering the diverse backgrounds of unhoused populations.**
- **Develop integrated data systems that allow for seamless information sharing among service providers, ensuring that healthcare professionals have access to relevant housing information and can make informed decisions about an individual's care.**

Strategy 6. Increase accessibility and expand transportation services for PEH

The lack of sufficient public transportation infrastructure and alternative transportation options significantly hinders access to a wide variety of supportive services for PEH in the Grand Junction area. Limited routes, stops, and coverage areas make it difficult for them to reach essential services and resources. The cost of transportation, whether public or private, is also prohibitive for PEH who often struggle with financial constraints.

Benefits. Aligns with City of Grand Junction's Sustainability and Adaptation Plan and mobility efforts. Improves accessibility and equity to transportation. Improves collaboration between government agencies, non-profits, businesses, and the community.

Barriers. Services are sparsely distributed throughout the county. Limited funding and capacity of existing system. Lack of support and stigmatization by alternative transportation services.

Expected outcomes and keys to success. PEH would have better access to essential services such as shelters, healthcare facilities, employment opportunities, and human service agencies leading to improved quality of life, independence, and self-reliance.

Recommended actions.

- **Develop a reduced fare program for public transit (i.e. discounted or free transit passes for PEH) or flexible payment options (i.e. contactless payments, mobile apps, and pre-loaded cards, to eliminate the need for cash, which is particularly important for individuals without access to traditional banking services). Include examination of payment models from public and private insurance.**
- **Extend operating hours of public transit.**
- **Evaluate and improve accessibility features.**
- **Provide clear and easily accessible information regarding transit routes, schedules, and service changes through multiple channels, including mobile apps, websites, and printed materials.**
- **Introduce shuttle services connecting shelters, service providers, and key transit hubs.**
- **Develop a transportation voucher program in coordination with case management services to cover cost of private transportation services (e.g. taxis, rideshare services) in instances where public transit is not appropriate (e.g. transport to medical appointments, destinations outside of service area, etc.).**
- **Invest in public restrooms and hygiene facilities at transit hubs.**
- **Engage PEH in planning and decision-making processes related to transportation development and changes to public transit.**

Strategy 7. Increase non-market housing options including interim housing and shelter units

Currently, key elements of the housing continuum intended to serve PEH and individuals at risk of houselessness are either missing or have insufficient capacity in the Grand Junction area. Expanding the existing housing options and developing new shelter and interim housing options provide stability and needed support to individuals seeking to exit houselessness. Interim housing can include emergency shelter, transitional shelter, and transitional housing.

Benefits. Utilizes existing infrastructure and links with current services. Employs PEH in development of program and service delivery. Increases collaboration and creates alternative models for meeting acute needs. Increases capacity and is lower cost than permanent housing models.

Barriers. Funding, operational capacity, and limited interest in expansion of current providers. NIMBYism and location restrictions. Adequate security and operational procedures. Law enforcement support.

Expected outcomes and keys to success. PEH would have a diversity of housing options to meet unique needs. Effective and efficient shelter and interim housing models can lead to stable and permanent housing solutions, leading to a reduction in houselessness, exposure, health conditions, and involvement with law enforcement and emergency services. Works best when there are adequate permanent housing options for individuals to move into after their stay in interim housing and when paired with a well-integrated system of care.

Recommended actions

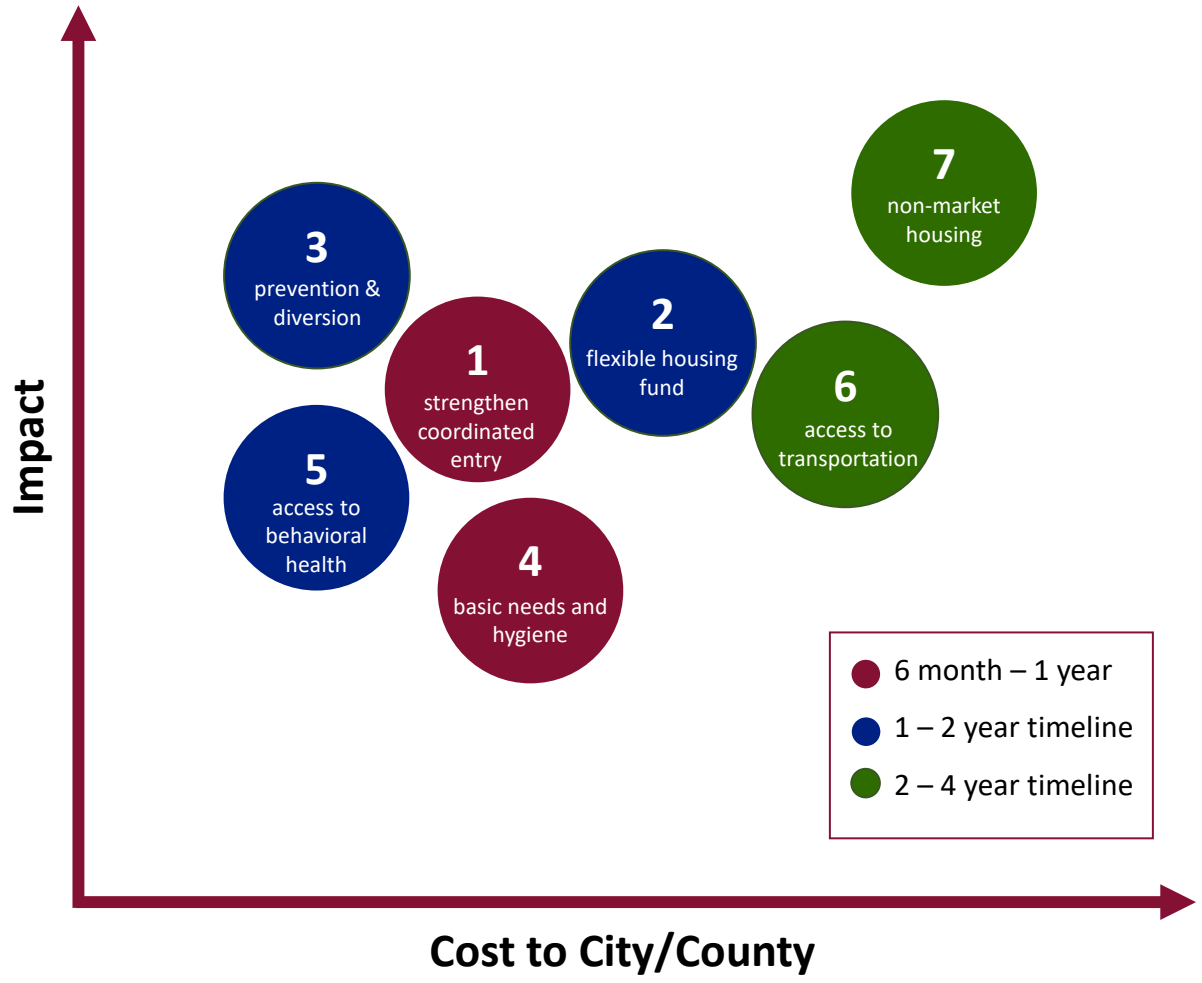
- **Expand and diversify emergency shelter and interim housing models to better serve key subpopulations, such as including non-congregate temporary shelter, low-barrier harm reduction options, and safe parking.**
- **Conduct inventory of existing vacant buildings, unused parking areas, and city- and county-owned properties that are currently underutilized in suitable geographic locations with consideration for proximity to service and higher risk areas.**
- **Increase community education opportunities regarding the benefits of diverse shelter options, and NIMBYism.**
- **Identify and/or develop potential sources of funding for both infrastructure and operational costs.**
- **Consider the acquisition of properties for redevelopment for the purpose of single occupancy housing (e.g. hotel, motel acquisition).**

Relative Cost and Impact of Strategies

There are practical considerations related to cost and staffing capacity that may impact the timing and ease/difficulty of advancing the strategies outlined in this report. To inform the practical considerations in decision-making, the cost/impact matrix illustrates the seven suggested strategies according to their relative cost and impact. The term "cost" is broadly interpreted and encompasses estimated financial expenses and staffing resources.

Strategies located in the lower-left quadrant are typically characterized by low cost and low impact. Moving to the right on the x-axis indicates an increase in cost, while moving upward on the y-axis signifies an increase in impact. Strategies positioned in the upper-right quadrant are generally associated with high cost and high impact. The strategies are color- coded based on their implementation timeline. While this matrix is not the sole criterion for strategy evaluation, it does offer guidance in considering the most effective options within the constraints of available resources. Final policy and/or designs may alter the cost and impact depicted in the matrix.

Figure1. Relative cost and impact

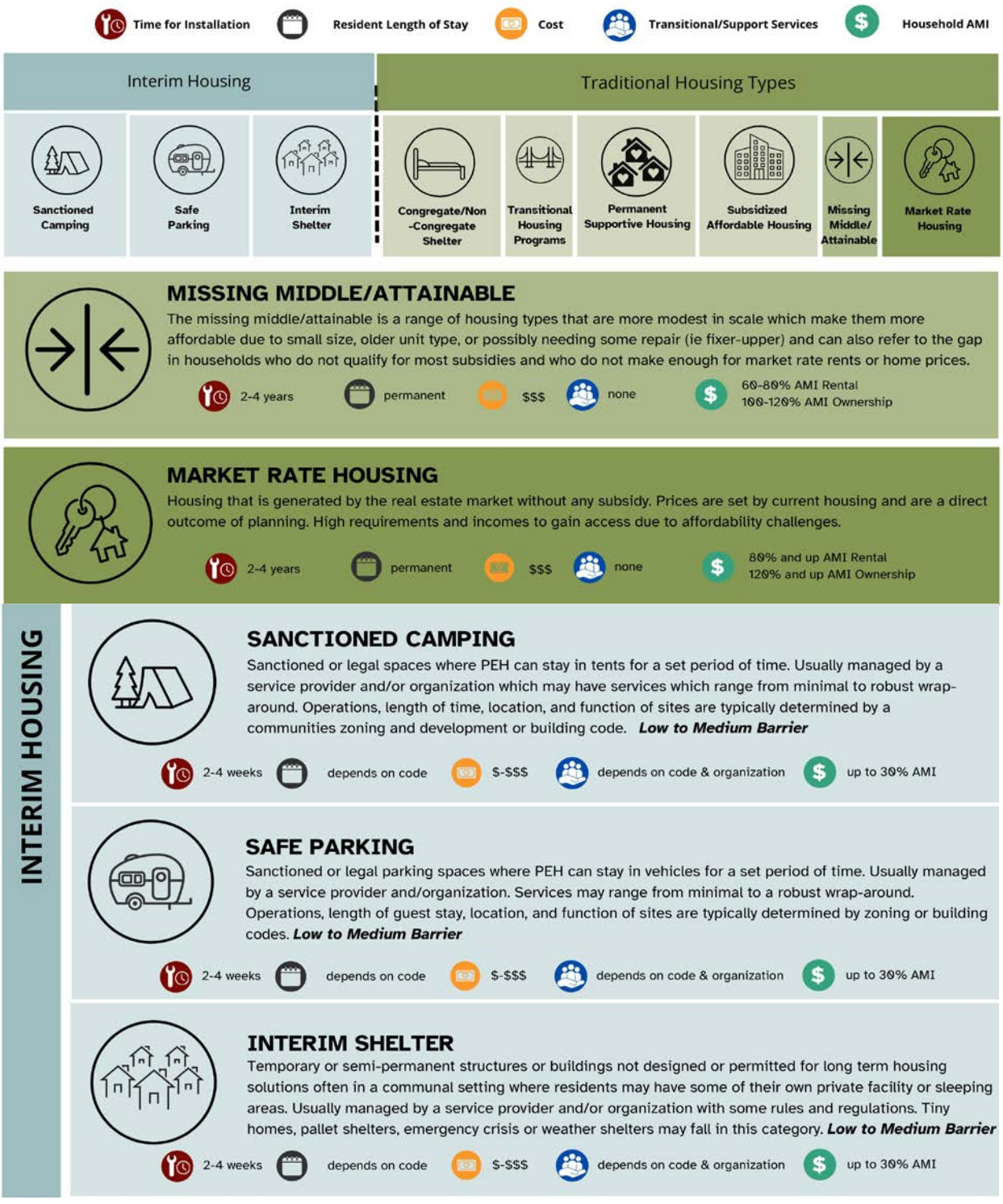


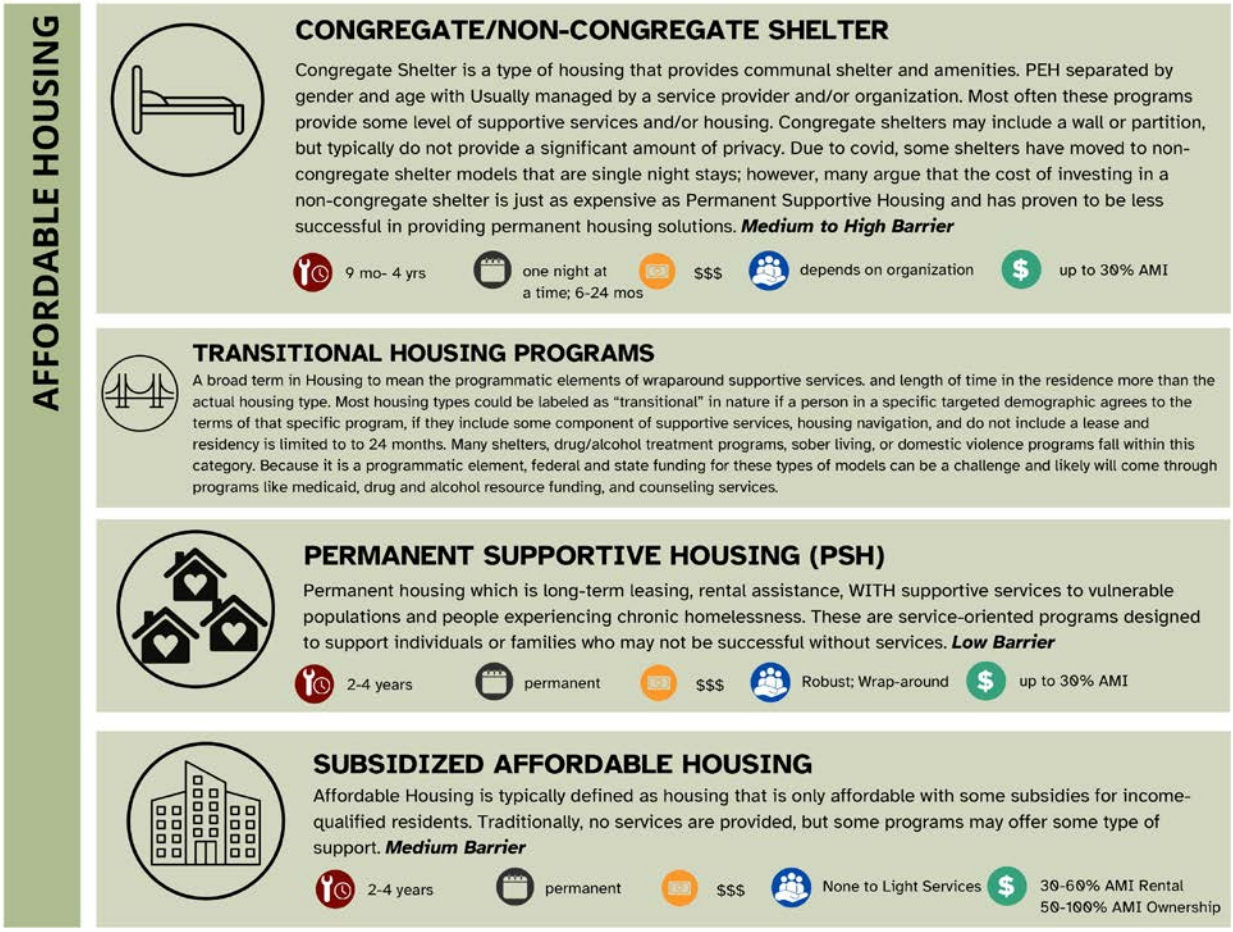
Conclusion and Next Steps

Through the Unhoused Needs Assessment and broad engagement with key stakeholders, the community has supported the identification and prioritization of seven strategies that seek to enhance the system of care for PEH or those at risk of entering houselessness. These strategies seek to reduce the number of people entering houselessness, support those experiencing houselessness, and increase the number exiting houselessness.

Each strategy serves to solve a key need identified in this process. Careful consideration and dedicated resources are needed to implement the strategies. Strategy implementation should be regularly evaluated to track progress and adapt as needed. Continued collaboration among community groups, government agencies, and service providers is needed to successfully address houselessness. Ongoing coordination will facilitate a more seamless integration of strategies and associated initiatives, allowing for a more comprehensive and cohesive approach. Sustained collaboration will foster a shared sense of responsibility among residents and key stakeholders and empower the community to actively participate in and support solutions addressing the multifaceted challenges around houselessness in the Grand Junction area.

Appendix A. Housing Continuum




AFFORDABLE HOUSING
CONGREGATE/NON-CONGREGATE SHELTER
Congregate Shelter is a type of housing that provides communal shelter and amenities. PEH separated by gender and age with Usually managed by a service provider and/or organization. Most often these programs provide some level of supportive services and/or housing. Congregate shelters may include a wall or partition, but typically do not provide a significant amount of privacy. Due to covid, some shelters have moved to non-congregate shelter models that are single night stays; however, many argue that the cost of investing in a non-congregate shelter is just as expensive as Permanent Supportive Housing and has proven to be less successful in providing permanent housing solutions. Medium to High Barrier
9 mo- 4 yrs
one night at a time; 6-24 mos
$$$
depends on organization
up to 30% AMI
TRANSITIONAL HOUSING PROGRAMS
A broad term in Housing to mean the programmatic elements of wraparound supportive services. and length of time in the residence more than the actual housing type. Most housing types could be labeled as "transitional" in nature if a person in a specific targeted demographic agrees to the terms of that specific program, if they include some component of supportive services, housing navigation, and do not include a lease and residency is limited to to 24 months. Many shelters, drug/alcohol treatment programs, sober living, or domestic violence programs fall within this category. Because it is a programmatic element, federal and state funding for these types of models can be a challenge and likely will come through programs like medicaid, drug and alcohol resource funding, and counseling services.
PERMANENT SUPPORTIVE HOUSING (PSH)
Permanent housing which is long-term leasing, rental assistance, WITH supportive services to vulnerable populations and people experiencing chronic homelessness. These are service-oriented programs designed to support individuals or families who may not be successful without services. Low Barrier
2-4 years
permanent
$$$
Robust; Wrap-around
up to 30% AMI
SUBSIDIZED AFFORDABLE HOUSING
Affordable Housing is typically defined as housing that is only affordable with some subsidies for income-qualified residents. Traditionally, no services are provided, but some programs may offer some type of support. Medium Barrier
2-4 years
permanent
$$$
None to Light Services
30-60% AMI Rental
50-100% AMI Ownership

Appendix B. Key Subpopulations

Based on findings from the Unhoused Needs Assessment, the following are key subpopulations of PEH in the Grand Junction area whose unique needs are considered in the development of strategy recommendations. While one strategy can effectively serve multiple subpopulations, it is valuable to consider the needs of each subpopulation to successfully make progress toward functional zero. Individuals may also fall into multiple subpopulation categories.

- **At risk of houselessness:** Individuals or families who are not currently unhoused but face imminent risk of entering houselessness due to eviction, job loss, domestic violence, or other factors. Poverty rates are one metric that can indicate risk of houselessness. In Mesa County, 18,407 individuals are living at or below the poverty line.
- **Doubled-up or couch surfing:** The practice of temporarily staying with friends, family members, or acquaintances due to lack of stable housing, often leading to unstable living conditions. Currently, the doubled-up population in Mesa County is estimated at 940 individuals.
- **Unsheltered:** Unhoused individuals living on the streets, in cars, parks, abandoned buildings, or other public spaces without access to regular shelter accommodations. Approximately 358 individuals are known to be experiencing houselessness and are unsheltered in Mesa County.
- **Chronically unhoused:** Individuals or families with a disabling condition who have been continuously unhoused for a year or more, or who have experienced at least four episodes of houselessness in the past three years. In 2022, 250 individuals were considered chronically unhoused in Mesa County.
- **Seniors and individuals with disability:** Over half (766) of unhoused individuals connected to services on the By-Names-List self-report a disability and 224 people were elderly.
- **Youth and families:** Currently, there are 907 youth classified as unhoused in Mesa County schools.
- **Individuals with substance use disorder:** higher prevalence of substance use disorders among individuals who are unhoused compared to the general population (SAMSHA). In 2021, the prevalence of self-reported substance used disorders among individuals served at HomewardBound North Ave shelter[2] was 9.17% alcohol use disorder, 5.56% other substance use disorder, and 5.83% reported co-occurring alcohol and other substance use disorder.

[2] The HomewardBound North Ave shelter provided aggregated data and total individuals could not be reported.

Appendix C. Strategic Development Process

Community feedback on the prioritization of needs and subsequent strategies was gathered with three strategies: 1) an online community survey for Mesa County residents conducted during the Unhoused Needs Assessment, 2) multi-stakeholder strategy feedback sessions, 3) an online survey for key stakeholders to provide additional feedback on strategies.

Unhoused Needs Assessment community survey

The online community survey generated responses from 677 Mesa County residents. Survey questions focused on understanding residents' experience of houselessness and housing-related services as well as their perspectives on the severity of houselessness in the Grand Junction area and the top needs within the community as they relate to houselessness. In addition to informing the Unhoused Needs Assessment, results from the community survey indicate which needs are of the highest priority among a broad sample of community members. The top needs indicated in the survey were mapped onto the preliminary strategies and, in conjunction with the strategy feedback sessions, were used to develop a prioritization framework.

Strategy feedback sessions

Strategy feedback sessions aimed to gather responses from a variety of stakeholders regarding 9 strategy categories and 28 strategies therein that emerged from the UHNA. The strategy categories and corresponding strategies are in Table 2.

Sessions included: community members (three meetings; two virtual and one in person), business owners, faith leaders, law enforcement and first responders, people with lived experience being unhoused, and service providers.

Participants were recruited in conjunction with key partners (i.e., the GJ City Housing Division and GJHA). A total of 159 individuals attended the strategy sessions.

Table 2. Strategy feedback session attendance

Business Leaders	26
Community Members	5 (in-person); 23 (virtual)
Faith Leaders	15
Service Leaders	24
First Responders	18
Lived Experts *	48
Note: 48 lived experts signed in, but there was a subset of individuals who declined to sign in and are thus not represented in participant totals	

Each feedback session was 90 minutes. The one exception was an extended conversation with apart service providers as it took place during a separate, but parallel, set of stakeholder conversations which took place during the needs assessment and were planned in advance of the project timeline. All sessions started with introductions, a brief overview of needs assessment findings, and then an introduction of each strategy category and the strategies therein, defining each so participants had a full understanding of what they would be ranking and discussing for the remainder of the session. Participants were then given instructions for ranking the strategy categories. Each session varied slightly, as described in the remainder of this section.

Strategy survey

In an effort to gain the perspectives of individuals who may not have been able to attend the in-person

sessions, a survey was e-mailed to all invitees and registrants as a follow-up. To avoid duplication of the in-person session results, the survey asked if individuals had attended an in-person session, and if so, they were disqualified from the survey. The exception was if they had attended the business owner session, in which case they were able to progress through the survey and submit feedback.

Determining strategies

The ranking of each strategy category by session participants was aggregated across all strategy feedback groups, the strategy survey, and the community survey disseminated during the needs assessment. The community survey asked participants what they believe were the major and supplemental needs regarding houselessness in Grand Junction. Responses were categorized based on the same strategy categories presented in strategy feedback sessions and in the strategy survey. Table 3 shows how each strategy category was ranked (1 being most important and 10 being least important) by each feedback session.

With the combined feedback from strategy sessions, the needs assessment community survey, and the strategy feedback survey, the original 28 strategies were pared down and language was fine-tuned by the research team. Tables 3 and 4 show the level of agreement among the groups for each strategy category, as well as the converging priority level that groups determined for each category. Overall, levels of agreement correspond with levels of priority.

Table 3. Ranking of strategy category by feedback session type

Strategy category	Service providers	First responders/ Emergency/ LE	Lived experts	Community members 1	Community members 2	Faith community	Business owners
Prevention and diversion	7	1	7	7	4	8	6
Emergency shelter	3	3	3	4	7	2	1
Transitional shelter	5	9	1	NA	NA	7	7
Transitional Housing	2	4	4	3	1	3	8
Permanent housing	6	10	2	6	5	4	2
Basic needs and harm reduction	8	5	5	NA	NA	1	9
Supportive services	1	2	6	2	2	9	4
Emergency, first responder, law enforcement engagement	10	6	9	5	8	10	3
System improvements and coordination	4	8	8	1	3	6	10
Community support and engagement	9	7	10	8	7	5	5

Table 4. Levels of agreement and converging prioritization among strategy feedback

Strategy Category	Level of agreement	Converging priority level
Prevention and diversion	moderate agreement	moderate priority
Emergency shelter	high agreement	high priority
Transitional shelter	low agreement	moderate priority
Transitional Housing	high agreement	high priority
Permanent housing	low agreement	moderate priority
Basic needs and harm reduction	moderate agreement	moderate priority
Supportive services	high agreement	high priority
Emergency, first responder, law enforcement engagement	moderate agreement	low priority
System improvements and coordination	moderate agreement	high priority
Community support and engagement	high agreement	low priority

Appendix D. Strategy Policy Crosswalk

The Unhoused Strategies are intended to address needs identified during the needs assessment phase of the project. During the compiling of the strategies, the research team reviewed existing City of Grand Junction and Mesa County planning documents that inform efforts to strengthen the Grand Valley community as they relate to housing. Based on this review, there are notable areas of alignment between the Unhoused Strategy and the City of Grand Junction's Comprehensive Plan and Housing Strategy and Mesa County's Master Plan.

Looking across these planning documents and policies, there is considerable alignment with the Unhoused Strategy. Each plan is briefly described below, with the key elements of each plan that align well with the Unhoused Strategy noted. Table 5 also provides an overview of the specific areas of alignment relative to each of the seven Unhoused Strategies.

One Grand Junction Comprehensive Plan

The One Grand Junction Comprehensive Plan was adopted in 2020 and outlines a vision and principles to guide the next 10 to 20 years of growth, development, and decision-making for the City of Grand Junction and broader community. The Unhoused Strategy aligns with multiple aspects of Principles 5, 6 10, and 11 of the comprehensive plan, providing an efficient and effective pathway for implementation as the City continues to move forward with its vision for the future.

Plan principle 5: Strong neighborhoods and housing choices

2. Partner in developing housing strategies for the community.

a. Housing strategy.
b. Housing incentives.
c. Regional housing initiatives.

Plan principle 6: Efficient and connected transportation

1. Continue to develop a safe, balanced, and well-connected transportation system that enhances mobility for all modes.

a. Balanced modes.
b. Regional transportation plan.
c. Circulation plan.
d. Bicycle and pedestrian plan.
e. Public transportation.
f. Complete streets.

Plan principle 10: Safe, healthy, and inclusive environment.

2. Promote health and wellness through access to services.

a. Coordinated approach.
b. Access.
c. Monitoring.
d. Homelessness.

3. Foster a culture of inclusivity, embracing and respecting the diversity of grand junction's residents.

a. Cultural competency.

b. Community events and activities.
c. Connectedness.
d. Culture of acceptance.

Plan principle 11: Effective and transparent government

2. Provide opportunities for meaningful and inclusive community involvement.

a. Transparency.
b. Meaningful participation.
c. Range of engagement approaches.
d. Translation and interpretation.

3. Collaborate with local, regional, and state partners on issues of mutual significance.

a. Regional collaboration.
b. Service providers.
c. Public-private partnerships.
d. State legislation.
e. City as a convener.
f. City as a leader.

Grand Junction Housing Strategy

The Grand Junction Housing Strategy was adopted in 2021 by the City of Grand Junction and outlines 13 strategies for addressing needs that were identified in the 2021 Grand Valley Housing Needs Assessment. The Unhoused Needs Assessment and Unhoused Strategy were directly informed by the Housing Assessment and Housing Strategy, and the seven unhoused strategies were intentionally developed to align with the existing Housing Strategy while homing in on the unique needs of unhoused populations. Each unhoused strategy aligns with one or more of the housing strategies.

Housing Strategy 1. Participate in regional collaboration regarding housing/homelessness needs and services.

Housing Strategy 7. Create a dedicated revenue source to address housing challenges.

Housing Strategy 8. Provide financial support to existing housing and homelessness services and promote resident access to services.

Housing Strategy 9. Support acquisition/ rehabilitation that creates or preserves affordable housing.

Housing Strategy 10. Consider implementation of an inclusionary housing/linkage fee ordinance.

Housing Strategy 11. Explore designation of an Urban Renewal Areas (URA) and utilization of Tax Increment Financing for affordable housing.

Housing Strategy 12. Consider adoption of a voluntary rental registry program in conjunction with landlord incentives.

Housing Strategy 13. Provide community engagement and education opportunities to address housing challenges and promote community participation

Mesa Together: Mesa County Master Plan

The Mesa County Master Plan was adopted by the county in 2023. The plan creates a shared vision for the county's future and establishes nine strategic goals to achieve the vision. The Unhoused Strategy aligns well with multiple key actions outlined under goals 1, 2, 3, and 4 of the plan and creates several opportunities to address houselessness in such a way that builds upon the county's strategic vision.

Goal 1: Promote a sense of community.

1c. Support complete neighborhoods to provide local access to services in communities.

1e. Recognize the need for decision-making to be transparent and accountable

Goal 2: Strategically address growth.

2a. Increase access to attainable and workforce affordable housing options.

2b. Encourage conservation and creation of a diversity of housing types and sizes including smaller, denser and more attainable housing types.

Goal 3: Encourage transportation options

3a. Foster active transportation by providing a regionally connected network of safe and accessible facilities that are safe for people walking and people biking.

3b. Provide reliable, viable and efficient transit options for local and regional travel throughout Mesa County.

Goal 4. Provide essential and adequate levels of services and facilities

4b. Maintain a five-to-10-year capital facilities/improvements program.

4c. Ensure fair and equitable access to schools and libraries in all areas of Mesa County.

4d. Provide safe and secure physical and community infrastructure throughout the County.

Table 5. Alignment with existing plans

Need(s) addressed	Unhoused Strategy	Housing Strategy	Grand Junction Comprehensive Plan	Mesa County Master Plan
Coordination and collaboration of service providers and improvement of support system for PEH	Unhoused Strategy 1 (Establish a community-wide framework for enhancing Coordinated Entry and System of Care Processes.)	Housing Strategy 1 (Participate in regional collaboration regarding housing/ houselessness needs and services.)	Comp Plan Principle #10, 2a -d (Promote health and wellness through access to services.) Comp Plan Principle #10, 3a-d (Foster a culture of inclusivity, embracing and respecting the diversity of Grand Junction's Residents.) Comp Plan Principle #11, 2a-d (Provide opportunities for meaningful and inclusive community involvement.) Comp Plan Principle #11, 4a-f (Collaborate with local, regional, and state partners on issues of mutual significance.)	Goal 1e (transparent and accountable decision-making)
Financial resources to prevent at-risk populations from entering houselessness	Unhoused Strategy 2 (Establish a flexible city-county housing fund to support housing security and increase collaboration between services.)	Housing Strategy 7 (Create a dedicated revenue source to address housing challenges.)	Comp Plan Principle #10, 2d (Continue to collaborate with partner organizations on the implementation of efforts to make homelessness rare, short-lived, and nonrecurring.)	Goal 2b. (creation of diverse affordable housing options)
Coordination and collaboration of service providers and improvement of support system for PEH	Unhoused Strategy 3 (Increase access to prevention, diversion, and housing navigation services.)	Housing Strategy 8 (Provide financial support to existing housing and houselessness services and promote resident access to services)	Comp Plan Principle #5, 2a-c (Partner in developing housing strategies for the community.) Comp Plan Principle #10, 2d (Continue to collaborate with partner organizations on the implementation of efforts to make homelessness rare, short-lived, and nonrecurring.)	Goal 4 (Provide essential and adequate levels of services and facilities)
Financial resources to prevent at-risk populations from entering houselessness	Unhoused Strategy 4 (Expand accessibility to basic needs and hygiene)	Housing Strategy 8 (Provide financial support to existing housing and houselessness services and promote resident access to services)	Comp Plan Principle #10, 2b (Facilitate access to health and human services)	Goal 2a (complete neighborhoods with access to services) Goal 4b-d (fair, equitable access to facilities, safe infrastructure throughout county)

Need(s) addressed	Unhoused Strategy	Housing Strategy	Grand Junction Comprehensive Plan	Mesa County Master Plan
Access to supportive resources and basic needs	Unhoused Strategy 5 (Expand mental health care services and substance use treatment options for PEH)	Housing Strategy 8 (Provide financial support to existing housing and houselessness services and promote resident access to services)	Comp Plan Principle #10, 2b (Facilitate access to health and human services)	Goal 4 (Provide essential and adequate levels of services and facilities)
Access to supportive resources and basic needs	Unhoused Strategy 6 (Increase accessibility and expand transportation services for PEH)	Housing Strategy 8 (Provide financial support to existing housing and houselessness services and promote resident access to services)	Comp Plan Principle #6, 1a-f (Continue to develop a safe, balanced, and well-connected transportation system that enhances mobility for all modes.) Comp Plan Principle #10, 2bii (working with GVT and the RTPO to ensure affordable and accessible transportation options are available to seniors, people with disabilities and other residents with specialized transportation needs with a particular focus on those that live within a reasonable distance to services and facilities)	Goal 3a-b (safe, reliable, regionally connected transportation)
Access to supportive resources and basic needs	Unhoused Strategy 7 (Increase non-market housing options including interim housing and shelter units.)	Housing Strategy 9 (Support acquisition/ rehabilitation that creates or preserves affordable housing.) Housing Strategy 10 (Consider implementation of an inclusionary housing/linkage fee ordinance.) Housing Strategy 11 (Explore designation of an Urban Renewal Areas (URA) and utilization of Tax Increment Financing for affordable housing.) Housing Strategy 12 (Consider adoption of a voluntary rental registry program in conjunction with landlord incentives.)	Comp Plan Principle #5, 1a-e (Promote more opportunities for housing choices that meet the needs of people of all ages, abilities, and incomes.) Comp Plan Principle #5, 5a-c (Foster the development of neighborhoods where people of all ages, incomes, and backgrounds live together and share a feeling of community.)	Goal 2a-b (affordable and diverse housing options)