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Homelessness affects the entire state of Utah. All the large municipalities and many small ones have community members who, for a wide variety of reasons, find themselves unhoused and at risk. It is almost impossible for an individual or family to thrive when living in such adverse conditions. The personal implications of homelessness are broad and can affect multiple generations. Its impact on neighborhoods, public safety, and commerce can be deep and difficult to address.

Signs of homelessness are sometimes easy to see, such as camping on sidewalks and in public parks. These visible manifestations of homelessness draw much attention. Unfortunately, all too often homelessness is far less obvious to the public when community members live in their cars, shelters, or other temporary situations. Despite years of focused effort and spending millions of dollars to solve problems, Utah’s experience with homelessness has proved to be perpetual and challenging.

Utah Code § 35A-16-203 charges the Utah Homelessness Council and the Coordinator of the Utah Office of Homeless Services with creating “a statewide strategic plan to minimize homelessness in the state.” Pursuant to these provisions, the Utah Homelessness Council conducted a nationwide search for a consulting group to perform a careful study of homelessness in Utah and to help draft a strategic plan to “minimize it.” The goal was to find an organization with wide experience in helping states and communities address homelessness. That search led to contracting with Homebase, a non-profit “dedicated to building community capacity to prevent and end homelessness.”

Beginning early in 2022 and working under the direction of the Utah Homelessness Council and Coordinator of Homeless Services, Homebase undertook a comprehensive review of homelessness throughout Utah. Homebase reviewed multiple survey reports, interviewed community leaders, Office of Homeless Services employees, homeless and social service providers, persons with lived experience with homelessness, and other stakeholders and reported their findings to the Homelessness Council. Homebase’s experience with successful practices from other jurisdictions and familiarity with Utah’s homelessness situation provided a foundation for its team to draft a proposed strategic plan, consulting regularly during the process with a group appointed from the Homelessness Council, the Coordinator of Homeless Services, and the Utah State Office of Homeless Services. Over time, the plan set forth in this booklet was developed and then approved by the Council and Coordinator.

The Shared Vision Statement of the Utah Homelessness Council and Office of Homeless Services in this Strategic Plan states:

“Our vision for the homeless response system in Utah is to make homelessness rare, brief, and non-recurring; that all people experiencing homelessness can thrive to their fullest potential; and that our communities are stable and safe for everyone.”

We recommend the Strategic Plan to everyone in Utah and invite the coordinated investment of community members, elected leaders, public employees, and stake holders in studying, applying, and working together to achieve this vision.
Letter from Wayne Niederhauser

The Office of Homeless Services is excited to implement this new state homelessness strategic plan with the Utah Homelessness Council and the Utah Homelessness Network.

Statewide Collaboration for Change: Utah’s Plan to Address Homelessness outlines specific goals and measurable benchmarks for minimizing homelessness and for coordinating much-needed wraparound services.

The plan identifies best practices and areas for improvement, ensuring all services are provided in a safe, cost-effective and efficient manner. It outlines gaps and recommends solutions for ensuring homelessness is rare, brief and non-recurring for Utahns.

While we have made real progress in some areas of homeless services, there is still much to do. We look forward to working with all stakeholders statewide to make significant and impactful advancements. Coordination is a key principle of success. The Office of Homeless Services is committed to collaborating with all stakeholders.

There is much more we can accomplish if we do it together.

Wayne Niederhauser
Shared Vision Statement of the
Utah Homelessness Council
& Office of Homeless Services

Our vision for the homeless response system in Utah is to make homelessness rare, brief and non-recurring; that all people experiencing homelessness can thrive to their fullest potential; and that our communities are stable and safe for everyone.

— Utah Homelessness Council

Guiding Principle One
The State respects the reality that those experiencing homelessness face complicated challenges. We support investments in activities that serve individuals and mitigate near-term needs and promote long-term results. Utah will prioritize positive outcomes and meaningful improvements in individuals’ lives. To do this, the State will resolutely:

1. Prioritize evidence-based practices as it identifies programs to fund, spotlight, and scale;
2. Commit to accountable processes for monitoring, evaluation, and recalibration in these efforts; and
3. Proactively share insights and results from these efforts such that each Local Homeless Council can be data-driven and outcome-focused as it adopts and adapts programs proven to maximize results.

Guiding Principle Two
Research and experience confirm that there are meaningful subpopulations among those who experience homelessness. There are consequential differences between these groups in terms of what causes or prolongs the situation, how frequently they experience homelessness, and what interventions and pathways will make homelessness rare, brief and non-recurring. Therefore, to ensure programs and services efficiently and effectively address the needs of each individual, the State is committed to:

1. Funding for early-stage assessments to diagnose root challenges and ongoing case management to ensure appropriate care is based on the individual’s needs; and
2. Prioritizing funding for evidence-based practices that treat root challenges for identifiable subpopulations to avoid a one-size-fits-all approach in caring for those experiencing homelessness.
Overview of Strategic Plan and Outcomes

Homelessness affects everyone. This includes people experiencing homelessness, people who are unstably housed, their housed neighbors, local businesses, first responders, hospital systems, community leaders and organizations, and other stakeholders. The purpose of a statewide strategic plan is to define effective goals and strategies to address homelessness at the state level that also support local partners in preventing and ending homelessness. The Utah Homelessness Council, supported by the Office of Homeless Services and stakeholders across the state, has performed an extensive needs assessment to identify what resources and interventions are needed to effectively address homelessness. Based on the needs assessment findings, state level target outcomes were identified to reduce and prevent homelessness in Utah, and goals and strategies have been identified to achieve these target outcomes, as detailed below. A sustainable and robust funding plan to move toward these target outcomes will be developed during implementation. The state further acknowledges the unique challenges of communities across the state to address homelessness and will continually seek to provide support and guidance to help localities address these challenges and achieve target outcomes to reduce homelessness in Utah.

TARGET OUTCOMES BY 2027

Based on the needs assessment as described in detail below, several target outcomes have been identified to address the key issues of a lack of permanent housing (especially for vulnerable subpopulations with high service needs), supportive/recovery services, and homeless prevention.

- **Create or identify 574 housing opportunities for people experiencing homelessness**
- **Increase supportive service interactions by 20%**
- **Reduce number of people becoming homeless each year by 20%**
- **Reduction of vulnerable subpopulations of chronically homeless, veterans, survivors of domestic violence, youth, and people with disabilities by 7%**

GOALS AND STRATEGIES

In order to achieve these targets, the following goals and strategies are recommended for implementation. Success or progress towards these goals will be assessed using the measurable outcomes detailed below.

For additional information on each goal, including recommended next steps to take for each strategy and nationally recognized innovative solutions to addressing homelessness, see Strategic Plan Implementation Recommendations.

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1 State level aggregated HMIS data from the calendar year 2022 will be used as baseline data to assess progress towards target outcomes.
Increase accessible and affordable permanent housing opportunities for people experiencing homelessness across the state

STRATEGIES TO ACHIEVE GOAL

1. Support localities to increase investment in permanent housing options at the state and local level, using private and public funds to meet the current housing need across the state.

2. Support localities to increase development of permanent supportive housing programs.

3. Support localities to increase development of transitional/interim housing for vulnerable subpopulations of people experiencing homelessness (e.g., those with mental health and substance use disorders, survivors of domestic violence, people experiencing chronic homelessness, people exiting criminal justice system, youth, and others) and create strong pathways for these populations to obtain and retain permanent housing.

4. Explore policy-level changes at the state and local level to preserve existing affordable housing.

5. Build community support for development of new permanent housing for people experiencing homelessness.

6. Support localities to employ innovative solutions for placing people equitably into permanent housing and design ongoing evaluation protocols that assess equity in housing outcomes.

7. Support local efforts across the state to perform housing needs assessments for vulnerable subpopulations experiencing homelessness and target resources and support to housing these populations.

MEASURABLE OUTCOMES FOR GOAL 1

- By 2023, the state of Utah will implement an annual demographic analysis of housing placements of people experiencing homelessness across the state to ensure equity in housing assistance, placement, and retention.

- By 2024, the state of Utah will establish cross-agency partnerships to develop a plan for identifying and funding permanent housing opportunities, including but not limited to permanent supportive housing, for people experiencing homelessness. The plan will examine how state agencies can work collaboratively to address the affordable housing deficit and current unmet housing needs for people experiencing homelessness across the state. This plan will also include housing needs assessments of vulnerable subpopulations experiencing homelessness (e.g., youth and survivors of domestic violence).

- By 2024, the state of Utah will establish a coordinated plan to help support localities in development and implementation of transitional/interim housing options for vulnerable subpopulations experiencing homelessness with strong pathways to permanent housing.

- By 2024, the state of Utah will launch a statewide social marketing campaign to change perceptions around homelessness and to lessen community resistance to development of new permanent housing for people experiencing homelessness.

- By 2025, the state of Utah will establish at least two cross-agency partnerships with the stated goal of advocating for and implementing policy changes to preserve affordable housing and support housing affordability.

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2 There is currently a deficit of approximately 40,000 units of affordable housing across the state (i.e. 20,240 affordable and available rental homes to meet the needs of 61,221 extremely low income renter households). According to the National Low Income Housing Coalition (NLIHC), Utah has a shortage of 40,981 affordable and available rental units. The deficit for units affordable for people who or at or below 50% AMI (area median income) is 43,253 units (https://nlihc.org/gap/state/ut). These data are based on the Housing Cost Burden by Income, which assess the degree to which individuals across income groups are cost burdened by housing (e.g., extremely low income = 0-30% of AMI; renter households spending more than 30% of their income on housing costs and utilities are cost burdened; those spending more than half of their income are severely cost burdened). Current housing needs of people experiencing homelessness was identified as 574 permanent housing opportunities per year based on HMIS data demonstrating the current system inflow across the state.

3 Transitional or interim housing refers to temporary housing often providing a bridge from shelter to permanent housing.
GOAL 2

Increase access to and availability of supportive services and case management for people experiencing and at risk of homelessness

STRATEGIES TO ACHIEVE GOAL

1. Develop a state-level supportive services working group to assess gaps and coordinate supportive services (e.g., behavioral health/addiction recovery, mental health services, and case management) across the state and identify strategies for increasing staff retention, capacity for client engagement, outreach, and general support.

2. Support localities to increase access to and availability of wrap-around mental and physical health services for people experiencing and at risk of homelessness across the state, with additional supports for people placed directly into housing from the street or emergency shelter.

3. Support localities to increase access to and availability of substance abuse services (including detox facilities and residential treatment) for people experiencing and at risk of homelessness across the state.

4. Support localities to increase housing navigation and location services to connect those in emergency shelter and on the streets with housing-focused case management.

5. Ensure that the delivery of supportive services is inclusive, culturally competent, and accessible to all people.

MEASURABLE OUTCOMES FOR GOAL 2

- By 2023, the Utah Homeless Network will establish a working group to coordinate supportive service efforts across the state.
- By 2023, the state of Utah will implement an annual demographic analysis of service administration across the state to ensure equity in the provision and delivery of services.
- By 2024, the Utah Homeless Network will perform a gaps analysis of supportive services and behavioral health services targeted to people experiencing and at risk of homelessness and identify strategies for increasing staff retention and capacity among supportive service providers.
- By 2024, the Utah Homeless Network will convene an advisory group of healthcare funders and providers, managed care plans, and stakeholders to evaluate and fund best practices in delivering healthcare to people experiencing homelessness in urban, suburban, and rural communities.
- By 2024, the state of Utah will identify a state liaison to collaborate with Utah CoCs to create connections between localities and substance abuse services providers and assist with identification of funding opportunities for sober living/substance abuse services projects.
- By 2025, the state of Utah will increase supportive service interactions with people experiencing and at risk of homelessness by 20% as demonstrated by homeless management information system data.
GOAL 3

Expand homeless prevention efforts by increasing coordination, resources, and affordable housing opportunities

STRATEGIES TO ACHIEVE GOAL

1. Develop a subcommittee to coordinate homeless prevention efforts and expand data tracking of homeless prevention service interactions.

2. Lead and support coordination of discharge efforts across the state to ensure that people exiting adjacent systems: (e.g. criminal justice, healthcare, foster care, and domestic violence shelters) are not discharged directly to homelessness and receive housing, behavioral health/healthcare, and other complementary services to assist with obtaining and retaining permanent housing opportunities.

3. Support localities to identify funding and build infrastructure to increase homeless prevention support for people at risk of homelessness.

MEASURABLE OUTCOMES FOR GOAL 3

- By 2023, the state of Utah will establish a subcommittee to coordinate homeless prevention efforts statewide and expand data tracking of homeless prevention service interactions.

- By 2025, the state of Utah will decrease the number of returns to homelessness from permanent housing projects by 5% overall, as tracked by HMIS.

- By 2025, the state of Utah will decrease the number of returns to the system of care after exiting homeless prevention assistance projects to permanent housing by 5%, as tracked by HMIS.

- By 2025, the state of Utah will increase homeless prevention assistance service interactions to people at risk of homelessness by 10%, as tracked by HMIS.
GOAL 4
Target housing resources and supportive services to people experiencing unsheltered homelessness

STRATEGIES TO ACHIEVE GOAL

1. Support localities to identify resources and infrastructure to increase availability of permanent housing and permanent supportive housing for people experiencing unsheltered homelessness with priority for people experiencing chronic unsheltered homelessness.

2. Assist localities in increasing supportive service and case management capacity to provide housing location, navigation, and stability services to provide the supports needed for unsheltered individuals to obtain and retain permanent housing.

3. Assist CoCs and LHCs to coordinate and target resources toward vulnerable unsheltered subpopulations by using by-name lists and other subpopulation targeting tools (e.g., chronically homeless, survivors of domestic violence, people with disabilities and/or substance use disorders, youth, etc.).

4. Support LHCs to identify specific needs, resources, and strategies to address unsheltered homelessness in their communities.

MEASURABLE OUTCOMES FOR GOAL 4

- By 2023, the state of Utah will work with all local CoCs and LHCs to ensure that people experiencing unsheltered homelessness are targeted for permanent housing opportunities, with priority for people experiencing chronic unsheltered homelessness.

- By 2025, the state of Utah will identify public land to develop safe parking, structured sanctioned encampments, and high access shelter in locations across Utah where there are elevated numbers of people experiencing unsheltered homelessness as demonstrated by Point-in-Time Count data.

- By 2025, the state of Utah will decrease the population of people experiencing unsheltered homelessness by 5% as demonstrated by aggregated state-level Point-in-Time Count data.

- By 2025, the state of Utah will support localities to develop by-name list tracking processes to target housing and services to vulnerable unsheltered subpopulations.

- By 2027, the state of Utah will decrease the number of people experiencing homelessness in the following subpopulations by 7%, as demonstrated by Point-in-Time Count data: chronically homeless, veterans, survivors of domestic violence, youth, people with disabilities (including SUDs).
GOAL 5

Promote alignment and coordination across multiple systems of care to support people experiencing and at risk of homelessness

STRATEGIES TO ACHIEVE GOAL

1. Develop cross-system partnerships with criminal justice, healthcare, human services, workforce development, foster care system, and education system stakeholders and state agencies.

2. Develop and support programs implementing strategies that seek to avoid the formal processing of a person experiencing homelessness by the criminal justice system (i.e. diversion programs) and focus on tracking outcomes for people suffering for mental illness and substance use disorders.

3. Create a model case-conferencing practice guide to assist CoCs and local jurisdictions with cross-agency/system in-person collaboration.

4. Work with privacy law experts to craft data sharing framework and create data sharing platform accessible across multiple systems.

5. Leverage data sharing to create a generalized protocol for organizational and project performance evaluation.

MEASURABLE OUTCOMES FOR GOAL 5

- By 2023, the state of Utah will establish a subcommittee to take leadership on cross-system initiatives, projects, and data sharing.

- By 2027 the state will reduce the number of people experiencing homelessness in the criminal justice system by 5%.

- By 2024, the state of Utah will create and disseminate a cross-system case conferencing practice guide to all CoCs.

- By 2024, the state of Utah will establish data sharing agreements with at least three systems external to the homeless system of care (e.g., criminal justice, healthcare & human services, workforce, and education).

- By 2026, the state of Utah will have a data sharing platform accessible to providers who enter into HMIS that provides access to and visibility of system partner data.

- By 2028, the state of Utah will develop a generalized protocol for organizational and project performance evaluation across multiple systems that work with people experiencing homelessness. Re-evaluation of these protocols will be carried out in 2030.
Needs Assessment Data Collection and Methodology

The target outcomes, goals, and strategies are based on the findings of a state-level needs assessment of resources for and needs of people experiencing homelessness across the state of Utah, as directed by the Utah Homelessness Council, supported by the Office of Homeless Services. This assessment included these key components:

4 A review of current research, reports, and efforts to address homelessness
   This plan incorporates information, recommendations, and best practices derived from existing studies and reports focused on homelessness in the state, as well as studies of best practices from around the country.

Quantitative data analysis
   This plan provides and analyzes data from Utah's local communities about people who are experiencing homelessness. Data are drawn from the federally mandated Homeless Management Information System (HMIS), which tracks people accessing certain types of housing and services for people experiencing homelessness, as well as annual Point-in-Time (PIT) counts, an annual snapshot which includes people who may not be accessing homelessness services, and other data provided by partners.

Stakeholder and community feedback survey
   More than 600 people from a wide cross-section of the state responded to an online survey distributed by the Utah Office of Homeless Services, the Utah Homelessness Council's Strategic Plan Advisory Group, the Utah Homeless Network, homeless service providers, and other stakeholders across the state. The survey was designed to gather feedback and perspectives from community members, providers, and other stakeholders about needed resources and strategies for addressing homelessness.

Interviews and focus groups
   This plan incorporates feedback from more than 20 groups of diverse community stakeholders, including people experiencing homelessness, funding organizations, business leaders, law enforcement and health care agencies, state and local leadership, and housing and services providers.

4 The Appendix contains in-depth summaries of methodology and findings from these data- and feedback-gathering strategies.
The Point-in-Time (PIT) Count is a physical count of all people experiencing homelessness within a Continuum of Care, including those who are unsheltered and may not have accessed the homeless system of care. It provides a snapshot of people experiencing homelessness at a specific point in time.

Each Utah Continuum of Care (Balance of State, Mountainland, Salt Lake) is required to have homeless service and housing programs enter data about people experiencing homelessness into HMIS. Data fields conform to standards published by the Department of Housing and Urban Development (HUD), which requires that each CoC administer an HMIS.

2,270 people have moved into rapid rehousing or permanent supportive housing, as tracked in HMIS at the state leve, and thus are maintaining an active enrollment.

American Community Survey (ACS) 2020 Five-Year-Estimates.

The following charts and analyses explore more about who is experiencing homelessness in Utah, by comparing Utah HMIS data, Utah 2020 Point-in-Time Count data, and the state population and state poverty population data.

WHO IS EXPERIENCING HOMELESSNESS IN UTAH?

According to the 2022 state-wide Point-in-Time Count, there were 3,556 sheltered and unsheltered people experiencing homelessness on a given night in Utah. However, this number does not capture the full picture of homelessness across the state. The Homeless Management Information System (HMIS) is a more accurate estimate of how many people are experiencing homelessness in Utah. HMIS data show that as of April 2022 there are an estimated 12,442 people currently enrolled in homeless service or housing projects in Utah. Of those, 2,270 have moved into housing opportunities supported by one of Utah’s Continuums of Care (CoC).
**Race, Ethnicity and Sex**

Examining the racial and ethnic makeup of people experiencing homelessness shows that while Utah is predominately white, Black, Indigenous, and People of Color experience homelessness at disproportionately higher rates across the state. When compared to state-level population data, Black, American Indian / Alaskan Native, and Native Hawaiian / Pacific Islander groups are overrepresented in the homeless population in Utah. For example: Black individuals are only 1% of the state population and 3% of the state population in poverty, but they represent over 10% of those in the homeless system of care. Similarly, those who are Hispanic / Latino are only 14% of the state population but make up 23% of the state population in poverty and over 23% of those experiencing homelessness.

Further, feedback from homeless service providers and people with lived experience emphasized the need for housing and services to be accessible and inclusive for everyone, especially vulnerable subpopulations including People of Color.

Demographic data from HMIS also demonstrated that, similarly to many states and localities, males represent a majority of the homeless population in Utah (57%).

“People of Color and low-income communities have been more impacted but it is not addressed [...]. When we think about our homeless response, we are often thinking about white people who speak English. We don’t meet the needs of People of Color, immigrants, people who speak other languages.”

– Utah Housing Corporation Representative

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**Homelessness by Race Compared to State Population Data**

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<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>White only</td>
<td>85%</td>
<td>76%</td>
<td>76%</td>
<td>78%</td>
</tr>
<tr>
<td>Black only</td>
<td>1%</td>
<td>3%</td>
<td>3%</td>
<td>10%</td>
</tr>
<tr>
<td>American Indian or Alaska Native Only</td>
<td>2%</td>
<td>4%</td>
<td>5%</td>
<td>6%</td>
</tr>
<tr>
<td>Asian Only</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander Only</td>
<td>9%</td>
<td>14%</td>
<td>11%</td>
<td>3%</td>
</tr>
<tr>
<td>Other / Two or more Races</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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*According to HMIS data from 2018-2022: 57% of the population is male, 42% female, and 1% who identified as a gender identity other than only male or female.*
What household types are experiencing homelessness?

The majority of people and households experiencing homelessness in Utah are single adults (adult-only households), making up about 48% of the people experiencing homelessness and 76% of all households. Families (adults with children) make up 30% of the people experiencing homelessness and 13% of the households.

Stakeholder and survey feedback identified both families with children and transition age youth as a high-priority populations for housing and services across the state. Of the adult-only households experiencing homelessness in Utah, approximately 8% are transition age youth (ages 18-24). Stakeholder feedback noted the need for services and housing opportunities for transition age youth, who cannot access many of the programs designed for adults experiencing homelessness because they do not meet the eligibility requirements or do not feel comfortable in accessing these programs. Further, stakeholders emphasized that chronically homeless households, predominately single adults, are another priority population for assistance.

10 The Department of Housing and Urban Development defines “household” as all the people who occupy a housing unit. A household includes the related family members and all the unrelated people, if any, such as lodgers, foster children, wards, or employees who share the housing unit. A person living alone in a housing unit, or a group of unrelated people sharing a housing unit such as partners or roomers, is also counted as a household.
LENGTH OF TIME HOMELESS

How long does it take for people to exit homelessness?

While some people experiencing homelessness in Utah are able to resolve their housing crisis and locate housing either on their own or with assistance through coordinated entry in their CoC, others struggle to find permanent housing and remain homeless for many days or sometimes years. The median time from system of care entry to exit (meaning placement in permanent housing) is 92 days.12

What types of projects or services get people into housing?

Certain types of homeless assistance programs in Utah are shown to have high rates of moving people into permanent housing and keeping them housed, while others struggle to connect clients with permanent housing opportunities. The chart below shows how many people end up in permanent housing after they exit from certain types of homeless assistance projects.

Exits from the System by Project Type and Destination Type (HMIS Data, Jan 2016 – April 2022)

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET OUTREACH</td>
<td>3%*13</td>
</tr>
<tr>
<td>EMERGENCY SHELTER</td>
<td>22%*</td>
</tr>
<tr>
<td>TRANSITIONAL HOUSING</td>
<td>63%</td>
</tr>
<tr>
<td>RAPID REHOUSING</td>
<td>79%</td>
</tr>
<tr>
<td>PERMANENT SUPPORTIVE HOUSING / OTHER PH*</td>
<td>62% (80%)14</td>
</tr>
<tr>
<td>HOMELESS PREVENTION</td>
<td>78%15</td>
</tr>
</tbody>
</table>

Similarly, permanent supportive housing (PSH), transitional housing (TH), and rapid rehousing (RRH) have lower rates of returns to homelessness once someone has become housed as compared to emergency shelter (30% of people return to homelessness from permanent destinations). Emergency shelter provides a vital service across the state, but providers face unique challenges in finding stable affordable and permanent housing opportunities for clients. Providers noted that, in many cases, they do not have enough resources to connect people, especially those who are highly vulnerable, to the services or housing opportunities they need to remain stably housed.

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11 Exit = if the person has moved into rapid rehousing or permanent supportive housing, if they have been exited for a year and have not returned (regardless of exit type), or if they exited to a permanent destination. Individuals in RRH and PSH are often still “enrolled” in the system and receiving other services.

12 According to HMIS data from 2017-2022 for length of time in the system for those who exit the system.

* = excluding retention

( ) = including retention

Unknown Destination >10%.

15 (PSH: 15% returns to homelessness from permanent housing; TH: 19% returns to homelessness from permanent housing; RRH: 24% returns to homelessness from permanent housing).
SUBPOPULATIONS EXPERIENCING HOMELESSNESS

How many people experiencing homelessness in Utah have disabilities?

Permanent affordable housing is out of reach for many Utah residents, but people experiencing homelessness with a disabling condition may face additional challenges to obtaining and retaining housing. Many adults experiencing homelessness across Utah have a disability or significant impairment, including chronic physical impairments, mental illness, substance use disorder, or combinations of multiple conditions. While many had a disability prior to losing their housing, many others acquired a disability resulting from living on the streets or being without stable housing. To return to housing successfully and for the long-term, people experiencing homelessness often require ongoing supports and services, including after housing placement.

According to HMIS data, about 48% of people who have experienced homelessness within the last five years in Utah had a disabling condition. Around 36% of them had a mental health or substance use disorder.

Stakeholders also strongly emphasized the need for additional supports and resources for people experiencing homelessness with disabling conditions, including substance use disorders and mental health needs. Approximately 51% of stakeholders that completed the survey stated that people with mental illnesses need the most focus in the homelessness response system.

<table>
<thead>
<tr>
<th>Disabling Condition Category</th>
<th>Number (77,409)</th>
<th>Percent of Total Ever Enrolled in the Homeless System (Jan 2016 ~ April 2022)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any Disabling Condition</td>
<td>37,925</td>
<td>48.99%</td>
</tr>
<tr>
<td>MHD OR SUD</td>
<td>27,904</td>
<td>36.23%</td>
</tr>
<tr>
<td>Mental Health Disorder (MHD)</td>
<td>20,959</td>
<td>27.33%</td>
</tr>
<tr>
<td>Substance Use Disorder (SUD)</td>
<td>15,302</td>
<td>19.92%</td>
</tr>
<tr>
<td>Alcohol Use Disorder (AUD)</td>
<td>6,899</td>
<td>8.99%</td>
</tr>
<tr>
<td>Drug Use Disorder (DUD)</td>
<td>12,447</td>
<td>16.24%</td>
</tr>
<tr>
<td>MHD AND SUD</td>
<td>8,357</td>
<td>10.80%</td>
</tr>
<tr>
<td>Chronic Health Condition</td>
<td>14,972</td>
<td>19.48%</td>
</tr>
<tr>
<td>Physical Disability</td>
<td>11,757</td>
<td>15.30%</td>
</tr>
<tr>
<td>Development Disability</td>
<td>7,376</td>
<td>9.61%</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>659</td>
<td>0.90%</td>
</tr>
</tbody>
</table>

17 7.5% (6,274) missing data was not included in this table; CE not included due to poor data quality. Data are from Jan 2016 ~ April 2022 time period. Please note this chart reflects a number of people who may have multiple disabilities or health conditions.
How many people in the state are experiencing unsheltered homelessness?

Experiencing unsheltered homelessness similarly creates challenges and barriers for people in obtaining permanent housing. People experiencing unsheltered homelessness are also uniquely vulnerable and, according to stakeholders, need housing and additional supports to exit homelessness and maintain permanent housing. Reducing unsheltered homelessness was identified by stakeholders as essential to addressing homelessness across the state.

Of all of the individuals in Utah who have experienced homelessness since 2018 and enrolled in the system of care, over 55% had a history of unsheltered homelessness.

Further, an estimated 39% of people newly entering the system each year will have experienced or will experience unsheltered homelessness.

Certain subpopulations experience unsheltered homelessness at a higher rate. For example, those who are considered chronically homeless have experienced unsheltered homelessness at higher rates (87.5%) than those who are not considered chronically homeless (38%), and adult-only households make up 61% of the total homeless population but 89% of those who are unsheltered.

“Everyone should have a home. Those with children should take precedence. Those with a disability or having been a victim of DV and those marginalized communities need extra support.”
– Survey Respondent
According to the HMIS data, approximately 49% of people with unsheltered histories (of those enrolled in the system of care in the last five years) also had records of mental health disorders (MHD) and/or substance use disorders (SUDs). The chart below shows how many people with unsheltered and sheltered histories are reported as having a mental health and/or substance use disorder across the state.

![Mental Health Disorders (MHD) and Substance Use Disorders (SUD) by Unsheltered Histories](chart)

A wide range of stakeholders emphasized the need to prioritize people who are living unsheltered for services and housing and that people living outside is an unacceptable solution and creates harm and trauma to people experiencing homelessness and the larger community.

Stakeholders identified the top solutions to unsheltered homelessness as permanent supportive housing, affordable permanent housing, and hotel/motel conversions to permanent housing or shelter. Survey respondents identified the need to resolve encampments, but overwhelmingly objected to sweeps or camp cleanups — only 8-10% of respondents selected these as potential solutions to unsheltered homelessness.

### How many unhoused people in Utah are experiencing chronic homelessness?

Like people experiencing unsheltered homelessness, people experiencing chronic homeless have vulnerabilities that may require expanded assistance and supports to connect them with permanent housing. Chronic homelessness is used to describe individuals who have experienced homelessness for at least a year — or on repeated occasions over the course of several years — while struggling with a disabling condition such as a serious mental illness, substance use disorder, or physical disability. Of the people currently enrolled in homeless assistance projects that enter data into HMIS, approximately 20% are considered chronically homeless.

- Balance of State CoC: 11.5% (284 people) are currently chronically homeless.
- Mountainland CoC: 20.6% (178 people) are currently chronically homeless.
- Salt Lake City CoC: 22.7% (1,783 people) are currently chronically homeless.

Each year, about 10% of those newly entering the system will be chronically homeless. Stakeholders also emphasized that people who are chronically homeless typically need a higher level of support paired with housing (e.g., permanent supportive housing solutions).
HOUSING AND SERVICES: WHAT IS NEEDED IN UTAH

In addition to providing a picture of who is experiencing homelessness in Utah, including the needs and characteristics of vulnerable subpopulations, the state needs assessment sought to identify what housing and service resources are required to meet the needs of Utah’s homeless population.

Unmet Housing Need Across the State

Permanent housing brings security and safety, allowing individuals and families to focus their efforts on maintaining a job, getting their kids to school or childcare, and improving or preserving their health and well-being. Stakeholders in all areas of Utah emphasized that there is a severe shortage of affordable housing for people experiencing homelessness and that meeting the current unmet permanent housing need was the most important solution to ending homelessness. To assess how much housing is required in Utah to serve the needs of all people who are currently experiencing homelessness, HMIS data was analyzed to determine (1) how many people come into the system of care (inflow), (2) how many people exit the system of care (outflow), and (3) the difference between those two (unmet housing need).

The following table shows the average unmet housing need is housing opportunities for 574 people per year by CoC (Continuum of Care). These three CoCs cover the entire state of Utah. The average was based on years 2017 through 2021, as those were the years with full data available for the analysis.

Average Unmet Need by CoC (2017-2021)

<table>
<thead>
<tr>
<th>CoC</th>
<th>Avg. Inflow per year</th>
<th>Avg. Outflow per year</th>
<th>Avg. Unmet Need per year</th>
<th>Balance of State</th>
<th>Mountainland</th>
<th>Salt Lake</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3,901</td>
<td>3,450</td>
<td>451</td>
<td>11,327</td>
<td>10,753</td>
<td>6,448</td>
<td>574</td>
</tr>
</tbody>
</table>

A majority of survey respondents stated that a key piece of solving homelessness was housing initiatives, including financial assistance and more units. Further, respondents also ranked deeply affordable housing units as the most effective strategy to addressing homelessness.

Similarly, broader data examining how many affordable housing units are needed to house low-income households across the state show significant deficits. According to the National Low Income Housing Coalition (NLIHC), there is currently a deficit of approximately 40,000 units of affordable housing across the state (specifically, there are 20,240 affordable and available rental homes to meet the needs of 61,221 extremely low-income renter households). The deficit for units at or below 50% of AMI (area median income) is 43,253 units (https://nlihc.org/gap/state/ut).

21 Data are based on the Housing Cost Burden by Income, which assess the degree to which individuals across income groups are cost burdened by housing (e.g., extremely low income = 0-30% of AMI; renter households spending more than 30% of their income on housing costs and utilities are cost burdened; those spending more than half of their income are severely cost burdened).
What Types of Housing are Needed in Utah?

While the data clearly show the need for additional permanent housing of all types, stakeholders specifically emphasized both the success of and the need for permanent supportive housing. Shelter providers noted that while their supportive services are comprehensive there are not enough housing opportunities for people exiting the shelter, especially those who have a high level of physical or mental health needs. Providers also noted that permanent supportive housing projects provide the best outcomes for people with a high level of mental health or other service needs. Survey respondents further noted that permanent supportive housing and affordable permanent housing are the top two solutions for unsheltered homelessness.

To determine what percentage of different types of housing are needed across the state, this assessment looked at level of acuity of people experiencing homelessness throughout the state. Acuity is the level of vulnerability or need someone has. People with higher levels of acuity typically require more supportive services and longer-term housing support.

One way to determine acuity, or severity of need, is through examining VI-SPDAT scores (a vulnerability assessment tool which generates a number to represent a person’s level of vulnerability) to examine how many people have low, medium, and high levels of acuity. Communities, including the Utah CoCs, use the VI-SPDAT in their coordinated entry systems to determine which people may need a high level of support such as permanent supportive housing.22

More than 50% of the people coming into the system are scoring in the low to medium range, below what is typically considered a range that is recommended for permanent supportive housing placement. This indicates that a significant number of people experiencing homelessness will not require permanent supportive housing.

The following chart shows the VI-SPDAT score ranges by family type (individual, family, and transition age youth)23. A “high” score range is 8+/9+ and indicates a need for permanent supportive housing. A “medium” score range is 4-7 and indicates a need for transitional housing or rapid rehousing. A “low” level is 3 or less and indicates a lower priority for permanent housing through coordinated entry, but services and housing assistance outside of coordinated entry are typically provided.

While 46% of adults, 41% of transition age youth, and 58% of families may be best served by permanent supportive housing, a much smaller percentage of these households are actually accessing permanent housing projects. Of people scoring in permanent supportive housing range,24 only 11% ever access PSH or Other Permanent Housing (OPH) project types.25

“A huge barrier is housing. If you are homeless that means you have no home. The prices of housing in the state make it much more difficult to house people. In this type of economy, it is hard to get people into something they can call home that is safe and stable. We don't have enough truly deeply affordable housing in the state.

– County Representative

VI-SPDAT Score Ranges By Family Type

( Jan 2017 - April 2022)

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Individual</th>
<th>Family</th>
<th>Transition Age Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>46.02% (4,292)</td>
<td>37.04% (3,538)</td>
<td>46.02% (4,292)</td>
</tr>
<tr>
<td>Medium</td>
<td>58.50% (1,222)</td>
<td>35.50% (747)</td>
<td>58.50% (1,222)</td>
</tr>
<tr>
<td>Low</td>
<td>41.41% (53)</td>
<td>35.94% (46)</td>
<td>41.41% (53)</td>
</tr>
</tbody>
</table>

22 “High” acuity is 8+ for individual households or 9+ for family households, which qualifies that household for Permanent Supportive Housing (PSH).
23 These data are from HMIS for January 2017 through April of 2022. There were not enough assessments in the dataset for 2016 to be included in analysis.
24 Of those who are exiting “coordinated entry” project types in HMIS.
25 Adults: 14% accessed permanent supportive housing or other permanent housing project types; Families: 3% accessed permanent supportive housing or other permanent housing project types; TAY: 9% accessed permanent supportive housing or other permanent housing project types.
Homeless Prevention

As the lack of permanent affordable housing spreads to additional rural areas of the state, more people are just one paycheck or financial crisis away from losing their housing. Often it only requires a small intervention to prevent them from becoming homeless — whether it is one-time financial resources to provide a security deposit, legal assistance to prevent eviction, or help learning to balance a budget. Homelessness prevention can be a low-cost strategy that can be implemented immediately at any agency serving homeless clients, and stakeholders across Utah identified homeless prevention as a key measure to addressing homelessness. Survey respondents noted that homeless prevention financial assistance is the most needed type of assistance and other stakeholders emphasized that stronger partnerships between homeless service providers and other systems that may discharge clients into homelessness, such as hospitals, the foster care system, and the criminal legal system, are needed to prevent homelessness for those exiting these institutions.

Further, HMIS data shows that 78% of people who do receive homeless prevention assistance remain housed, supporting the efficacy of this cost-effective intervention.

“We don’t have available affordable housing. You have people who are chronically homeless that need permanent supportive housing, but then you also have people that were evicted because they can’t afford their rent anymore. Prevention is housing.

– UHC Member

“We need to focus more on preventing homelessness to avoid people from falling into our system, help keep people where they are.

– Homeless Provider
Unmet Service Needs

Housing is a solution to homelessness, however, it is often very difficult for everyone experiencing homelessness to obtain and retain housing without the proper social services and supports. Nonprofits, community groups, county, and state agencies provide a variety of services that can help people to exit homelessness and stay housed for the long term. Programs such as mental health treatment, employment and job training, health care, substance use recovery, and transportation are needed to help people attain greater stability. Case management is a crucial supportive service for people experiencing, exiting, and at risk of homelessness because they help assess the individual needs and make the connection to the right services. For people who are currently homeless, housing-focused case management is a best practice that focuses on the specific challenges and barriers preventing people from regaining stable housing.

Data from across the state show that about half of people experiencing homelessness have disabling conditions that may require a high level of service needs, including mental health and substance abuse treatment. Feedback from survey respondents and other stakeholders also emphasized the need for more funding and state support for service providers.

Next to housing, supportive services was the second highest priority for addressing homelessness for a majority of survey respondents and stakeholders, and many stakeholders across Utah emphasized the need for SUD treatment and better linkages between homeless service providers and drug treatment programs.

Over 90% and 88% of survey respondents, stated that behavioral health and mental health treatment were the top health care priorities for people experiencing homelessness. A majority of survey respondents also stated that wrap-around supportive services and case management were the top two types of supportive services most needed. Stakeholders further emphasized that without adequate transportation to access supportive services and case management, people cannot be effectively connected to these services.

Finally, survey takers said that some services are currently underutilized, primarily due to lack of staff resources. Providers and shelter staff similarly emphasized that low pay and high job turnover created significant challenges in running existing programs.

“

We need more permanent supportive housing with an emphasis on structured wrap-around services. Case management is critical for those who lack housing right now.

– LHC Representative
The resources to provide a true homeless resource center has been a struggle. We know what we want to do, what works, but we haven't been resourced to serve people experiencing homelessness. The State Council has looked at sheltering system as a way to reduce homelessness. They look to us and say, we changed the system, but there is more unsheltered homelessness, and so they ask us what we are doing wrong. Need a focus on support services. We have been talking about the fact that we are the last resort, so we have people with severe needs, and we don't have the resources to support them. They need more than just congregate shelter but that is all we have, so we are adding to their trauma.

- Provider / LHC Representative