

Idaho has two regional Continuum of Cares that are charged with coordinating a system response for housing and services funding for homeless families and individuals within their geography:

Boise City/Ada County,
Our Path Home

Idaho Balance of State,
*Idaho Homelessness
Coordinating Committee*



Our Path Home

The public-private partnership
working to end homelessness in Ada
County, governed by the Executive
Committee.





Our Path Home



Housing First

- prioritizes providing permanent housing to people experiencing homelessness as the first step



Diversion Trained

- helps people identify and access alternatives to homelessness and resolve their immediate housing crisis



Trauma Informed

- care that emphasizes understanding, compassion, and responding to the effects of all types of trauma



Collaborative

- a single team to plan and provide effective use of community-wide resources





DIVERSION

OTHER



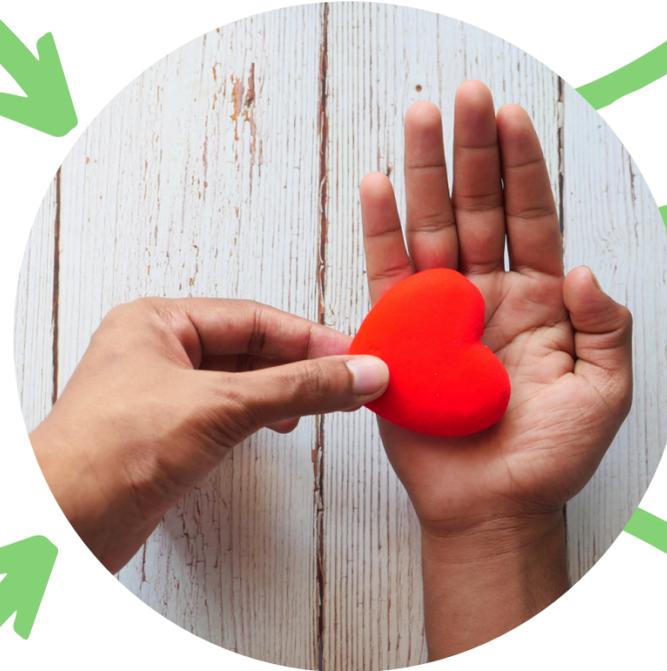
PREVENTION



Our Path Home
HOUSING CRISIS HOTLINE



Our Path Home
OUTREACH



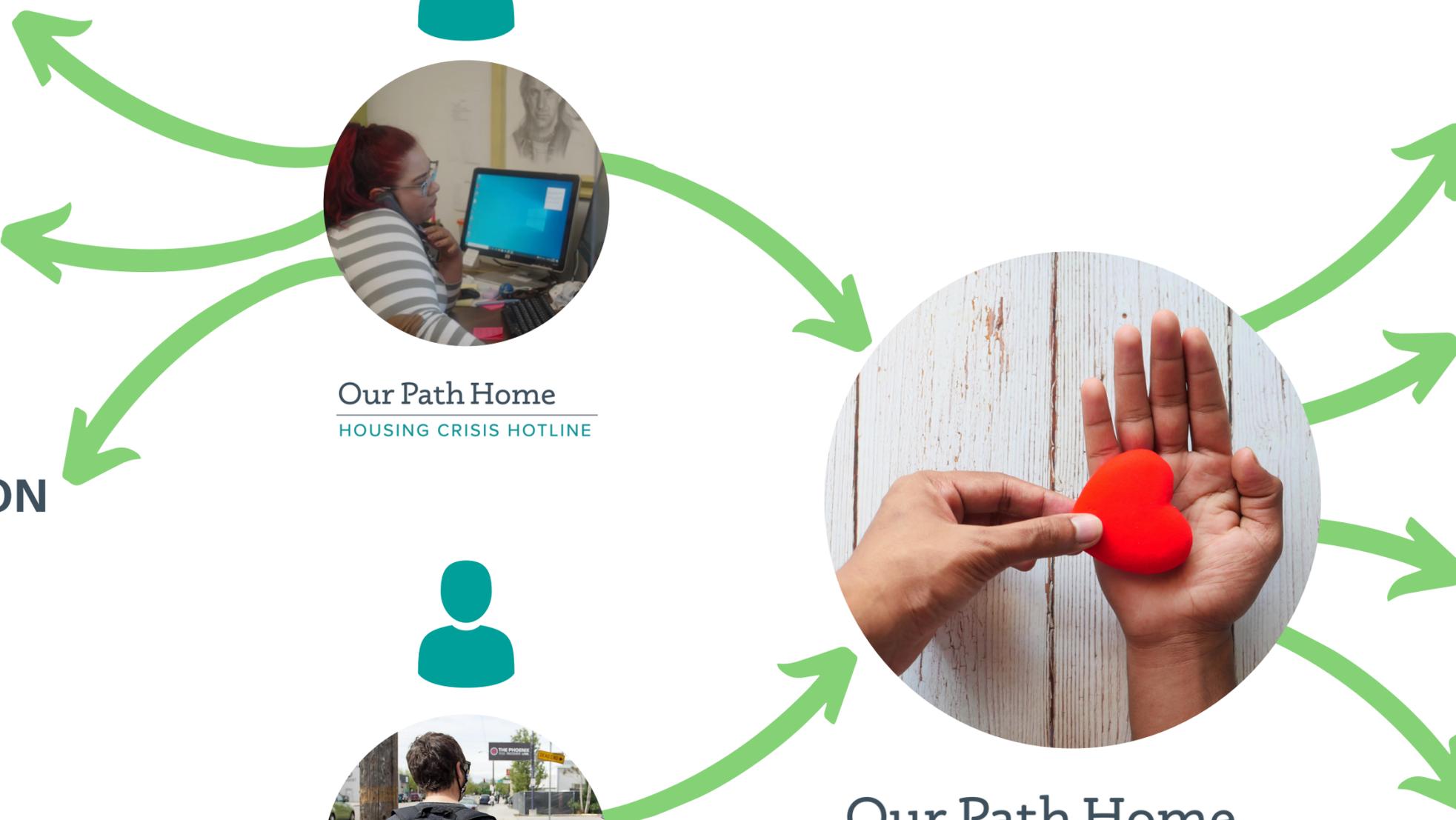
Our Path Home
CONNECT

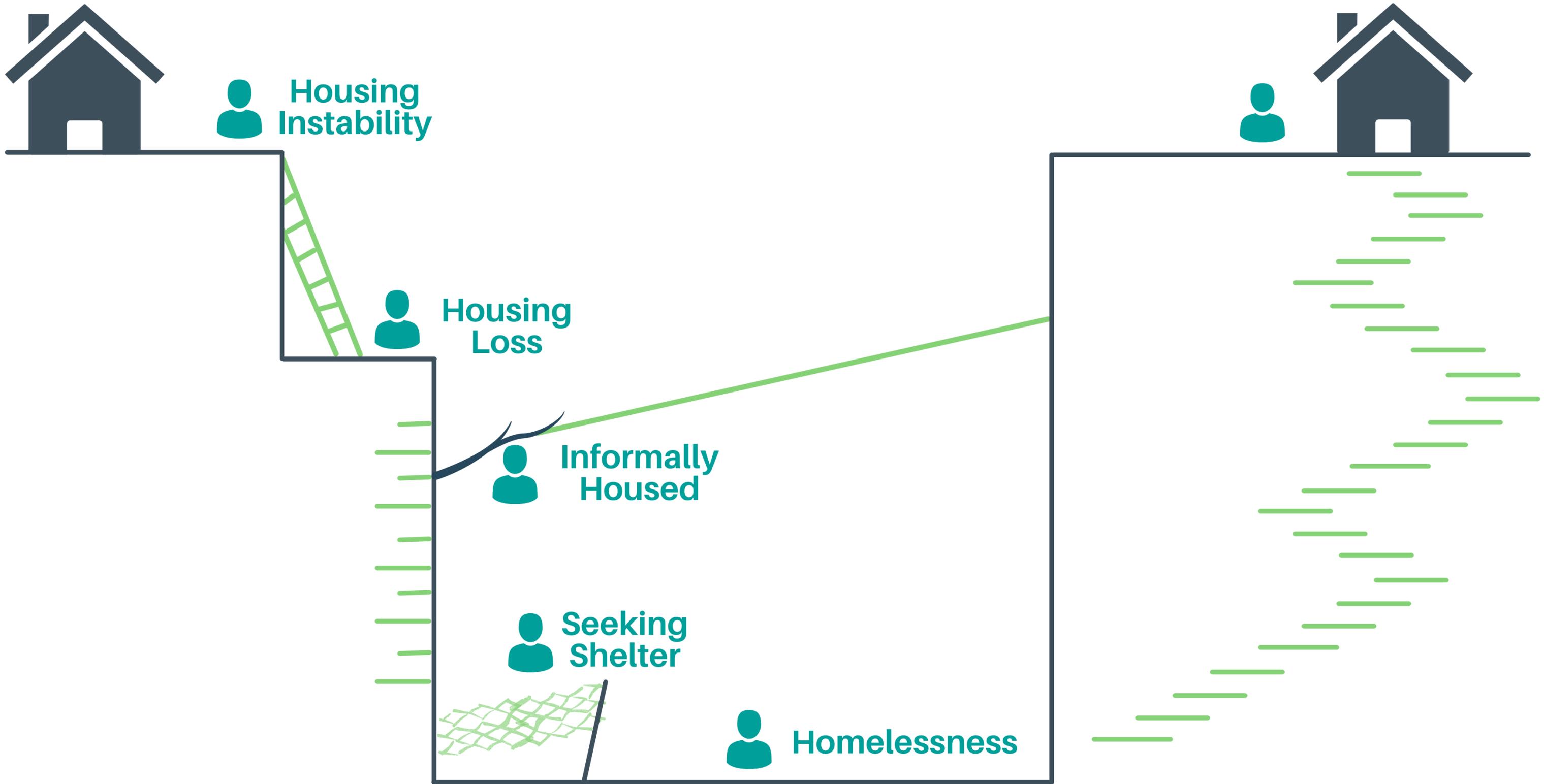
EMERGENCY SHELTER

RAPID RESOLUTION

RAPID REHOUSING

PERMANENT SUPPORTIVE HOUSING







STREET OUTREACH



Our Path Home

OUTREACH

What We Do



Photo Credit KIVI



Photo Credit Brian Myrick, Idaho Press

How We Help

- unhoused in Boise/Ada County
- The "invisible homeless"
- Chronic homelessness
- Not engaged in services



Photo Credit KIVI



CHALLENGES

Photo Credit Brian Myrick, Idaho Press



Stock Photos



STORIES





Our Path Home

HOUSING CRISIS HOTLINE

**HOUSING
CRISIS**

HOTLINE



IF YOU ARE EXPERIENCING A HOUSING CRISIS - WE ARE HERE TO HELP.

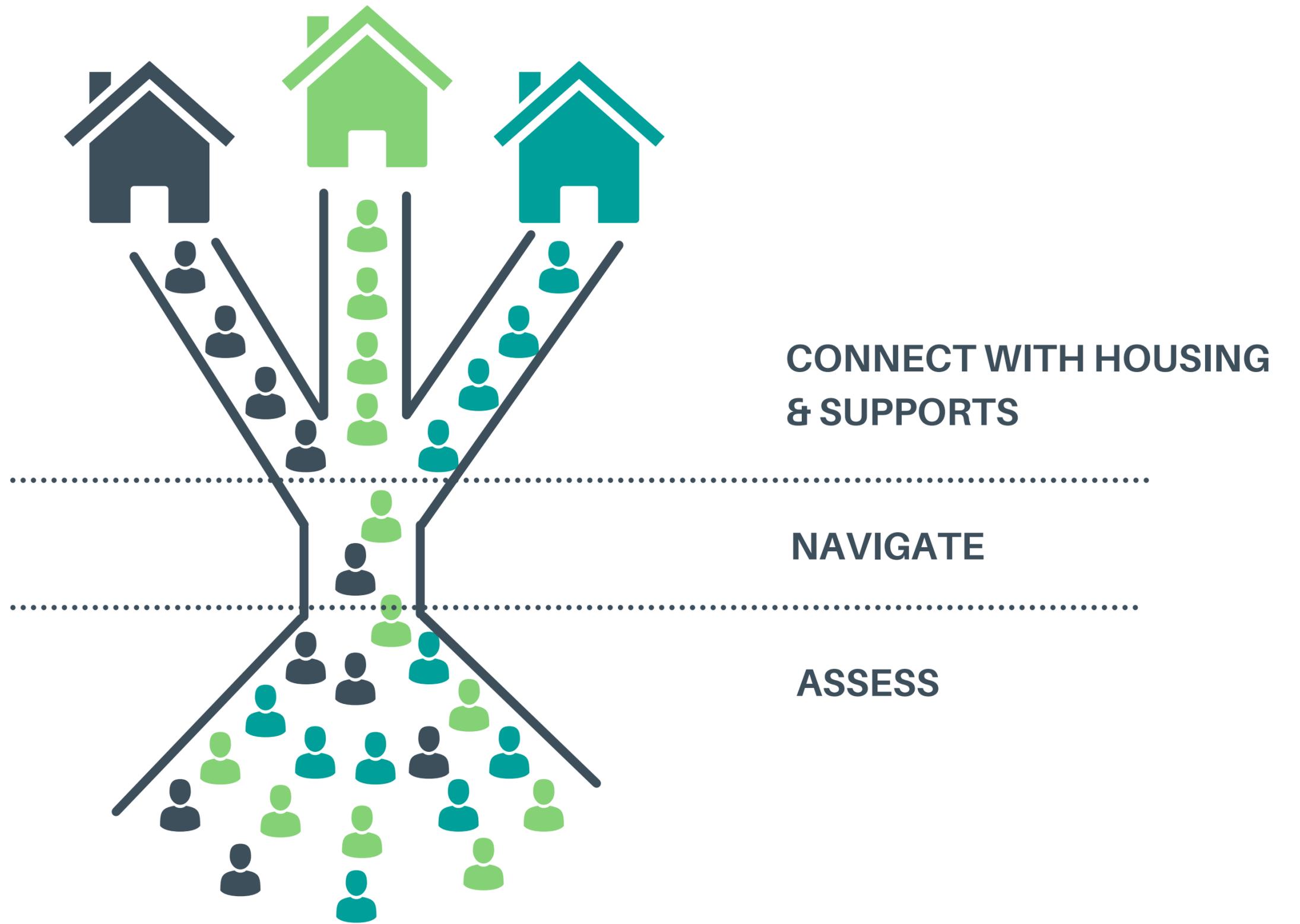
Call us for
RESOURCES, INFORMATION & SUPPORT

208-336-HOME (4663)



Our Path Home

CONNECT



Terry Reilly Health Services

A Community Health Center in operation for 50 years



What we do: Prioritize high-need, disparate or underserved communities and populations, emerging community health needs, and social determinant impacting health

Who we serve:

- Uninsured, Medicaid/Medicare, private insurance
- Sliding and nominal fee schedule, based on ability to pay
- **Health Care for the Homeless**
- Migrant Health Center

Services:

- Primary Care, Urgent Care
- Dental
- Psychiatry
- Pharmacy
- Behavioral Health and Substance Misuse
- Support Services
 - Medical setting – navigation, nutrition, translation
 - Supportive housing – care management, ACT team



Poor Health Housing Instability Poor Health

- Exposure
- Hygiene
- High stress
- Lack of safety
- Recovery difficult
- Diet
- Routine/structure
- Trust/Engagement
- Access
- Trauma

Health Conditions among People Experiencing Homelessness in Comparison to the General US Population

18%	Diabetes	9%
50%	Hypertension	29%
35%	Heart Attack	17%
20%	HIV	1%
36%	Hepatitis C	1%
49%	Depression	8%
58%	Substance Misuse	16%

Source: Health Center Patient Survey (HCPS) 2009 – www.nhchc.org
February 2019 Homelessness & Health: What's the Connection?





Models of Support Services

Community Based

Site Based

Intensive
CM

CHOIS program
(voucher plus CM)

Team
Based
Care

New Path Community Housing
(housing plus support)



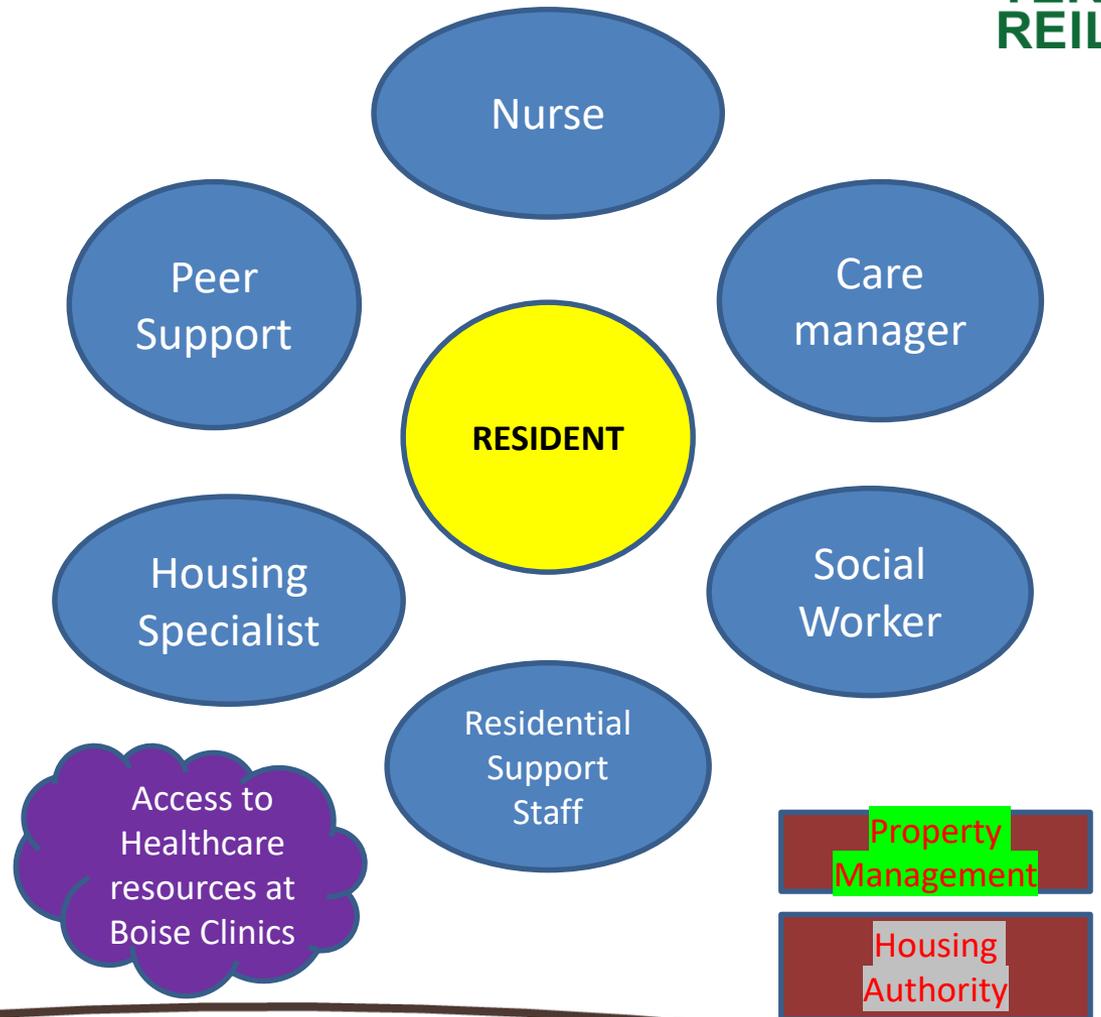
On site - Team Based Support at New Path Community Housing



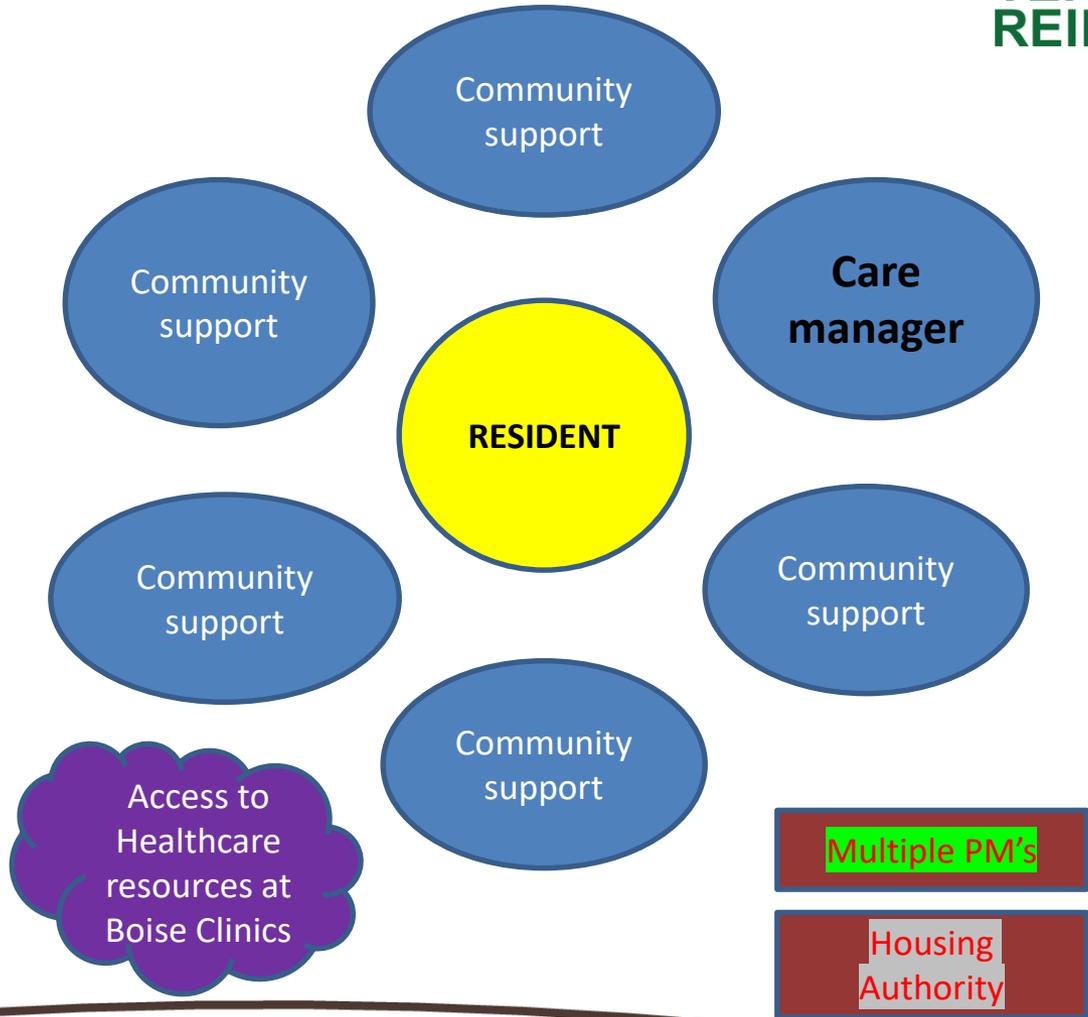


NEW PATH COMMUNITY HOUSING





Care Manager – Supports residents with homes throughout the community



Support Services

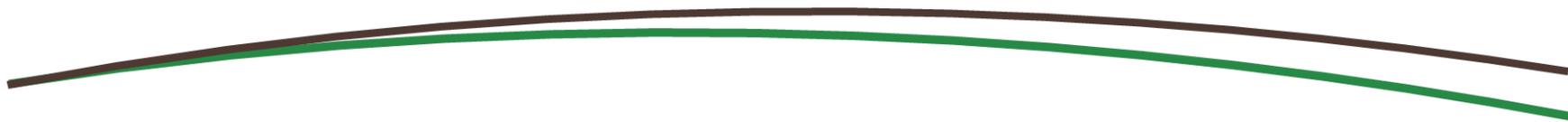


Tenancy Supports

- Housing Search Assistance
- Collecting documents to apply for housing
- Completing housing applications
- Reasonable Accommodations/Recertifications
- Advocacy
- Acquiring furniture, cleaning supplies, etc.
- Eviction prevention (e.g. payee or cleaning services)
- Housing Authority liaison
- Property manager relationship management
- Cleaning/organizing living space

Additional Care Supports

- Problem solving
- Crisis management
- Access food, transportation, health care resources
- Coordinate with other community providers
- Care transition (hospitals, skilled nursing, jail)
- Activity and support groups
- Independent living skill building
- Transportation
- Linking to education, job skills training and employment
- Resident council
- Mental health and Substance misuse counseling



HOUSING AFFORDABILITY

“I am a senior and have friends on disability They are selling the rentals out from under my friends with very little time to relocate. They do not have the funds to rent a high end apartment. Where are they going to live?”

“a [rent] increase from \$1,167.00 to \$1,778 marking an increase of 52% over the course of six months. [...] I know my situation is not unique. The housing/rental prices [in Boise] have become unmanageable for the majority of the local working class.”

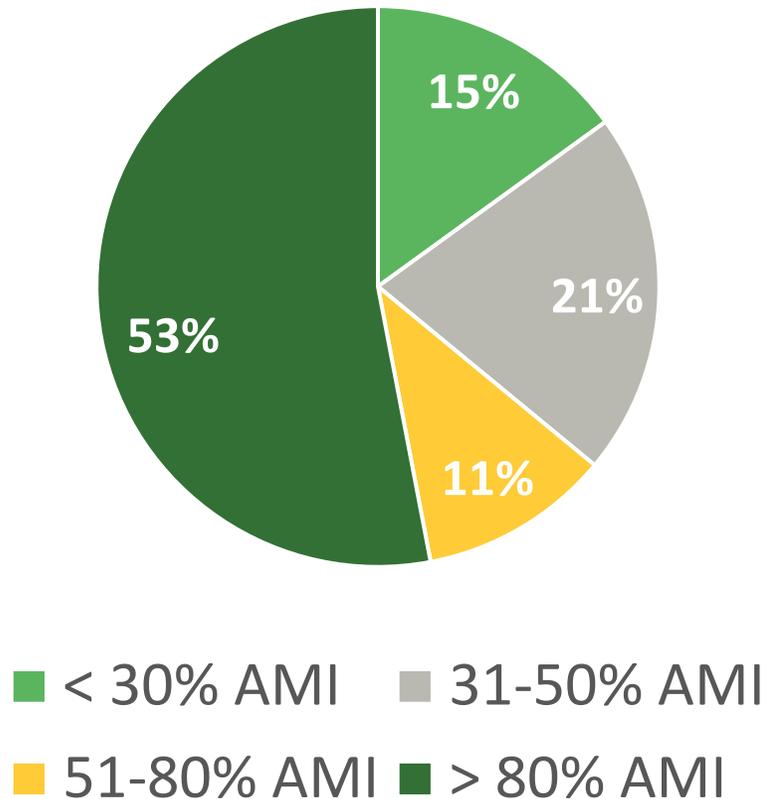
NEW UNITS NEEDED BY 2030

	Annual Need	Total Needed by 2030
Ada County	6,684	66,839
City of Boise	2,773	27,725

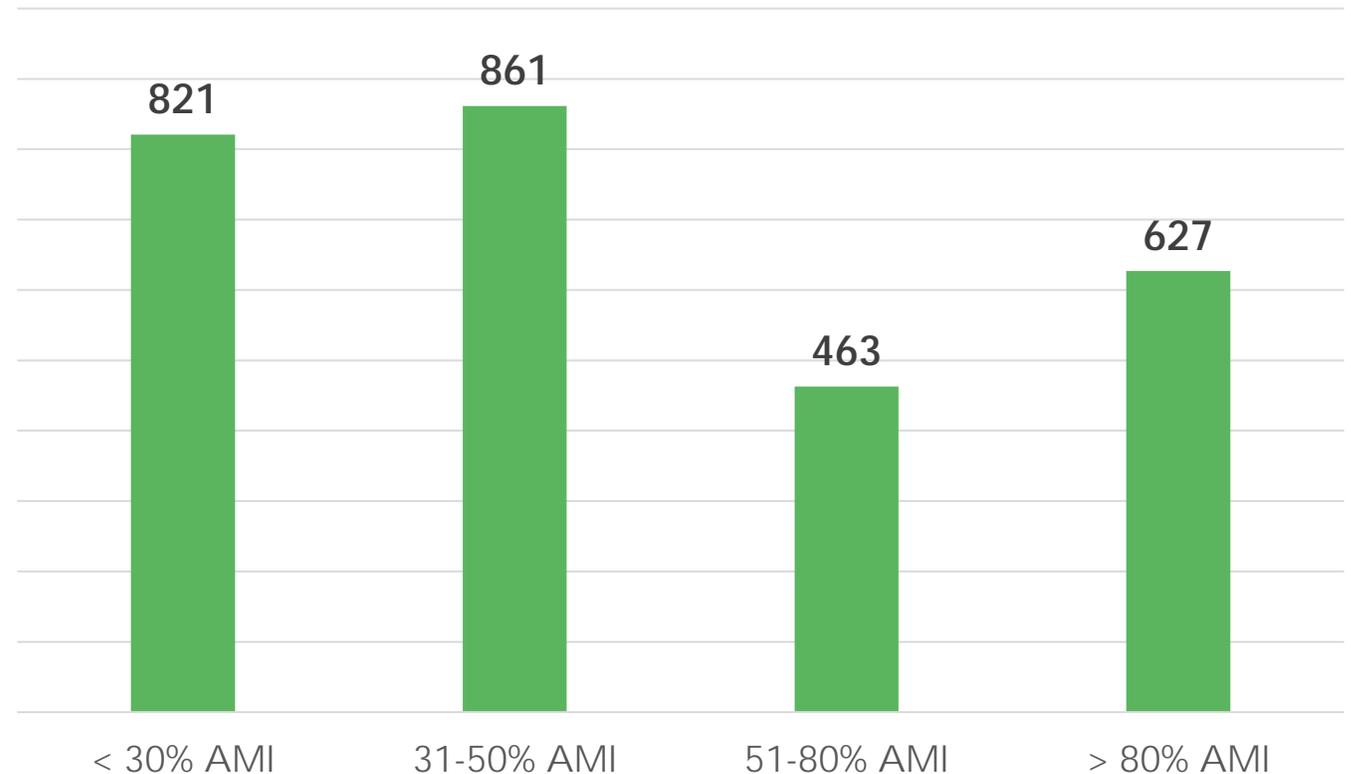
SOURCE: American Community Survey/Census and Homeless Management Information System

CITY OF BOISE: HOUSING NEED BY INCOME

POPULATION BY INCOME



UNITS NEEDED EACH YEAR BY INCOME



SOURCE: American Community Survey/Census and Homeless Management Information System

HOUSING AFFORDABILITY BUDGET FORECAST

Source	Amount	Description
City of Boise	\$20M	Investment and incentives (~\$10M) Supportive housing (\$10M) Campaign to End Family Homelessness (\$2M) Land (\$???)
Partner Resources	\$???	HOME, CDBG, ARP, HOME-ARPHTF, LIHTC, bonds, vouchers, etc

SOURCE: American Community Survey/Census and Homeless Management Information System

CITY'S PRIORITIES + STRATEGIES

- **Increase Production of Affordable Housing**
 - Engage + incent market rate developers
 - Invest in multi-family
 - Density + equity
- **Preserve Affordable Housing**
 - Property owner partnership program
 - Revolving Loan Fund
 - Partner w/ mission-oriented developers
- **House the Unhoused**
 - Implement the supportive housing action plan
 - Implement the Campaign to End Family Homelessness

KEY TAKEAWAYS + CONSIDERATIONS

- A lot of production but not enough to serve those with lower incomes
- 77% of the annual need is for housing affordable to those 80% or less of the area median income
- Housing affordable to these households is hard to build:
 - Land, unit mix + size, capital stack, gap financing, timing + phasing (pipeline)
- Land availability necessitates more dense development
- Specialized populations have unique needs