IOWA HOMELESSNESS NEEDS ASSESSMENT

2024

DOCUMENTING GAPS AND RESOLUTION OPPORTUNITIES

This Needs Assessment Report documents the extent and scope of homelessness throughout the State of Iowa. The Report also identifies housing resources and service strategies needed to achieve a more optimal result where homelessness is prevented, when possible, quickly resolved when not preventable, and all persons experiencing a housing crisis are able to achieve housing stability and economic self-sufficiency.

This Report is made possible through the generous financial support of the Iowa Finance Authority.

ACKNOWLEDGEMENTS

Data compilation, reporting, and analysis required to complete this Iowa Needs Assessment Report was possible through the generous support of Institute for Community Alliances and, specifically, the following staff:

Jessica Bleile, Balance of State Associate Director
Rachel Falahpour, Balance of State Grantee Support Specialist
Courtney Guntly, Balance of State CoC Director
Andrea Jacobs, Omaha/Council Bluffs HMIS Director
Cassandra Kramer, Coordinated Entry Manager
Patrick Schacherer, HMIS Director
Ehren Stover-Wright, Senior Analyst

Report author: Matt White, Housing Innovations Senior Associate

TABLE OF CONTENTS

NEEDS ASSESSMENT BACKGROUND

In the spring of 2024 the Iowa Finance Authority (IFA), through an intermediary contract with the Institute for Community Alliances (ICA), funded Housing Innovations to complete a needs assessment of people experiencing homelessness throughout Iowa and identify service strategies and resources to address homelessness. This **Needs Assessment Report** (Report) employed a data-driven system modeling analysis to define gaps in homelessness systems in relation to an "optimal" system design required to address all homelessness. Analysis includes information about the number of households experiencing or at imminent risk of homelessness, inventory of resources available to meet the needs of households experiencing homelessness, and program models and pathways managed by the homelessness system to assist all people to resolve their housing crisis. System modeling results provide estimates of the number of units needed of each project type to address the needs of people forecasted to enter the homelessness system each year. Housing resource needs are then paired with average per unit cost data to estimate the total cost of the "optimal" homelessness system.

WHAT NEEDS ASSESSMENT QUESTIONS GUIDED THE ANALYSIS?

The design of the needs assessment and analysis approach was guided by the following core questions:

- What is the extent and scope of homelessness on a statewide basis and in each planning region?
- What are the different needs, profiles, and attributes of people experiencing homelessness in each planning region?
- How does each region organize its response to homelessness?
- What new investments in each region might provide additional response capacity and/or greater impact?

WHAT IS AN OPTIMIZED HOMELESSNESS RESPONSE SYSTEM?

An optimal homelessness system is one in which individuals and families experiencing a housing crisis are quickly connected to the types of resources and support services necessary to address their particular needs. Resources are deployed in a manner that offers just enough assistance to help people resolve their housing crisis and connect assisted households to other system resources and community supports to promote long-term housing retention and stability. The most intensive and expensive homelessness system resources are prioritized for households with the most severe service needs rather than offered to everyone universally. Similarly, people with more modest needs are provided with lighter touch assistance in an effort to maximize the efficiency and effectiveness of limited homelessness resources. By optimizing the homelessness response system in this manner, the most appropriate and impactful resources are deployed to people experiencing homelessness based on their particular needs rather than a one-size-fits-all approach.

1. STATEWIDE NEEDS ASSESSMENT SUMMARY RESULTS

An estimated 17,000 Iowa households will likely experience homelessness in 2025. Most people, about 80%, expected to experience homelessness are single adults. ***Exhibit 1: Expected Homelessness Prevalence in 2025*** breaks out prevalence by single persons and family household types. 2025 projections are based on annual rates of increase from 2020 through 2024 continuing into 2025.

Exhibit 1: Expected Homelessness Prevalence in 2025

Household Type	Projected Number	Percentage
Single person households	13,675	80%
Households with at least one adult and one child	3,315	20%
Total Households Expected to Experience Homelessness in 2025	16,990	100%

People experiencing homelessness throughout Iowa will be served in emergency shelters, transitional housing, rapid rehousing, and permanent supportive housing projects. Additionally, some people experiencing homelessness will resolve their housing crisis without these projects because there are simply not enough available service and housing slots for all the people who need them. Exhibit 2. ***Homelessness Services Inventory Throughout Iowa*** lists the number of beds or housing units available currently to help resolve homelessness of Iowa citizens.

Exhibit 2: Homelessness Services Inventory Throughout Iowa – 2024

Project Type	Family Units	Single Units
Emergency Shelter (ES) Bed/Units	260	2,281
Transitional Housing (TH) Beds/Units	178	398
Rapid Rehousing (RRH) Service Slots	324	571
Permanent Supportive Housing (PSH) Units	119	1,158
Other Permanent Housing (OPH) Units	145	343

State of Iowa homelessness systems are currently operating from a position of a resource deficit. The current inventory of beds and resource slots is insufficient to accommodate appropriately all people experiencing a housing crisis who need those resources to resolve their homelessness. Based on projected rates of system ***inflow***, persons experiencing homelessness for the first time, and ***long-term*** homelessness, persons continuing their homelessness status from previous years, Iowa's homelessness system emergency shelter beds and housing units would need to be increased across all project types to meet the expected demand. The lack of sufficient resources is documented in ***Exhibit 3: Projected Need, Single Adults*** and ***Exhibit 4: Project Need, Families***.

Each night throughout 2025 Iowans experiencing a housing crisis will be forced to make alternative crisis housing arrangements because of the lack of sufficient homelessness system capacity. These alternative arrangements will

include choices such as sleeping in a car, abandoned buildings, places not meant for prolonged habitation like outside camps, and, for some people, staying in unsafe housing arrangements that put people at risk for victimization, abuse, and human trafficking.

In addition to the lack of sufficient crisis response services, Iowans experiencing homelessness have insufficient stabilization resources needed for housing placement and retention. As a result, Iowans experience longer periods of homelessness which exacerbates physical and behavioral health conditions and contributes to greater disconnection from employment and economic self-sufficiency.

Exhibits 3 and 4 reveal the bed/unit inventory of current system compared to optimal system. In addition to the traditional *Emergency Shelter* included on the Housing Inventory Count (HIC) report to U.S. Department of Housing and Urban Development (HUD), this Needs Assessment analysis also included the crisis response models of *Prevention & Diversion* and *Direct to Housing* within the Crisis Response category. A full explanation of all program models is included in Exhibit 10 ***Project Types in an Optimized Homelessness Systems***.

Exhibit 3: 2025 Projected Need – *Single Adults*

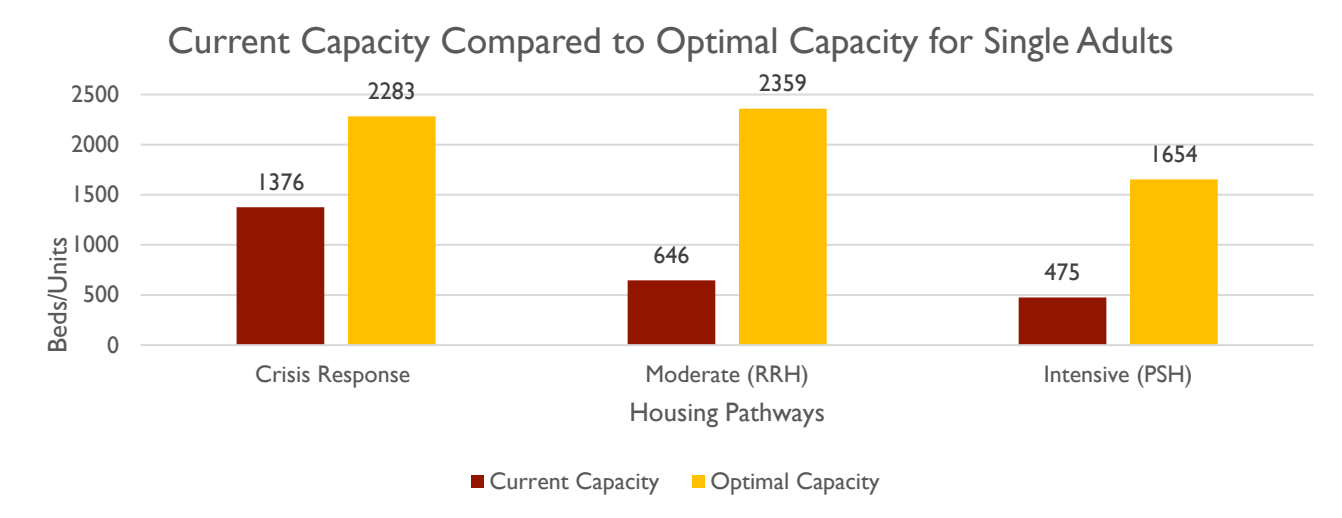
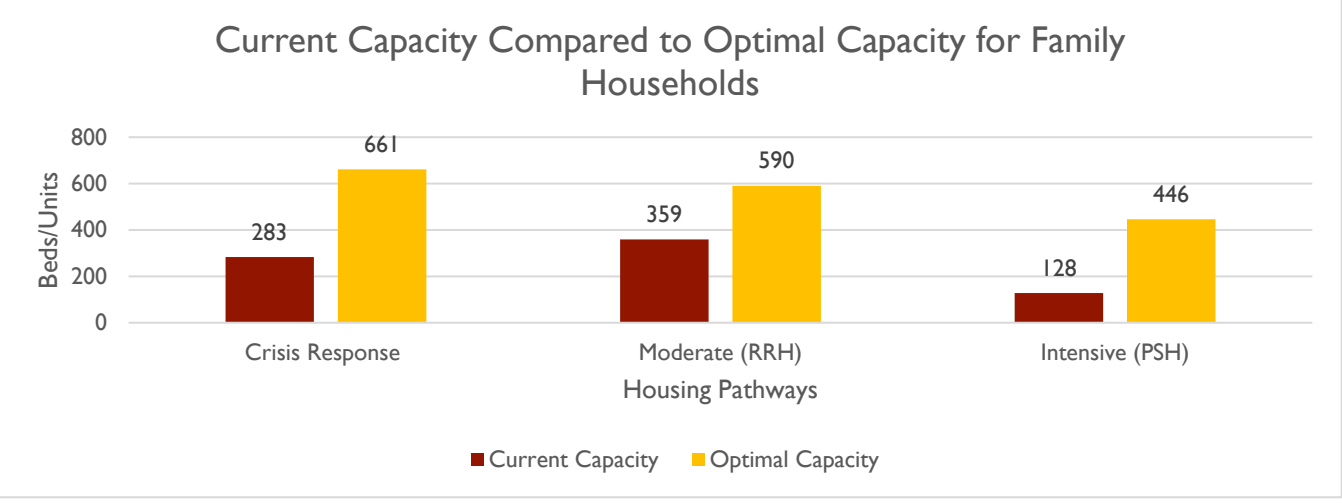


Exhibit 4: 2025 Projected Need *– Family Households*



Exhibits 3 and 4 provide summaries of current system capacity compared to optimal system needs. The difference between optimal and current system is the additional system expansion needed to achieve optimization. Exhibit 5: ***System Expansion for Statewide Optimization*** summarizes these results.

Exhibit 5: System Expansion for State Optimization *(Exclusive to State of Iowa)*

Additional Capacity Required for Homelessness System Optimization	New Family Resources	New Single Resources
Crisis Response Services	**378**	**907**
Prevention, Diversion, Direct to Housing and/or Emergency Shelter (ES) Beds/Units		
Rehousing Services	**549**	**2,892**
Rapid Rehousing (RRH) Service Slots	231	1,713
Permanent Supportive Housing (PSH) Units	318	1,179

SYSTEM EXPANSION COSTS

Applying average per unit costs to operate crisis response services and rehousing services, Iowa can estimate the needed additional system investment required to achieve optimization. Based on applying national average operating costs for each project type and making adjustments that align with actual Iowa cost structures, the total additional system investment can be calculated for system optimization. Exhibits 6 and 7 provide the estimated average annual cost to operate each project type for single adults (including youth and young adults) and families.

Exhibit 6: Estimated Average Cost – Single Adults

	Crisis Response Resources			Rehousing Resources	
Cost Category	Prevention & Diversion	Direct to Housing	ES	RRH	PSH*
Rent Subsidy/Leasing – $1,000/month	$1,000	-	-	$12,000	$12,000
Services/Flex Fund	-	$1,500	-	$5,000	$7,500
Operations	$500	-	$12,000	-	-
Administration	$225	$225	$1,800	$2,550	$2,925
TOTAL Annual Per Unit/Bed Cost	**$1,725**	**$1,725**	**$13,800**	**$19,550**	**$22,425**
TOTAL Per Person Cost (based on turnover)	**$1,725**	**$1,725**	**$3,450**	**$19,550**	**$22,425**

*PSH cost projection data does not include potential one-time acquistion, new construction, or rehab costs

Exhibit 7: Estimated Average Cost– Families

	Crisis Response Resources			Rehousing Resources	
Cost Category	Prevention & Diversion	Direct to Housing	ES	RRH	PSH
Rent Subsidy/Leasing – $1,200/month	$1,200	-	-	$14,400	$14,400
Services/Flex Fund	-	$1,500	-	$7,000	$9,000
Operations	$500	-	$18,000	-	-
Administration	$255	$225	$2,700	$3,210	$3,510
TOTAL Annual Per Unit Cost	**$1,955**	**$1,725**	**$20,700**	**$24,610**	**$26,910**
TOTAL Per Person Cost (based on turnover)	**$1,955**	**$1,725**	**$5,175**	**$24,610**	**$26,910**

When average costs per unit are multiplied by the estimated number of additional beds/units necessary to achieve optimal system design, the results provide an estimate of total new additional investment needed for Iowa homelessness systems. Results reveal an annual additional need of close to $73 million for single adults and $22 million for families. These large gaps, shown in Exhibits 8 and 9, demonstrate how underfunded the current system is and the scale of additional investment needed to address optimally the housing crisis needs of Iowa citizens on an annual basis.

Exhibit 8: Estimated Additional System Investment Needed to Achieve Optimization – Single Adults

Homelessness System Components	Current Average Cost Per Unit	Additional Inventory for Optimization	Approx Additional Annual Cost
Crisis Response Intervention Options			
Prevention & Diversion	$1,725	907	$1,564,575 - $12,516,600
Direct to Housing	$1,725		
Emergency Shelter	$13,800		
Rehousing Intervention Programs			
Rapid Rehousing	$19,550	1,713	$33,489,150
Permanent Supportive Housing	$22,425	1,179	$26,439,075
TOTAL Additional Annual System Cost			**$61,492,800 - $72,444,825**

Exhibit 9: Estimated Additional System Investment Needed to Achieve Optimization – Families

Homelessness System Components	Current Average Cost Per Unit	Additional Inventory for Optimization	Approx Additional Annual Cost
Crisis Response Intervention Options			
Prevention & Diversion	$1,955	378	$652,050 - $7,824,600
Direct to Housing	$1,725		
Emergency Shelter	$20,700		
Rehousing Intervention Programs			
Rapid Rehousing	$24,610	231	$5,684,910
Permanent Supportive Housing	$26,910	318	$8,557,380
TOTAL Additional Annual System Cost			**$14,894,340 - $22,066,890**

2. OPTIMIZED HOMELESSNESS SYSTEM ATTRIBUTES

The concept of an 'optimal' system is aspirational. The results provide a directional perspective on necessary system changes and additional investments necessary to move in the direction of optimization. In addition, all elements of increased capacity need to be fully operational for systems to achieve optimization. The transition to this optimal status will take several years of deliberate, phased improvements and substantial additional investments.

Housing Innovations staff met multiple times throughout 2024 with homelessness system stakeholders from Iowa Continua of Care (CoC) systems and coordinated entry system (CES) regions. See ***Exhibit 11: Needs Assessment Geographies*** for a breakdown of these regions. These meetings enabled multiple planning conversations focused on documenting the nature of homelessness in each region; verifying data sources, completeness, and accuracy; and defining optimization in a locally specific manner that reflected each jurisdiction's approach to client engagement, service delivery, and partnerships with adjacent social service systems.

WHAT CHARACTERIZES AN OPTIMIZED SYSTEM?

Based on planning conversations with Iowan stakeholders, and for purposes of this Report, homelessness system service design is organized according to two distinct classifications of project types: ***crisis response services*** and ***rehousing services.*** Crisis response services include traditional emergency shelter and transitional housing, but also include approaches to crisis resolution such as prevention and diversion that do not include interim stays in temporary accommodations such as shelter. These non-facility-based approaches address participants' crises through problem-solving conversations, direct to housing strategies, and diversion from emergency shelter altogether. While emergency shelter may have been used historically as a necessary safety net resource for everyone on the pathway to homelessness resolution, many communities are helping some clients bypass shelter altogether and instead focus on crisis resolution by assisting households to transition directly from homeless status into independent housing or shared housing arrangements.

The other category of project types included in this optimization analysis are rehousing services. Rehousing services are generally reserved for households with greater barriers to housing who have more severe service needs. Rehousing services include Rapid Rehousing (RRH), Permanent Supportive Housing (PSH), and Other Permanent Housing (OPH).

Exhibit 10: Project Types in an Optimized Homelessness Systems

Project Types in an Optimized Homelessness Systems
Crisis Response System
Prevention & Diversion – problem-solving assistance often paired with modest and limited financial assistance directed to households at risk of imminent homelessness or provided in the early days of literal homelessness to quickly resolve the crisis and prevent longer periods of housing instability.
Direct to Housing – combines diversion supports and exploration of housing problem solving conversations to help clients experiencing homelessness to quickly identify safe alternatives to the streets or shelter. Housing strategies often involve exploring shared housing arrangements with family or friends. Direct to Housing is most effective when paired with a Flex Fund to support modest amounts of direct financial assistance. Direct to Housing is also referred to as ***Housing***

	Problem Solving, ***Rapid Resolution***, ***Rapid Exit***, ***and Housing Central Command***. This Report uses the term Direct to Housing, but the meaning is the same.
	Emergency Shelter (ES) – a facility that provides temporary crisis housing assistance (typically less than 90 days) for people experiencing homelessness and who have no other housing options or resources. Shelter may include temporary stays in motels or hotels paid for with vouchers.
Rehousing System	
	Rapid Rehousing (RRH) – a program that helps homeless people and families access rental housing and strengthen tenancy skills to maintain leased housing. RRH provides short-term (up to 3 months) or medium-term (up to 24 months) of rental assistance paired with housing-focused case management.
	Permanent Supportive Housing (PSH) – permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless participants with a disability and long histories of homelessness to achieve stable housing.
	Other Permanent Housing (OPH) – permanent housing supports such as a Housing Choice Voucher or public housing unit that provides housing without a designated length of stay for formerly homeless individuals and families. Supportive services are not necessarily paired with housing and participants need not be disabled as an eligibility criterion.

Other system attributes, in addition to project types, are also part of the modeling analysis. These other system design and operational considerations include:

- The number of households entering the homelessness system is even throughout the year without large swings from month to month or season to season in the number of households that need to be served. Although homelessness systems likely experience some degree of seasonal variation in inflow or outflow rates, system modeling manages these differences by modeling annual prevalence distributed evenly throughout the year.
- Crisis shelter beds and rehousing resources operational on only a temporary basis during periods of especially harsh weather conditions are extremely difficult to stand up and manage as an ad hoc, seasonal resource. Historically, these types of temporary shelter beds are often poor quality, do not support successful rehousing outcomes, and can exacerbate participant trauma and dislocation. For these reasons the optimal system includes sufficient year-round bed capacity to address emergency shelter needs for all persons requiring crisis housing assistance.
- After the initial investment in housing is sufficient to end homelessness for people who meet the definition of chronic homelessness, the number of non-chronically homeless households does not change each year.
- Returns to homelessness are not separately accounted for, returning households are included with the annual inflow into homelessness.
- Net demand for services stays constant, with improvements in the system balancing out increases in homelessness.
- The pathways through the homelessness system developed as part of the system modeling work are estimated to guide planning and budgeting decisions. Actual placement decisions for each household are

made on a case-by-case basis based on assessment results, consultation with clients, and program eligibility requirements.

HOW IS AN OPTIMIZED SYSTEM MODELED?

Optimization assumptions are defined and then modeled through an analytical process, incorporating inflow and long-term homelessness rates, pathways of various project type combinations based on household characteristics, and turnover rates for each project type.

The modeling calculations use the following factors and data:

- 2024 Annual and Point-in-time (PIT) Count data on the number of households experiencing homelessness in the system and throughout each subregion. Additional data are also included to supplement PIT counts due to households who experience homelessness in unsheltered locations but were not included in the PIT because they were not encountered. Adjustments are also made for domestic violence programs that are prohibited from providing data to HMIS.
- Projects listed on the 2024 HIC that are not expected to receive continued funding in 2025 are not included in the analysis. These projects include Emergency Housing Vouchers (EHVs) and Emergency Rental Assistance (ERA) associated with one-time, COVID-era funding.
- Projects listed on the 2024 HIC that are exclusively dedicated to a subpopulation and not universally available to a general population of people experiencing homelessness are not included in the modeling. These projects include HUD-VASH PSH slots.
- Annual prevalence information from HMIS is used to estimate the number of individuals and families that are:
    - inflowing annually to the homelessness system
    - long-term homeless people (i.e. people who meet the definition of chronic homelessness)
- Service strategies or pathways based on the system program models needed for each group of households (individuals, inclusive of youth, and families) include the following distinct models:

    Crisis Response

    1. Homelessness Prevention & Diversion
    2. Direct to Housing
    3. Emergency Shelter (ES)

    Rehousing Response

    4. Rapid Rehousing (RRH)
    5. Permanent Supportive Housing (PSH)
    6. Other Permanent Housing (OPH)
- projections of pathway utilization
    - estimates of the percentage of households using each program model pathway are based on CES assessment results, aligning household need to program and service type, intensity, and duration based on the CES vulnerability index score.
    - estimates of the length of stay in each prevention, shelter or housing program along a program model pathway are based on most efficient but practical time necessary for households to resolve. Time frames are informed by current system averages.
- System inventory and cost information to model housing units and costs over time, including:
    - existing shelter, housing and subsidy inventory remains constant
    - current turnover rates for permanent housing resources are held constant
    - total (services and operating/rent) costs for current system program models are based on HUD-defined Fair Market Rents (FMR) and industry standards for best-practice program models

3. NEEDS ASSESSMENT RESULTS BY IOWA REGIONS

Needs assessment results reported at a statewide level would mask nuances and distinctions evident in different geographies throughout Iowa. To create a more relevant and actionable analysis this Report provides Needs Assessment findings at the Continuum of Care (CoC) geographic level and Coordinated Entry regions included in the Balance of State CoC. A CoC is a U.S. Department of Housing and Urban Development (HUD) distinction that recognizes homelessness assistance systems as units of geography that correspond to how communities organize and carry out the responsibilities required to manage a crisis response system and assist people to resolve their homelessness. Homelessness systems in Iowa are covered by 17 separate CoC and/or CES homelessness systems identified in ***Exhibit 11: Needs Assessment Geographies***.

Exhibit 11: Needs Assessment Geographies

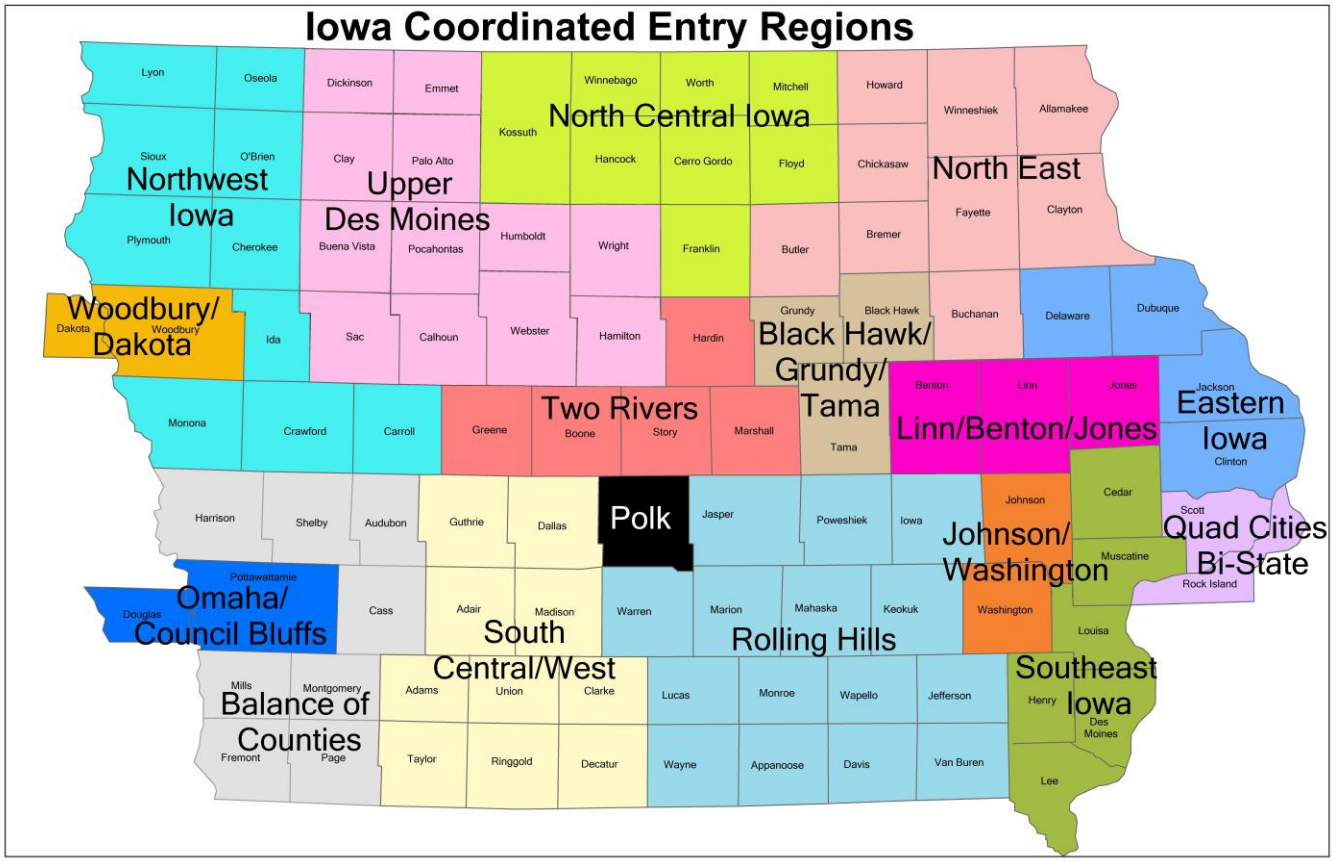
HUD CoC Region	CES Region
IA-500	Sioux City/Dakota, Woodbury Counties
IA-502	Des Moines/Polk County
NE-501	Threshold CoC Omaha/Council Bluffs/Pottawattamie County
IA-501	Iowa Balance of State subregions according to Coordinated Entry System (CES) regions
	Balance of Counties: Audubon, Cass, Fremont, Harrison, Mills, Montgomery, Page, Shelby Counties
	Black Hawk, Grundy, Tama Counties
	Eastern Iowa: Clinton, Delaware, Dubuque, Jackson Counties
	Johnson, Washington Counties
	Benton, Linn, Jones Counties
	North Central: Cerro Gordo, Floyd, Franklin, Hancock, Kossuth, Mitchell, Winnebago, Worth Counties
	North East: Allamakee, Bremer, Buchanan, Butler, Chickasaw, Clayton, Fayette, Howard, Winneshiek Counties
	Northwest: Carroll, Cherokee, Crawford, Ida, Lyon, Monona, O'Brien, Osceola, Plymouth, Sioux
	Quad Cities Bi-State: Rock Island, Scott Counties
	Rolling Hills: Appanoose, Davis, Iowa, Jasper, Jefferson, Keokuk, Lucas, Mahaska, Marion, Monroe, Poweshiek, Van Buren, Wapello, Warren, Wayne Counties
	South Central/West: Adair, Adams, Clarke, Dallas, Decatur, Guthrie, Madison, Ringgold, Taylor, Union Counties
	Southeast: Cedar, Des Moines, Henry, Lee, Louisa, Muscatine Counties
	Two Rivers: Boone, Hardin, Greene, Marshall, Story Counties
	Upper Des Moines: Buena Vista, Calhoun, Clay, Dickinson, Emmet, Hamilton, Humboldt, Palo Alto, Pocahontas, Sac, Webster, Wright Counties

The IA-501 CoC Region, Iowa Balance of State, is further subdivided into smaller planning regions. Each smaller region is associated with a Coordinated Entry System or CES that defines geographic specific policies and protocols for accessing crisis services, assessment participant needs, prioritizing participants for limited resources, and referring or matching people to available housing and resource slots.

Results of the Iowa Homelessness Needs Assessment are reported at the subregional level, inclusive of each of the 3 Iowa CoCs and the 14 CES regions within the BoS CoC.

The map of Iowa in ***Exhibit 12: Iowa Coordinated Entry Regions*** provides an additional visual of the needs assessment geographies.

Exhibit 12: Iowa Coordinated Entry Regions



ANNUAL DEMAND

Comprehensive needs assessment data were derived from 2024 Point-in-Time (PIT) counts of persons experiencing homelessness, annual prevalence counts of persons experiencing homelessness derived from Homeless Management Information System (HMIS) custom reports, system performance measures from longitudinal system data defined and reported by HUD, and assessment results of persons seeking assistance through one of Iowa's Coordinated Entry System access points.

Demand for crisis services and rehousing assistance is based on analysis of current and historical inflow rates, the number of adults and families who experience a housing crisis throughout a 12-month period and seek crisis services through one of Iowa's Coordinated Intake access points. System inflow is paired with numbers of people already experiencing homelessness from previous years, have long-term needs, and have not been able to resolve their crisis. People with long-term needs are characterized as "chronic" and are eligible for specialized housing supports such as permanent supportive housing (PSH). System inflow and long-term (chronic) homelessness taken together constitute the projected total number of people experiencing a housing crisis. ***Exhibit 13: Inflow and Chronic Numbers by Region*** provides the results of this analysis.

Exhibit 13: Inflow and Chronic Numbers by Region

Iowa Region	Short-term Needs (Inflow)		Long-term Needs (Chronic)	
	Singles	Families	Singles	Families
Sioux City/Dakota, Woodbury	208	93	14	8
Des Moines/Polk	1,895	675	535	54
Council Bluffs/Pottawattamie	417	233	234	23
Threshold CoC (Omaha + Council Bluffs)	3,380	260	1,013	68
Balance of Counties	25	30	12	7
Black Hawk/Tama/Grundy	490	126	85	42
Eastern Iowa	269	76	91	20
Johnson/Washington	661	101	153	14
Linn/Benton/Jones	430	60	219	15
North Central	262	23	29	4
North East	75	24	14	4
Northwest	22	13	1	0
Quad Cities Bi-State	785	259	149	49
Rolling Hills	114	58	18	12
South Central/West	94	109	1	2
Southeast	330	44	52	3
Two Rivers	372	49	49	8
Upper Des Moines	145	53	11	5
TOTAL	6,544	2,026	2,680	338

CRISIS RESPONSE SERVICES

Each jurisdiction in Iowa manages a region-specific response to people seeking homelessness assistance. These locally specific regions organize their crisis responses differently. In some regions, ***emergency shelter*** is offered universally to all people experiencing homelessness. In other regions, emergency shelters are not immediately available and, as a result, eligible households may be placed on a waiting list and offered alternatives to emergency shelters such as ***homelessness prevention*** or ***direct to housing supports***. These alternatives to shelter are proven to be equally effective compared to facility-based shelter when offered early enough, structured flexibly, and paired with client-centered services. The structure and organization of each region's crisis response – whether shelter based, direct to housing oriented, or organized in combination with homelessness prevention programming – is dependent on locally specific resources, capacity, and local system design. For these reasons this Needs Assessment Report does not specify a particular programmatic form of crisis response; the Report simply includes a general analysis of crisis response capacity and leaves up to each region how that crisis response should be structured. The specific costs, operating approaches, and system integration design are dependent on how each region decides to organize and operate crisis response services.

One slot of **crisis response** could be configured as ***prevention***, ***direct to housing,*** or ***emergency shelter***. Each region should decide how best to configure their crisis response services.

STATEWIDE RESULTS

Each planning jurisdiction in Iowa requires enhancements, service expansion, increased coordination and alignment across systems, and new investments to achieve a homelessness response system that operates in a more optimized manner. ***Exhibit 14: Needs Assessment Results – State of Iowa*** provides an aggregate summary of recommended additional capacity and associated costs.

EXHIBIT 14: NEEDS ASSESSMENT RESULTS – STATE OF IOWA

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	1,376	2,283	907	$1,587,000 - $11,868,000
Moderate (RRH)	646	2,359	1,713	$33,489,150
Intensive (PSH)	476	1,654	1,179	$26,439,075
Families				
Crisis Response	283	661	378	$652,050 - $7,824,600
Moderate (RRH)	359	590	231	$5,684,910
Intensive (PSH)	128	446	318	$8,557,380
Total Annually				**$77,295,525 - $91,069,765**

REGIONAL RESULTS

Each jurisdiction in Iowa manages a region-specific response to people seeking homelessness assistance. These locally specific regions organize their crisis responses differently. The following tables show Needs Assessment results for each jurisdiction with corresponding costs of needed investments to achieve optimization.

SIOUX CITY/DAKOTA, WOODBURY (INCLUSIVE OF REGION IN NEBRASKA)

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	208	217	9	$15,525 - $124,200
Moderate (RRH)	34	211	177	$3,460,350
Intensive (PSH)	59	162	103	$2,982,525
Families				
Crisis Response	21	23	2	$3,450 - $41,400
Moderate (RRH)	34	48	14	$344,540
Intensive (PSH)	4	69	65	$1,749,150
Total Annually				**$8,555,540 - $8,702,165**

DES MOINES/POLK COUNTY

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	276	648	372	$641,700 - $5,133,600
Moderate (RRH)	57	390	333	$6,510,150
Intensive (PSH)[i]	48	571	523	$11,728,275
Families				
Crisis Response	67	116	41	$84,525 - $1,014,300
Moderate (RRH)	58	62	4	$98,440
Intensive (PSH)	41	65	24	$645,840
Total Annually				**$19,708,930 - $25,032,165**

COUNCIL BLUFFS/POTTAWATTAMIE (NOT INCLUDING OMAHA/DOUGLAS COUNTY, NE)

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	94	162	68	$117,300 - $938,400
Moderate (RRH)	24	98	74	$1,446,700
Intensive (PSH)	60	163	103	$2,309,775
Families				
Crisis Response	24	142	118	$203,550 - $2,442,600
Moderate (RRH)	10	38	28	$689,080
Intensive (PSH)	29	64	35	$941,850
Total Annually				**$5,708,255 - $8,768,405**

BALANCE OF COUNTIES

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	0	10	10	$17,250 - $138,000
Moderate (RRH)	0	15	15	$293,250
Intensive (PSH)	0	7	7	$156,975
Families				
Crisis Response	0	10	10	$17,250 - $207,000
Moderate (RRH)	0	15	15	$369,150
Intensive (PSH)	0	7	7	$188,370
Total Annually				**$1,042,245 - $1,352,745**

BLACK HAWK, GRUNDY, TAMA

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	72	142	70	$120,750 - $966,000
Moderate (RRH)	43	173	130	$2,541,500
Intensive (PSH)	12	27	15	$336,375
Families				
Crisis Response	27	54	14	$46,575 - $558,900
Moderate (RRH)	62	62	-	-
Intensive (PSH)	1	37	36	$968,760
Total Annually				**$3,718,640 - $5,076,215**

EASTERN IOWA

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	176	163	-	
Moderate (RRH)	69	108	39	$762,450
Intensive (PSH)	25	86	61	$1,367,925
Families				
Crisis Response	39	52	13	$22,450 - $269,100
Moderate (RRH)	12	29	17	$418,370
Intensive (PSH)	7	23	16	$430,560
Total Annually				**$3,001,730 - $3,248,405**

JOHNSON, WASHINGTON

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	90	191	101	$174,225 - $1,393,800
Moderate (RRH)	53	336	283	$5,532,650
Intensive (PSH)	101	206	105	$2,354,625
Families				
Crisis Response	20	67	47	$81,075 - $972,900
Moderate (RRH)	16	96	80	$1,968,800
Intensive (PSH)	2	67	65	$1,749,150
Total Annually				**$11,860,525 - $13,971,925**

BENTON, LINN, JONES

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	133	162	29	$50,025 - $400,200
Moderate (RRH)	182	266	84	$1,642,200
Intensive (PSH)	45	123	108	$1,749,150
Families				
Crisis Response	7	19	12	$20,700 - $248,400
Moderate (RRH)	54	31	-	
Intensive (PSH)	3	14	11	$296,010
Total Annually				**$3,758,085 - $4,335,960**

NORTH CENTRAL

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	43	73	30	$51,750 - $414,000
Moderate (RRH)	23	125	102	$1,994,100
Intensive (PSH)	12	55	43	$964,275
Families				
Crisis Response	0	7	7	$12,075 - $144,900
Moderate (RRH)	23	12	-	
Intensive (PSH)	0	5	5	$134,550
Total Annually				**$3,156,750 - $3,651,825**

NORTH EAST

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	0	23	23	$39,675 – $317,400
Moderate (RRH)	22	24	2	$39,100
Intensive (PSH)	7	12	5	$112,125
Families				
Crisis Response	6	14	8	$13,800 - $165,500
Moderate (RRH)	14	18	4	$98,440
Intensive (PSH)	4	4	-	
Total Annually				**$303,140 - $732,665**

NORTHWEST

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	16	16	-	
Moderate (RRH)	5	6	1	$19,550
Intensive (PSH)	0	2	2	$44,850
Families				
Crisis Response	0	4	4	$6,900 - $82,800
Moderate (RRH)	5	3	-	$0
Intensive (PSH)	0	1	1	$26,910
Total Annually				**$98,210 - $174,110**

QUAD CITIES BI-STATE (INCLUSIVE OF REGION IN ILLINOIS)

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	117	233	116	$200,100 - $1,600,800
Moderate (RRH)	52	299	247	$4,828,850
Intensive (PSH)	96	103	7	$156,975
Families				
Crisis Response	40	77	37	$63,825 - $765,900
Moderate (RRH)	33	99	66	$1,624,260
Intensive (PSH)	15	34	19	$511,290
Total Annually				**$7,385,300 - $9,488,075**

ROLLING HILLS

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	11	33	22	$37,950 - $303,600
Moderate (RRH)	23	33	10	$195,500
Intensive (PSH)	0	20	20	$448,500
Families				
Crisis Response	9	18	9	$15,525 - $186,300
Moderate (RRH)	15	18	3	$73,830
Intensive (PSH)	0	11	11	$296,010
Total Annually				**$1,067,315 - $1,243,610**

SOUTH CENTRAL/WEST

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	4	24	20	$34,500 - $276,000
Moderate (RRH)	0	14	14	$273,700
Intensive (PSH)	0	10	10	$224,250
Families				
Crisis Response	8	28	20	$34,500 - $414,000
Moderate (RRH)	4	17	13	$319,930
Intensive (PSH)	0	11	11	$296,010
Total Annually				**$1,182,890 - $1,389,890**

SOUTHEAST

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	64	95	31	$53,475 - $427,800
Moderate (RRH)	42	138	96	$1,876,800
Intensive (PSH)	35	38	3	$67,275
Families				
Crisis Response	11	13	2	$3,450 - $41,400
Moderate (RRH)	8	17	9	$221,490
Intensive (PSH)	0	5	5	$134,550
Total Annually				**$2,357,040 - $2,727,915**

TWO RIVERS

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	62	105	43	$74,175 - $593,400
Moderate (RRH)	18	181	163	$3,186,650
Intensive (PSH)	40	76	36	$807,300
Families				
Crisis Response	4	15	11	$18,975 - $227,700
Moderate (RRH)	9	25	16	$393,760
Intensive (PSH)	22	22	-	
Total Annually				**$4,480,860 - $5,208,810**

UPPER DES MOINES

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	74	81	7	$12,075 - $96,600
Moderate (RRH)	41	80	39	$762,450
Intensive (PSH)	0	31	31	$695,175
Families				
Crisis Response	11	15	8	$6,900 - $82,800
Moderate (RRH)	10	29	19	$467,590
Intensive (PSH)	0	12	12	$322,920
Total Annually				**$2,267,110 - $2,427,535**

THRESHOLD COC (OMAHA + COUNCIL BLUFFS)

Population Component	Current System	Assessed Need	Optimization Gap	Optimization Resource Need
Singles				
Crisis Response	978	920	-	
Moderate (RRH)	88	723	635	$12,414,250
Intensive (PSH)	682	1,362	680	$15,249,000
Families				
Crisis Response	111	139	28	$48,300 - $579,600
Moderate (RRH)	24	69	45	$1,107,450
Intensive (PSH)	58	102	44	$1,184,040
Total Annually				**$30,003,040 - $30,534,340**

This Report includes modeling results for the Threshold CoC which encompasses the multi-state region of Douglas County, Nebraska (including the City of Omaha) and Pottawattamie County, Iowa (including the City of Council Bluffs). The Threshold CoC results are included here for reference purposes only. The portion of the Threshold CoC within Iowa boundaries are included as a separate table. Where statewide totals are referenced, they **do not** include the Nebraska portion of Threshold CoC.

Conversely, the Sioux City/Dakota, Woodbury and Quad Cities/Bi-State region charts reflect both Iowa data **and** persons coming from and served in neighboring NE and IL respectively. The data available for this Report analysis from the Sioux City/Dakota, Woodbury and Quad Cities/Bi-State regions could not be separated out by state of origin or placement for either of those two regions.

4. OTHER SYSTEM IMPROVEMENTS NEEDED TO SUPPORT OPTIMIZATION

This Needs Assessment Report documents the significant gap in crisis response services and rehousing supports for Iowans experiencing homelessness. Additional bed/unit and service capacity will certainly help Iowa homelessness systems move closer to optimization, but other system improvements are also required.

INCREASE ACCESSIBLE, AFFORDABLE HOUSING

The number of renter households paying more than 50 percent of their income on rent increased dramatically, rising over 15 percent between 2015 and 2024. The shortage of rental units accessible to this population of people in extreme poverty puts pressure on households to double up, settle for substandard housing, or make economic choices that put their housing stability at risk. At a statewide level Iowa needs to continue to focus on development of new affordable housing, expanding use of vouchers and other subsidies to make existing rental stock more accessible to low-income Iowans, and create incentives and requirements for housing developers to ensure some portion of all newly developed housing is accessible to people with median incomes in the lowest quartile.

ADDRESS BASIC NEEDS OF CLIENTS

Overwhelming responses from personal interviews with service providers throughout the State indicate that very basic elements of life are not adequately addressed for people experiencing homelessness. People in crisis may not be able to regularly bathe, find and cook food, store their belongings, safely sleep, or maintain employment. While each Iowa planning region identified different strategies for providing safe, crisis shelter for residents without housing, the execution of these strategies is often dependent on external partners and adjacent systems of care. Efforts to expand services and housing options and improve the system of care need to ensure that the basic needs of people experiencing homelessness are adequately addressed.

BUILD CAPACITY AND SUPPORT PROFESSIONAL ADVANCEMENT OF DIRECT CARE STAFF

Homelessness systems are dependent on direct care staff providing quality housing-focused case management, outreach, and other support services. These staffing positions are often entry level, low paying positions. Staff could benefit from frequent, high-quality supervision, access to training and skill-building opportunities, active management of appropriate caseloads to maintain frequent contact with all clients, and defined pathways for professional support and advancement. Regular training opportunities for staff should include housing-focused case management service design, critical time intervention, housing first principles, crisis intervention and de-escalation skills, harm reduction strategies, and knowledge of and access to community-based services throughout the region. The long-term success of clients is dependent on quality case management services provided by staff in homelessness systems.

IMPROVE COORDINATION WITH ADJACENT SYSTEMS

To end or substantially reduce homelessness, a coordinated response is needed that aligns the resources in adjacent systems with CoC resources and housing. Homelessness is often caused by and/or exacerbated by the inability of public support systems to address the complex needs of people in extreme poverty experiencing housing crises. These systems include education, hospitals, behavioral health, criminal justice, and child welfare. Engagement and service delivery approaches need to be responsive to the particular needs of people at

imminent risk or experiencing literal homelessness. More responsive adjacent systems will provide specialized engagement, enrollment supports, discharge planning, and coordination with CoCs in each region.

[i] PSH inventory analysis includes additional detail about annual turnover rates and likely availability of PSH within a 12-month period.