



Heading Home Ramsey Continuum of Care
2024 Needs Assessment
Subtitle of Report or Contract Goes Here

December 12, 2024

2024 Heading Home Ramsey Needs Assessment

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Executive Summary

Guiding Questions

- **What parts of our system are not working for providers and clients?**

There are many parts of the homelessness response system that must work together to ensure people experiencing homelessness or housing instability are able to move from unstable to stable housing. Presently, within the Heading Home Ramsey Continuum of Care (CoC), the lack of affordable housing options or diversity in housing programs available is greatly affecting the ability of people to move through the system. The absence of these options means fewer people are exiting or moving out of housing programs to either rent-subsidized or market-rate housing, decreasing the available units to move others into year over year. To be clear, the flow out of the homelessness response system has not completely stopped, but it has slowed, with the most abundant program type (Permanent Supportive Housing (PSH)) having an average of 5% of all units turning over in a year. These programs are intended to be long-term and have low numbers of exits annually, but because they are the most prevalent program type, the flow of the system is in many ways dependent on their turnover.

The decreasing rate of persons exiting programs increases the wait times on housing priority lists or the length of stay in emergency shelter, affecting all the other parts of the system. There are many ways these parts of the system are also not working for providers and clients as a lack of capacity in housing increasing those in need of emergency shelter directly impacts the capacity needed from emergency shelter providers. These trends are coupled with the end of COVID-era funding and anticipated funding cliffs in prevention, emergency, and housing services, creating further strain. This strain is evident to providers across the system, making it difficult to pinpoint one or two specific parts that are not working as the entire system is continuously strained. The homelessness response system is affected by a multitude of outside forces that influence individual housing stability but does not have the ability to directly affect change in these areas or alter the demand/need for these services.

- **How do the identities of clients and providers affect the use and experiences of people in the Ramsey County the homelessness response system?**

The identities of clients and providers affect their experience in the homelessness response system in a few key ways. First, the providers (including leadership and client-facing staff) with marginalized identities go through significant primary and secondary trauma as they navigate this system with their clients. This either happens by experiencing discrimination themselves or by witnessing or listening to the discrimination their clients have faced. Providers shared many such experiences in their in-depth interviews which generated Theme 6: *Intersections and Effects of Discrimination*.

Second, clients begin to decrease service utilization following repeated discrimination and become less engaged with the providers working with them to achieve housing stability, potentially lengthening the amount of time they are experiencing homelessness. This was mentioned numerous times with providers working with those who had been unhoused for significant periods of time. The disparities in rates of returns to homelessness across gender and racial identity likely demonstrates the effects of this discrimination and requires further investigation. Presently, there is a significant difference in the representation of racial groups in the population of people experiencing homelessness compared to the general population, with inferential statistics demonstrating that this difference is statistically significant. Furthermore, the ways the intersections of identity are affecting the persons experiencing homelessness are likely also contributing to their experiences and requires a robust examination. Finally, identity encompasses so much of life experience that it can be difficult to discern with precision the ways it affects interactions with this specific system. Regardless, the Ramsey County CoC must continue to prioritize equity and inclusion to ensure all members of the larger Ramsey County community that come into contact with the homelessness response system are safe, valued, and respected regardless of their identities.

- **What are the strengths of our system, how do those help us in identifying gaps?**

There are many strengths to the Ramsey County Continuum of Care and each of them aids in identifying gaps and determining solutions. The first of these is the community of organizations and service providers dedicated to doing this work and assisting individuals or families find and maintain stable housing. Organizations and

providers meet at a regular cadence either in person or virtually to give thoughts on CoC-related matters, focus in on a population or program of interest, or assist with ancillary tasks within the CoC. For each of these purposes, providers willingly spend their time and energy to continuously improve the system. This is an extremely valuable strength and helps the broader community engage in hard conversations and determine the best next step as a continuum.

The next strength is the knowledge and resources of each person working within the homelessness response system. Within the provider survey, over half of respondents said they either agreed or strongly agreed with the sentiment “I have the knowledge I need to assist the clients I provide services for,” or “I know who to go to when I have questions or need assistance.” The knowledge, resources, and skills of each person is valuable and provides strength to our system.

An additional strength is a shared goal and vision among service providers. Each provider, through a diversity of programming, services, or resources, is determined to improve the conditions of the persons participating in their services. The shared goals between providers or organizations are another key strength that assists us in determining gaps as the community understands the programming or services that do not align with shared values or goals. It becomes faster and easier to determine solutions to problems that align with the community.

The final strength is simply the length of time organizations and providers have been working in this field. The historical knowledge of the system provides a valuable perspective to understand what has or has not been tried before in the region. This helps us identify the gaps that were previously present and which gaps are new challenges to solve. Altogether, the arduous work in the homelessness response system is only possible through these strengths.

Findings Summaries and Next Steps

Prevention

- 1) The need for prevention services will likely continue to increase as the rate of evictions increases annually.
- 2) The funding used for prevention services is facing a large decrease in the next two years, meaning fewer individuals / households will be able to access assistance to prevent homelessness. This will impact the need for emergency shelter or temporary shelter programs as more individuals face housing instability.
- 3) The ability for community members to access prevention services continues to be a priority among prevention providers and the broader CoC, ensuring services are equitable and accessible.

Next Steps: The amount of funding for prevention must increase to meet the growing demand. Presently, around 1,600 households request assistance each month, but only 96 households (6%) receive assistance. To meet the requests of all households, funding for prevention assistance would need to be around \$67.2 Million annually.

Emergency Services

- 1) The need for shelter services among all populations remains high, with more than 400 people remaining unsheltered daily in Ramsey County.
- 2) The current shelter capacity is being highly utilized across all population groups, with utilization rates generally following a seasonal pattern. The group with the lowest number of available shelter beds according to the housing inventory count is youth between the ages of 18-24.
- 3) The average stay in shelter is reported as between one day and eight days, however, the true average length of stay is likely much longer and is not accurately reflected in this assessment due to past HMIS data management processes. A longer length of stay indicates that shelters are being used for an extended period because individuals experiencing homelessness are not able to quickly access housing.

Next Steps: The number of shelter beds and diversity of shelter programming must increase to meet current needs and decrease the number of individuals experiencing unsheltered homelessness. Furthermore, the capacity of shelter advocates and outreach organizations must be maintained and focused to continue their important work in all parts of the county to connect sheltered and unsheltered households to services.

Coordinated Entry

- 1) There are around 2,255 households presently on coordinated entry priority lists in need of housing or supportive housing programs. The number of households added to the lists annually is around three times higher than the number of households exiting the list.
- 2) Households spend an average of 7.2 months waiting to be referred to supportive housing projects in Ramsey County.
- 3) On average, less than half of all referrals to housing providers from the coordinated entry list are successful. Meaning, it may take two or more referrals before an individual from the priority list is successfully placed into a program and housed.

Next Steps: Organizations and providers must improve understanding of the coordinated entry system and priority lists to improve communication and decrease the number of unsuccessful referrals. The coordinated entry teams must continue their work on phased or dynamic prioritization and a new assessment tool to ensure those who may be better served through programs outside of the homelessness response system are able to efficiently access them.

Housing Programs

- 1) There are 4,274 units within the currently operating supportive housing programs in Ramsey County. Of those, the majority are Permanent Supportive Housing (PSH) programs.
- 2) Among different populations, there are more units available for families across all CoC funded program types. Youth have the lowest total number of units across housing programs and adult singles have the lowest diversity of housing programs, with the units for single adults being either PSH or Housing Support (HS) programs only.
- 3) The number of persons exiting programs compared to those entering changes by population group and program type, creating inconsistencies in the turnover of people through the homelessness response system. Permanent Housing programs that are not timebound such as PSH and HS have less than 10% of the capacity exiting or entering annually. Presently, there are more persons entering than exiting, decreasing the availability of units year over year and slowing the flow of persons through the system.

Next Steps: The number and diversity of supportive housing programs must increase to improve the flow of individuals through the homelessness response system. Presently, if each person on the priority list was to have a unit available to them there would need to be at least an additional 2,550 units across population groups with many more units for single adults. These units must also be diversified to include timebound and non-timebound programs.

Returns to Homelessness

- 1) In comparison to other population groups, families had the highest rate of returns to homelessness. In the comparison of returns by program type, PSH the highest rate of returns to homelessness.
- 2) Returns are driven by many factors, but presently around 30% of individuals exiting programs are not exiting to permanent destinations, impacting their ability to maintain stable housing.

Next Steps: The Ramsey County Continuum of Care must carefully monitor and provide technical assistance to the programs with the highest rates of returns to homelessness. Program providers should collaborate with the CoC to investigate returns to homelessness and determine ways to ensure those exiting to institutions are not unstably housed after leaving those institutions.

Racial Disparities

- 1) There is a statistically significant difference in representation of racial groups in the homeless population when compared to the general population of Ramsey County. These cannot demonstrate a causal relationship between experiencing homelessness and racial identity but do illustrate the disparate experience and impact of housing instability.
- 2) There are differences in those exiting to permanent housing between racial groups that requires further investigation, especially within transitional housing and rapid rehousing programs. The statistical significance of these differences cannot be determined but it is notable that those with marginalized racial identities may have different experiences attaining resources and services within housing programs in the homelessness response system.

Next Steps: There must be further investigations into differences in program outcomes between racial identities to ensure equity in programmatic experiences, investigate the root causes of outcome disparities across racial identities, and develop additional culturally specific programming to address these disparities.

System Performance Measures

- 1) The CoC has significant work to do to improve five of the seven measures used by the United States Department of Housing and Urban Development (HUD) to gauge system performance.
- 2) For the measures focused on returns to homelessness and those who are homeless for the first time, the CoC is going in the wrong direction where these numbers are increasing instead of decreasing.
- 3) The CoC's system performance measures include programs not funded by HUD, instead illustrating how almost the entire homelessness response system is performing. These measures demonstrate how the performance in one program can affect all the programs and providers in the region.

Next Steps: The CoC must design and implement a regular monitoring cadence and determine ways to collaborate with programs to improve system performance measures. The CoC needs to inform funders and regulatory agencies of the ways System Performance Measures drive funding into or out of the CoC.

Provider Survey

- 1) The shortage of staff and staff retention were highlighted as the largest barrier to providing services for clients.
- 2) The majority of providers mentioned rental assistance or financial assistance as being the largest service provided to clients or program participants and the most requested service. Transportation needs were the second most requested service that providers listed as needing further capacity.
- 3) Providers responded that they feel connected to others within their own agencies but not as connected to staff in other agencies or the larger CoC.

Next Steps: The CoC must continue to promote connection and provide events for members of different organizations or service providers to meet and build relationships. In collaboration with service providers, the CoC should investigate ways to provide additional transportation resources to program participants.

Qualitative Findings

- 1) Most of the themes generated from qualitative data demonstrate the heaviness, complexity, and nuance of working in housing services. The Sisyphean nature of these descriptions shows how easily staff burnout occurs.

- 2) Of the themes describing joy or connection, it was clear that those working to provide services in these organizations look to each other and the success of their clients to sustain themselves.

Next Steps: The members of the CoC should continue to share their perspectives and experiences with each other to find solace, understanding, and build a strong, resilient community.

Acknowledgements

The Heading Home Ramsey Staff Team would like to thank the organizations, providers, client-facing staff, and people with lived experience who participated in the in-depth interviews and surveys for this needs assessment. We would also like to thank the members of the ad-hoc committee who assisted with determining the scope, method, and materials used for this assessment. Their valuable input was critical to assesses the needs of this community and determine next steps.

Additionally, we would like to thank the following individuals and groups:

- Heading Home Ramsey Executive Committee
- Heading Home Ramsey Governing Board, Steering Committee, and Workgroups
- The Housing Stability Department Staff and Interns
- Ramsey County Information Services
- Ramsey County Communications & Public Relations
- Face to Face Counseling and Services
- One Day at a Time

Introduction

Historical Context

This needs assessment was conducted from June-November 2024. The assessment fulfills the requirements outlined in the Notice of Funding Availability (NOFA) and Family Homeless Prevention and Assistance Program (FHPAP) application process, which provide federal and state funding, respectively, for the homeless service projects in Ramsey County. The previous needs assessment was completed in May of 2022 by members of the Housing Stability Department and Social Services Department at Ramsey County. This report analyzes the current homeless service system in Ramsey County through the Heading Home Ramsey Continuum of Care. The findings of this report are intended to provide and improve understandings of the present programs and people within the homelessness response system. Heading Home Ramsey currently acts as the funding and regulatory agent to well over 100 programs for persons experiencing homelessness using federal, state, and local funding. The geographic area considered in this assessment is the entirety of Ramsey County in Minnesota. This region is comprised of 14 cities with the largest being St. Paul at around 300,000 people.

CoC Overview & Structure

The CoC is titled Heading Home Ramsey and is comprised of the partner organizations that provide services to people experiencing homelessness in Ramsey County. The governance of the CoC is conducted through committees. An overview of these committees and structure is demonstrated in Figure 1. The CoC governance structure is in accordance with the CoC charter as amended in March 2024.

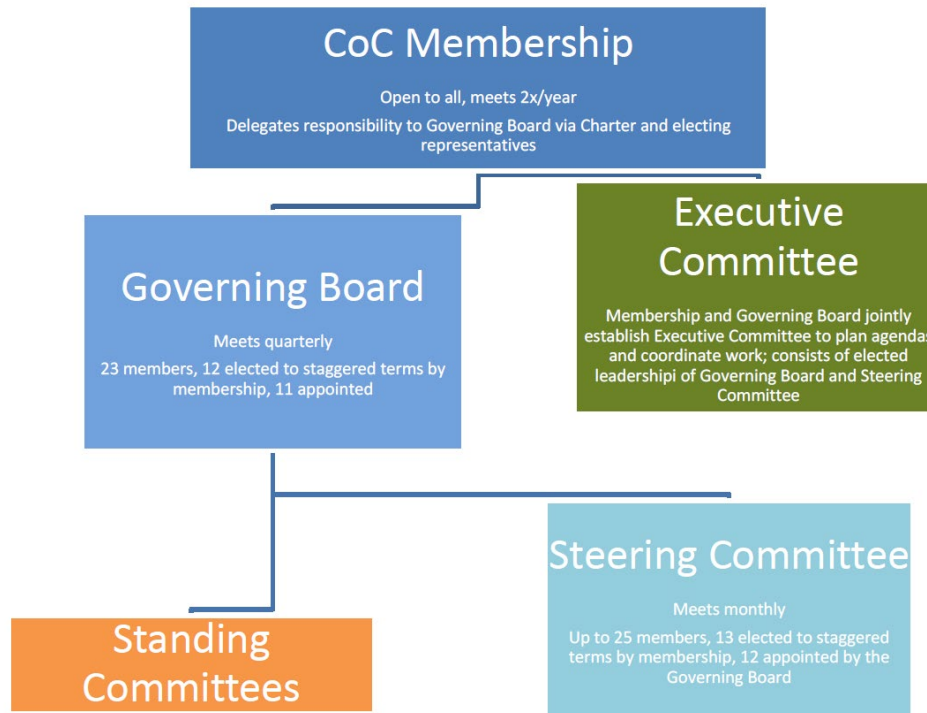


Figure 1 Governance Structure of Heading Home Ramsey

The two committees that act as the main regulatory agents for matters regarding the continuum are the Governing Board and Steering Committee. These groups are comprised of housing providers, organization directors, members of the community, and civic leaders. There are additional standing committees and workgroups with specific charges to design and implement new strategies or programs in the continuum. Members of the Governing Board are either appointed by designated organizations on an annual basis or elected by the Full CoC for staggered three-year terms. Members of the Steering Committee are either appointed by the Governing Board or elected by the full CoC for staggered three-year terms.

The staff members directly working on behalf of Heading Home Ramsey are in the Ramsey County Housing Stability Department. The CoC Coordinator and department planners manage the governance of the CoC and ensure CoC programs are in compliance with HUD standards. The staff in the department are responsible for all CoC run funding competitions and business managed by the CoC.

Homelessness Response System Overview and Literature Review

The CoC, in partnership with local organizations, manages and operates the structures involved in the homelessness response system. This system comprises all of

the programs and services people experiencing homelessness may interact with as they work to attain stable housing. This includes prevention services, diversion resources, emergency shelter, coordinated entry, and supportive housing services. Each of these services has separate sources of funding, program providers, and program requirements. To describe this system as accurately as possible, it will be described from both the provider and participant perspective.

From the provider perspective, the homelessness response system looks something similar to the graphic depicted in Figure 2.

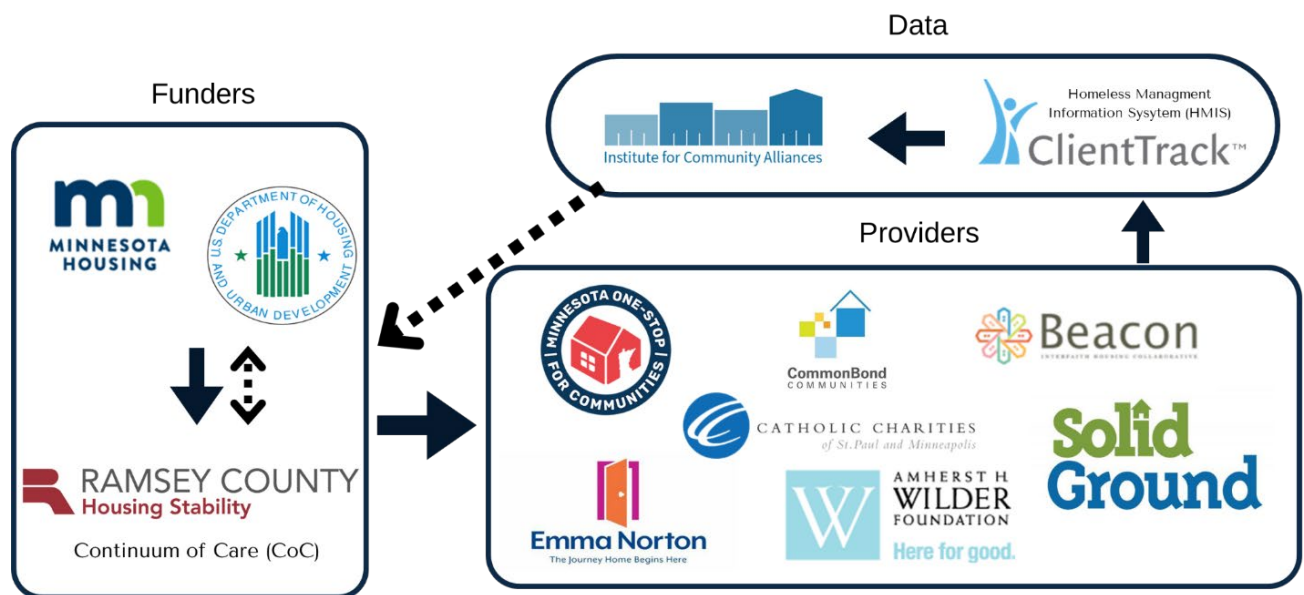


Figure 2 Relationship between funders, providers, and data in the homelessness response system.

Following the graphic from left to right, all funding for housing and homeless services in Minnesota comes from one or more of these places: the U.S. Department of Housing and Urban Development (HUD), Minnesota Housing, the Minnesota Department of Human Services, local government sources or private philanthropy. This funding is coordinated by the Continuum of Care (CoC) and funds organizations within the community providing services for clients. The information about the clients or program participants, including personal information and program information is entered into a database known as the Homeless Management Information System (HMIS). The HMIS software used in Ramsey County is *ClientTrack*. Minnesota’s HMIS Administrator is the Institute for Community Alliances (ICA). ICA sends reports and other information back to the CoC to help with determining areas for improvement and

focus. Each of these groups works in tandem to keep the homelessness response system running and operational for all the persons experiencing homelessness who rely on these services to improve their housing stability.

From the perspective of participants, the homelessness response system looks similar to the graphic depicted in Figure 3.

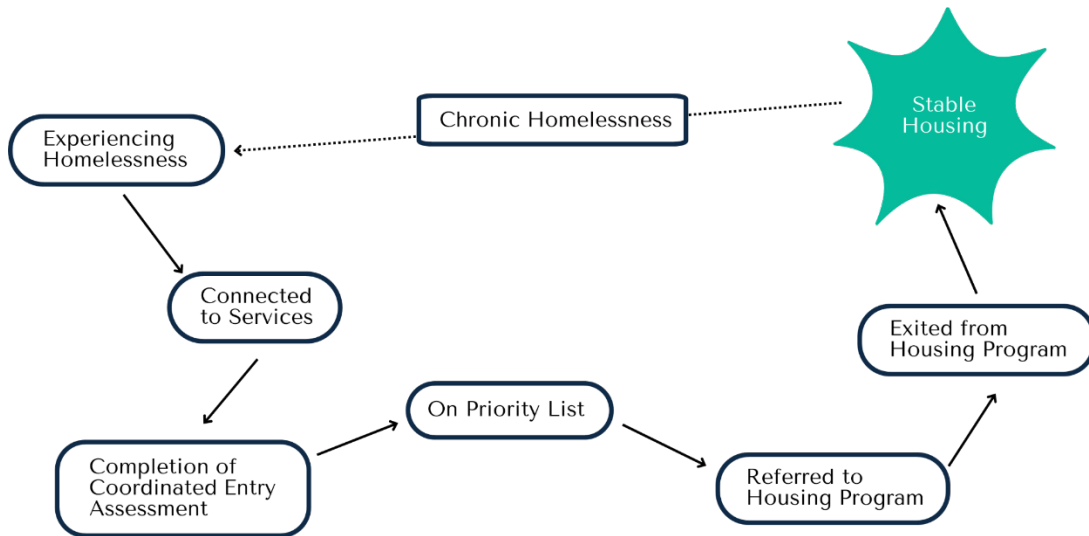


Figure 3 Participant perspective of the homelessness response system.

This is by no means intended to demonstrate the route that all persons experiencing housing instability take through the homelessness response system to achieve housing stability, and individuals may only interact with portions of this continuum, but it is the pathway a majority of persons will take. Within the system, persons likely get connected to services after they begin experiencing homelessness, and then undergo a coordinated entry assessment to be placed on the priority list for housing program placement. The priority list is intended to house those with the highest needs regardless of when they are assessed. After assessment, the person experiencing housing instability must wait until there is a vacancy in a housing program. The average wait time from assessment to referral in Ramsey County is currently around six months.

When there is a vacancy, that individual is notified by the coordinated entry team and a referral is sent to the housing provider. From there, the individual completes the necessary paperwork or application process and is then able to move into the program and achieve stable housing. Depending on the program type they are referred to, they may stay for one to two years or however long they would like. As they exit those

programs, in is the intention that the support they received in the program would enable the person previously experiencing housing instability to be able to maintain stable housing in either an affordable housing option or in the private housing market.

Altogether, the homelessness response system is a network of providers and organizations aimed at providing individuals or persons experiencing housing instability or homelessness with the services or programming they need to achieve stable housing. Another graphic that may be useful in describing the homelessness response system is shown in Figure 4.

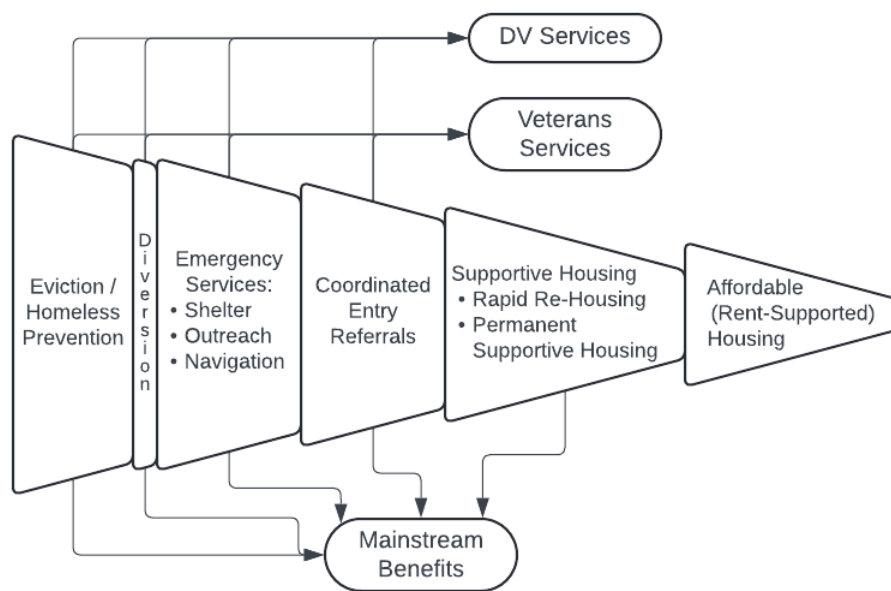


Figure 4 The sections of the homelessness response system.

This system (as it is currently), is fairly new and there has yet to be a significant body of literature describing or evaluating its success. Furthermore, due to the nuance and responsiveness of this system, the pathways to stable housing, available programming, and types of providers can vary greatly within or between geographic areas. Thus, the contents and results of this assessment cannot be generalized to the state or national homelessness response system or speak to broader trends.

Literature Review

In the United States, over half a million people are currently experiencing homelessness (Lanham, White, & Gaffney, 2022). The causes or risk factors of homelessness include substance abuse, poverty, lack of social support, and adverse life

events (Lanham, White, & Gaffney, 2022; Nilsson et al. 2019). Housing instability affects individuals in a multitude of ways and is considered a traumatic event (Brown et al., 2018; Mantell et al., 2023; O'Campo et al., 2022; Semborski et al., 2020). The trauma of housing instability and traumatic events that may occur while experiencing homelessness has led to significant differences in life expectancy, mortality, and accelerated aging among this population (Aldridge et al. 2018). The demand for housing services and affordable housing is greater than what is presently available within communities (Balagot et al., 2019; Ecker et al., 2022). The barriers to accessing housing services along with increasing rent and housing prices and stagnation of the minimum wage has led to a marked increases in experiences of homelessness.

The increase in the population of people experiencing homelessness and the effects of housing instability on mental and physical health have made homelessness a significant public health issue. Homelessness affects both the persons experiencing homelessness and the communities in which they live. The rates of homelessness have been increasing since the 1980s with rapid increases following major economic events such as the 2008 financial crisis and the COVID-19 pandemic (National Alliance to End Homelessness, 2023).

Influence of COVID-19 Policy

The influence of economics and politics on homelessness were illuminated during the COVID-19 pandemic as many were unable to maintain their employment (Baggett & Gaeta, 2021; Cawley et al., 2022; Perri et al., 2020; Ralli et al., 2021; Wiessing et al., 2021). During this time eviction moratoriums were passed to prevent those unable to work due to the pandemic from becoming homeless. This period demonstrated the power of policy to prevent homelessness as millions of dollars became available within communities to provide or extend rental assistance (Reina et al., 2021; Reina & Lee, 2023). The pandemic highlighted the current state of employment, wage stagnation, rent burden, and homelessness and demonstrated the ability of policy to intervene in this issue. This time also spurred researchers to determine the effect of this increase in available funds on communities and programs (Reina & Lee, 2023). Since then, there has been cross-sector analysis of the intersections of these issues and how they each contribute to the current state of homelessness and housing systems with recommendations to policy makers.

As such, this assessment takes place as the emergency funding available throughout this period is ending and providers are returning to pre-pandemic funding levels. This has impacted the provision of services within the Heading Home Ramsey Continuum of Care and likely will continue to impact the types of services that remain available to persons experiencing homelessness.

Needs Assessment Methodology

Needs Assessment Design

For the 2024 Heading Home Ramsey Needs Assessment, a mixed-methods design was used to guide the assessment. For the quantitative data, the Heading Home Ramsey Team collaborated with the Institute for Community Alliances (ICA) to access data in the Homeless Management Information System (HMIS) for calendar year 2023 to answer guiding questions 1 and 2. Similar information on clients experiencing domestic violence was accessed in collaboration with Women's Advocates. A 20-question survey was created on Microsoft Forms and distributed to providers to answer guiding questions 2-5. Purposive sampling methods were used to determine which agencies to contact for survey distribution. This method means the persons conducting the assessment deliberately selected participants based on their knowledge, relevance, or expertise. Provider Surveys were left open to be completed for a 60-day period to ensure equal accessibility for all providers in Heading Home Ramsey.

For the key informant interviews, purposive sampling was used to select who to collect data from. The Heading Home Ramsey team provided the names and contact information of key informants throughout the Continuum of Care. These key informants are either directly involved in the county's homelessness response system or manage teams providing housing services. The goal of these interviews was to answer guiding questions seven, 11, 13, and 14. For the provider interviews, convenience and purposive sampling was used to select participants. The organizations providing services to people experiencing homelessness were contacted to recruit participants via email. Client or program participant -facing staff who were interested in sharing their experiences were then selected for interviews. The goal of these interviews was to answer guiding questions seven, and 10-14. For the client interviews purposive sampling was used to select who to include in interview. Agencies providing preventative housing assistance or permanent housing were contacted via email and asked to select clients for interviews. Clients were given a \$25 Visa Gift Card as compensation for their time. The goal of the client interviews was to answer guiding questions 8-11.

Description of Data Collection Instruments

For the 2024 Needs Assessment, four data collection instruments were created to be used for the quantitative and qualitative data collection. The first step of this process was to create a working group from Heading Home Ramsey Steering Committee members. This group, in collaboration with CoC staff, determined the guiding questions for the assessment, and the measures of interest. Through the recommendations of the working group, four data collection instruments were created to answer both the quantitative and qualitative guiding questions. The framework for the data collection instruments was developed from the HUD system performance measures, the 2023 HUD CoC Notice of Funding Opportunity (NOFO) application questions, and feedback from the needs assessment working group. The data collection tools and guiding questions were reviewed by both the working group and the Heading Home Ramsey Staff Team for constructive feedback.

Interview Guide and Focus Group Guide Development

Three semi-structured interview guides were tailored to the populations of interested based on the guiding questions. Each guide has introductory questions and then goes on to cover Ramsey County partnerships or services, service experiences, and perceptions of the current homelessness response system to investigate overall guiding question 2. The interview guide for Key Informants has 11 main questions with 24 probes. The interview guide for providers has 10 main questions with 21 probes. The interview guide for clients has 10 main questions with 21 corresponding probes. The final copies of the Key Informant, Provider, and Client Interview Guide are in Appendices B-D, respectively.

Data Collection Procedures

Quantitative Data

Following approval of the methodology by the governing board, a 20-question survey was created on Microsoft forms and distributed to providers to answer guiding questions 2-5. Survey questions were informed by the System Performance Measures, the 2022 Heading Home Ramsey Needs Assessment, and the guiding questions developed by the working group. The survey questions were reviewed by the Heading

Home Ramsey Staff Team ahead of survey distribution. The survey questions were also pre-tested by members of the working group to gauge clarity and accuracy. Purposive sampling methods were used to determine which agencies to contact for survey distribution. Surveys were distributed via email to organizations who have prevention services, emergency services, and housing programs for clients in Ramsey County. The link to the survey was activated on July 31, 2024, and deactivated on November 1, 2024. Providers who were initially recruited were sent a survey completion reminder 30 days after the initial distribution.

In addition to the provider survey, reports provided by the Institute for Community Alliances (the HMIS Administrator for all CoCs in Minnesota), the Heading Home Ramsey Prevention Team, and the Shelter Utilization Report were used to analyze the present state of the homelessness response system in Ramsey County. These reports include the NOFO Scoring Tool, the Core Homeless Programs, CE Monitoring, Returns to Homelessness and Prevention Zip Code Data. Each of these reports included data from January-December 2023. The Prevention Zip Code Data and Situation Report included information from both 2023 and 2024.

Qualitative Data

Following approval of the methodology by the governing board, a recruitment email was sent to identified key informants for key informant interviews. An additional recruitment email was sent to all providers in the Heading Home Ramsey CoC who provide prevention or housing services to inquire about client and case manager participation for provider interviews and client focus groups. Interviews were one-on-one with each participant for around 60 minutes. Interested key informants, providers, and clients were asked to respond to the recruitment email and a time to interview was set up with members of Heading Home Ramsey Staff Team. A total of 13 key informants were interviewed. A total of 14 providers completed interviews, and five client interviews were conducted.

Those who participated in the Key Informant Interviews worked across the continuum in the areas of prevention, outreach, coordinated entry, and housing programs. The client-facing staff or providers included those working in prevention, emergency shelter, and housing programs.

Interviews with key informants and providers took place from August-October 2024, interviews were primarily conducted online via Microsoft Teams, with 10 interviews conducted in person. The Heading Home Ramsey Staff Team asked each interviewee for verbal consent to participate in the interview and to record the interview. The team also informed each informant that the interview was voluntary and ensured that documentation would be de-identified. Interview recordings were uploaded to a secure Microsoft SharePoint folder that could only be accessed by members of the Heading Home Ramsey Staff Team. After being uploaded onto Microsoft SharePoint, all recordings were deleted from county devices. All stored data was de-identified. The team will delete all recordings by December 2024, following submission of the final report and the needs assessment presentation to the full CoC.

Data Analysis Procedures

Quantitative Data

Descriptive statistics for the parts of the homelessness response system were collected from the reports and surveys described above. Data analysis was completed in Microsoft Excel and using R-Studio. No personal protected information on clients or providers was collected or used in the analysis of this assessment. The reports were filtered to only include client interactions that had been validated by the Institute for Community Alliances (ICA). Inferential statistics were used in two cases in this assessment, in a chi-square analysis and in a logistic regression model. Both tests were run using R-Studio. The chi square test for independence used the sample size of individuals entering emergency shelter or outreach services in comparison with the general population of Ramsey County as determined through the American Community Survey. The bivariate logistic regression analysis was run to determine the crude association between returns to homelessness and racial category as defined through the HUD data standards. This step was used to determine the statistical significance of the association between race and returns to homelessness. For the association, the adjusted odds ratio (AOR) and associated p-values were recorded. Significance was assessed at a value of $\alpha=0.05$.

Qualitative Data

The analysis of qualitative data was completed through MAXQDA. The transcription of in-depth interviews was completed either through Microsoft Teams or through MAXQDA transcription. Transcripts were verified for accuracy of speech prior to analysis. The responses for key informants and providers/client facing staff were analyzed as one dataset. Transcripts were reviewed, analyzed, and coded by the lead interviewer. The data was sufficiently rich and provided nine salient themes.

Quantitative Findings

Guiding Questions

- What is the relationship between programs and a return to homelessness?

Exited From	Total Exited	Total Returned	Returns within 365 Days	Percentage of Program Exits	Percentage of All Returns
TH	128	45	40	35.2%	20.7%
RRH	446	38	35	8.5%	17.5%
PSH	731	134	98	18.3%	61.8%

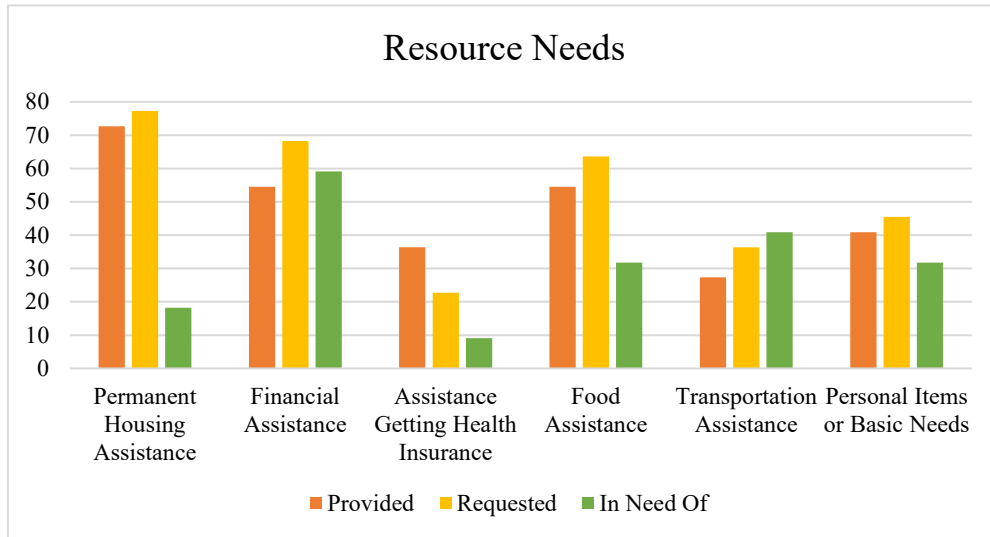
- How many clients are being served in housing programs?

Program Capacity 2023	Transitional Housing	Rapid Rehousing	Permanent Supportive Housing	Housing Support
Youth	101	49	88	25
Adult Singles	0	28	1,330	543
Families	209	369	1,332	200

Entries 2023	Transitional Housing	Rapid Rehousing	Permanent Supportive Housing	Housing Support
Youth	40	26	5	9
Adult Singles	0	15	37	54
Families	23	56	31	40

- What services are they [clients] being offered in programs?

The chart below describes the services being provided, requested, and most in need as reported by a least 1/3 of providers in the provider survey.



- How are funding options affecting the services provided?

Funding options are affecting services providing by limiting the amount of services available and the types of services that can be provided.

- How are clients made aware of resources or services?

Due to the inability to provide compensation to clients completing online surveys in real-time, a survey for clients was not developed or distributed for this assessment. Therefore, this question does not have a decisive answer.

- What is preventing clients from accessing services?

Due to the inability to provide compensation to clients completing online surveys in real-time, a survey for clients was not developed or distributed for this assessment. Therefore, this question does not have a decisive answer.

- How can we improve the outcomes for those with needs outside of what is currently funded?

Those with needs outside of what is currently funded in the CoC will likely need to seek resources from mainstream benefit providers or organizations outside of the CoC to improve housing outcomes.

- What services are being provided outside of City of St. Paul?

The services being provided outside of St. Paul include rental assistance or homeless prevention services, some scattered-site housing programs, and outreach services. The majority of emergency services and housing programs are within St. Paul.

Prevention

Prevention is a key part of the work of the homelessness response system and comprises all the programs and funding used to keep households from experiencing homelessness. The primary form of prevention funding for the Ramsey County CoC is provided through the Minnesota Housing Family Homeless Prevention Assistance Program (FHPAP). For the current two-year period from 10/1/23 - 11/30-25, Ramsey County received \$14 Million from Minnesota Housing for FHPAP, which is used to fund four key strategies to prevent homelessness or provide supportive housing. These are: prevention, street outreach, coordinated entry and rapid rehousing. Of the \$14 Million, \$11 Million is administered through the Ramsey County Housing Stability Department. The majority of this funding is used for prevention efforts such as emergency rental assistance, eviction prevention, and securing housing. Current funding is at an all-time high following a historic singular legislative appropriation in 2023. State funding for FHPAP is expected to drop to base levels and Ramsey County's funding projection for the 2025-2027 grant period is approximately \$3 million.

Residents of Ramsey County are also able to use the Emergency Assistance (EA) and Emergency General Assistance (EGA) programs when needed to prevent the loss of housing. These programs are not managed by Ramsey County Housing Stability or monitored through the Continuum of Care; however Financial Assistance Services Department staff of Ramsey County participate as partners in the Prevention Work Group and FHPAP Advisory Committee. Together with FHPAP, these form the financial clinic that is available to Ramsey County residents in need of rental assistance. A person or household is eligible for FHPAP if they are a resident of Ramsey County, have an income at or below 200% of the Federal Poverty Guidelines, and are homeless or at risk of homelessness. Those who are at risk of homelessness has increased with the spike in 2022 primarily attributed to the end of the COVID pandemic eviction moratorium. The change evictions filed and the results of evictions over the last nine years are depicted in Figure 5. The trend in evictions, however, can only demonstrate a part of the larger needs, as many requests for prevention funding come to providers before an eviction is filed. The trend in eviction filings also show an increase in the number of cases being settled out of all filings. In 2014 it was 58% and it is 72% of all cases so far in 2024.

Although this change cannot be solely due to the changes in prevention funding, closing this gap or preventing as many evictions as possible is a goal of prevention.

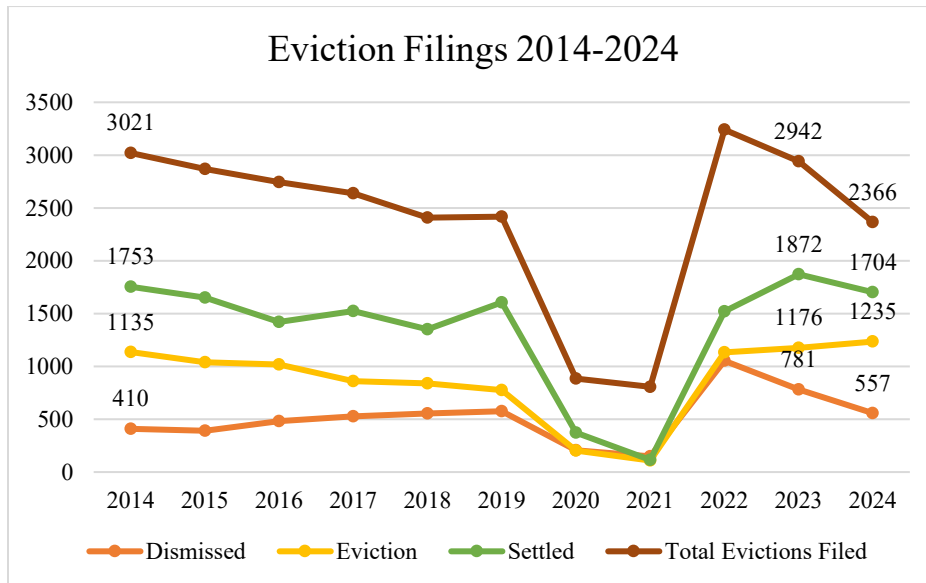


Figure 5 Trend in Eviction Filings over 10 years.

The demand for homeless prevention has surged alongside the high rates of evictions filed. Over a nine-month period between October 2023 to September 2024, FHPAP providers tracked over 20,000 people seeking financial assistance to prevent or resolve their homelessness. The increased demand for emergency rental assistance is primarily due to the economic disruptions caused by the COVID-19 pandemic, which led to widespread job losses and income reductions, making it difficult for many to afford rent payments, particularly when combined with high housing costs, a shortage of affordable housing and other key risk factors for eviction (e.g. previous episodes of housing instability, the presence of health challenges, low wages/income, poor housing quality and demographic factors, tenant-landlord disputes, etc.).

Twin Cities area renters are experiencing a significant strain with the rise in median rent prices. Rent for a one-bedroom apartment averages \$1,300 while a three-bedroom apartment averages \$3,000. In the Twin Cities metro area, only a small percentage of rental housing is accessible for those with low incomes: 3% at 30% Area Median Income (AMI), 25% at 50% and 51% at 60% AMI. The minimum wage in Minnesota and the City of St. Paul is much higher than the federal minimum wage, but it is still extremely difficult for households to maintain stable housing. The monthly income required by landlords to ensure these rents can be paid is substantial – generally

2.5 times the monthly rent – ranging from \$3,100/month for a one-bedroom and \$5,000/month for a three-bedroom.

A comparison to the minimum wages available in the Twin Cities demonstrates that there is a considerable gap in what is a possible income and requirements to rent a market-rate apartment. These comparisons do not include those who are on a fixed income, due the diversity of fixed income programs. However, those individuals also face significant barriers in attaining accessible and affordable housing because of these same discrepancies (Hembre, 2022). The current minimum wage in Minnesota is \$10.85 an hour for large businesses and \$8.85 an hour for small businesses. In the City of St. Paul, the minimum wage is \$15.57 an hour for large businesses and \$14 an hour for small businesses. Figure 6 depicts these comparisons across apartment types. These estimations do not include tax calculations, and the two- or three-bedroom calculations were made with the assumption that two members of the household would be working full-time.

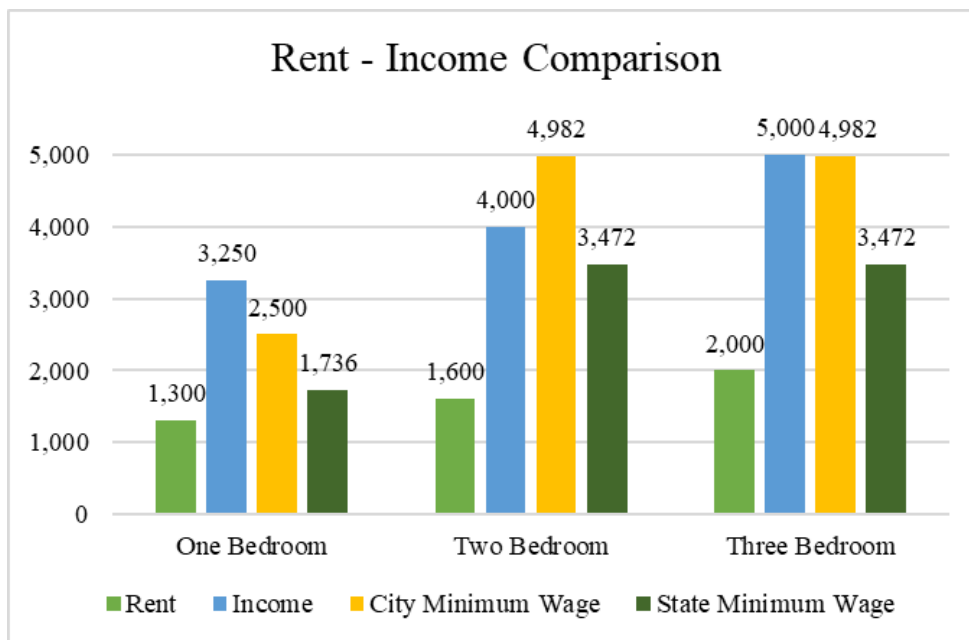


Figure 6 Income to Rent Comparison across city and state minimum wage.

From October 1, 2023, to June 30, 2024, 870 households were served through FHPAP Prevention projects in Ramsey County; approximately 20% are served via providers that participate in the Housing Court Financial Clinic; the remaining are served directly through providers where an eviction summons may or may not have been issued. The average amount of financial assistance requested to prevent a person’s

homelessness was \$3,500. Nearly 85% of the requests for emergency financial assistance are for rent, 9% for damage deposits, 6% for utilities, and .5% for mortgages. The need is greater in St. Paul neighborhoods and zip codes where there are high concentrations of poverty; 74.6% of prevention need came from just eight zip codes, including 55107, 55103, 55101, 55130, 55117 (North End), 55106 (East Side), 55104 (Frogtown), and 55119 (Greater East Side)

Type of Funding Needed	Percentage of Prevention Spending
Damage Deposit - Already Housed	5.1%
Damage Deposit – Homeless	4.1%
Mortgage Foreclosure Assistance Secured	0.5%
Rent Secured	84.4%
Utilities Assistance	5.9%

Table 1 The Distribution of Prevention Funding Requests

Presently, if the 870 households are extrapolated to estimate the entire year, around 1,157 households would be served, needing between \$4 million and \$7.75 million to meet the present requests that are being fulfilled. However, prevention providers are collectively experiencing around 1,600 calls a month, meaning that they are only providing services to approximately 6% of those who request them. To meet the emergency needs of all of those requesting prevention services in Ramsey County through FHPAP, it is estimated that funding would need to be between \$67.2 million and \$128.6 million annually. This would require a dramatic increase in funding and demonstrates the demand or need for additional prevention services in the Ramsey County CoC. An increase in funding would assist providers by not only increasing the households being served but also expanding services to provide ongoing, short-term case management, programming such as tenant training, financial literacy, and would enhance collaboration with strategic partners such as workforce, mental health, etc.

Diversion

In 2022, as county-run COVID shelters closed, it became clear that single adults experiencing homelessness in Ramsey County needed a single point of entry for emergency overnight shelter. This team was intended to be a single point of contact for adults to call or visit in person to reserve shelter beds, similar to Hennepin County’s

Adult Shelter Connect. In late 2022, a planner was hired to research and make recommendations to the CoC for the creation of this program and team. An early core recommendation came from the CoC's Prevention and Tenant Stabilization Workgroup, which recommended that diversion, as a strategy, be expanded to all populations within the CoC. At the time, only families had access to diversion resources through the coordinated access to housing and services (CAHS) team. Diversion is a strategy of providing prevention resources at the point of entry to emergency shelter and is considered to have a high impact relative to other prevention efforts by the National Alliance to End Homelessness (National Alliance to End Homelessness, 2020).

The Ramsey County Shelter Entry and Diversion (SHED) team launched April 25, 2024. The team currently collaborates with most shelters providing overnight services to single adults within the county to reserve beds and assists residents with questions they may have as they navigate the homelessness response system. After launching in April, the team has received an average of around 3,500 calls a month from residents. As of late November 2024, they have diverted over 300 households from the need for immediate emergency services through a variety of strategies, such as connecting them with family in other areas, mediating with their landlords to resolve past-due rent, or connecting them to services that are better suited to meet their needs (such as victim service providers or veterans service providers). The team has been an incredible asset to the community and a welcome provider to the CoC. In the first seven months the SHED team spend \$137,767 on diversion needs.

Emergency Services

Within Ramsey County there are over 10 providers currently serving those in need of urgent help accessing or maintaining shelter or stable housing. These providers include those doing regular outreach to communities, those providing day shelter or drop-in services, and the organizations who operate overnight shelters. Those accessing emergency services are usually the individuals within the community who are experiencing what HUD defines as ‘literal homelessness’: either staying in a place not meant for human habitation or staying in an emergency shelter. The State of Minnesota’s definition for homelessness includes these individuals as well as those who may be “doubled up”: couch hopping or staying with others in a non-permanent tenure. Due to the difficulty in ascertaining exactly how many individuals may be experiencing housing instability through couch hopping, for the purpose of this assessment only those who were included in shelter stays or connected to outreach workers will be included in estimations of people experiencing homelessness. Housing instability or homelessness also looks different for each person or household and the data present in this section is by no means intended to encapsulate the experiences of all persons in the Ramsey County CoC.

Trends

To estimate the trend of individuals experiencing housing instability, the Point in Time Count is the most utilized data point. The Point-in-Time Count (PIT) is an annual count that reports the number and demographic characteristics of those in emergency shelter, unsheltered, or in transitional housing at the time of the count. The 2024 PIT count occurred January 24, 2024. The PIT count is only an estimate of the number of people who are experiencing homelessness. This information is used to inform the United States Congress and HUD to assist with decisions related to funding. The PIT Count trend from 2015 to 2024 is depicted in Figure 7. This figure does not include those in Transitional Housing (TH) programs. Although they are considered a part of those in emergency services by HUD, due to the structure of TH programs in the Ramsey County CoC, those individuals are included in the section on supportive housing.

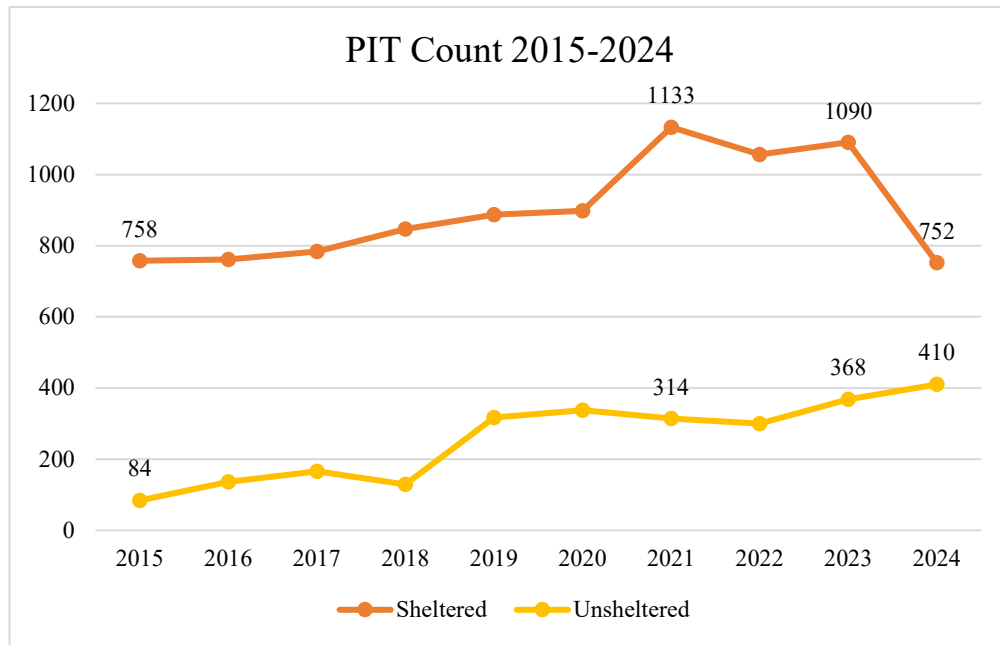


Figure 7 Trends in the Point-in-Time Count

Since hitting a peak in 2021 during the COVID pandemic, there has been a steady decline in individuals within emergency shelter during PIT night, however, this decrease has coincided with an increase in those experiencing unsheltered homelessness, so it does not indicate that the total number experiencing homelessness is decreasing. Rather, the trend demonstrates how individuals within the CoC are experiencing more unsheltered homelessness as the number of shelters and shelter beds have decreased over the last three years. In addition to the number of individuals experiencing homelessness, there has been a decrease in available shelter beds, likely leading to these opposite trends. Thus, the number of sheltered individuals may look to be decreasing, but due to the number of unsheltered and the lack of shelter space for people to go to, the total number of those experiencing homelessness on any given night in Ramsey County may not be changing significantly.

Street Outreach

Within Ramsey County, there are four organizations that conduct the majority of outreach to individuals experiencing homelessness. These include People Incorporated, RADIAS Health, MN Community Care, Street Works, and the City of St. Paul. Each of these organizations and their teams are in the community daily working with people and assisting them either connect to services or maintain their basic needs. Outreach workers are often the primary contact or connection people experiencing homelessness

have to the larger homeless response system or may be the first people they interact with after losing housing. Each organization works with a different group or targets different areas. Generally, RADIAS, People Incorporated, and MN Community Care, and the City of St. Paul Homeless Assistance Response Team (HART) work primarily with single adults. Those in the Street Works collaborative focus on the youth experiencing homelessness in the community. Around 521 individuals were served by outreach in the year 2023.

Outreach workers are also the group of people with the most amount of knowledge regarding current encampments within the CoC. With this understanding, a few outreach workers were able to provide an overview of the current state of encampments within the CoC. Presently, there are at least 27 active encampment sites in the geographic area encapsulating the CoC (Ramsey County) with an estimated 203 individuals. These encampments include usually around 30-40 people each and the communities within them vary based on location. Often these groups are placed in the areas the city allows them to be and may be comprised of members of the same community or members who have found community with each other. St. Paul's present policy is not to close encampments through force but rather to connect individuals via the HART team and work to get them connected to emergency shelter or similar services.

However, encampments can be defined in a multitude of ways and there are individuals in suburban Ramsey County like Maplewood or Roseville who have maintained campsites with others for long periods of time. These individuals tend to be more mobile as well and outreach workers have described how encampments change over time, with one or two popping up, being cleared or leaving, and then popping up again or being created in different areas. Thus, determining the status of encampments becomes tricky and nuanced. These groups of individuals likely have existed for long periods of time within the Ramsey County CoC but have only become more prominent as camps grew larger and became more visible to high-traffic public areas. To respond to encampments within St. Paul, the city has launched the HART team and is now implementing a new program, Familiar Faces, to engage those most frequently interacting with various crisis response services, including police, fire, emergency medical services, hospital emergency rooms and emergency shelter. This program will

include an outreach component. Both groups, in addition to the organizations currently servicing people in the area, will continue to work with those experiencing unsheltered homelessness to connect them to services and reduce the amount of time they are spending in places not meant for human habitation.

Overnight Shelter

The emergency resource most utilized for individuals experiencing homelessness is emergency overnight shelter. Through analyzing the trends in this population, we may be able to better ascertain changes in those experiencing homelessness and the needs for emergency services over time. To demonstrate the change in these trends over time, Figures 8 and 9 show the changes in shelter population and utilization from October 2023 to June 2024. This data was sourced by the Situation Report published by the Ramsey County Housing Stability Department.

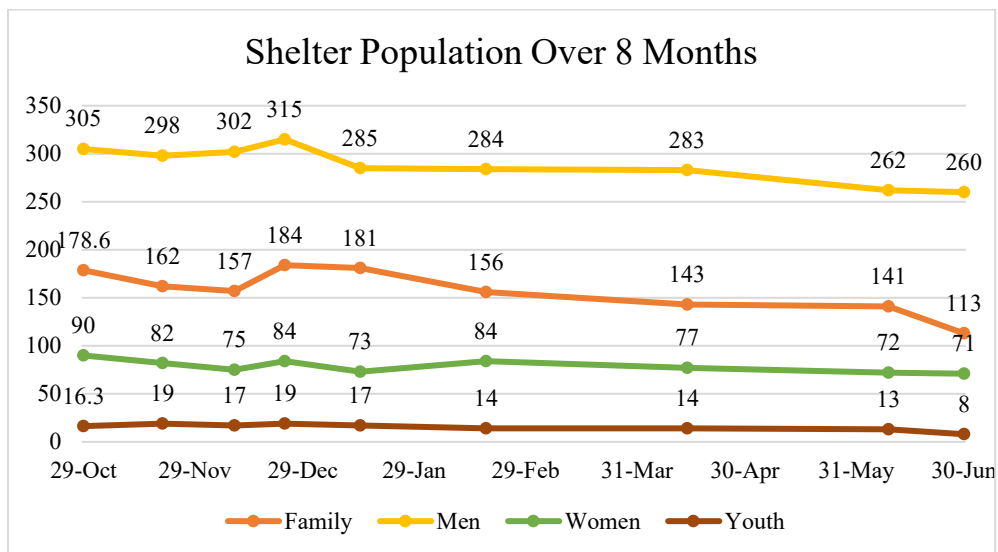


Figure 8 Shelter Population Trends from October 2023 – June 2024.

These numbers are reported by the shelters using HMIS to report enrollments and the self-report of stays from shelters not using HMIS. Mixed families were not included in this report due to the potential duplication with the other populations listed.

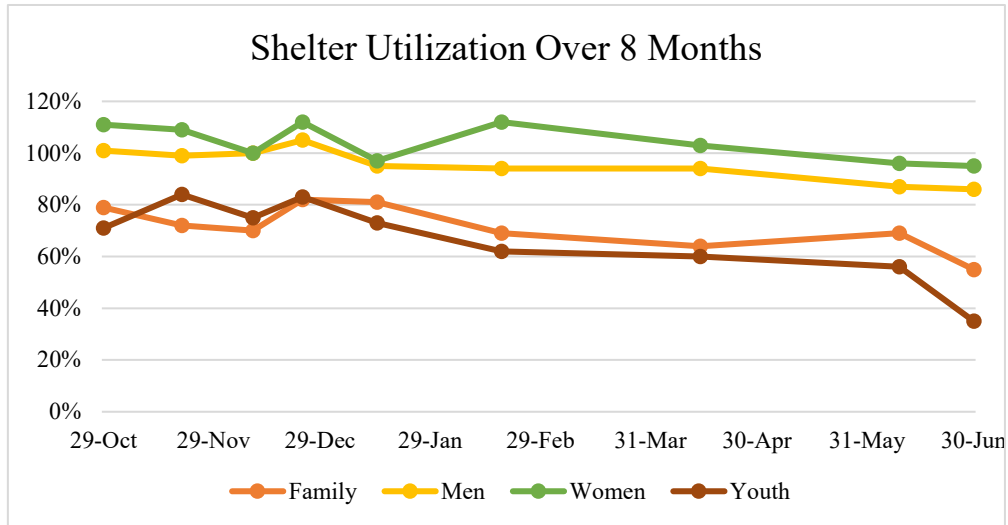


Figure 9 Shelter Utilization Rates from October 2023 – June 2024.

Overall, the highest population staying in emergency shelters was men followed by families. Shelter populations peaked in late fall and decreased moving into the summer. This change is likely due to the changing weather conditions in Minnesota with more individuals seeking shelter to stay warm moving into the winter months. The trend in bed utilization shows a similar seasonal rise and fall, but both men’s and women’s beds remain over 80% utilized throughout the time period included in this report. Additionally, both of these groups have over 100% utilization at certain points in the report. The additional bed utilization is due to the use of overflow beds during times of high demand from shelters.

Family shelter utilization, when taken as a percentage of total capacity, can sometimes be misleading since different family sizes may occupy available shelter rooms and therefore constitute full utilization. Furthermore, although the utilization rate remains steady for family shelters, the family shelters in Ramsey County have a waitlist for maintaining their shelter capacity. Therefore, the rate may not change as much when compared to others, but that is because there is a constant need for shelters among families. The present waitlist includes over 200 individuals comprised of various households in need of shelter.

The total number of beds throughout this period ranged from 636-658 depending on the season, with a higher total number of beds available until April 2024. The total number of beds reported in the Situation Report is much lower than the number of beds reported in the Housing Inventory Count (HIC). In the Housing Inventory Count for

2024, 1,011 beds were reported as a part of emergency shelter programs in the Ramsey County CoC. This is a discrepancy of around 353 beds between the HIC and the beds reported in the Situation Report. The difference in capacity is likely due to a couple main causes. Firstly, the Housing Inventory Count includes emergency shelter programs that closed after PIT night but during the period that the Situation Report covers for shelter utilization. Secondly, the HIC is a report of all the beds in a facility or year-end beds, and those beds may not be currently available to the community. The beds available reflect the number of beds an organization has available that can be readily managed by the staff onsite. Due to changes in staffing across organizations at the CoC, the number of beds used tends to be much lower than the total number of beds reported in the Housing Inventory Count. Thirdly, some beds in the HIC are hotel voucher beds not tracked in HMIS and are purposefully not included in the County’s Situation Report. Furthermore, the number of beds reported in the Housing Inventory Count were not reviewed for confirmation during the reporting period, so some organizations may have over reported their number of total beds. This difference in bed capacity and utilization over time demonstrates the need for both improvements in data quality and increases in staff retention.

The total number of unique households that accessed shelter in the year 2023 was 2,345. The total number of persons was 2,835. The description of the numbers of each household type using emergency shelter can be found in Table 2.

Household Type	Number of Enrollments
Adults with Children	603
Youth with Children	65
Single Adults	1799
Single Youth	264
Single Child	70
Missing	31

Table 2 Households accessing Emergency Shelter Services in 2023.

Single adults and families had a greater number of enrollments compared to youth, demonstrating the needs of these populations. These enrollment numbers assist with showing the number of people in need of emergency services on an annual basis. The also can assist with demonstrating the length of time a person experiences

homelessness before being referred or placed into permanent housing. In Figure 10 a histogram of shelter length of stay among all of those who were enrolled in 2023.

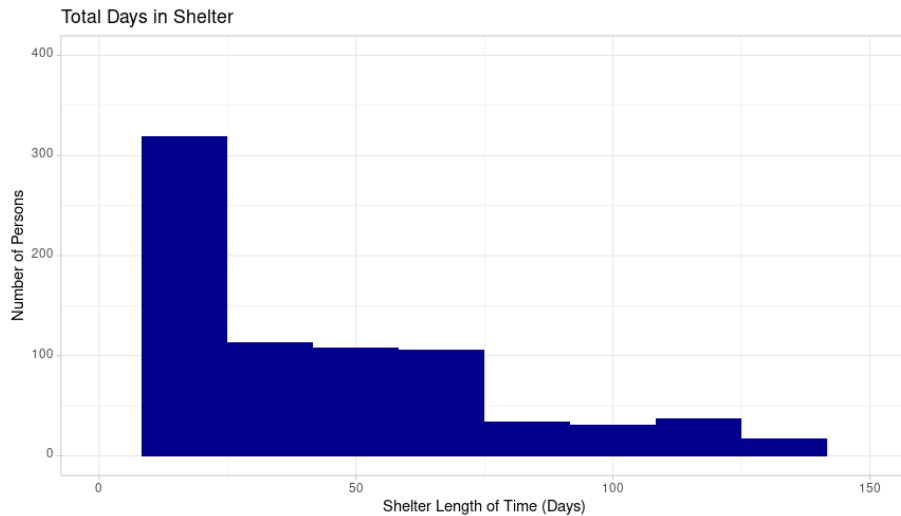


Figure 10 Average Length of Stay in Shelter in Days.

The average length of stay during this period can be interpreted in two ways. The median length of stay was one night, but the mean length of stay was 8.8 nights. This shows that individuals seeking shelter are likely not staying for only one or two nights. The length of time in shelter may also change in the upcoming year as the process for entering enrollments has changed. Previously, and as is reflected in the data from 2023, some shelters would log individual entries and exits for each night they stayed, and the data management practice of “bookending” these stays was not performed uniformly for all shelters or throughout the year. With the state’s new HMIS platform in place as of August 2024, this should no longer be an issue and enrollment dates should better demonstrate the total length of time someone stayed in shelter. Even so, the 2023 data still demonstrates that people on average may stay in shelter for well over a week before moving to another shelter or finding other places to stay. The length of stay information further shows the demand for emergency shelter in the Ramsey County CoC.

Data on shelter enrollments also cannot demonstrate the number of people experiencing first time homelessness or those who are new to the homelessness response system as easily. Those who were enrolled in Outreach Services in 2023 as well as those who were added to the coordinated entry priority list over that time may give a better understanding, but it is still not a complete picture. This is because, as described earlier, individuals do not consistently go from one type of service to another. In other

words, people experiencing homelessness do not go from prevention to emergency shelter, or from outreach to emergency shelter, they may use other resources or stay in areas outside of the homelessness response system. They may also choose to seek or find housing stability outside of the system altogether. Furthermore, those entering the coordinated entry list are those completing an assessment. People experiencing homelessness may complete an assessment after many months or years making them not a part of the population experiencing homelessness for the first time.

Coordinated Entry

Within the Ramsey County CoC there are currently three teams working within coordinated entry programs to operate coordinated entry priority lists for supportive housing programs for people experiencing homelessness. The Coordinated Entry System (CES) is a federally mandated program created to provide people experiencing homelessness with a single point of entry to housing programs and providers. Previous to coordinated entry, people experiencing housing instability were tasked with navigating the homelessness response system on their own, completing multiple intakes at housing providers or coordinating resources across providers. Additionally, there was not a place for providers to communicate with each other about availability or openings for their programs. The community lacked a central place to prioritize and equitably select individuals for housing with the limited available housing resources.

Ramsey County Coordinated Entry started in June 2016. It is comprised of three teams, each with a different population in focus. The Coordinated Access for Housing Services (CAHS) team works with families, the Coordinated Entry Youth Singles (CEYS) is broken into two additional teams, one working with youth (age 18-24), and one working with adults (25+). Though the three teams are all working within the Ramsey County CoC, only one team is staffed by the County's Housing Stability Department. Both the CAHS team and youth team are staffed by community organizations. The three groups work to refer people experiencing homelessness to supportive housing placements by collaborating with community organizations when they communicate vacancies in their housing programs. The teams work across much of the system, collaborating with both outreach workers or those providing emergency services and the housing program providers. These teams often have the most up to date knowledge on system capacity or changes within organizations as they are communicating and working with so many providers on a regular basis.

The Coordinated Entry System is accessed by people experiencing homelessness through the completion of a coordinated entry assessment. The present assessment used within Ramsey County asks individuals about their personal identities, income information, disability status and their length of time homeless. These assessments may be conducted with staff at emergency shelters, drop-in centers, or outreach workers. Assessors are trained by Coordinated Entry System teams to complete assessments.

There are currently around 50 assessors in Ramsey County. Of these, only two are full-time assessors, with the rest completing assessments as a part of their other work duties. After completing an assessment, people experiencing homelessness are placed on a priority list. This list is different than a waitlist in that people are placed higher or lower based on the information in the assessment, instead of when they completed the assessment. The presented prioritization process takes into account the persons disability status and length of time homeless as the primary two factors to determine list placement.

After they are placed on the list, individuals experiencing homelessness are asked to wait until a place becomes available that they may be referred to. During this time, many individuals work with the staff around them to attain their vital documents or gain employment to smooth the transition into housing when it comes. An analysis of the coordinated entry system illustrates the ways demand for housing and housing capacity affect the length of time someone experiences homelessness in Ramsey County. As more individuals are placed onto the list and housing programs close, people experiencing homelessness must wait longer before being placed. This causes additional issues as the assessors who completed these assessments leave or lose contact with the person assessed, leading to a backlog of persons who may or may not be still in need of housing but who are unable to be contacted. This is especially complicated as people experiencing homelessness frequently do not have a consistent means of contact due to the cost of technology or theft from others. Assessors work to combat this by putting multiple contacts in the assessment for each person, but as time passes, that contact information may also change, creating the same problem.

In August of 2024, 2,255 total households were on one of the three priority lists. In 2023, 1,342 households were added to the priority list. Over that same time, there were 512 successful referrals. This means that as one person was leaving the list, around three were being placed onto it. The average time someone has to wait on the priority list before being referred is around 220 days or seven months. The wait time also varies between populations due to the housing available. The breakdown of housing wait time by population group is in listed in Table 3.

Population	Average Days	Month Conversion
Families (including Youth Families)	163	5.4
Singles	266	8.9
Youth	275	9.2
Household Type Missing	159	5.3

Table 3 Coordinated Entry List wait times by Household Type

The table describes the average length of time between enrollment (entering) in the coordinated entry program projects (the priority list) and exiting the coordinated entry program projects. This length of time reflects the time someone remains on the list until they are referred. Between all population groups, youth and singles remain on the list the longest with each waiting over seven months between assessment and referral or leaving the priority list. This length of time creates stagnation in the homelessness response system as people are waiting for placement in housing programs with limited capacity. The wait time is also likely a contributing factor to the increasing acuity of mental or behavioral health issues facing this population creating barriers to housing as the length of time experiencing the trauma of homelessness increases, so too does the effects of that trauma.

When people experiencing homelessness are referred, there is also a change that the referral is not successful. Of the 1,180 total referrals made in the year 2023, only 512 were successful. That is around 43% of all referrals. Referrals are not successful for a variety of reasons either on behalf of the person experiencing homelessness or on behalf of the housing program. This means that referrals can be cancelled, declined, or unresolved depending on the situation. Table 4 describes the amount of successful, declined, cancelled or unresolved referrals by population group. Of these, Single Adults had the highest number of successful referrals and total referrals. The rates of successful referral for each population group are as follows: Families (38.6%), Single Adults (47.6%), and Youth (42.0%).

	Successful	Declined	Cancelled	Unresolved	Missing	Total
Families	186	70	29	186	10	481

Single Adults	249	160	35	69	9	523
Youth	66	59	5	22	4	157
Missing	11	7	1	0	0	19

Table 4 Referral Status by Household Type

The coordinated entry programs do their best to ensure the person experiencing homelessness feels empowered in selecting the housing program they will be placed in during and after referral, but due to the small supply housing program units, individuals may feel inclined to accept the first thing that is offered instead of continuing to wait on the priority list until the next one becomes available.

Housing Programs

In the Ramsey County CoC, housing programs are comprised of all the programs providing services and housing placement for people experiencing homelessness in Ramsey County. These programs are broadly funded by public federal and state dollars, in addition to private philanthropic persons or organizations. Housing programs for people experiencing homelessness have existed in some form since around the 1980s. However, within the last 15 years, specific funding grants provided by HUD and the state of Minnesota have given programs more structure, definitions and requirements. Programs funded by private means do not have to adhere to these requirements and may include programming outside of what is required or expected from publicly funded programs.

The programs that are a part of this analysis are transitional housing, rapid rehousing, permanent supportive housing, and housing support programs. Each of these program types is managed by the CoC in some form and many within the CoC are directly funded through the Department of Housing and Urban Development's Notice of Funding Opportunity (NOFO) annual grant. Of these, the transitional housing programs are considered not permanent housing by HUD and included in the PIT count that occurs annually. However, in the Ramsey County CoC these programs are mostly site-based and do provide housing for individuals for up to 18 or 24 months depending on the program. They also provide services to clients or program participants; thus, they are included in the supportive housing analysis.

The differences between programs includes the length of time a participant is in the program and the types of services available to them. Both transitional housing and rapid rehousing are time-bound programs with participants only being able to be in the program for up to two years. Permanent supportive housing and housing support programs are not time bound, participants are able to stay in the program for as long as they remain qualified or are interested in staying. Housing support and permanent supportive housing programs are also intended for individuals living with disabilities. Having a disability or disabling condition is a requirement of participants for both programs. All housing programs, with the exception of most residential housing support programs, receive referrals or clients to be placed in programs through the coordinated entry system.

Through these programs, people experiencing homelessness receive wrap-around services and care to assist them in attaining housing stability. All programs are structured based off of the housing first model but have diverse specific programming available dependent on the organization operating the program. Thus, the capacity, inflow, and outflow of individuals in these programs is critical to understanding the present needs of the system. Table 5 demonstrates the capacity of each program type by the population being served presently in Ramsey County.

	Transitional Housing (TH)	Rapid Rehousing (RRH)	Permanent Supportive Housing (PSH)	Housing Support (HS)
Youth	101	49	88	25
Adult Singles	0	28	1,330	543
Families	209	369	1,332	200

Table 5 Program Capacity by Household Type in the Heading Home Ramsey Continuum of Care.

As noted in the table above, the capacity is variable both between and within populations and housing types. For youth, there are more TH and PSH units than RRH or HS units. For Adult Singles, there are very few TH or RRH units compared to PSH or HS units. Finally, for families there are more RRH or PSH units than TH or HS units. These differences are key because of the length of time an individual usually spends in each type of program before they exit. As previously mentioned, both TH and RRH programs are timebound, whereas PSH and HS programs are not. Additionally, Housing Support programs have specific disability and income eligibility requirements. This means that TH and RRH units generally become available at a faster rate than PSH or HS units. If a population, such as adult singles, has fewer time-bound units for their population, their time on the Coordinated Entry list increases as they are waiting longer for a unit to become available.

This is a generalization of the relationship between program unit type, population, and their relationship to coordinated entry, and there are many specific circumstances that may not fall into this pattern. However, the generalization of this relationship demonstrates how the populations within the homelessness response system likely experience differences in accessibility of units, wait times, and types of programming available to them. To demonstrate how people from each population are flowing into and out of supportive housing, Tables 6-9 shows the number of entries,

exits, and exits to permanent destinations by program type and population. The information in these tables was taken from HMIS reports and does not include providers that do not use HMIS.

Transitional Housing	Entries	Entries as % of Capacity	Exits	Exits as % of Capacity	Entries/Exits	Exits to Permanent Destinations	% of all Exits
Youth	40	39.6%	13	12.8%	3.07	12	92.3%
Single Adults	0	0	0	0	0	0	0
Families	23	11%	23	11%	1.0	16	69.5%

Table 6 Transitional Housing Entries and Exits by Household Type.

Rapid Rehousing	Entries	Entries as % of Capacity	Exits	Exits as % of Capacity	Entries / Exits	Exits to Permanent Destinations	% of all Exits
Youth	26	53%	27	55%	0.96	19	70.3%
Single Adults	15	53.5%	23	82%	0.65	19	82.6%
Families	56	15.1%	52	14%	1.07	28	53.8%

Table 7 Rapid Rehousing Entries and Exits by Household Type.

Permanent Supportive Housing	Entries	Entries as % of Capacity	Exits	Exits as % of Capacity	Entries / Exits	Exits to Permanent Destinations	% of all Exits
Youth	5	5.6%	7	8%	0.71	7	100%
Single Adults	37	2.8%	57	4.3%	0.64	10	17.5%
Families	31	2.3%	44	3.3%	0.70	26	59%

Table 8 Permanent Supportive Housing Entries and Exits by Household Type.

Housing Support	Entries	Entries as % of Capacity	Exits	Exits as % of Capacity	Entries / Exits	Exits to Permanent Destinations	% of all Exits
Youth	9	36%	9	36%	1.0	5	55.5%

Single Adults	54	9.9%	48	8.8%	1.13	19	39.6%
Families	40	20%	19	9.5%	2.10	9	47.4%

Table 9 Housing Support Entries and Exits by Household Type.

From the entry and exit patterns, it is clear that the time-bound programs for single adults and families are able to enroll and exit more of their capacity over a calendar year than the programs that are not time bound. The exits to permanent destinations from these programs are also generally higher than the exits from PSH or HS programs. These tables also demonstrate how inflow and outflow varies by population group.

For both entries and exits, the youth population had higher percentages of entries and exits compared to the program capacity, meaning that there was likely more churn or turnover in youth programs. This could be due to the needs of the youth population, or the work of the youth coordinated entry team to ensure providers are enrolling the youth who are referred as quickly as possible. For families, the percentage of capacity being filled, or exiting, was much lower in comparison to youth and singles. This may also be due to the needs of families experiencing homelessness and the demand for those programs. Overall, the relationship between those exiting or entering may be measured by the ratio of entries to exits. The program type that had an entry/exit ratio below 1.0 for all population groups was permanent supportive housing. This may be caused from a variety of factors, but points to PSH programs as being a point of interest in the inflow outflow as fewer units are being filled that the number that should be opening over the year.

Program Type	Length of Time (Days)	Length of Time (Months)	Length of Time (Years)
Transitional Housing	449	15	1.25
Rapid Rehousing	388	13	1.1

Permanent Supportive Housing	1,435	48	4
Housing Support	1,137	38	3.2

The change in flow with this program type compared to RRH or TH may also be the nature of the program and it not being time bound, meaning that units do not become available at a semi-regular cadence. In terms of length of time in programs, Table 10 demonstrates the average length of time program participants were in their programs before exiting across program types.

Table 10 Average Length of Time in Housing Programs before exit

From the table, it is clear that people within the non-time-bound programs spend up to three additional years in their programs on average compared to those in transitional housing or rapid rehousing programs. The variance in programs type available to each population may also explain why certain groups spend longer waiting on the priority list for housing referrals. For instance, the majority of housing available to single adults through coordinated entry is the programs that are not time-bound and though there are many units, if the average program participants spend three to four years in the program, it may take that long for there to be an opening in the program. This leads to a lack of churn or flow in the system and disparities as different populations are able to move through the system with less of a wait time in comparison to others. Less time waiting affects the amount of time a person is experiencing housing instability and may decrease the number and severity of traumatic experiences they go through.

Returns to Homelessness

The variance in programs, length of time in programs, and difficulty maintaining stable housing also the effect of returns to homelessness within the Heading Home Ramsey Continuum of Care. From 2021 to 2023, the Ramsey County CoC recorded 217 individuals who exited housing programs and then reappeared in the homelessness response system within two years. Table 11 shows where all exiting individuals went in 2023. These exit destinations are defined in the [2024 HUD Data Standards Manual, Appendix A](#).

Exit Destination	Number of Persons	Percent
Don't Know or Not Collected	85	6.4%
Deceased	34	2.6%
Homelessness	114	8.6%
Institutional	44	3.3%
Other	22	1.7%
Permanent	925	69.6%
Temporary	105	7.9%

Table 10 Exit Destination for those exiting housing programs in 2023.

Table 12 shows which program types of people returning were exited from within the two-year period.

Exited From	Total Exited	Total Returned	Returns within 365 Days	Percentage of Program Exits	Percentage of All Returns
TH	128	45	40	35.2%	20.7%
RRH	446	38	35	8.5%	17.5%
PSH	731	134	98	18.3%	61.8%

Table 11 Relationship between program type and returns to homelessness.

From the exit destination data, it is clear that the majority of people exited are exited from programs to permanent housing situations. This could include renting their own apartment, finding subsidized housing, or staying with friends or families in a permanent manner. The exit destination also demonstrates how many individuals are

exiting back into homelessness, unstable housing, temporary housing, or into institutional settings such as inpatient medical care or incarceration. Altogether around 20% of all those exiting, are entering into those settings and may experience homelessness again due to the fragility of their housing.

An examination of the programs those returning exited from demonstrates that the majority of those returning were enrolled in Permanent Supportive Housing programs (PSH). As previously mentioned, these programs have an average length of time around three years, including average wait time on the priority list, this means that a person in the Ramsey County CoC was likely a part of the homelessness response system for around five years before exiting their PSH program. Then around 18% of those individuals were unable to maintain stable housing and re-appeared in the homelessness response system. The cause for these returns are extremely difficult to distinguish due to all the structural and personal factors that influence housing instability. The loss of stable housing may be due to another sudden job change or it changes in physical or mental ability, or a combination of those things. The reasoning for PSH programs having a higher rate compared to others may also be due to a myriad of factors that are all personal, structural, or programmatic, and is cause for further investigation. Additionally, TH programs have the highest amount of their exits returning with just over one out of three persons exited from programs returning to the system is an additional cause for concern.

Examining the returns from the perspective of populations provides another layer to this issue, as shown in Table 13. Of all population groups, families had the highest share of people returning across all those who returned.

Household Type	Total Number Exited	Total Returns	Returns between 0 and 365 days	Percentage of Exits	Percentage of Total Returns
Families	978	120	92	12.2%	27.6%
Single Adults	270	70	61	25.9%	16.1%
Youth	58	20	15	34.4%	4.6%

Table 12 Relationship between population groups and returns to homelessness.

Within population groups, youth had the highest number of people returning from those exiting youth programs. These differences again may be the result of a variety of causes but demonstrate how different groups experience the homelessness response system and how the system may need to respond different to ensure people exiting supportive housing programs are able to maintain housing stability.

Special Populations

Within the Heading Home Ramsey Continuum of Care there are a variety of services available for special populations that are treated as their own separate response systems. These includes services for veterans, those experiencing domestic violence, and victims or survivors of human trafficking. These services include many of the same steps as the other parts of the homelessness response system but are designed with their specific populations in mind. They are also subject do different regulations and protections to ensure the safety and confidentiality of those utilizing their services.

Victim Service Providers (VSPs)

In the Ramsey County CoC there are at least four organizations providing services to those experience domestic violence or victims of human trafficking, otherwise known as Victim Service Providers (VSPs). Due to the sensitive nature of their client information, these organizations do not participate in the Homeless Management Information System (HMIS). Instead, some have similar or comparable database systems in place to report on the experiences of clients within their system. Table 14 below demonstrates the inflow and outflow of clients from some of these organizations.

	Units	Program Enrollment	Program Exits	Exits to Permanent Housing	Average Length of Time in Program
VSP Sample	92	106	85	59	17 Months

Table 13 Enrollments and Exits in Victim Service Provider Sample.

The diversity of data systems and need for VSPs to have distinct systems to safely manage client information means that the information shown here cannot speak to larger trends in this population across the Heading Home Ramsey Continuum of Care. However, the organizations providing these services and those working in emergency shelter have described the strong need for more programming and services for this population. The organizations providing these services were recruited for qualitative in-depth interviews and the perspectives shared align with this sentiment. Additional planning with VSP providers is needed to gain a more complete perspective on the need for these services within the Heading Homey Ramsey Continuum of Care.

Veterans

The services and programs available to veterans experiencing homelessness within the State of Minnesota are managed by the Minnesota Department of Veteran Affairs (MDVA). Through the MDVA, the Minnesota Assistance Council for Veterans (MACV) coordinates and operates the programs for veterans experiencing homelessness. Similar to VSPs, the persons experiencing homelessness within this population often utilize a different set of providers and services, essentially creating a different homelessness response system. All veteran experiencing homelessness are encouraged to complete an assessment similar to the coordinated entry assessment that places them on the Homeless Veteran Registry (HVR). After being placed on this registry, the individual and their family work closely with MACV to access the services or housing programs that is the best fit for their needs.

The goal of the MDVA is to reach functional zero in all of Minnesota's Continuums of Care for veteran homelessness. The MDVA is also committed to ending chronic or long-term homelessness among veterans and to ensure veterans have access to permanent housing within 90 days of completing the HVR. The Homeless Veteran Registry Dashboard on the Minnesota Department of Veteran Affairs provides the most accurate and up-to date information on Veteran Homelessness in Ramsey County and is updated regularly. Presently, the challenges to functional zero in Ramsey County include the number of veterans experiencing unsheltered homelessness creating barriers to maintaining engagement and the decrease in housing placements as demand has increased. MACV is working to solve these challenges through the creation of new permanent housing and expanding coordination with other parts of the homelessness response system.

Racial Disparities

A major guiding question of this assessment was determining the racial demographics and disparities of those experiencing homelessness within the Ramsey County CoC. The analysis of racial disparities was conducted in an exploratory manner, using both qualitative and quantitative data to determine disparities. The quantitative analysis included descriptive and inferential statistics to assess the relationship between racial identity and experiences of homelessness. The first analysis included a comparison of the population of those engaged in emergency services or experiencing literal homelessness with the population and racial demographics of all those in Ramsey County. This comparison can be found in Figure 11. In the chart, it is clear those who identify as American Indian, Alaskan Native, or Indigenous, Black, African American, or African, Multiracial, and Native Hawaiian or Pacific Islander are over-represented in the population of people experiencing homelessness.

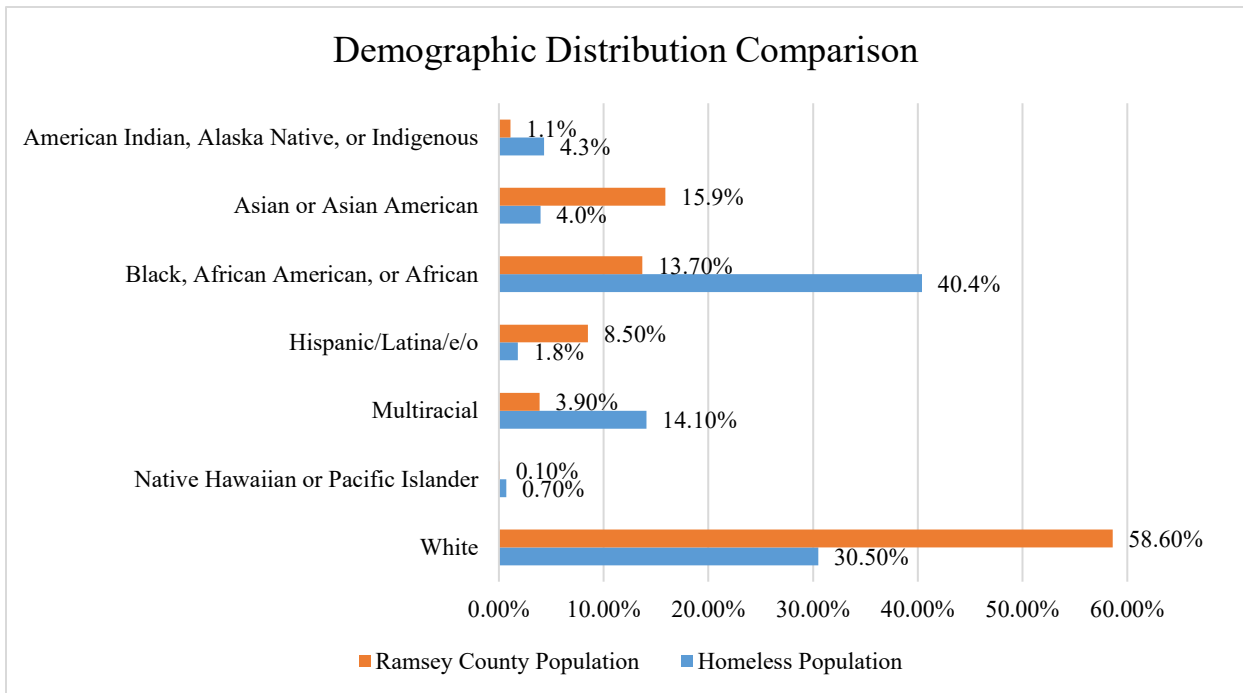


Figure 11 Comparison of the distribution of Racial Identities between Populations

To align with the racial groups in the American Community Survey, some of the groups from HMIS (such as the two multiracial categories) were added together. This representation when presented as a ratio compared to the White population is shown in Figure 12. The ratios show that these groups are all at least two times more represented in the homeless population than in the general Ramsey County population, with Native

Hawaiians or Pacific Islanders and American Indians having the highest over-representation. A significant note is that although the ratio for Native Hawaiian or Pacific Islanders is the largest, this population comprises less than one percent of either population.

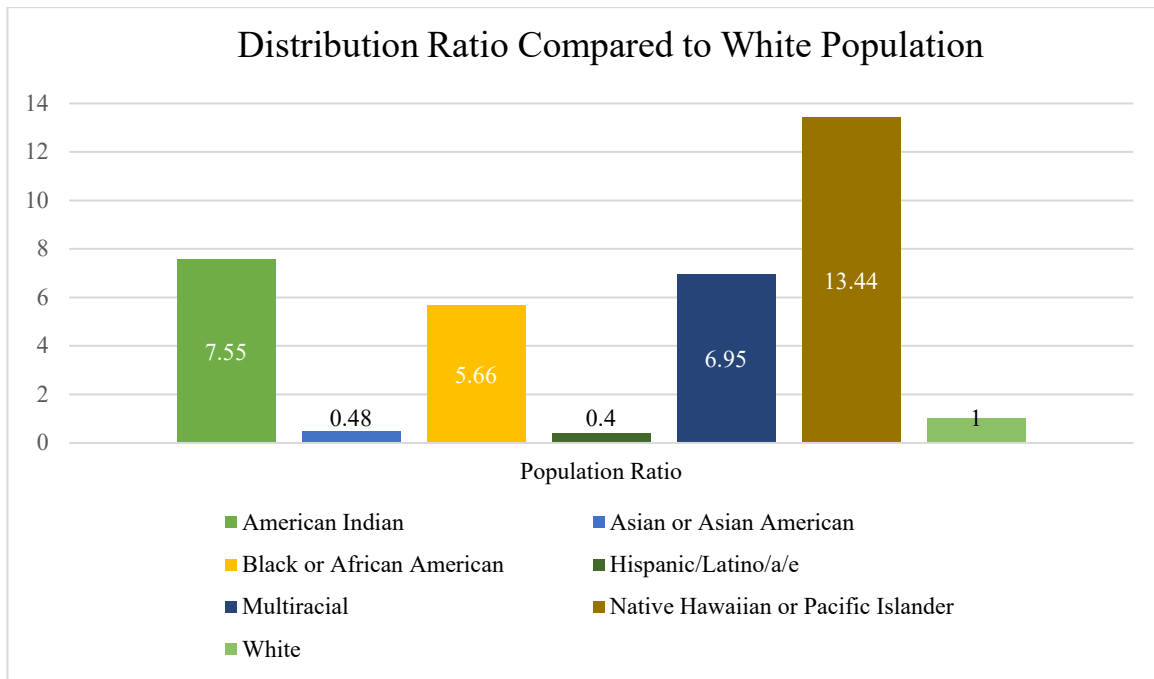


Figure 12 Ratio of Population Distribution Compared to White Population.

This difference in distribution of racial identities between the general population and population of people experiencing homelessness was further investigated using inferential methods. These methods use either statistical tests or models to determine the strength of the relationship between two factors or variables. For the comparison of distribution, a chi-square test of independence was run to determine if the groups are statistically significantly different. This test is often the initial test run to determine if two variables are related to each other, or not independent. If the test is significant, it demonstrates that the variables are related that there is a relationship that could be further investigated. The test between the distributions between these groups was significant, with a chi-square value of 92.6 and a p-value <0.0001. The results demonstrate that the racial representation within population of those experiencing homelessness is statistically significantly different than the racial representation within the general population in Ramsey County. The results of this test cannot describe what the relationship between racial identity and experiencing homelessness is but does

provide evidence that a significant relationship exists and can or should be further investigated in Ramsey County.

To determine the racial equity of the system overall, an analysis was conducted of program entries, exits, exits to permanent housing and returns to homelessness by racial group and program type. Entries and exits for each program type are illustrated in Tables 15-17. The racial demographics used in these tables reflect those used in the Homeless Management Information System (HMIS). For these tables, Housing Support and Permanent Supportive Housing programs are combined for data quality.

Transitional Housing	Entries (N=63)	Exits (N=45)	Exits to Permanent Housing (N=28)
American Indian, Alaska Native, or Indigenous	0	0	0
Asian or Asian American	3	3	2
Black, African American, or African	35	23	16
Hispanic/Latino	0	0	0
Middle Eastern or Northern African	0	0	0
Multiracial (where none are Hispanic/Latino)	6	6	1
Multiracial (where one is Hispanic/Latino)	3	7	5
Native Hawaiian or Pacific Islander	0	0	0
White	14	6	4
Client prefers not to answer or Missing	1	0	0

Table 14 Transitional Housing Entries and Exits by Racial Group.

Rapid Rehousing	Entries (N=136)	Exits (N=140)	Exits to Permanent Housing (N=107)
American Indian, Alaska Native, or Indigenous	4	5	4
Asian or Asian American	7	4	3
Black, African American, or African	74	69	54
Hispanic/Latino	3	1	1
Middle Eastern or Northern African	0	0	0
Multiracial (where none are Hispanic/Latino)	8	12	6
Multiracial (where one is Hispanic/Latino)	12	19	11
Native Hawaiian or Pacific Islander	1	1	1
White	26	28	26
Client prefers not to answer or Missing	1	1	1

Table 15 Rapid Rehousing Entries and Exits by Racial Group.

Permanent Supportive Housing or Housing Support	Entries (N=212)	Exits (N=232)	Exits to Permanent Housing (N=96)
American Indian, Alaska Native, or Indigenous	10	12	2
Asian or Asian American	11	5	5
Black, African American, or African	99	115	59

Hispanic/Latino	3	0	0
Middle Eastern or Northern African	1	0	0
Multiracial (where none are Hispanic/Latino)	17	22	8
Multiracial (where one is Hispanic/Latino)	6	18	7
Native Hawaiian or Pacific Islander	0	1	0
White	63	59	17
Client prefers not to answer or Missing	2	0	0

Table 16 PSH and HS Entries and Exits by Racial Group.

To continue determining the relationship between racial identity and homeless, an addition inferential test of likelihood was conducted. In previous assessments, the difference in population distribution was described as the likelihood of experiencing homelessness, an extreme inaccuracy. The odds or likelihood of experiencing homelessness based solely on racial group is exceedingly difficult to discern due to the multitude of factors that influence housing instability and the ethics of determining comparison groups. However, the likelihood of returning to homelessness based on racial group is presently more accessible and can be determined using another inferential model: the logistic regression.

A logistic regression is a form of statistical modeling where the outcome is binary (either yes/no or 0/1). The outcome of a logistic regression is an odds ratio where the odds are greater than 1 that means one group is more likely to experience the outcome than another, and odds less than 1 meaning a group is less likely to experience the outcome. For a logistic regression model for returns to homelessness, the outcome of interest is reappearing in the system after exit and can be calculated from information in the Returns to Homelessness Report published by the Institute for Community Alliances (ICA). Using data from 2023, a logistic regression model was created using R, with returns being the outcome and the variable of interest being self-reported racial identity. The model was created and ran with the data available, but the variables were not found to be statistically significant. Meaning none of the odds ratios for returning to homelessness based on racial identity alone can be used to describe this relationship. This essentially means that the likelihood does differ, but not in a way that can or should be generalized to the entire population or indicates a true predictability of returns to homelessness. The last analysis that was completed to explore this relationship was comparing the population of those entering emergency shelter with those who were placed on the coordinated entry priority list by racial category. This comparison

demonstrates potential inequities in those who access services compared to those who move further along in the homelessness response system, the comparison can be seen in Figure 13.

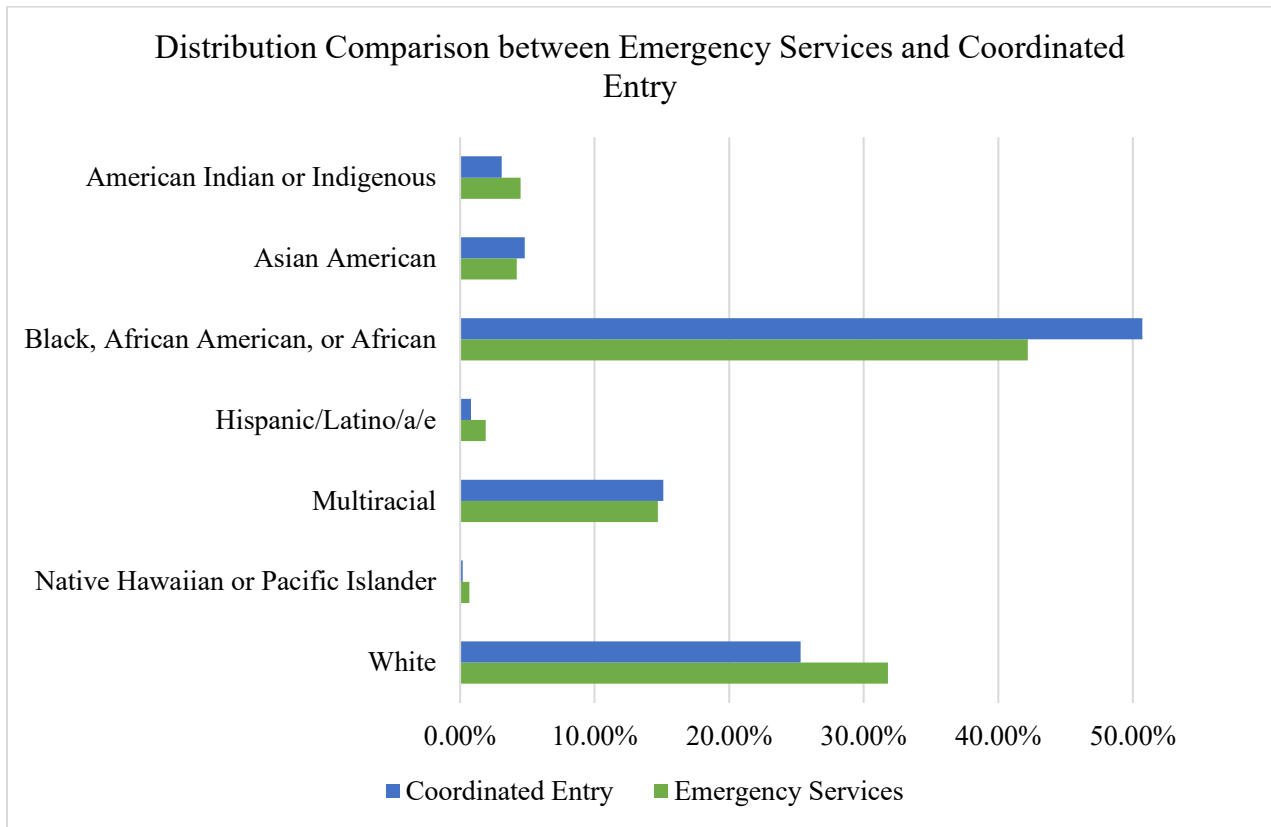


Figure 13 Population Distribution Comparison between Emergency Services and Coordinated Entry.

This figure demonstrates that the distribution of racial groups within emergency services and coordinated entry are fairly similar. Thus, there is not a large discrepancy between those who are able to access emergency services and those who complete a coordinated entry assessment to move onto the priority list by racial identity alone.

System Performance Measures

In addition to the measures of needs and performance described above, the needs assessment for the Ramsey County CoC also must take into consideration the system performance measures established by HUD. There are seven measures the Department for Housing and Urban Development takes into consideration when determining how well a CoC or homelessness response system is performing. These are: Length of Time Persons Remain Homeless (Measure 1), Returns to Homelessness (Measure 2), Number of Homeless Persons (Measure 3), Employment and Income Growth for Homeless Persons (Measure 4), Number of First Time Homeless (Measure 5), Data Quality (Measure 6), Successful Placement in or Retention of Permanent Housing (Measure 7). System Performance Measure 3 is directly related to the Point-in-Time Count and has been covered in the Emergency Services: Trends Section.

The remaining measures will be discussed below. All of the data used in the system performance measures reported to HUD is sourced either from HMIS data reports or from PIT and HIC collected each January by the CoC. The data is analyzed by both CoC Staff and the Institute for Community Alliances prior to being submitted to HUD through the Homeless Data Exchange (HDX) website. The system performance measures are one of the main factors affecting the CoC's collaborative application score in the annual Notice of Funding Opportunity (NOFO) competition for HUD CoC funding.

Measure 1

The first measure, length of time persons remain homeless is measuring the length of time people spend in emergency shelter, transitional housing, or permanent housing (including PSH or RRH). For the emergency shelter measure, it is the average and median bed nights each person spent. For the measure with permanent housing, it includes the number of nights between their program enrollment and housing move-in date. In Figure 14, a comparison of the median and average length of time is compared between 2022 and 2023.

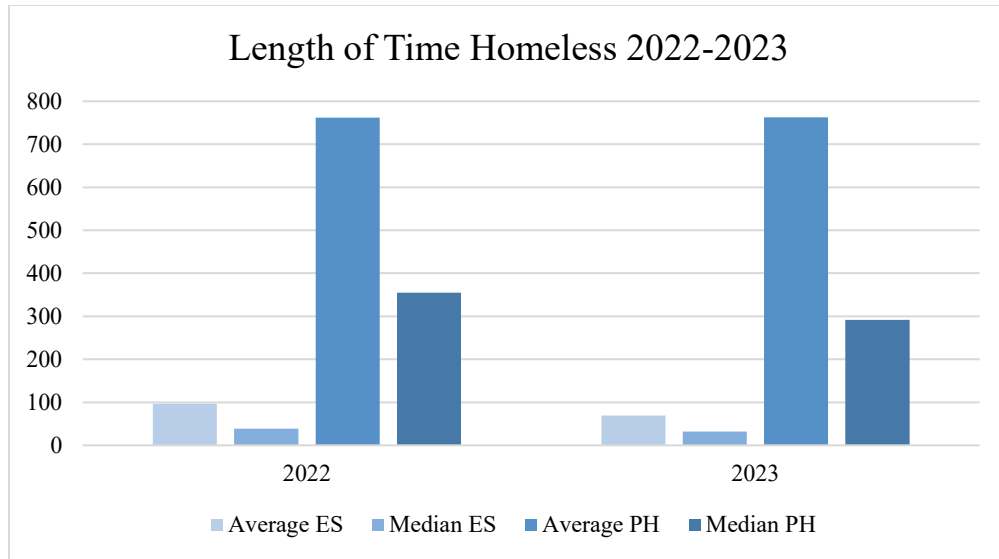


Figure 14 Length of Time Comparison

Between 2022 and 2023, the length of time homeless decreased for both measures, though by slightly less for those in PH. Length of time homeless for those in emergency services decreased by around 26% and by around 0.25% for those in permanent housing. For the NOFO competition, HUD awards points to any CoC that shows a decrease of at least 5%. Since the Ramsey County CoC did have at least a 5% decrease, the Housing Stability Department expects to receive all the points available on the question in the 2024 Collaborative Application.

Measure 2

The second measure, returns to homelessness, is comprised of all of those who exited emergency shelter (ES), outreach services (OS), transitional housing (TH), rapid rehousing (RRH), or permanent supportive housing (PSH) to a permanent destination and then were seen again in the homelessness response system within a two-year period. The return to the system could be re-entering shelter services or getting connected again with an outreach worker. Figure 15 demonstrates the comparison between returns to homelessness between 2022 and 2023.

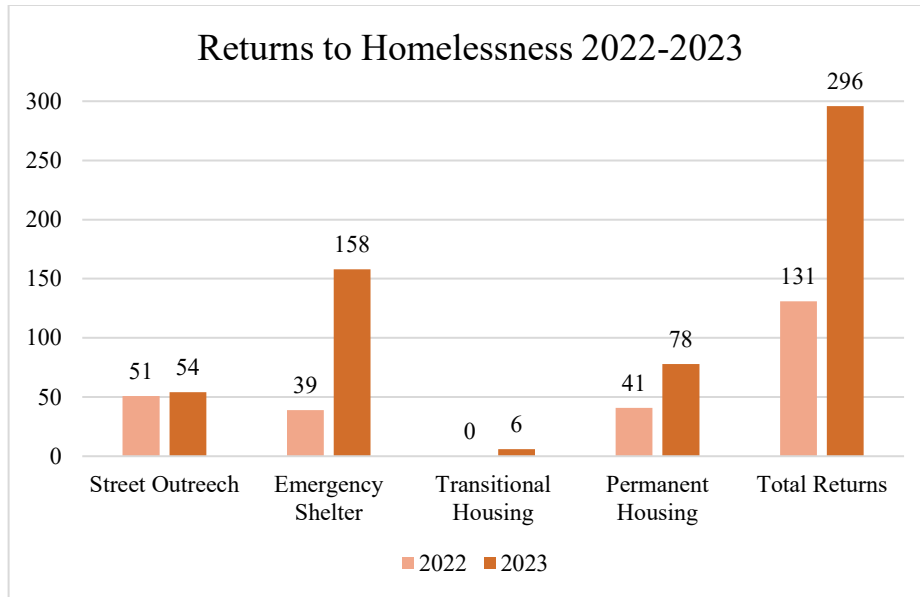


Figure 15 Year to Year Returns to Homelessness Comparison

Overall, there was around a 125% increase in returns to homelessness between 2022 and 2023. There are likely a multitude of factors contributing to this trend, including the end of eviction moratoriums or other housing or wage protections granted during the COVID-19 Pandemic. The largest increases in returns to homeless were from those exiting from emergency shelter (305%) or permanent housing (90%) this measure combines those exiting from both RRH and PSH programs. HUD awards points to CoC's that decrease returns to homelessness by at least one percentage point within both a six-month and twelve-month period. Due to the rapid increase in returns to homelessness, the Ramsey County CoC does not expect to receive these points in the 2024 Collaborative Application.

Measure 3

The third measure takes into consideration the number of persons within emergency shelter and transitional housing programs over a calendar year to anticipate decreases. Figure 16 depicts the number of persons accessing shelter or transitional housing between 2022 and 2023.

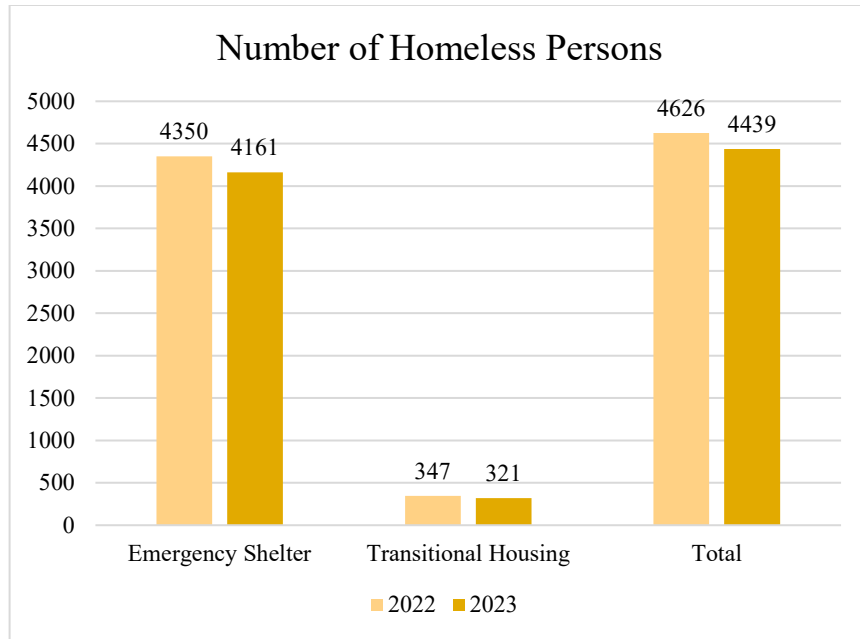


Figure 16 Number of Persons experiencing homelessness comparison.

Between the two years there were decreases across the programs, indicating there may be less people overall experiencing homelessness. However, this measure does not take into consideration those who are experiencing unsheltered homelessness. In the NOFO, HUD uses information from the PIT and HIC count to determine the points awarded to CoC's. The points are awarded if CoC's decrease the number of families and individuals who are sheltered or unsheltered by at least 5%. The decrease in Figure 16 is around 4% for emergency shelter and 7% for transitional housing. However, there were overall increases in the number of individuals and families experiencing sheltered and unsheltered homelessness in the HIC comparison between 2023 to 2024 so the Ramsey County CoC is not expecting to be awarded points on this measure in the 2024 Collaborative Application.

Measure 4

The fourth measure is focused on changes income among those who either stayed or exited from programs between years. The income measured is both increases in earned, unearned, and total income. The measure differentiates between stayers and leavers to determine the effect of programs on increases in income. Figure 17 depicts the trends in income among stayers and leavers between 2022 and 2023.

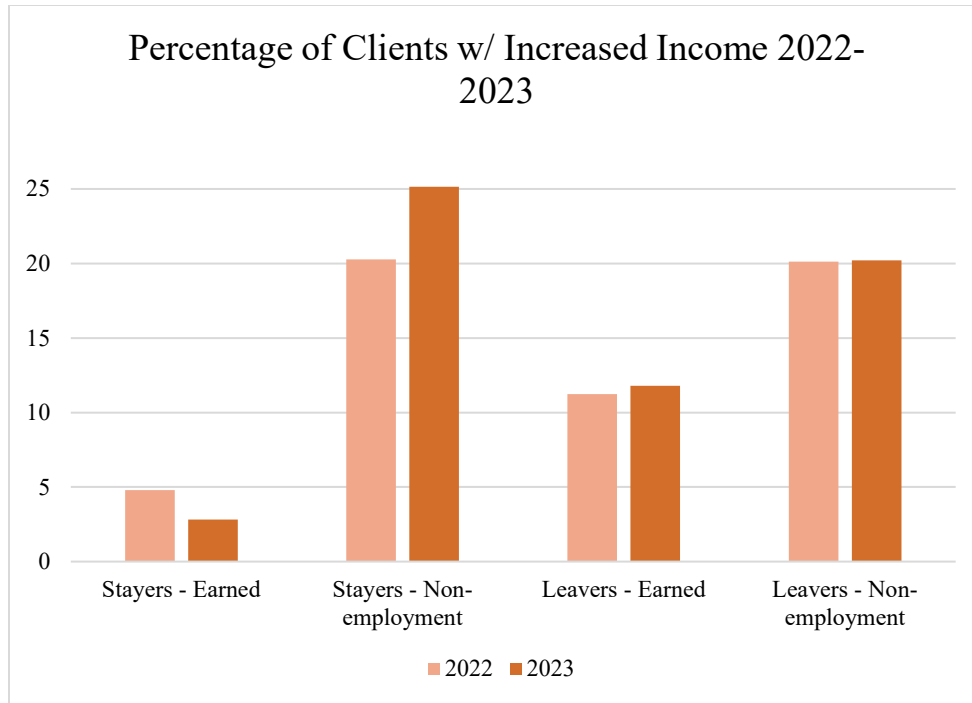


Figure 17 Comparison of Income among those in Housing Programs.

Overall, there is a higher percentage of clients and program participants who are able to increase their non-employment income when compared to increases in earned income. This may be due to a greater number of supports received by clients in gaining assistance they are qualified for but were unable to access on their own. The CoC is awarded points based on how income changes among program stayers over program leavers. The percentage of clients who gained earned income decreased, whereas the percentage of clients who gained non-employment income increased. HUD's standard is that earned and unearned income increases by any percentage point among those who stayed in the program for a full calendar year. Since only one of these categories increased in Ramsey County, the CoC can expect to receive points only in this area in the 2024 Collaborative Application.

Measure 5

The fifth measure pertains to those who experienced homelessness for the first time in the CoC. It is determined by the number of unique persons who are enrolled or enter emergency shelter, transitional housing, or permanent housing that have no prior enrollments in HMIS for up to two years before their enrollment. Essentially, the timing ensures that these are individuals who have not been already served by housing

providers in the CoC and are new to the homelessness response system. Figure 18 shows the comparison of those who were first time homeless between 2022 and 2023.

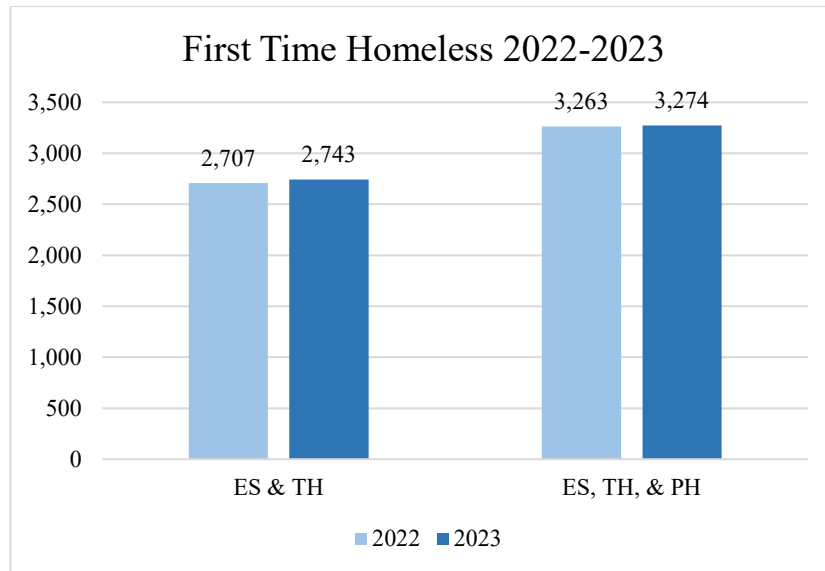


Figure 18 Number of First Time Homeless 2022-2023

The measure is split into two, one that only includes those in emergency services, and other which includes those in permanent housing. In both, there were slight increases year to year. Among only those in emergency services, the increase was around 1.3% and when those in PH programs are included, the increase is around 0.3%. The standard to be awarded points by HUD is an overall decrease or reduction in those who were first-time homeless. Since the numbers of first time homeless are increasing instead of decreasing, the Ramsey County CoC can expect to not be awarded these points in the 2024 Collaborative Application.

Measure 6

The sixth system performance measure pertains to Data Quality. The data quality within HMIS is monitored by the HMIS vendor for the state of Minnesota, the Institute for Community Alliances, on behalf of the Ramsey County CoC. This measure is reported by the number of Missing, Don't Know, or Refused elements in exits from CoC programs. Overall, the number of data errors has decreased from 2022 to 2023 by about 1.5%. The CoC is awarded points by HUD for submitting this report in a timely manner. The Ramsey County CoC was able to submit the data quality report in the time requested and can anticipate receiving the points awarded in this area in the 2024 Collaborative Application.

Measure 7

The seventh measure pertains to the number of individuals who are connected with and retain permanent housing from other parts of the system. It specifically measures the change in street outreach outcomes, and the exits to permanent housing among those in emergency shelter, transitional housing, rapid rehousing or permanent supportive housing programs. Figure 19 shows the change in the percent of successful housing placements from 2022-2023.

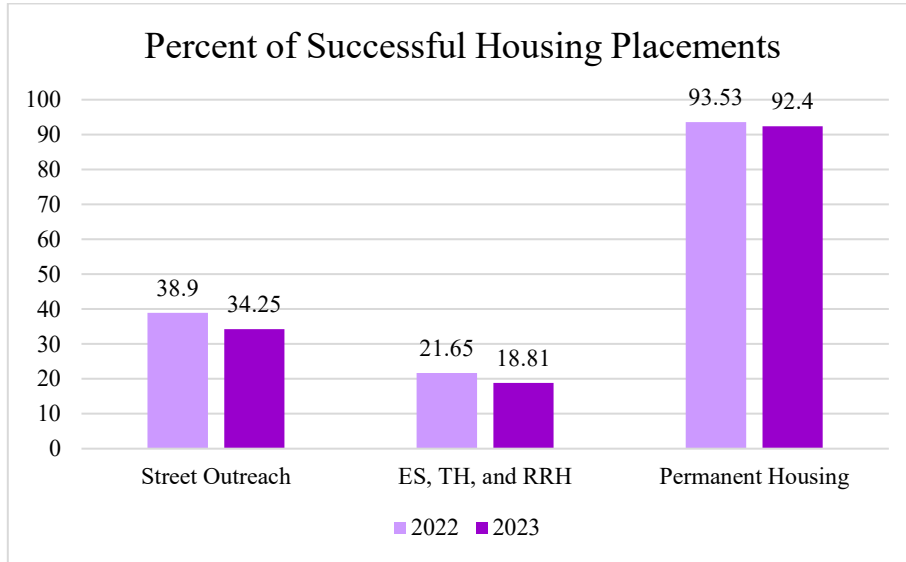


Figure 19 Description of changes in successful housing placements from 2022-2023.

Overall, it is clear the permanent housing has the highest rate of successful housing placements with over 90% of all exits going to permanent destinations both years. However, HUD awards points if the percentage of successful housing placements increases by at least 1% for permanent housing exits and 2% for emergency services, transitional housing or rapid rehousing. Since the percentage of successful housing placements decreased across all groups in 2023, the CoC can anticipate not being awarded those points in the 2024 Collaborative Application.

Provider Survey Results

In addition to an analysis using Point-in-Time Data, Homeless Management Information System Reports and the Housing Inventory Count, this assessment sought to collect additional quantitative and qualitative data directly from providers or client-facing staff. The results of the survey are presented below. There were 25 respondents, of these, 22 were client-facing staff and able to complete the included questions.

Survey Respondents

We have collected a total of 25 responses, of these 22 are valid responses. The survey was open at the end of July and remained open for three months. Among the 22 valid responses, 14 respondents (64%) reported working with their current organization for more than two years, and five respondents (23%) indicated tenure of over five years. The representation of respondents is illustrated in Figure 20.

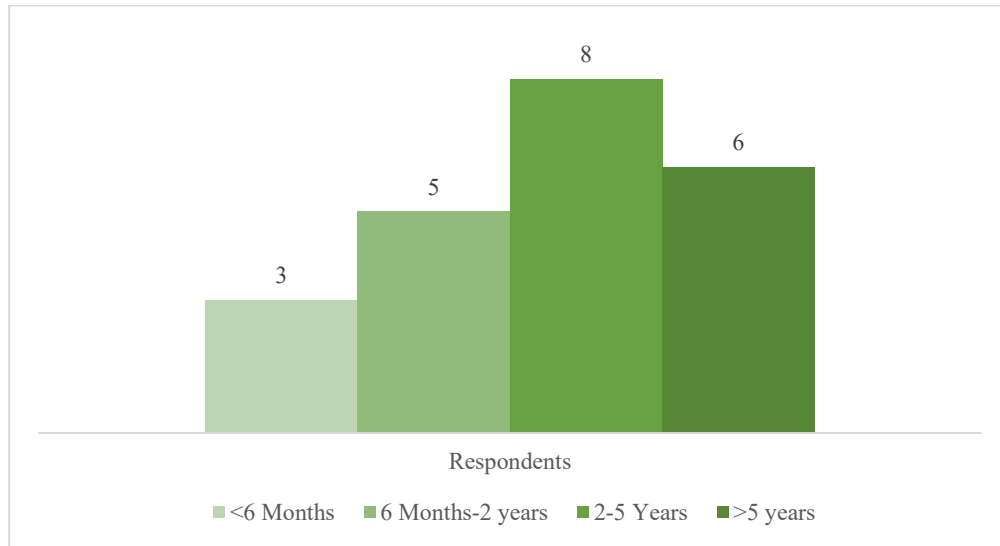


Figure 20 Work experience in housing of respondents.

This suggests that the survey is more likely to reflect the respondents' in-depth knowledge of systemic challenges and their experience in navigating high-stress environments. However, the results may be limited by the underrepresentation of newer staff, who are often more susceptible to burnout and contribute to the high turnover rates observed in this field. Consequently, this survey may not fully capture the challenges faced by less experienced professionals. To gauge knowledge, need for resources, connections, and awareness of disparities, a level of agreement scale was

created to gauge agreement with 11 sentiments. Figure 21 describes the distribution in responses.

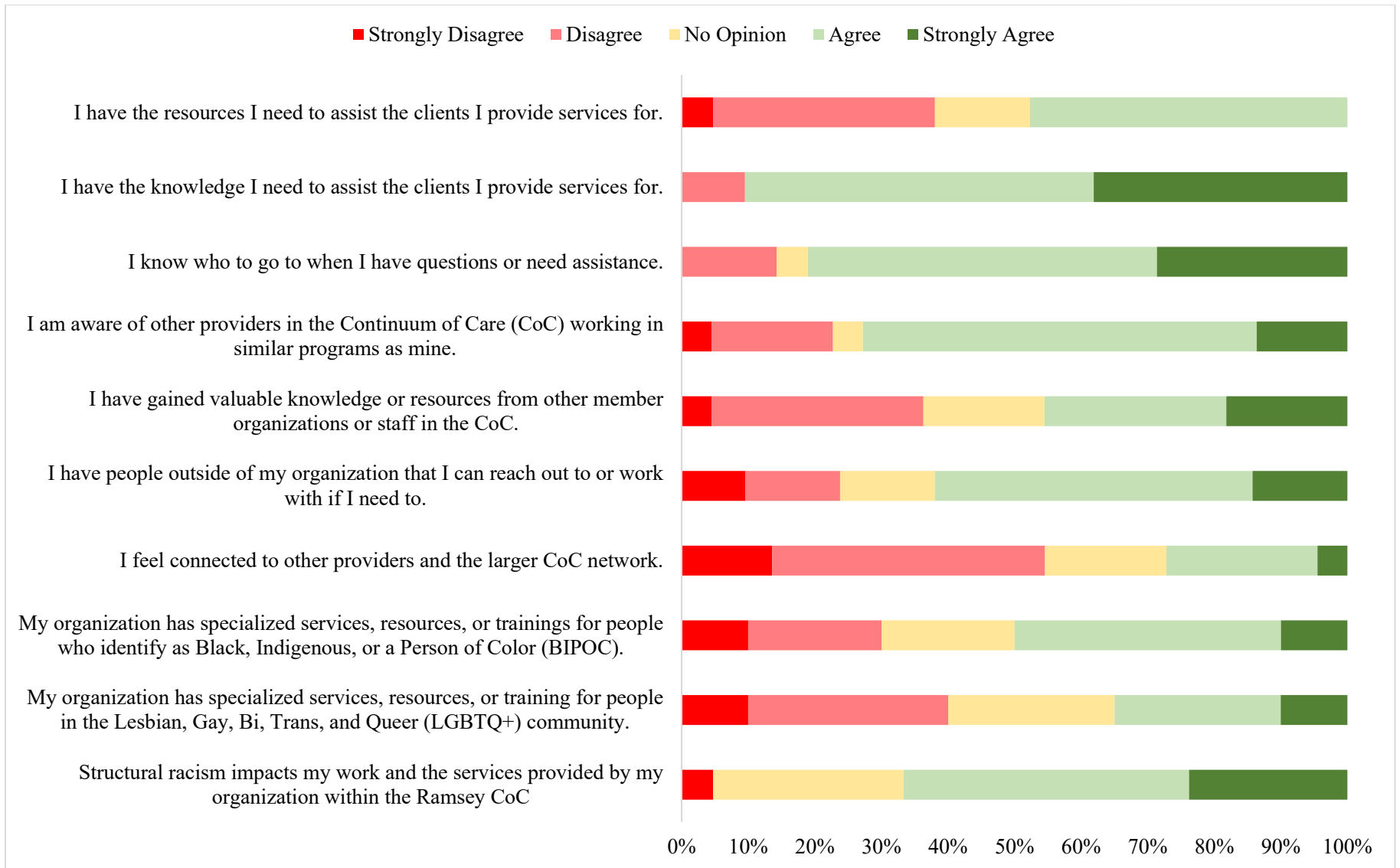


Figure 21 Level of agreement with statements from respondents.

These sentiments show a few interesting nuances in the perspectives of providers. For the most part, people feel they have the knowledge to assist clients, but not necessarily the resources. They also feel that they know who to go to when they have questions and are aware of other providers, yet do not feel connected to other providers or the larger CoC network. There were more mixed responses between the value of knowledge or resources and specialized services, and a majority of providers agreed that structural racism does affect their work. Altogether, these responses show how two or more things may be true at the same time and the gaps in current services or resources being provided. When asked more about services provided, requested, and in need of, providers selected their top five from a list of options. The resources that at least one third of respondents selected are represented in Figure 22.

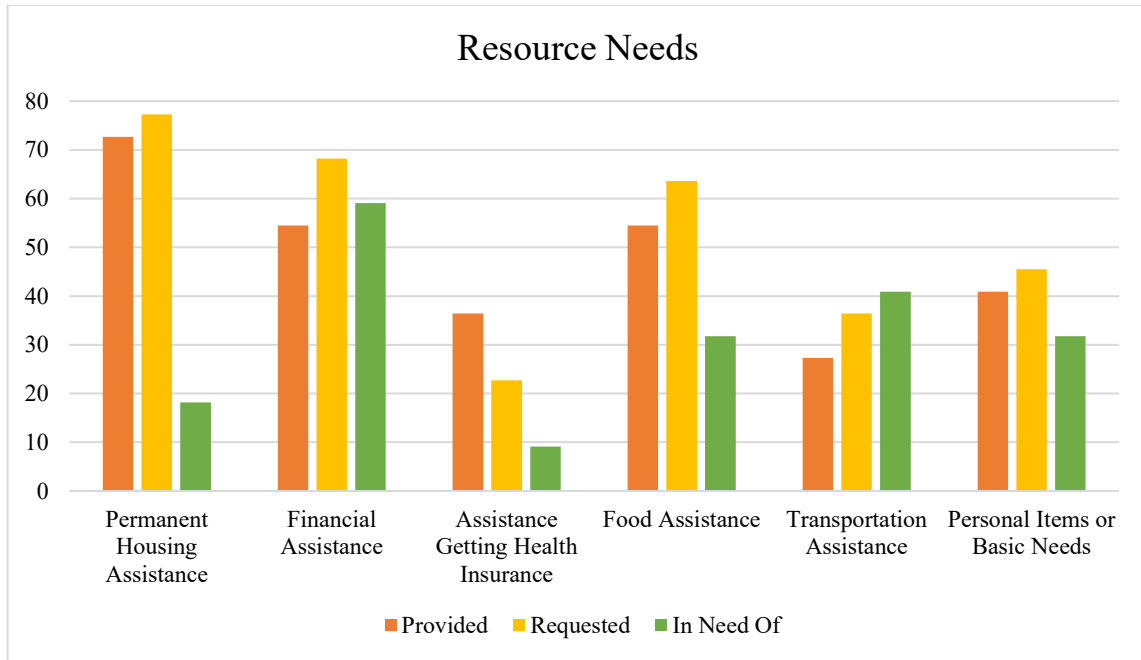


Figure 22 Comparison of resources requested, provided and needed as described by survey respondents.

The resources that providers listed as most requested include housing assistance, such as rental assistance, financial assistance and food assistance. The resource that was most requested but still in need by providers by far was financial assistance followed by transportation assistance. This figure demonstrates that most of the services that are requested can be provided, as the only resource that was listed more in need than provided was transportation assistance. This may also assist providers in knowing that there are resources available to their clients who are in need and there are likely similar service providers in Ramsey County filling those needs for clients. When asked what the largest barrier is to providing services to clients, respondents overwhelmingly answered

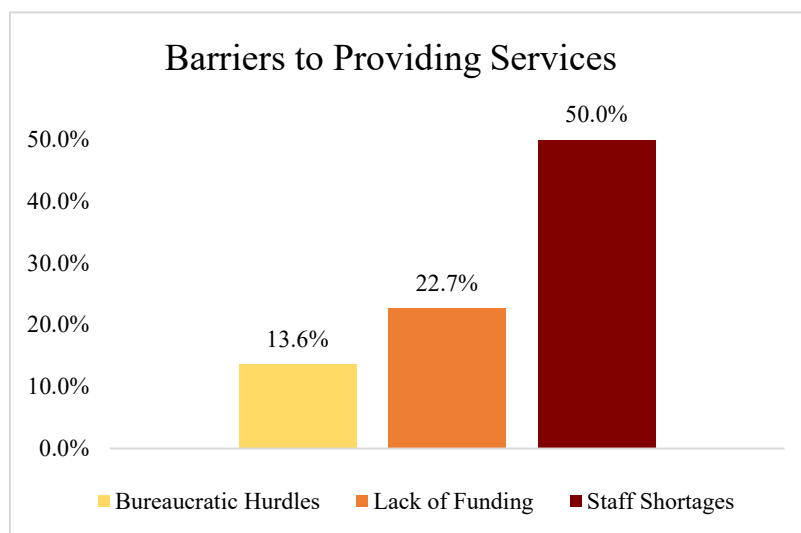


Figure 23 Barriers described by respondents to providing services.

with staffing shortages as depicted in Figure 23.

Survey Qualitative Questions and Findings

In response to the question, “What is your/your organization's biggest barrier to providing services?”, 50% of respondents (11) identified staffing shortages as their primary challenge, while 23% cited lack of funding. In the subsequent open-ended question, respondents elaborated on these challenges:

- **Staff Recruitment and Retention:** Maintaining existing staff and recruiting new team members has become particularly difficult, especially in the post-pandemic context.

- **Interplay of Funding and Staffing:** Respondents highlighted how funding struggles exacerbate staffing issues. Some expressed a desire for funding to provide greater support for administrative needs or staff salaries.
- **Sustainability Concerns:** Respondents emphasized that current funding levels and staffing capacity are insufficient to maintain consistent quality and quantity of services for clients.
- **Interactions with Government Agencies:** Respondents frequently expressed frustration when interacting with state and county government agencies, because of the slow response time or difficulty determining the next steps in a process.

Qualitative Findings

Guiding Questions

- What are the experiences and perceptions of programs and services from direct service providers?

The experiences and perceptions of direct service providers are presented in all nine themes. The first seven describe the ways the work creates strain for the staff involved and the challenges that are specific to this work. Themes eight and nine describe the experiences that are uplifting to staff and rejuvenate them for the work ahead.

- What are the experiences and perceptions of programs and services from clients?

Due to the low number of clients recruited for in-depth interviews, a theme could not be generated to answer this question.

- How has prevention and rental assistance or shelter access been experienced by clients?

Due to the low number of clients recruited for in-depth interviews, a theme could not be generated to answer this question.

- What are the differences in perceptions of the Ramsey County CoC between prevention and housing program providers?

The differences in perceptions between prevention and housing program providers speak to how those experiencing homelessness or housing instability each have a different pathway from instability to stability. Those in the prevention space had much less interaction or understanding of the CoC than those in the supportive housing space. Another key difference was the level of influence over the CoC. The housing program providers spoke more about their aspirations of the CoC such as specific ways to improve communication or programming compared to the prevention providers. They were also generally more empowered in their assessments and suggestions demonstrating a desire for improvement and a hope or belief that these processes can be improved.

- How do providers build partnerships and feel supported?

Providers build partnerships by reaching out and connecting with providers who are either working with the same population group or operating the same program type within the CoC. They feel supported when they collaborate with those connections on program operations, program design, or response to emerging problems/needs in the community.

- How do providers remain agency-centric and what are the impacts?

Providers remain agency-centric when the resources offered within the organization are more easily accessible than the resources available outside of the organization. The impacts of this includes decreasing connectivity to the larger CoC and being unaware of additional resources that may be available to clients.

Introduction

The analysis of in-depth interviews with program leadership and participant-facing staff revealed nine themes that capture their experiences and perspectives within the homelessness response system. These themes highlight how daily engagement in this work impacts individuals, the complexities of their roles, and the sources of joy and resilience that sustain them. The identified themes include: *Awareness of the Work, Staff Needs and Retention, The Weight of the Work, Standards and Accountability, Specificity and Nuance, Intersections and Effects of Discrimination, Cultivating and Craving Connection, Rejuvenation Through Community, and Optimism, Ideals, and Aspirations.*

Due to nature of this analysis in combination with the terms used in homelessness response system, the following specific terms and their meanings will be used in the qualitative analysis.

Interviewees: All of those who completed either a key-informant or provider interview.

Leadership Staff: Refers to interviewees whose roles or responsibilities include the management or supervision of other staff or those who are leading teams in the CoC.

Participant-facing or Client-facing Staff: Refers to all interviewees whose roles or responsibilities are directly with clients or program participants, may also be considered direct-service staff.

Program Participants: Refers to participants in the prevention, emergency, or housing programs in the CoC. May be used interchangeably with clients.

Clients: Refers to participants in the prevention, emergency, or housing programs in the CoC. May be used interchangeably with program participants.

However, due to the limited number of interviews conducted with program participants, data saturation was insufficient to develop distinct themes from their perspectives. To address this, selected powerful quotes from clients will be shared in this section, offering valuable insights in place of a fully developed theme.

Theme 1: Awareness of the Work
(Codes: Awareness, Perspective Change and Job History)

The theme of *awareness of the work* emerged from the interviews in two key ways: First, interviewees emphasized that the general public remains largely unaware of the complexity and scope of housing services. This lack of understanding, they noted, negatively affects both staff and program participants. Staff working directly with program participants observed that many of the individuals served were unfamiliar with the structure of the homeless response system, available resources, or strategies for maintaining stable housing once it was secured.

Second, participant-facing staff themselves acknowledged challenges arising from their own limited knowledge of the homeless response system. This gap often hindered their ability to effectively guide clients toward appropriate support. They stressed that the lack of awareness complicates interactions with colleagues in less familiar areas of the system, fostering assumptions, misinformation, and a sense of isolation.

“And I realized delving into a world of...finding housing and everything. And I'm like, nobody really knows any of it. It's just all over the place and, you know, resources come and go. It seems like a lot of times and clients have issues extending past their ability to be able to stay housed.” – Provider 02

“I think it's the lack of knowledge behind it. A lot of people don't really understand housing, even when they sign a lease. They don't always read the full lease or understand what they're signing. Even landlords don't fully understand their own lease sometimes, which is concerning.” – Provider 08

Furthermore, the lack of awareness made it difficult to assist clients or know where to point people to get them the help or resources they were in need of. Interviewees remarked how difficult it is to work with those outside the system or explain the stress of the job to others. This pointed to another issue in feeling as though the system is not working with these clients and instead is working against them. The other ways lack of awareness was a salient theme was in the awareness those within the homelessness response system have with each other. There were multiple times where interviewees said they didn't know of other parts of the system or had made

assumptions about the type of work others were doing. They felt as though the system did not talk to itself unless there was a problem, or a fire needed to be fought.

“Actually, can I say something? [redacted], it's like we don't talk to a lot of people because I don't think a lot of people care enough to know exactly. So whatever [the interview] is for, it feels good to tell somebody what we do, because it doesn't seem like too many people care as long as it's going smooth...They only care when there's a problem.” – Key Informant 07

Despite these challenges, staff underscored the value of intentional learning in expanding their perspectives and enhancing their effectiveness. For example, those in emergency services reported that by engaging in dialogue and collaborating more closely with Coordinated Entry and Ramsey County financial services, they gained critical insights into these areas. This collaborative approach helped them better understand the roles and functions of different components within the broader system, ultimately improving service delivery.

“I complained about the process and then later on and I was like, “How do [they] it? What's going on? I'm thinking they're not doing their job. They're not this. They're not that.” And wow, being in this position is a whole different side and I was wrong, you know.” – Key Informant 04

Altogether, it became clear that increased awareness of the work both within the CoC and to the larger community may alleviate some of these concerns and frustrations.

Theme 2: Staff Needs and Retention

(Codes: Staff Needs, Additional Tasks)

The theme of *staff needs and retention* was drawn from interviews with leadership staff, participant-facing staff, and program participants. Leadership staff expressed how hiring has been challenging, mentioning the length of time positions remain vacant and the difficulty of getting staff into roles that are needed.

“Staffing. Continuous short staffing and turnover. It takes a lot of time to post jobs, review resumes, and screen candidates. I had a position open for nearly a year, and out of hundreds of resumes, many were unqualified. Then you finally get someone in for an interview, and they don’t show up. Staffing has been extremely challenging.” – Provider 01

Due to the length of time it takes to find, hire, and train someone, leadership staff mentioned taking on additional tasks including managing more people, moving to a participant-facing role with an unclear duration, or losing services that were previously available. The addition of tasks wasn’t explicitly remarked as being challenging or over the top, rather as something interviewees’ saw as inevitable or part of the job. However, they could not be sure when the tasks they had to take on would be taken off their plate or the next person would be hired and if that person would stay. This creates an environment of overworking and uncertainty within the homelessness response system.

“Currently, because we are down another program manager, my role has shifted a little bit to overseeing all of the staff and then some compliance and other things. I sit in on the meetings for the housing program too now. So, I do some of that and then our lease termination prevention plans, checking in with youth about those. My role has shifted but primarily I focus on the shelter program. Besides, now I supervise all of the case managers and direct care staff, so doubling the staff that I supervise, so having a lot more supervision meetings has just been the big thing that's changed.” – Key Informant 01

Turnover and uncertainty were also mentioned as remarks interviewees heard from program participants. They have expressed living with uncertainty, not trusting that staff members assisting them will stay in their roles or if the programming they rely on will continue. Both leadership and client-facing staff spoke about how service delivery is impacted by staffing. They shared the fear clients have expressed in their programs as they cannot be certain that the staff members assisting them will stay in their roles or if the programming they attend will continue.

“But just that we're talking about needs as a whole like community, like, for instance, there's two mental health case managers that recently left here at [redacted]. And all their clients have just fell through the cracks. Our team has no case management. Some of them are people that we have previously assisted and paid rent portions for, now those rent portions that we have paid are being jeopardized because of background situations that are unable to be handled because nobody has the means to leave the office and go take somebody to the Social Security and do this and do that...You know?” – Key Informant 12

With fewer staff, everyone had more people to work with than usual, and things slipped through the cracks. We weren't in contact enough, or paperwork wasn't done to our usual standard. Trying to get back on track has been tough, and new staff have to help clean up, which isn't always fair to them.” – Provider 09

Within the conversation on staff retention, there was an acknowledgement and acceptance that people leave this work for a number of reasons. Chief among these, as expressed by the interviewees, was the pay available for staff. Although leadership and participant-facing staff talked about the impacts of team members leaving, they did not harbor resentment or anger for the staff that had left or the situation that caused them to leave. Instead, interviewees discussed their frustrations with not being able to adequately pay staff or retain them by improving work conditions.

“We ask our staff members to do very complex work, and we don't pay them complex salaries. That is driven by reimbursement rates, that's driven by margins and things like that, which some of it of course is out of our control. We are big on making sure that we are there at the capital; we're advocating, we are pushing for more housing funding, more mental health funding and everything in between to make sure that we can sustain our services. But, my fear is, we're not going to get into a rhythm because we're always turning staff over because the work can get really, really hard, right? Um, and if we're not careful in doing it well, and treating our staff well, and sometimes even when we do make sure that we're doing everything well, the existing in a system that just like, feels like it's constantly working against you can be tiring. And I don't blame anybody for that. So, I think like, where is the balance? Where's the trade off? Salary isn't the only thing, right? A lot of people do this work because they have a passion for it, and that's the only thing that's keeping them. How do we keep that passion alive? How do we keep that glimmer of hope for not only our clients but our staff? Because like I had said, the work can get tough sometimes.” – Key Informant 06

The need for additional staffing and resources to retain staff is clear in services across the Continuum of Care and homelessness response system. As staff feel

supported and valued through their work and wage, more staff may be retained and the services available to clients can become more consistent.

Theme 3: The Weight of the Work

(Codes: Urgency, Self-Care, Secondary Trauma, Personal Experiences)

The *weight of the work* theme was generated from responses from interviewees about their daily tasks, their concerns for the homelessness response system, and recurring challenges they face. Interviewees talked about how the work is relentless, can be isolating, and extremely challenging. They shared how they feel pressure to persevere and stay determined even in the most difficult of circumstances.

“Keep going. Keep going. Keep going. Keep going. Okay, I’m done. Go home. Keep going. Keep going. Keep going. So basically...[I] never have a time to just really stop and just think...” – Key Informant 03

Interviewees also described a profound sense of urgency in their work, feeling that if they didn’t act quickly, the consequences could be severe, and they would bear full responsibility. While the sense of urgency is understandable given the critical nature of housing services, it takes a heavy toll on staff, making it challenging to leave work behind at the end of the day or maintain a healthy work-life balance.

“But it also I think felt feels like here, at least if you don't see the client right now, you might not see them for another two weeks. You don't know when you'll see them next. Especially with a couple of the ones that are struggling with addiction. But, yeah, it is like, sometimes I'll see a client every single day and then not see them for a month. And then I'm like, I gotta go, wait, [now] we're at a standstill now.” – Provider 10

“Yeah, I'll just give a short example. There was a day I'd left my desk for the day, went out to get food, and suddenly thought, ‘Did I send that letter of guarantee out for that person?’ I could've waited until the next day, but I felt like I should just go back and do it. If it could alleviate even a bit of their stress that evening, it seemed worth the extra trip back to work.

So, moments like that are very positive but can also be emotionally taxing. I try to leave work at work, but I find myself checking my email first thing in the morning. So, I'm not sure how well I'm doing with that.

Yeah, I think that the main thing is the urgency and the need that this place brings to a community of people...There's a level of and I'll say stress, but good stress that comes with that job of knowing, knowing that you're honestly making a difference. Like if we don't pay your rent this month, you are going to get evicted from your home.” – Provider 02

Stress is compounded by the high needs of program participants and lack of available resources to support them. It was shared that many program participants have needs that take longer to be met within the CoC. Thus, staff have to find ways to share

complex processes, or hard news with participants about services or housing that is not available at their time of need.

“[There’s a] huge need for coordinated entry. So, my recommendation from our supervisor was to do no more than two coordinated entry [assessments] a day. And when I was in that role, I was doing like five a day, because it’s just really hard to say no to people right when they’re in need and they need housing. But now obviously I cannot do that many, I usually don’t have time for more than one a day if that. So yeah, boundaries are huge, I think.” – Provider 11

“As an assessor, I see a lot of people fleeing domestic violence. It’s hard because the housing available often isn’t for them. I try to explain the process without discouraging them, but it’s tough. In the year I’ve been here, I’ve only seen one person fleeing domestic violence get into housing. It’s hard to break that to clients without making them lose hope. It’s also difficult for the people doing referrals—they try really hard to find housing for people in these situations, but the options are so limited. Then, clients hear about others getting housing faster, and it’s hard to explain why without crushing their hopes.” – Provider 06

Finally, interviewees shared experiences of secondary trauma, where they had to determine how to set boundaries and care for themselves as they completed this work. With the weight of the work, there was a discussion about self-care and how interviewees try to lessen this weight by taking care of themselves in and outside of work.

“Internalize the appropriate amount, but then also being able to like self-care and not just like bring every shred of trauma home with you and being able to get up and do the job the next day. 'cause, you’re not helping, you’re not doing the clients that come after that person any favors by not being as good for the next person as you were for the previous person. And so, you do have to, you know, be in the moment. And you do have to, really walk alongside that person and hold their hand and be there with them as they’re going through those things. But then you also have to be able to take care of yourself enough so that you can be there just as much for the next person.” – Key Informant 11

“Honestly, I’d say there are more good days than bad days, but some sad stories stick with you. As a case manager, I did wellness checks, and it got to the point where I couldn’t do them anymore. I didn’t want to see certain things anymore. It can affect you personally. It’s hard sometimes.” – Provider 07

This theme illustrates just how difficult the work within the homelessness response system can be. This demonstrates how the work itself can drive and affect

many of the components mentioned in Theme 2. The urgency of this work will likely not change, but through community and caring for oneself, the weight of this work can be lessened.

Theme 4: Barriers to Effective Service Delivery

(Codes: Red Tape, Frustration, Overcoming Challenges, Recurring Challenges)

The *barriers to effective service delivery* theme emerged from discussions about the barriers leadership and participant-facing staff confront in their work that complicate their daily tasks. The experiences shared focused on recurring obstacles, particularly around the red tape encountered when trying to access resources for programs or program participants. These challenges are exacerbated by a lack of communication or misunderstandings within the homelessness response system, increasing the difficulty of navigating housing services.

“And it's like, it's like government bureaucracy at its finest. And at its worst, I mean it's like, can we have any more red tape on this than we already do? But they will find a way to add more, and that's just so frustrating because I think you make the providers and the governments, kind of fight to get this funding and I think that what is often forgotten in [redacted's] view are the people that are actually needing it and receiving it on the front lines. I mean, we just had our [redacted] monitoring...and it was the absolute worst monitoring I've ever went through... And I was like, do you guys even know what you're doing?” – Key Informant 02

Interviewees also spoke about the challenges of working with other benefit systems, such as those offered at the county or state level. Many expressed frustrations with the tedious or burdensome requirements tied to funding and eligibility, particularly for qualifying for benefits, coordinated entry, or housing. Although these qualifications and standards are designed to be helpful, they often lead to unintended consequences, especially when the purpose or requirements of these standards are unclear, or communication between agencies is lacking.

“For example, we've had clients in domestic violence situations where a spot opened up with another provider, but because they weren't from [redacted], we couldn't transfer them. The way the system operates makes collaboration harder. I can refer clients directly to them without strict eligibility requirements. But the funding limitations outside of our programs make it harder to collaborate.” – Provider 01

“...why am I having to get somebody on one waitlist, two waitlists, three waitlists, five, whatever it is? We have to like, continually push people through different systems. And it's just so...Like it can be traumatic. Like how much? What else are we trying to do? Like how do we figure that out? Because I think there's so much like movement back and forth, especially for our clients, that it's like they are just trying to get somewhere and wherever that is that can serve them first. Is it person centered? Probably not, because we're asking somebody to get on multiple waitlists and just take whatever they can get first. And that's not fair, right? Because people should still have

preferences that are honored. But the system is not set up that way.” – Key Informant 06

“I think it would help if everyone had more knowledge about the different programs and qualifications. A lot of times, clients feel more comfortable asking questions of certain people, but not everyone has the same answers. If everyone was on the same page about what qualifies people for certain programs, it would strengthen the community and help clients feel more supported.” – Provider 06

Some interviewees mentioned that the process of proving a crisis—particularly for youth—can be particularly difficult and triggering. Participants often lack the necessary documentation, such as IDs or birth certificates, to meet eligibility requirements, and the long wait times to obtain these documents only exacerbate the problem.

“Um, sometimes there's kind of this sense of needing the youth to, like, prove that they're in a crisis, which can be really triggering and really awful. And a lot of the times they're not really able to do that because their response is like, “I'm telling you, I'm sleeping on the street, right? Like, I don't have documentation, you know, to prove that, but I am.” And then just kind of, you know, general, like, long wait times to get vital docs, like IDs and birth certificates and stuff.” – Provider 10

Finally, interviewees touched on the difficulty of coordinating and braiding funding to provide adequate resources for clients or staff. Staff consistently struggle to balance the growing need with available resources. The lack of flexibility in funding, particularly in the face of increasing acuity among program participants, makes consistent service delivery challenging. Many interviewees highlighted the need for additional support and communication from the entities overseeing or administering funding.

“Also, the requirements for certain funding can be tricky. I understand why we need requirements, but sometimes they're too strict, and we end up cutting out a lot of people who need help. For example, one of our funders only allows us to help families, which leaves out all the single people. If they don't have a minor, a mental disability, or a life-threatening illness, they don't qualify. So, the tightness of the requirements can be a burden.” – Provider 03

“It's challenging to meet the goals set by funders, especially with everything else we have to manage. Documentation and tracking take time, and while I understand it's important, it can feel like an extra burden in an already busy job. For example, we track our housing placements to meet the requirements of funders like the [redacted]. It's valuable data, but it's an additional piece of work.” – Provider 05

“I think again, just having better communication and being more accessible. Something I always wanted when I was a case manager was having like a monthly or quarterly meeting with the [redacted] County workers. Just to have like an understanding, like if someone could come out and say, "Yeah, we're four months behind on food stamps," or something like that. Like, we're low-staffed too. Just to have that clear communication instead of being on hold with my client for two hours and then having the phone hang up, trying to reach someone, and the delay in paperwork that was dated two weeks ago... It's just very... like I can understand the frustration with my clients. It's a lack of communication on both ends, and that can be frustrating.” – Provider 08

Overall, this theme highlights how red tape, program requirements, and service accessibility can both facilitate and impede the work of supporting individuals experiencing homelessness. Many of the recurring challenges faced by organizations in this field are driven by policy and funding decisions. While interviewees shared ideas and aspirations for policy improvements, the most frequently expressed request was for better communication across agencies.

Theme 5: Specificity and Nuance

(Codes: Special Populations, Coordinated Entry)

The theme of *specificity and nuance* emerged from discussions about special populations, coordinated entry, and work responsibilities. Interviewees highlighted how the nature of the work is influenced by the diverse needs of the populations being served. They emphasized the need for tailored approaches and services, noting that at times their concerns were overlooked in favor of other groups. Their experiences demonstrate that a one-size-fits-all approach is ineffective in supporting program participants. Each group requires individualized attention and solutions to address their specific challenges effectively.

“So, when I was a new outreach worker who was a youth worker and I assumed that, you know, everybody cared about youth work just the same as I did. That was my lens. And then I started working with single adults experiencing unsheltered homelessness. And then I started looking at it through that lens and I just assumed that everybody cared about unsheltered single adults.

And then the more you're around, then you start figuring out like, what makes everybody else tick and that everybody has their own passions and everybody is there for different reasons. So, they want to make sure that whatever their passion is gets the [green] light...Sometimes the COC meetings end up being, you know, the squeaky wheels for their client populations [to] kind of get greased.” – Key Informant 11

“So, either we give time for each because I know singles and youth is a big thing, but guess what? Families are too, and a lot of focus has been on singles and youth. We have quite a few families out there that really need some help and I just, I wanna spread the wealth amongst us all equally...And I think the numbers of families that are homeless is not accurate because a lot of them don't wanna tell you they're in the car for fear at CPS being involved. So, some things apply to families that don't apply to youth, and it's all wrapped in one...” – Key Informant 04

Staff may feel protective of the populations they serve, their work, and the resources they have, which can lead to a sense of isolation with their concerns sometimes feeling as though they have less attention from the CoC compared to those of other population groups. This perspective was consistently expressed across all interviews, revealing a widespread sentiment within the Continuum of Care (CoC) that there is a lack of equality and fairness in the allocation of focus or resources across different populations.

Theme 6: Intersections and Effects of Discrimination

(Codes: Disparities, Personal Experiences)

The theme *intersections and effects of discrimination* was generated from the sentiments and experiences participants shared about discrimination or disparities within the Heading Home Ramsey Continuum of Care. Interviewees were asked how or where they see racism, sexism, homophobia, and ableism in the current system and its effects. Participant-facing staff shared personal experiences and program participant experiences of discrimination they were made aware of.

“I think part of the way that affects our staff is we've had some property owners that we're working with that have just been really blatantly racist about things, about the folks that are applying for their units or people that they've housed, and then they're saying really inappropriate things. So, then it depends on the staff's comfortability to address it or to do something about it. And then as an agency or as a line of service taking a stand to say like, “we're not gonna work with that owner again because they were inappropriate.”” – Key Informant 05

“I think that unfortunately, before it ever gets to us or before they even reach an age where they can be a part of [the system], you know, the coordinated entry [list starts] at 16. I think there's a lot of, I think people of color are more likely [to receive] instead of needs-based to be addressed in the correctional [area]... you know, juvenile detention or whatever as opposed to recognizing, maybe this is some sort of mental health need here? Maybe this is a particular part of autism or different disabilities that are manifesting that you're treating with corrections. So that makes it really hard and then by the time they are coming of age well now maybe they're 19 and they've already been to prison. And you look at it, and you say, “did they really need to go to prison?” “If they weren't, people of color, would they have gone to prison?”” – Key Informant 10

“Yeah, and I think too when you talk about your intakes, I often hear people ask, like one of the questions is “do you have any disabling conditions?” And a lot of people say “No.” But in turn we know it to be true, hence why you're on SSDI or whatever.... because sometimes you can't see their physical disabilities, they are in turn treated as if... how can I put it? Like, if we didn't have the question on there, we wouldn't ask them if we saw them in person. It's that, and then their disability is affecting them when they go into shelter. And people are like, “what the f is your problem?” Yeah, big barrier is, well, “Okay, well, you can't get on the top bunk, you can't do this, you can't take care of yourself.” When in turn, yeah, maybe they can just put me closer to the bathroom. And no, that's just making it harder for them. You're getting special treatment, blah, blah, blah.” – Key Informant 12

“Well, finding housing is always easier for someone without mental health issues. And it’s generally easier to find housing for white families. Even with professional management companies, bias creeps in, and with mom-and-pop landlords, it’s even more common. The discrimination is more obvious with smaller landlords, they don’t have the same checks and balances in place. They just do what they want, and unless someone reports them, they get away with it…”

We also see issues when we place people in the suburbs. They get watched more closely by the police, or their kids are targeted at school. I have a client in White Bear Lake who gets pulled over all the time, and their kids are having issues with teachers.” – Provider 09

“I would say racism affects my clients a lot. A lot of my clients are black and brown, single mothers with children. Um, baby dad is ... just absolutely absent. And it just, it feels like it's always an uphill battle. It’s difficult to see how they're treated differently than, like, if they reach out, it's a different story if I reach out. You know, like, if I advocate for them, it's way easier than if they advocate for themselves. Which yeah, it's huge. [It] sucks because I want my clients to be able to have their own voice, but I also want them to be able to receive the resources that they deserve.” – Provider 10

These sentiments together demonstrate the discrimination that people experiencing homelessness face in Ramsey County and how those experiences are perceived by those that work alongside them. While it is evident that staff strive to advocate for change, both within their organizations and in interactions with external parties, to make housing access as equitable as possible, it is clear that much work remains.

Theme 7: Cultivating and Craving Connection

(Codes: CoC Connection, Partnership, Specific Resources, Connection Value)

This theme was generated from sentiments expressed by interviewees in response to questions about connection to the CoC, partnership, and barriers to partnership. The respondents were split in their connection to the CoC, with a little over half knowing how to get connected and feeling connected and the other half not knowing how to engage with the CoC.

For those who were not as involved, they expressed a desire to be involved but not really being sure on where to start and how to get connected. This was mostly in relation to CoC meetings or CoC leadership and was expressed by more the leadership staff who were a part of these interviews.

“And, you know, part of me wants to get involved, but then part of me is like, well, where would I even start? Because there's like, so many different steering groups and different bodies. And I've even emailed the CoC before and like, they never really know... There's just not enough time in the day to build those connections while serving clients, while trying to do internal policy change, while trying to reach professional goals.” – Provider 12

“It's really hard to figure out based on the website, even though it's new, like when the meetings are how you attend, how you get invited to the meetings, which is which subcommittee, or like work group to join, to try to like, participate and be more involved.... You missed the conversation... Like if you're on an email list, how are you not getting [it] ahead of time? I don't know how to get better connected to the system to get the information like in the metro.

We work really closely with Hennepin and SMAC and so like they'll send email updates and like, that's at least some information like I can kind of get what's going on. I don't know how to get that from Ramsey. I can't figure out how to get that that information to be better connected so we could do more in Ramsey. I don't know how to access that like I feel a little bit more like on the peripheral instead of [inside of] the CoC.” – Key Informant 05

“Yeah, I feel like I would never feel like scared to reach out because there's been so much, I wouldn't say so much turnover, but there has been turnover. Sometimes I just get kind of lost in the sauce. Probably the easiest way to say it. Like, who am I supposed to reach out to? Who does what? So just knowing like who works there and how can we reach out would be helpful. I know something that was helpful for me, an example like our HR department, kind of broke down all their roles, like this person does benefits, this person does like FMLA, this person does this. Just having that might

be more helpful, so then I'm like if I have a question, I'm like I just don't want to email someone, you know, when it's not their role, it would be annoying.” – Key Informant 01

For people not in leadership positions, they trusted their supervisors to make connections or notify them of potential resources. Participant-facing staff expressed that they feel less afraid or nervous to call different agencies or try to connect if they or their clients are in need of something. There was a desire among participant-facing staff to know or connect with others doing the same work as them in other agencies. They were interested in learning about those working with similar or the same populations to gain a better perspective on the work being conducted.

“I’m not really part of any workgroups or committees, so I wouldn’t say I’m deeply involved. I’m still kind of new to that world. I don’t have a lot of relationships with other agencies, but it’s something I want to get better at this year—meeting people and learning more about what they do. Ideally, in person, because that’s always better for me.” – Provider 09

“It would be great to know who the service providers are, maybe through team chat introductions at the start of meetings. I don’t know much about Ramsey County, and I’d love to know more—especially for participants wanting to move to Saint Paul.” – Provider 07

“So, we're not all trying to do the same thing. We're all trying to be specialists in our own little area and then we kinda feed into each other. And then some of that ends up working itself up to like agency or, you know system level because then you know people duplicate the idea, but you still have to actually do. Everybody has to actually pull their part of the chain to make it the chain strong.” – Key Informant 11

Another aspect of this theme was those who do not feel as though they need to reach out due to the resources available at their organizations. The interviewees who were a part of larger organizations with a diversity of programs, did not feel as though they needed to make as many connections because they could refer clients or program participants to other parts of their organizations for assistance or services.

“What I was going to say is, I feel like we have so many resources here at [redacted]. That I haven't needed to reach out to other resources. I like, you know, I've worked with... Small Sums to help my clients get work clothes. I know like [redacted] has so many resources and [there are] so many amazing people on this team. And I just feel

like I don't need to reach out anywhere else. We have our own clinic too. Like if anybody needs medical care like just go to the clinic [redacted].” – Provider 10

Altogether, this theme demonstrates the network or connectedness between those delivering services in Ramsey County, both with each other and with the larger CoC. The interviewees from organizations working with more specialized populations described having stronger networks and a greater sense of community, likely due to the unique needs of the populations they support. This illustrates that fostering community among providers is not only possible but also essential. It presents an opportunity for the CoC to actively encourage and facilitate further community-building initiatives to strengthen collaboration and support across the system.

Theme 8: Rejuvenation Through Community

(Codes: Community in Work, Connection Value, Overcoming Challenges)

The theme *rejuvenation through community* was generated by sentiments expressed when interviewees were asked about their community at work or how they overcome challenges. Interviewees consistently spoke highly of their teams and demonstrated that this work is not possible in isolation. Many of those included in these interviews shared instances where they helped a team member, or a team member helped them. For those that are connected, interviewees expressed how valuable some of the resources they have been given access to are or how they lean on the community they have with providers.

“I think it’s amazing. Without those relationships, we’d be overwhelmed with calls. We already get a lot of calls, but if it were just us doing all the work, it would be consuming. By leaning on each other, we know we’re not alone, and we can refer clients to agencies that are a better fit. It makes things smoother. The clients are the main focus, so having that network of resources is crucial. We don’t have all the answers, but someone else might. At the end of the day, it’s about helping the client, so that network is huge.” – Provider 13

“Without this community, I wouldn’t have as many people on the list. It’s essential for getting people into housing... The strength is having people willing to go the extra mile for clients. We work with a lot of people who have trust issues after being homeless for years. Some people didn’t think we’d ever be able to get them on the list, let alone into housing. But through teamwork, we got them there. Last week, we helped two people that others thought would never make it. I followed one of them around for days just to get the assessment done. It’s about working with clients the way they need to be worked with, rather than making them conform to our process.” – Provider 06

“I have a phenomenal team who is so passionate about homelessness and working with others, getting them resources...Oh, I wouldn't be able to do the work I do without them...What do you see? What would be your recommendations? And then we talk about it. I put them in a position of making a decision and talking it out and helping them feel like there is shared power.” – Provider 04

“I think just being empathetic and supportive of each other. I think you know we had a really brand-new director that just started in one of our other programs. And I looked at her face after a meeting. And I said you're not OK, are you? Do you wanna, just go quick, have a chat? And she immediately broke down crying. And it's recognizing other peoples in need and just being there for them. However, that looks, however, that works, and so I hope that I am a person that others can lean on because I know I

definitely lean on a lot of others that support me. Umm, so I hope I pay that forward, but I think just being there for each other, just understanding and having empathy for when the day is a hard day.” – Key Informant 02

Interviewees later described how finding value in others can lighten the load and lead to greater connection throughout time. The value they consistently found in those relationships is when they could see or feel that the person in the other organization had the same intention in their work.

“It’s really helpful. When we were struggling with hiring, we realized everyone on the CoC had the same problem. Knowing that some issues are systemic and not just our fault helps. It’s also great to hear about others’ successes and good ideas, which we can try to implement ourselves.” – Provider 09

“And like you said, kind of seeing the value of every relationship regardless of where that person works, because you never know what’s gonna happen. You never know what resource they might have, or so on and so forth... And it can be hard to see that if you’re a provider and you’re like, well, I work with you. So why would I need to know who works with families or who works with singles? It doesn’t [seem to make sense], you know, but every connection can be really valuable” – Key Informant 11

“It makes you feel like you’re not as alone. It can be really isolating to be in this work, and especially if you’re in a site-based building by yourself, you could we have staff that you know they don’t necessarily come to our main office so they can feel really disconnected. We’ve worked really hard to make sure that they feel supported, and they have opportunities because it can feel like I’m the only one out here doing this or nobody’s, you know, I’m the only one that has this situation.” – Key Informant 05

“Exactly, and we all are very passionate, and we all are very, very passionate about seeing clients served well, and I think that’s what really seals the deal for us, like working well together. We all, you know, we have our times, but we all love our clients, and we all are very passionate, and we all come together to advocate for our clients as hard as we can at the end of every day...Yeah, shared visions, shared goals, even though the work looks so different day to day and client to client.” – Key Informant 13

These experiences and perceptions demonstrate the power of community in the work throughout the homelessness response system. The community within and between organizations provides a strong example for how the weight of the work can be lifted from those providing services.

Theme 9: Optimism, Ideals, and Aspirations

(Codes: Joy, Ideals, Aspirations)

As interviewees were asked about what brought them joy in their work or what an ideal homelessness response system would look like, it became clear that both the experiences of the program participants as well as the experiences of interviewees with their teams were the greatest sources of joy. They also had many new ideas and aspirations for this work, demonstrating hope and interest in improving the system and its conditions.

“Well, let's [say] tears of joy. You know, when I call a client...and I offer them a housing program and they start crying and it's like “ohh my God, don't cry. I'm gonna cry, you know?”

Or you've had somebody that's you keep trying to fill them with, “hang in there, just hang in there, something's coming....” Like one of my families was just housed on Friday. And there was an issue where, “Is she gonna be able to get in there with their kids?” I did a lot of advocating and writing. I'm with the housing person and so forth and. It was nice to come in and see. That she got her keys Friday afternoon and sent me an email. [It said] “Thanks so much. Thanks for believing in me. I finally got a first good night's sleep and feeling good. Uh, it's been a long [road], God bless you.” You know that that's the best. That's the best ever.” – Key Informant 04

“I think like two things. Like one, I always just get so freaking happy anytime somebody gets housed. Like I feel like I'm getting housed all over again. I know it sounds so dramatic, but like when you've worked with somebody you've like had barrier, barrier, barrier - just like hit, hit, hit - and then finally, like you know it's never easy to get someone who's homeless housed, by the time that you finally get them housed you've overcome plenty of barriers for the next two years. And then two, I think like when you see a client and like they've been able to get connected to services, but also keep up on those services by themselves and then you see them and the next time you see them it's like they literally look like a whole new person.” – Key Informant 12

“Seeing people succeed. Like one client who owed \$4,000 to a previous property manager. Being able to get that paid off meant she could get an eviction expunged, qualify for housing, and move into the community. Another client didn't understand how an income-based program worked, ended up owing \$12,000 to Saint Paul Public Housing, and was facing the loss of her voucher. After learning about her learning disability and working with her mental health provider, we were able to appeal, and she kept her housing. Seeing people overcome big challenges is really rewarding.” – Provider 01

“For me, it’s seeing the light at the end of the tunnel. When a client says, “We got the keys,” or “We’re not getting evicted,” it’s a huge relief. It takes a weight off your chest. Celebrating those victories with my clients and my team brings me joy. We’re like a family here – we care about each other, and that dynamic makes the work even better.” – Provider 13

For aspirations from interviewees, most of the ideals they described can be parsed down to communication that is early, often, and accurate. In the ideal system, interviewees mentioned how both clients and those serving clients would have more information and be able to access those with authority more readily than what is currently possible.

“It should flow smoothly, where everyone knows who to connect to and what steps to follow. Right now, there’s a big gap because not everyone’s trained on all aspects of the process. Ideally, it should be more seamless, where after I do the assessment, I can hand the client off, knowing exactly where they’re going next. Yes, or at least knowing who has the responsibility at each step. If a client asks me about their assessment, I should be able to say, “You need to talk to this person now.”” – Provider 06

“For those individuals and others, an ideal system would have three steps. First, they’d come in and get the assistance they need. Second, they’d be assessed for other organizations that provide additional help, such as childcare or car repair. The best case is that they’re eligible for those services too, so they get a warm handoff to those organizations. Third, there would be a check-in at a designated timeframe to see if the assistance helped and if new needs have arisen. Ideally, the county would step in here, keeping track of the person’s progress through a case number or similar system. That way, the county can monitor whether the person is meeting their financial goals, and organizations can access that information to help flag future needs, like rental assistance or utility struggles.” – Provider 02

The ideals and the places where people feel joy demonstrate how those working with people experiencing homelessness are able to maintain themselves in this work and can illustrate ways to improve staff retention. This theme also shows how leadership and participant-facing staff are well aware of the gaps in the current system. Each member of the system has valuable thoughts to offer on ways the CoC can improve and may be willing to assist in the implementation of new improvement measures.

Client/Program Participant Quotes

Due to the low number of interviews conducted with program participants in the CoC, there was not data saturation or enough data to generate distinct themes. Instead, some powerful quotes from clients are shared here. They are separated by each client participant. All participants were compensated for their time.

Client 1:

“Um, starting to go to [organization]. Okay. Um, they helped me a lot throughout my process. I got connected with [case manager], and she's helped me a lot in every way and getting everything that I need, the paperwork that I had needed. It's just easy access for her to get. And just the things that I'm not so good with is what she helps me with.

I can't say anything was difficult or anything like that. It was pretty good. Everything went really smooth. Yeah. A lot of it does have to do with [organization and case manager] as well...”

“Um, my friend had actually brought me here [the organization]. Um, and got me an intake. Then I realized how much help that they actually do, because I had two friends that came here, and I just needed it and realized that it's a lot better to have somebody help you than to do it all on your own where you don't have support.”

“I wish I knew about [organization] a lot earlier for the fact of getting jobs and getting everything that you need, just in line with how much that they push you to do better and get on your stuff. They do their best at everything that they can do, and they get everything that you ask for almost unless it's impossible for them to get. But they try their hardest and they do a good job at it.”

“I feel like everybody comes from their own background... Um, I can't say that they need to work on anything. It's the kids that need to work on treating the staff better.”

Clients 2 and 3 were a part of the same interview so their quotes are placed together.

Client 2:

*“I got connected by coming here every day, busting my *** cheeks... And I've been actually, like, grinding so hard. But now that I got it done, I will be moving into my two bedroom very, very soon, which I'm very grateful for. I do say that [redacted] housing program for Ramsey County in general works a lot faster than I definitely give y'all that, because [redacted], their waiting list is five years. I literally got my voucher out here within five months.”*

“What was difficult is like the time, they don't contact you when they send out information and stuff like that. It's just like you're going off by the schedule of mail, you know? So, like, it's dependent on when you're going to get that mail letter in and see if you got approved and all of that good stuff. That's the only thing that I was kind of like, worried about how long it was going to take, which I'm glad they didn't take

that long. You know, so I wish I would have known like I would have had some type of like time scale on how long it would take for the program or something to get me approved so then I could help me out for the future, like, okay, I'm staying with my mom or something. I tell her I'm going to stay here for this amount of time. This how much you know? I had already planned out."

Client 3

"Yeah. The whole process took about like six months, because really, I don't even know why. Because once you're staying in the shelter after 14 days, you can get a referral to be put on housing. So why it took six months is crazy [to me]. You know, when I had my referral within two weeks.

Interviewer: Does it feel like, "okay, if I reject this one, here's what I'm expected later. Can it be worse? Is it going to be better?"

That's what she [case manager] was telling me. She's like, because I was wanting maybe like a two bedroom. She's like, oh, well, that's going to take even longer. And I'm just like, okay, well, I don't have the time to wait for that. Find a way."

Client 2

"Like, I didn't know what I was going to do as far as getting the money on my own. So that was probably the biggest thing that, you know, stuck with me. Like they helped. They've been helping me a lot... Even I refer this place to, like, so many of my peers. That's my big cousin right there. My other my other big cousin was just here too. Last week even my sister [was] planning on coming up here too... I definitely give this place a big shout out to whoever I be around... People that just come across that really need help. I'm like, yeah, come to [redacted]. That's one thing I do know that they definitely, definitely need ... bigger funding because how many people come through here on a daily basis."

Client 3

"I fucking hated my [redacted] worker. Like, I love that she would pop up on me and give me the gift cards I needed, the resources I needed. Okay, cool. That's good... That was cool for a minute. But then, like, when it came down to doing the work. Yeah, it was like, okay, now we got to go do this. Then when it came down to getting information to me, I'm like, lady, you know, I don't have an address right now, right? I'm in a shelter. You come to me, so why couldn't you just bring me the letter or the mail? You know? That's where it got kind of confusing and stuff."

Client 3

“Because with [redacted], their program is very strict. So, I say, like the first, like three, four months I was on, like, a trial period. I wish I could have told them, like, okay, y'all don't need to watch me. Like, I'm not gonna be in here breaking any rules or anything or stuff like that because it's, you know, it's rules. You can't. You got to follow [them]. Like, your guests have to leave at a certain time. If you want somebody to spend the night, they got to fill out a paper. And I'm like, I wish I could have just told them, like, I'm fine with doing all of that. I'm just glad to be here more than worrying about following the rules, honestly....”

“Yeah. Especially knowing like, I feel like the case managers know the difference between the people that want help and the ones that are just here kind of thing. [For] the people that want help, they're 100% willing to help you all the way through. They're almost holding your hand.”

Client 2

“Me? I'm not gonna lie. What keeps me going? That I overcome any challenge at any given time. It would be my baby. Oh, yeah, it would be my baby. I remember at all times that everything that I'm doing would be for her, right? Like keep going... I got to keep going. I can't stop no matter how much I get tired or get lazy, I cannot stop. Because then I'll be fucking up for not only her, but me too. And I also look at that as an eye opener for myself because you know people like to say shit. They might not think what you do is the best parenting in the world. So, I make sure everything that I do in life is the best thing for me and my child, no matter who said what.”

Client 5

“That's [it], hey, we have to limit ourselves on this or that, or I can't put my music how I on how I want like, well, it feels good to be home. I know that I'm in my room with my Bluetooth speaker on. My kid is in his room with his Bluetooth speaker, and we're living two totally different worlds, right? But we're under the same roof and comfortable, like it's a big deal.”

“So, we went to the [redacted]. I had to, you know, let them know, like we were staying in a hotel. That was expensive. And then I went through losing my job because of, you know, attendance and being stressed out about being homeless and dealing with whatever. When I called, it was like, pretty quick. They're like, hey, um, you know, usually this is the process and blah, blah, blah, but you know, if you're letting me know what the circumstances are like, I can call you back in a little bit if I find that we have space because it's just you and one kid. If you had a few kids, you know, [it would] be something else. Then [they] call me and they're like, hey, this place, if you can get over here, we can make sure that you and your son have space and get you something to eat, go from here, do this and do that. And it was just like, man, like God just works, like, if I didn't make that phone call, then that could have been somebody else's, or I

could have still been waiting, or I could have been dealing with more uncomfortableness. It was more so like it was just like, okay, this is your last day dealing with this.

And even though I was just stressed and depressed, like, why, you know, why is this happening? Why are we here? I'm just thankful, like, all right, so we get to the [redacted]. I got a little discouraged there and depressed because we ended up there for the full four months, like we got an extension for whatever, you know, because we were doing what we needed to do. I was goal chasing. I was getting up, trying to figure things out. They're like, look, as long as you're doing what you need to do, we can help you, you know, until the time runs out. Time ran out. Still waiting. They found a program for me. But it was taking time to get the tools and the paperwork done. Let's get this person. Let's make sure that you have a worker. Let's make sure we can give you this person. So, I literally had to transition to another place. And I was only there for a few weeks. And I could, you know, I found my job and I was, you know, able to make things work."

"And I'm like look, I'm going to be humble and do whatever I have to do to make sure that I have stable housing for my son and myself. So, like we were, it was really discouraging because we it was right around Christmas and they were like, well, we're trying to get you placed before Christmas so that you and your kid can, you know, enjoy this and that. And it didn't happen. People went on vacation for the program, like, hey, well, if she has somewhere to live over there, then, you know, she can wait till we get back after New Year's. That hurt my feelings really bad, but I'm like, it is what it is because you can't bite the hand that feeds you."

"I have to wait longer. Yeah, it's just a wait, wait, wait, wait, wait. And I'm like, I pray for patience. I kid you not, I was 17 years old. Never forget it. I pray for patience. God has been whooping my butt ever since. (...) Like, you gotta be careful what you ask for."

"So, it's like I wouldn't even like I don't even consider some days like the worst days. I expect crap [to happen] when I'm in a good mood. That sucks. But it's real because it's like you can never be too happy. Something has to come and try to put a little, you know, a little fire under you or rain on your parade. Like I just let things roll off because I've been through worse, you know?"

"Know, when you're a young adult, you know, you need an apartment, or you need to have your own space you need to pay bills. But if nobody taught you those things, like how to take care of your budget, how to do that, nobody taught me that. I had this talk with my oldest brother, [but] nobody taught me that. I had to start winging it and learning these things on my own. There was a lot that my parents didn't teach me, and I was like, there's no way that this is how life is supposed to be. You know what I mean? But then I'm like, well, maybe their parents didn't show them a whole lot, so they had to wing it. And they assume that that's how you go about it. I don't know, but man, I'm thankful for the things that I can read up on."

Strengths and Limitations

Strengths

There were a number of strengths to the assessment that contributed to the methodology and findings. The first of these was the interest from the community and homelessness response system in the assessment. The enthusiasm to understand and improve the Heading Home Ramsey Continuum of Care led to a high interest and level of participant in the methodology workgroup. Members had much to contribute and worked diligently with the system performance lead to shape the scope and details of the assessment. The interest from the community also yielded to an ease in recruitment for key informant and client-facing staff participants for in-depth interviews.

An additional strength of the assessment was the mixed-methods approach and design. Formal qualitative data collection had not previously been included in the assessment in the manner it is for this assessment. The generative themes gave members of the CoC and larger community a better understanding of the experiences and perceptions of those working with people experiencing homelessness. Additionally, providers/client-facing staff perspectives have been absent within previous assessments, their inclusion in this assessment demonstrates the value of their experiences and perceptions in the CoC.

A final strength of this assessment is its creative use of quantitative data sources. Although much of the sources for quantitative data was HMIS, this assessment included directly from providers through the provider survey and information on special populations that operate outside of HIMS. The ability to include such sources strengthens this assessments applicability to recommendations and future directions.

Limitations

In addition to its strengths, this assessment also had a fair number of limitations. The first of which was the availability of HMIS data. During the time of the assessment, the database used to store all information on people experiencing homelessness, the homeless management information system (HMIS) was experiencing a software transition. The transition, led by the Institute for Community Alliances (ICA), was implemented to shift HMIS from *Service Point* to *Client Track*, a software platform developed by Eccovia. The transition began in late July 2024 and was still ongoing

during the end of this assessment. The implication of the software transition is that the data used this assessment was from January-December of 2023, and the assessment was not able to include any real-time data from 2024 as data was being migrated from one system to the other.

The second limitation of this assessment was the recruitment of clients or program participants. Due to lack of marketing or recruitment materials advertising the assessment and the compensation available to clients or program participants who participated in in-depth interviews there was low client inclusion in the qualitative data. Furthermore, there was difficulty in scheduling participants meaning that not all persons who demonstrated interest were able to be included. Finally, the lack of previous formal qualitative data collection led to confusion among some interested participants regarding language and may have contributed to difficulties in recruitment.

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Appendices

Appendix A: Provider Survey Questions

1. Eligibility Question
 - a. Are you currently working directly with people who are experiencing homelessness in Ramsey County?
2. What is your favorite animal? (*This question was to ensure there were not duplicate responses while maintaining anonymity*)
 - a. Short answer
3. Have you worked with other organization serving the unhouse population in the Twin Cities?
 - a. Yes
 - b. No
4. How long have you been in your current role in years?
 - a. Less than 6 Months
 - b. 6 Months or longer, but less than 2 years
 - c. 2 years or longer but less than 5 years
 - d. 5 year or longer
5. Please rate to what extent you agree with the following statements:
 - a. I have the resources and knowledge I need to assist the clients I provide services for
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree
 - b. I know who to go to when I have questions or need assistance.
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree
 - c. I am aware of other providers in the CoC working in similar programs as mine.
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree
 - d. I have gained valuable knowledge or resources from other member organizations or staff in the CoC.
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree

- e. I have people outside of my organization that I can reach out to or work with if I need to
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree
 - f. I feel connected to other providers and the larger CoC.
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree
 - g. My organization has specialized services or resources for people who identify as Black, Indigenous, or a Person of Color (BIPOC)
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree
 - h. My organization has specialized services or resources for people in the Lesbian, Gay, Bi, Trans, and Queer (LGBTQ+) community.
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree
 - i. Structural racism (add definition?) affects me and the work I do in the Ramsey CoC
 - i. Strongly Disagree
 - ii. Disagree
 - iii. No Opinion
 - iv. Agree
 - v. Strongly Agree
6. On the organizational level, what is your/your organization's biggest barrier to providing services?
- a. Lack of Funding
 - b. Staffing Shortages
 - c. Bureaucratic Hurdles
 - d. Lack of training/professional development opportunities
 - e. Other
7. We would love to know more about the barriers that providers are facing. Please tell us more about the organizational-level barriers at your work.
- a. Long answer
8. In your opinion/ to the best of your knowledge, what are the major barriers with funding for your agency/organization?
- a. Long answer

9. On the individual level as a worker, what are the biggest barriers for you to provide services?
 - a. Long answer
10. What services do you provide most frequently? Please Select at most 5 options.
 - a. Temporary shelter assistance
 - b. Permanent housing assistance (e.g., rental assistance, finding an apartment, housing subsidies)
 - c. Employment assistance (e.g., job training, job search help)
 - d. Educational resources (e.g., GED programs, college enrollment assistance)
 - e. Health care services (e.g., medical, dental, vision, mental health)
 - f. Health care services (e.g., medical, dental, vision, mental health)
 - g. Document or Legal assistance (e.g., help with documentation, legal advice)
 - h. Financial assistance (e.g., emergency funds, budgeting help)
 - i. Substance abuse treatment or counseling
 - j. Assistance getting health insurance (Medicaid/MNCare, Medicare, TriCare, Indian Health Service-IHS)
 - k. Assistance getting disability services (including social security)
 - l. Food assistance (e.g., food banks, meal programs)
 - m. Childcare or family support services
 - n. Transportation assistance (e.g., bus passes, help with vehicle repairs)
 - o. Personal items or basic needs (e.g., clothing, hygiene products)
 - p. Social integration and support programs (e.g., community activities, peer support groups)
 - q. Other
11. What is your most frequent/requested referral? Please Select at most 5 options.
 - a. Temporary shelter assistance
 - b. Permanent housing assistance (e.g., rental assistance, finding an apartment, housing subsidies)
 - c. Employment assistance (e.g., job training, job search help)
 - d. Educational resources (e.g., GED programs, college enrollment assistance)
 - e. Health care services (e.g., medical, dental, vision, mental health)
 - f. Health care services (e.g., medical, dental, vision, mental health)
 - g. Document or Legal assistance (e.g., help with documentation, legal advice)
 - h. Financial assistance (e.g., emergency funds, budgeting help)
 - i. Substance abuse treatment or counseling
 - j. Assistance getting health insurance (Medicaid/MNCare, Medicare, TriCare, Indian Health Service-IHS)
 - k. Assistance getting disability services (including social security)
 - l. Food assistance (e.g., food banks, meal programs)
 - m. Childcare or family support services
 - n. Transportation assistance (e.g., bus passes, help with vehicle repairs)
 - o. Personal items or basic needs (e.g., clothing, hygiene products)

- p. Social integration and support programs (e.g., community activities, peer support groups)
 - q. Other
12. What services are most requested that you do not have funding for? Please Select at most 5 options.
- a. Temporary shelter assistance
 - b. Permanent housing assistance (e.g., rental assistance, finding an apartment, housing subsidies)
 - c. Employment assistance (e.g., job training, job search help)
 - d. Educational resources (e.g., GED programs, college enrollment assistance)
 - e. Health care services (e.g., medical, dental, vision, mental health)
 - f. Health care services (e.g., medical, dental, vision, mental health)
 - g. Document or Legal assistance (e.g., help with documentation, legal advice)
 - h. Financial assistance (e.g., emergency funds, budgeting help)
 - i. Substance abuse treatment or counseling
 - j. Assistance getting health insurance (Medicaid/MNCare, Medicare, TriCare, Indian Health Service-IHS)
 - k. Assistance getting disability services (including social security)
 - l. Food assistance (e.g., food banks, meal programs)
 - m. Childcare or family support services
 - n. Transportation assistance (e.g., bus passes, help with vehicle repairs)
 - o. Personal items or basic needs (e.g., clothing, hygiene products)
 - p. Social integration and support programs (e.g., community activities, peer support groups)
 - q. Other
13. If funding was provided, what additional resources or services would you provide?
- a. Short Answer
14. How can Ramsey County make services and resources better for providers?
- a. Long answer
15. What is the name of the agency/organization that you are working at right now?
- a. Short Answer

We are collecting demographic information from providers completing this survey to have a better understanding of the diverse individuals serving clients through the Continuum of Care.

16. How do you identify yourself? [Select ALL that apply]
- a. Matrix of race/ethnicity identities
17. Are you of Hispanic/Latino/a/e origin?
- a. Yes
 - b. No
 - c. Prefer Not to Answer
18. How do you identify your gender [Select ALL that apply]
- a. Male
 - b. Female

- c. Non-Binary
 - d. Transgender
 - e. Prefer not to Answer.
 - f. Other
19. In order to have a deeper understanding of what is working and what is not working in the current system, we will also be conducting interviews to providers.
If you would like to be contacted for an interview, please provide your email address below and we will reach out!
20. We value your insights and suggestions. Please share any additional comments or ideas on how Heading Home Ramsey (HHR) can improve its services and support for people experiencing homelessness and providers serving that population. Your feedback is crucial in helping us better address the needs of our community.

Appendix B: Interview Guide for Key Informants

“Good [Morning/Afternoon/Evening] I hope your day is going well! Thank you for taking the time to speak with us today. We are members of the Heading Home Ramsey Continuum of Care, conducting a needs assessment on provider experiences and perceptions in Ramsey County. This interview is to help us understand your experiences as a [position title]. We will be asking you about your role, responsibilities, and perceptions. Your answers will be used to help us better understand the present state of Ramsey County and identify areas for improvement. Your participation in this interview is completely voluntary, if you need to stop at any time or end the interview, please let us know. We will be recording the conversation so we do not miss anything you say, our conversation will be completely confidential, and the recordings will be destroyed following the end of our project on December 1st. Do we have your permission to begin recording?”

“Thank you, the recording is on, just to confirm, we have your permission to record this conversation. Do you have any questions before we begin?”

[Interviewer states the date and time – participant ID will be assigned following the interview]

Introductory Questions

1. Tell me about your current role.
 - a. *How long have you been at your organization?*
 - b. *What got you interested in the work you do?*
 - c. *What works well in this role?*
 - d. *What is missing from your role?*
2. Tell me about your typical day.

How have your daily tasks changed over time?

Ramsey County and Partnerships

3. What is the Heading Home Ramsey Continuum of Care to you?
 - a. *How does it compare to the homelessness response system?*
 - b. *What would an ideal CoC or homelessness response system look like?*

- c. What level of connection do you feel to the CoC?*
- 4. What has been your experience being a part of the Heading Home Ramsey Continuum of Care?
 - a. Describe your relationship with CoC staff or HSD.*
 - b. How has the CoC changed over time?*
 - c. Who are the most under-served population in our current system and why?*
 - d. What is the biggest worry or concern you have about our system?*
- 5. How have you built partnerships with other organizations?
 - a. What made those partnerships meaningful?*
 - b. What are the barriers to building partnerships?*
- 6. What does community in this work mean to you?
 - a. How does having a community affect the work you do?*
 - b. What is the strength of your community?*
- 7. How do you see racism/sexism/homophobia/ableism playing a role in our current system?
 - a. How do you see this affecting your staff or clients?*

Services and Resources

- 8. ONLY FOR ASSESSORS What is your perspective on the current coordinated entry assessment procedure?
 - a. What are the strengths of the current procedure?*
 - b. What are the gaps or weaknesses?*
- 9. How does funding affect your work?
 - a. What services are you most in need of that are difficult to fund?*
 - b. What is difficult about funding?*

Closing Questions

- 10. How do you overcome challenges in your work?
 - a. What is a recurring challenge?*
- 11. What brings you joy in your work?
 - a. How do you encourage others in your role or in this work?*

Is there anything about your experience that I didn't ask about that you'd like to share?

Appendix C: Interview Guide for Client-Facing Staff

“Good [Morning/Afternoon/Evening] I hope your day is going well! Thank you for taking the time to speak with us today. We are members of the Heading Home Ramsey Continuum of Care, conducting a needs assessment on provider experiences and perceptions in Ramsey County. This interview is to help us understand your experiences as a [position title]. We will be asking you about your role, responsibilities, and perceptions. Your answers will be used to help us better understand the present state of Ramsey County and identify areas for improvement. Your participation in this interview is completely voluntary, if you need to stop at any time or end the interview, please let us know. We will be recording the conversation so we do not miss anything you say, our conversation will be completely confidential, and the recordings will be destroyed following the end of our project on December 1st. Do we have your permission to begin recording?”

“Thank you, the recording is on, just to confirm, we have your permission to record this conversation. Do you have any questions before we begin?”

[Interviewer states the date and time – participant ID will be assigned following the interview]

Introductory Questions

1. Tell me about your current role.
 - a. *How long have you been at your organization?*
 - b. *What works well in this role?*
 - c. *What is missing from your role?*
2. Tell me about your typical day.
 - a. *How have your daily tasks changed over time?*
3. Can you describe what got you interested in housing services?
 - a. *How has this compared to other roles you had?*
 - b. *What makes housing services unique?*

Ramsey County and Partnerships

4. What has been your experience being a part of the Ramsey County Continuum of Care?
 - a. *What level of connection do you feel to the CoC?*
 - b. *What would an ideal CoC or homelessness response system look like?*
5. How have you built partnerships with other organizations?
 - a. *What made those partnerships meaningful?*
 - b. *What are the barriers to building partnerships?*
 - i. *How does the way your agency provides services affect partnerships with similar organizations?*
6. What does community in this work mean to you?
 - a. *How does having a community affect the work you do?*
 - b. *What is the strength of your community?*
 - c. *How can the community of Ramsey County providers be strengthened?*
7. How do you see racism/sexism/homophobia/ableism playing a role in our current system?
 - a. *How do you see this affecting your staff or clients?*

Services and Resources

8. Please describe the resources and services you provide for your clients.
 - a. *How did you access these resources and services?*
 - b. *What is the impact of these on the people you serve?*
9. How does funding affect your work?
 - a. *What services are you most in need of that are difficult to fund?*
 - b. *What is difficult about funding?*

Closing Questions

10. How do you overcome challenges in your work?
 - a. *What is a recurring challenge?*
11. What brings you joy in your work?
 - a. *How do you encourage others in your role or in this work?*

Is there anything about your experience that I didn't ask about that you'd like to share?

Appendix D: Interview Guide for Program Participants

“Good [Morning/Afternoon/Evening] I hope your day is going well! Thank you for taking the time to speak with us today. We are members of the Ramsey County CoC completing a needs assessment to better understand the current services and resources available to clients. This interview is to help us understand your experiences as a Client at [position title]. We will be asking you about your experiences as a client, how you were connected to housing, and your perspective on the types of services being provided. Your answers will be used to identify areas for improvement or change in Ramsey County. Your participation in this interview is completely voluntary, if you need to stop at any time or end the interview, please let us know. We will be recording the conversation so we do not miss anything you say, our conversation will be completely confidential, and the recordings will be destroyed following the end of our project on December 1st. Do we have your permission to begin recording?”

“Thank you, the recording is on, just to confirm, we have your permission to record this conversation. Do you have any questions before we begin?”

[Interviewer states the date and time - participant ID will be assigned following the interview]

Introductory Questions

1. Tell me about where you currently live.
 - a. *What has made it feel like home?*
 - b. *How do you feel safe there?*
2. What does home mean to you?
 - a. *How has home changed for you over time?*
3. Please describe how you got connected to housing.
 - a. *How did organizations help you get connected?*
 - b. *What was confusing or difficult about the process?*

Ramsey County Questions

4. What has been your experience with the organizations in Ramsey County (these include Catholic Charities, Lutheran Social Services, One Day at a Time, and others)?
 - a. *How does your experience compare to other places you've worked with?*
 - b. *What was the most memorable part of your connection?*
5. Tell me about the resources you used or were made aware of to help you get housing.
 - a. *How did you learn about these resources?*
 - b. *Which resource or connection helped you the most in gaining housing?*
 - c. *What resources do you think should be more well-known?*
 - d. *Looking back, are there resources you wish you had known about?*
6. Who would you consider to be your broader community?
 - a. *How are you connected to your community?*
 - b. *How has housing helped you connect to your broader community?*

Service Experience Questions

7. What has been your experience consistently finding what you need in Ramsey County?
 - a. *What resources do you think are missing from Ramsey County?*
 - b. *How do you find what you need in the County?*
8. How have you been treated by the case managers and staff you work with?
 - a. *How has your treatment changed over time?*
 - b. *What do you wish case managers and staff knew about you or others like you?*
9. How do you feel your identity has shaped your experience of getting housing?
 - a. *Do you have any specific cultural practices that go unmet in current services?*
 - b. *Tell me about any organizations or services you feel you cannot access because of your identity.*

Wrap-Up Questions

10. Please describe how you overcome challenges you face.

- a. *Who do you go to when there is a new challenge to overcome?*
- 11. Tell me about yourself in 5 years.
 - a. *How will the people the people in your life now be in your life at that time?*

Is there anything about your experience that I didn't ask about that you'd like to share?