

HEADING HOME OF SOUTH CENTRAL INDIANA

HOUSING ACTION PLAN

For Unsheltered Homelessness in Bloomington/Monroe County

In May 2024, the following leaders from Bloomington's homeless service-providing agencies and Heading Home of South Central Indiana convened to create an actionable plan for addressing street homelessness. The group met several times over a two-month period to reach consensus on all but one of the specific recommendations detailed in this plan.

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We are grateful for the thoughtful, sometimes challenging conversations that resulted in this Housing Action Plan, and look forward to continued partnership as we work to make lives better for all residents in our region.

Introduction

Unsheltered homelessness is a public health and safety crisis. That's true for those living on the streets and for the broader community. We must unite our resources and energy to tackle this challenge. We believe we can build a better quality of life for all, and have created this Housing Action Plan to achieve that goal.

In 2019, 29 people were reported unsheltered in Monroe County, according to that year's [Point-in-Time \(PIT\) count](#). Since 2019, unsheltered homelessness has increased dramatically. A [survey conducted in May 2024](#) by the South Central Housing Network (SCHN) found that 117 people *in Monroe County alone* are currently unsheltered – staying in places not fit for human habitation, including cars, encampments, abandoned buildings and on the streets. This is likely an undercount and does not include people who refused to participate in the survey or who could not be reached.

The Housing Action Plan for Bloomington/Monroe County addresses this crisis. It provides a targeted, strategic approach to create the necessary shelter, housing units and supportive services with the *goal of reducing unsheltered homelessness in Bloomington/Monroe County by at least 50% by the end of 2027 and 70% by 2030*. The South Central Housing Network and [Heading Home of South Central Indiana](#) will conduct annual surveys of unsheltered residents to track progress on these goals.

While this plan focuses on addressing unsheltered homelessness, the actions here will also result in decreasing the overall population of unhoused residents.

This plan connects to the [Heading Home plan](#), a regional guide to support long-term initiatives that increase housing security by reducing homelessness, increasing affordable housing, and providing effective strategies for addressing acute housing issues. Heading Home of South Central Indiana is the organization charged with implementing the Heading Home plan.

These ambitious goals come in the context of major changes at several of our county's primary homeless service providers. [Beacon Inc.](#) is constructing a new facility with an emergency shelter and permanent supportive housing units. [Wheeler Mission](#) is expanding its programming and facility. [Middle Way House](#) is restructuring The Rise, its transitional housing complex, to become permanent supportive housing. HealthNet's [Homeless Initiative Program](#) is restructuring due to financial challenges.

Potential supports are also in the works. [Bloomington Health Foundation](#) has undertaken a mental health focus that, among other things, could fund additional support staff for homeless service providers starting in early 2025. The [Community Foundation of Bloomington & Monroe County](#) is seeking a grant from the Lilly Endowment that would, if fully funded, add 10 case managers spread across these agencies.

The success of this Housing Action Plan relies in part on stemming the inflow of people experiencing homelessness in our region. A first step was to gain a deeper understanding of the current unhoused population in Monroe County.

In May 2024, [SCHN surveyed 249 households](#) experiencing homelessness in Monroe County. Of those, 61% (151 households) reported being in Monroe County for more than two years.

Of the total surveyed, 39% (98 households) have been in Monroe County less than two years. Those 98 households include 7% (19 households) who came from other counties in our region and 31% (79 households) who came to Monroe County from another part of Indiana or another state. (For purposes of this plan, the region is defined as these seven counties: Monroe, Morgan, Owen, Lawrence, Greene, Martin and Brown.)

A broad coalition of stakeholders is needed to address this challenge, beyond the nonprofits that serve this population. Those stakeholders include the City of Bloomington, Monroe County government, local employers, township trustees, Indiana University and IU Health, concerned community members, and philanthropic organizations including the Community Foundation of Bloomington & Monroe County, Bloomington Health Foundation, IU Health Foundation and United Way of South Central Indiana.

In addition, Heading Home and the South Central Housing Network will continue to work with other counties in this region to strengthen their services, with the goal of better serving unhoused people in their place of origin and offsetting demand for services in Bloomington/Monroe County.

Heading Home and the South Central Housing Network have partnered with [Built for Zero](#) since 2022. We are the first and so far only region in Indiana to be part of this national initiative, which is based on the belief that [homelessness is solvable](#). Belief alone won't reach our goals. Implementing this action plan – with a shared vision and broad community support – will make lives better for all our residents.

Summary of Recommendations

Immediate Priority Needs

1. Support robust, coordinated street outreach and linkage to services, including emergency shelter and housing.
2. Strengthen case management support.
3. Strengthen diversion efforts to prevent homelessness.
4. As a short-term measure to address inflow, enact a temporary moratorium on welcoming people from outside our region to overnight emergency shelters, provide reunification services for out-of-region people, and explore other ways to mitigate the increase of non-regional residents experiencing homelessness. *(Note: The group did not reach full consensus on this recommendation.)*
5. Increase the number of housing units with rents under \$500/month.
6. Bolster security and services for permanent supportive housing to reduce exits to homelessness.
7. Increase the number of beds for medical respite.
8. Determine any need for additional shelter beds.

Long-Term Priority Needs

1. Restructure the local criminal justice system to emphasize in-patient recovery and mental health care for people experiencing homelessness who repeatedly commit crimes in the community, moving away from long-term imprisonment and arrest-and-release approaches.
2. Continue to invest and advocate for additional housing to address the 9,777 gap in available units (both owner-occupied and rental) at \$500/month or less. This approach should include converting higher-rent units to more affordable rentals. ([ROI Housing Affordability Analysis p. 126](#))

Immediate Priority Needs

1. Support robust, coordinated street outreach and linkage to services, including emergency shelter and housing.

Needs: Street outreach is an important method of providing services to unsheltered residents and connecting them to shelter and housing. Currently several organizations provide some type of street outreach in Bloomington. These include sheltering agencies (Beacon, Wheeler Mission, New Hope for Families), healthcare/mental healthcare agencies (HealthNet HIP, Centerstone, IU Positive Link), and the Bloomington Police Department's downtown resource officers (DROs). In addition, Indiana Recovery Alliance does street outreach specifically for harm-reduction related to drug use.

HealthNet's Homeless Initiative Program (HIP) has been transformational in providing healthcare/mental healthcare and outreach since coming to Bloomington in 2022. They are the only agency providing direct medical and psychiatric care to residents in encampments and on the streets.

Outreach staff from all agencies meet weekly to discuss their efforts. The meeting is convened by the Bloomington Police Department's DRO Sergeant. Most outreach workers also connect unsheltered residents to the [Homeless Management Information System](#) (HMIS), the database used for this region's [Coordinated Entry system](#). Coordinated Entry is the collaborative process for moving the most vulnerable unhoused residents into appropriate housing.

However, the number of outreach staff is currently inadequate to meet the needs of a growing unsheltered population. Whenever encampments are closed, for example, it is typically the outreach staff who work with unsheltered residents in that process.

In 2024, the South Central Housing Network, with support from Heading Home, adopted a [Region 10 Street Outreach Policy](#) designed to better coordinate outreach efforts among agencies working in Bloomington and surrounding counties. This policy provides a clear guide for conducting street outreach and should be used by all agencies.

Recommendations:

1. Fund additional street outreach staff – at least 12 total – to achieve a 10-1 best practice ratio of clients per street outreach staff.

2. Explore ways to better coordinate outreach efforts among local agencies, using the [Region 10 Outreach Policy](#) as a guide.
3. A year after implementation, document and review the effectiveness of increased street outreach staff in reducing street homelessness.

Cost & Funding Sources:

- \$1M annually. Estimated \$50-\$60K per outreach staff (base salary of \$40-50K + benefits), plus funds to adjust the salaries of existing outreach staff to a commensurate level.
- Potential sources: City of Bloomington & Monroe County unallocated local income tax (LIT) revenue. Lilly Endowment & other private philanthropic organizations.

Challenges to Address:

- Adequate long-term funding is needed to increase salaries/benefits for existing and additional staff. Typical grant funding is short-term (1-2 years) and creates uncertainty for budgeting purposes and for recruitment of staff, who need employment stability.
- High turnover among street outreach workers, in part due to low compensation, difficult working conditions and secondary trauma.
- Difficulty coordinating among multiple agencies with various goals/services.
- Training and professional development is not uniform across agencies.
- As more encampments are closed, unsheltered residents disperse – making it a challenge to maintain continuity of care and build trust/relationships.

Immediate Priority Needs

2. Strengthen case management support

Needs: Case management and other supportive services are crucial to the success of lifting people out of homelessness and preventing at-risk residents from becoming homeless. Local agencies that serve this population struggle with adequate staffing. High staff turnover results from low wages, burnout, secondary trauma and a caseload that exceeds capacity.

Case management is time intensive. Priority is understandably given to people who are most vulnerable. As a result, fewer staff resources are available for residents who have

recently lost their housing and who might need only limited case management before they can secure housing again. Additional case managers will increase the ability to quickly resolve a housing crisis before it becomes chronic, thereby reducing stress on the community's limited resources.

Recommendation:

1. Add 10 additional case managers (total) to be placed at the following homeless service providers: Beacon, HealthNet Homeless Initiative Program, Middle Way House, New Hope for Families, Wheeler Mission.
2. A year after implementation, document and review the effectiveness of increasing case managers to reduce street homelessness.

Cost & Funding Sources:

- \$1M annually. Estimated \$50-\$60K per case manager (base salary of \$40-50K + benefits), plus funds to adjust the salaries of existing case managers to a commensurate level.
- Potential sources: City of Bloomington & Monroe County unallocated local income tax (LIT) revenue. Lilly Endowment & other private philanthropic organizations.

Challenges to Address:

- Adequate long-term funding is needed to increase salaries/benefits for existing and additional staff. Typical grant funding is short-term (1-2 years) and creates uncertainty for budgeting purposes and for recruitment of staff, who need employment stability.
- Recruitment of experienced staff is always a challenge. Low wages and lack of benefits make recruitment even more difficult.
- Training and professional development is not uniform across agencies. Heading Home provides a limited amount of cross-agency training and plans to increase the frequency of those sessions. This could serve as the basis for a more cohesive, collaborative approach to cross-agency training and professional development needs.

Immediate Priority Needs

3. Strengthen diversion efforts to prevent homelessness

Needs: As stated above, the success of this plan relies in part on stemming the inflow of people experiencing homelessness in our region. One impactful way to do that is to prevent residents who encounter a housing crisis from losing their home. Events that might create a housing crisis – i.e. the inability to pay their rent or mortgage – include job loss, health emergency, birth of a child or other unforeseen impacts on household income. If residents can quickly get support while they stabilize their situation, they can avoid becoming homeless.

As part of this region's Built for Zero work to end veteran homelessness, Heading Home and its partners developed the [Region 10 Veteran Homeless Prevention & Diversion Strategy](#). This document could be used as the basis for a broader diversion effort that addresses short-term needs of at-risk households.

Recommendations:

1. Create a flexible fund with administrative staff and a centralized process that can be used by multiple agencies to support people who are imminent at risk of losing their housing.
2. Partner with township trustees to better coordinate resources for diversion (rental and utility assistance, etc.)
3. Analyze and potentially implement recommendations from [consultants](#) hired by the Community Foundation of Bloomington & Monroe County, who are creating a plan to address street homelessness.
4. Use the [Region 10 Veteran Homeless Prevention & Diversion Strategy](#) as the basis for a broader diversion strategy that addresses short-term needs of at-risk households.
5. A year after implementation, document and review the effectiveness of diversion efforts in reducing street homelessness.

Cost & Funding Sources:

- An initial \$500K for diversion funds plus additional funds for dedicated staff/administrative costs.
- Potential sources: Township trustees, community groups (Salvation Army, St. Vincent dePaul, Exchange Club of Northside Bloomington's Veterans Matter initiative), faith-based organizations.

Challenges to Address:

- Many funding sources do not provide the flexibility needed to quickly and adequately resolve the emergency that led to a housing crisis.
- Township trustees are governed by state statute and the diversion spending from that source would need to align their funding constraints.
- The logistics of creating and administering a multi-agency diversion program – and determining where this program will be housed – will be an initial challenge.

Immediate Priority Needs

4. As a short-term measure to address inflow, enact a temporary moratorium on welcoming people from outside our region to overnight emergency shelters, provide reunification services for out-of-region people, and explore other ways to mitigate the increase of non-regional residents experiencing homelessness.*

Needs: Sheltering agencies do not have the capacity to provide meaningful, immediate case management and other services to all who are experiencing homelessness. According to the May 2024 SCHN survey, 39% of unhoused households (98 of 249 households) in Bloomington have been here less than two years, including 79 households (31% of all unhoused households) who have come to Monroe County from outside our region (4.4% from Marion County/Indianapolis, 14.4% from other Indiana regions, and 11.6% from other states).

In the wake of the June 2024 U.S. Supreme Court ruling on [Johnson v Grants Pass](#), we expect other communities in Indiana and elsewhere will enact laws targeted at street homelessness – for example, making it illegal for people to sleep outside or in their cars. As a result, it's likely that Monroe County could see an even greater influx of out-of-region residents seeking services and shelter here.

Our community cannot successfully support the growing number of unhoused people coming here from outside our region and state. Our resources are limited and already stretched thin. Service providers need to prioritize working with residents from the South Central Indiana region. (For purposes of this plan, the region is defined as these seven counties: Monroe, Morgan, Owen, Lawrence, Greene, Martin and Brown.) The exception to this approach is people fleeing domestic violence or discrimination, who should be provided with services regardless of their residency.

In order for this recommendation to be successful, we must invest in case management services to help people coming to Monroe County from other regions identify a safe place to which they can return. This could be another shelter, a friend or family member, or a housing opportunity. We know people have a higher chance of success if they are living in an area where they have a stronger support network to address their needs. When they relocate during an episode of homelessness, they are less likely to achieve stable housing. In addition to robust case management for everyone who comes to our community, this strategy requires sufficient resources to help those from outside our region identify and travel to a safe place to stay.

Residency requirements are one way to address the growing influx of unhoused residents coming from outside our region. However, we need to monitor the effectiveness of this approach while exploring other ways to manage this challenge to our region's homeless response system.

Recommendations:

1. For a year, prioritize services at overnight shelters for people who are residents of Region 10 (Morgan, Monroe, Owen, Lawrence, Greene & Martin counties) and Brown County.
2. For non-regional residents, provide 10 days of shelter/services while working toward their return to a location where shelters are available and they have an existing support network.
3. Provide agencies with funds that will pay for reunification (bus passes, gas for transportation, etc.) The exception to this approach is people fleeing domestic violence or discrimination, who should be provided with services regardless of their residency.
4. Develop a uniform way to verify residency that is used by all sheltering agencies. The verification needs to ensure that regional residents are not excluded due to documentation issues, such as lost IDs or lack of paperwork with the most recent address.
5. Convene a working group to explore other strategies to address the inflow of residents from outside this region who are experiencing homelessness. Enlist Built for Zero resources to analyze approaches deployed in other communities.
6. Document and review the effectiveness of residency requirements in reducing street homelessness. A year after implementing this approach, determine whether residency requirements should remain in place.

Cost & Funding Sources:

- \$100K annually for reunification funds to be distributed among sheltering & outreach agencies.
- Up to \$250K annually for participating shelters as needed for staffing to manage shelter intake, residency documentation and relocation logistics.
- Potential sources: Community groups (Salvation Army, St. Vincent dePaul, Exchange Club of Northside Bloomington's Veterans Matter initiative), city & county government, faith-based organizations.

Challenges to Address:

- Developing a uniform method of verifying residency – an approach that all shelters can agree upon and use consistently – will be difficult.
- Funds to support reunification are a crucial piece of this strategy and must be provided in order for the approach to be successful.
- Uniform cross-agency training and communication about the underlying rationale is vital, so that all staff comply with this unified approach.
- If unhoused residents who are not from this region refuse to be relocated to their home community, that could increase the number of people who are unsheltered.

**Note: This recommendation did not achieve consensus. Wheeler Mission-Bloomington will focus on Region 10 residents, work to reunify others, and continue to serve out-of-region residents if they decline to return to their home community.*

Immediate Priority Needs

5. Increase number of housing units with rents or mortgages under \$500/month

Needs: In the past decade, housing for extremely low-income residents in Bloomington has decreased significantly. Many options have been eliminated, in part due to the development of student housing that has replaced older rental properties.

These low-cost options include single room occupancy (SRO) units, studio apartments, shared housing, co-housing, tiny homes and manufactured/modular housing. They play an important role in providing accessible housing that can divert people from homelessness, especially those under 30% AMI. These units also can be a bridge for people who are currently unsheltered, providing stability in a non-congregant setting.

According to the [2024 update](#) of the Regional Opportunity Initiatives housing study for Monroe County, there is a shortage of 9,777 units for residents who can afford only less than \$500 per month for housing.

While the gap is daunting, the ROI report shows surpluses in the range of \$500-\$999 (5,553) and \$1,000-\$1,499 (3,072). We believe some of this excess can be converted, through subsidies, to address the deficit in lower-cost housing.

Regionally, Brown County shows a 609-unit deficit for housing in the less-than-\$500 range. At this level the ROI analysis shows surpluses in Lawrence, Greene and Martin counties – plus a very small surplus of 8 in Owen County. However, the report notes that the quality of rental stock in that range can be extremely poor quality, as many areas in these counties do not have rigorous building codes or rental inspection programs.

Other communities are starting to recognize the importance of this type of housing stock. For example, the city of Bloomington, Minnesota (in Hennepin County, population ~90K) is exploring zoning code changes to [expand the development of SROs](#).

Recommendations:

1. Add more than 1,000 units by 2027 in Monroe County with rents in the range of \$500/month or less, and 2,000 additional units by the end of 2030. Of these additional units, 25% should be prioritized for people experiencing homelessness or at imminent risk of homelessness.
2. Work with surrounding counties to strengthen their less-than-\$500/month housing stock. According to the SCHN May 2024 unhoused survey, 7% (19 households) who had been homeless in Monroe County for less than two years originally came from Owen, Lawrence, Greene or Morgan counties.
3. Create a long-term coordinated initiative (see Long-Term Priority Needs below) to add more units in this range.
4. Annually document and review progress toward these goals and the impact of creating these types of units on reducing street homelessness.

Cost & Funding Sources:

- This will require significant investment from multiple sources. Potential sources: Federal and state grants, [Low-Income Housing Tax Credit](#) (LIHTC), remaining city/county ARPA funds, private sector investment.

Challenges to Address:

- Behavioral issues, including actions that result in property damage, are a concern with any housing development. In some cases, on-site case management and security measures might be needed.
- Zoning could be a barrier to development, depending on the location of a potential site. Stakeholders need to work with the City of Bloomington and Monroe County planning officials and elected leaders to address this barrier.
- Partnering with willing developers/landlords is crucial. Social service agencies that serve the unhoused population do not have the capacity to take on this initiative. Potential partners include LIHTC developers and the [Summit Hill Community Development Corp.](#)
- Rent from tenants should cover building-related costs. However, subsidies might be needed to provide staffing for services and security.

Immediate Priority Needs

6. Bolster security and services for permanent supportive housing to reduce exits to homelessness.

Needs: [Permanent supportive housing](#) (PSH) is a program that provides subsidized housing, case management and wrap-around services for the most vulnerable residents. In Bloomington, PSH projects include Crawford Apartments, Crawford II Apartments and Kinser Flats, as well as other scattered site PSH.

PSH residents often suffer from physical disabilities, chronic health issues (diabetes, congestive heart failure, etc.), mental health issues, substance use disorders, and other trauma. The goal is to provide residents with safe, stable housing and adequate support to improve their health and quality of life. [Research](#) has repeatedly shown that PSH, when appropriately funded, lowers public costs for crisis services, including emergency room visits, shelter use, and jail/prison.

However, local agencies that provide services at PSH projects – Beacon for Crawford Apartments and Crawford II Apartments, and Centerstone for Kinser Flats – are underfunded and lack resources to hire adequate staff to meet residents’ needs. PSH residents frequently require intensive staff support. Such support includes help with managing their basic needs, dealing with health and mental health issues, including hoarding, and addressing other life skills. Residents also require support in setting

boundaries, such as allowing guests to violate terms of their leases. When supports are inadequate, residents risk eviction and the cycle of homelessness continues.

Unaddressed behavioral issues can also result in damages to a PSH unit, which often require costly repairs. If the property management is unable to fund those repairs in a timely manner, units sit vacant. This is unacceptable at a time when our community needs more housing, not less.

Finally, security remains a major concern for PSH projects. Non-residents who prey on vulnerable PSH residents are an ongoing challenge. Kinser Flats began providing 24/7 on-site security following the murder of a resident there in 2022. This has put a financial burden on the project and can not be sustained. Crawford Apartments do not have 24/7 on-site security.

We need to ensure that Bloomington's PSH projects are functioning in a safe, stable and sustainable manner and that people housed in PSH remain successfully housed.

Recommendations:

1. Provide 24/7 security at Crawford Apartments, Crawford II Apartments, Kinser Flats, Middle Way House's The Rise (when it transitions to PSH), the future Beacon Center, the future Bloomington Housing Authority/Centerstone Kohr Building.
2. Provide life skills case management to support clients in cleaning and caring for their homes in all PSH projects.
3. Increase overall case management support for all PSH agencies (see #2 above).
4. Strengthen relationships between property management and service providers.
5. Bolster repair funds to support quick turnover of apartments.
6. A year after implementation, document and review the effectiveness of additional PSH security and services in reducing street homelessness.

Cost & Funding Sources:

- \$300K-\$360K annually each for Crawford Apartments, Crawford II Apartments and Kinser Flats (total \$900K-\$1.08M annually).
- Additional funds needed when The Rise transition to PSH is complete and for the future Beacon PSH and Kohr Building.

Challenges to Address:

- On-site security is expensive and an ongoing need.
- Adequate long-term funding for case management is needed (see #2 above). Typical grant funding is short-term (1-2 years) and creates uncertainty for budgeting purposes and for recruitment of staff, who need employment stability.
- Recruitment of experienced staff is always a challenge. Low wages and lack of benefits make recruitment even more difficult.

Immediate Priority Needs

7. Increase the number of beds for medical respite.

Needs: There are no reliable beds for unhoused residents who have short-term medical needs that require privacy and respite. Some agencies use hotel rooms for this purpose, if funds are available. The primary needs are for unhoused residents who have been recently released from medical care and are not enrolled in Medicaid. Congregate settings are not appropriate for people recovering from medical procedures.

Recommendations:

1. Provide a maximum of 10 beds at sheltering agencies that can be used for medical respite, primarily for unhoused residents who are not enrolled in Medicaid or who are in the process of applying for it.
2. Provide funds for medical staff support to address medical respite needs.
3. Engage IU Health to collaborate on ensuring proper post-hospital care. Lack of medical respite can lead to increased EMT calls and emergency room visits.
4. A year after implementation, document and review the effectiveness of medical respite beds in addressing post-hospital care and assess whether additional (or fewer) beds are needed.

Cost & Funding Sources:

- Costs would vary, depending on how medical respite beds are incorporated into existing shelters. If all 10 beds are located at one shelter, the costs would include renovations and a full-time employee at \$60K/year.

Challenges to Address:

- Staff support is needed for any respite options.
- Coordination among medical providers needs to be strengthened.

Immediate Priority Needs

8. Determine any need for additional shelter beds.

Needs: On May 13, 2024, there were at least 117 people sleeping outside in Monroe County. That same night, our community had at least 50 empty shelter beds for men and no empty shelter beds for women or trans individuals. This tells us that if every unsheltered person wanted to sleep in a shelter, we would not have enough beds.

However, we have consistently noted that there is a segment of the homeless population who routinely choose not to enter shelter, and it's unclear how a residency requirement for shelter services (see # 4 above) would impact demand for shelter beds. For that reason, we recommend working closely with [consultants](#) hired by the Community Foundation of Bloomington & Monroe County (CFBMC) to determine whether we need additional beds, particularly for women, those who identify as women, and queer or trans men.

Currently shelter capacity for single adults is:

- Friend's Place has 40 beds for single adults and is usually full. Friend's Place has a sobriety requirement, and pets are allowed. Since Wheeler Mission-Bloomington closed its women's shelter in 2023, Friend's Place has increased beds for women but at this time does not see a sufficiently high demand to shift to a women-only shelter. Beacon's new facility, to be completed by 2027, will have 50 emergency beds, some of which might be used to meet medical respite needs.
- Wheeler Mission-Bloomington has 80 beds and 24 overflow mats for men and always has available space. Wheeler offers low-barrier sheltering with unlimited length of stays during the winter season (Nov. 1-March 31). During the summer months (April 1-Oct. 31) the low-barrier shelter stay (no background checks, ID, income, or sobriety requirements, etc.) is limited to 20 days with extensions for those seeking case management services. Wheeler Mission is evaluating its winter low-barrier sheltering for future years.
- A volunteer initiative of the Bloomington Multi-Faith Alliance provides white flag (severe weather) sheltering for up to 20 women and people with disabilities.

Our community needs to ensure that our emergency shelters meet demands while we strive to move all residents into housing.

Recommendations:

1. Work with CFBMC consultants to determine the barriers to unsheltered individuals entering shelter, including accommodations for couples and pets.
2. Support sheltering agencies to reduce barriers to shelter to increase the number of homeless individuals willing to enter shelter.
3. If all shelter beds are filled and many people remain unsheltered, explore options for short-term low-barrier contingency sheltering without creating permanent shelter beds in the near-term.
4. Document for a year how unsheltered numbers are impacted by residency requirements and make recommendations after that time on whether additional shelter beds are needed.

Cost & Funding Sources:

- The Community Foundation of Bloomington & Monroe County is funding the cost of consultants who are researching this issue. Additional costs may occur depending on the outcome of that work.

Challenges to Address:

- The primary challenge is convincing unsheltered individuals to make use of existing shelter, regardless of weather conditions. This is complicated to communicate with the general public because many people see sheltering as the solution to homelessness.
- We must carefully consider and understand the need before adding permanent shelter beds.

Long-Term Priority Needs

1. Restructure the local criminal justice system to emphasize in-patient recovery and mental health care for people experiencing homelessness who repeatedly commit crimes in the community, moving away from long-term imprisonment and arrest-and-release approaches.

Needs: In the first six months of 2024, an average of 171 households per month in Monroe County were chronically homeless. Chronic homelessness refers to people who experience long-term (multi-year) homelessness due to disabilities.

A relatively small but visible subset of people who are chronically homeless are unable to maintain permanent supportive housing when provided with it, often due to extreme untreated mental health conditions and/or chaotic drug use. For some, these conditions can lead to erratic, violent behaviors, threatening service providers, other unhoused residents and the general public. Long-term incarceration or quick release following an arrest does not address underlying needs for the individual or for public safety concerns in the broader community.

Our current system is not equipped to handle the needs of unhoused individuals who commit crimes and regularly cycle through the criminal justice system with no meaningful intervention. Lack of treatment means the cycle is likely to continue.

Nor are in-patient facilities adequate to treat these conditions. There are an insufficient number of beds for treatment of severe mental health and substance use disorders. The beds that are available are difficult to access. Other barriers include the cost of treatment/rehab, cost of medications, lack of insurance, logistical challenges (lack of access to transportation and phones/contact information), local/state/federal law & policies, continuity of care breakdowns, and client self-determination.

Homeless service providers acknowledge the need for a better approach, developed in partnership with court officials, law enforcement, health professionals, substance use experts and other community leaders.

Recommendations:

1. Create a task force of homeless service providers, court officials (judges, prosecutor, public defender) law enforcement, medical/mental health professionals, substance use experts and government decision-makers to pursue changes to the Monroe County criminal justice system.
 - a. As an example, the American Bar Association supports [creation of homeless court programs](#), and provides resources to facilitate creation of this type of specialty court. Monroe County Circuit Court already operates four specialty courts under the umbrella of a [“problem-solving court”](#) program.
2. Empower the task force to also lead an effort to add in-patient beds for high-acuity care at IU Health, Bloomington Meadows Hospital and/or other treatment facilities.

3. Refine data collection to better determine the number of people in this category.
4. Determine method of regularly reporting progress on this initiative to the public.

Cost & Funding Sources: Cost unclear. Initially, this initiative focuses on organizational/institutional changes.

Challenges to Address:

This is a longer-term project that involves navigating the complexities of the criminal justice and health care systems. It will require identifying decision makers and overcoming institutional hurdles – including significant funding needs and resistance to organizational change.

- **Resources:**
 - American Bar Association [Homeless Courts](#) briefing and best practices
 - Community Solutions: “[Atlanta Initiative Diverts People Experiencing Homelessness from Criminal Justice System to Housing Solutions](#)”
 - May 2024 Health Affairs article: “[Health Care’s Role in Ending Homelessness](#)”
 - US News & World Report: “[New California Law Aims to Force People with Mental Illness or Addiction to Get Help](#)”

Long-Term Priority Needs

2. Continue to invest and advocate for additional housing to address the 9,777 gap in available units (both owner-occupied and rental) at \$500/month or less. This approach should include converting higher-rent units to more affordable rentals. ([ROI Housing Affordability Analysis p. 126](#))

Needs: The short-term need for housing units under \$500/month is included as an immediate priority in this plan (see item #5 above). However, the demand for this type of housing – and the significant gap in availability – requires this to remain a long-term priority as well.

Recommendations:

1. Advocate with elected officials at the City of Bloomington and Monroe County to address housing needs. This includes addressing zoning code: the city’s [Unified Development Ordinance](#) (UDO) and the [County Development Ordinance](#) (CDO).

2. Create a coalition to work on this challenge, with support from developers, landlords and business groups like the [Bloomington Economic Development Corp.](#), [Building Association of South Central Indiana \(BASCI\)](#), [Monroe County Apartment Association](#), and [Greater Bloomington Chamber of Commerce](#).
3. Work with surrounding counties to strengthen their less-than-\$500/month housing stock. According to the SCHN May 2024 unhoused survey, about 7% (19 households) who had been homeless in Monroe County for less than two years originally came from Owen, Lawrence, Greene or Morgan counties.
4. Determine method of regularly reporting progress on this initiative to the public.

Costs & Funding Sources: This will require significant investment from multiple sources. Potential sources: Federal and state grants, [Low-Income Housing Tax Credit \(LIHTC\)](#), remaining city/county ARPA funds, private sector investment.

Challenges to Address:

- Issues beyond local control (labor & material costs, interest rates, etc.) affect the housing market for any community.
- Zoning and processes in both the City of Bloomington and Monroe County planning departments can add to the cost of housing and limit the number of units that are built.

Other Recommendations

The following needs were identified but not addressed in this Housing Action Plan:

1. Retool the way our community handles winter contingency, including considering “white flag nights” to address shelter during severe weather. The South Central Housing Network and Heading Home of South Central Indiana will develop a winter contingency plan, updated annually, to guide the region’s response to sheltering during winter months.
2. Create a community-wide anti-stigma campaign that also advocates for change in organizational policies. As an example, IU Health conducts warrant checks on patients and calls the Department of Child Services when unsheltered mothers give birth. This policy results in a reluctance to seek medical care, leading to crisis situations.

3. Engage in state and national advocacy for funding for mental health and substance use treatment centers, both long and short-term.
4. Address poverty and other underlying causes/solutions for chronic homelessness.