



2025 |

UNHOUSED NEEDS
SURVEY REPORT

Housing & Houselessness as a City Priority

Comprehensive Plan Principle 5: Strong Neighborhoods and Housing Choice

1. Promote more opportunities for housing choices that meet the needs of people of all ages, abilities, and incomes
2. Partner in developing housing strategies for the community.
3. Support continued investment in and ongoing maintenance of infrastructure and amenities in established neighborhoods.
4. Promote the integration of transportation mode choices into existing and new neighborhoods.
5. Foster the development of neighborhoods where people of all ages, incomes and backgrounds live together and share a feeling of community.

2023-2025 City Council Strategic Outcome: Welcoming, Livable, Engaging

Grand Junction fosters a sense of belonging, where people are accepted as themselves and have access to the amenities and services they need to thrive, and actively seeks participation from our community.

Grand Junction's 2020 Comprehensive Plan serves as a blueprint for the city, with its foundation resting on the community's vision for the future. This vision provides guidance for the formulation of goals, strategies, and overall development in Grand Junction.

The Strategic Plan, updated every two years, integrates the priorities identified as most crucial by the City Council into the broader framework of city planning and development.

Vision

The City of Grand Junction is committed to enacting housing policies and partnering with outside organizations that seek to increase affordable housing options, diversify housing choice, decrease the gap between need and housing inventory, and assist those without homes to access supportive and housing services.

Housing Division Overview

The Housing Division was launched in 2022 following the adoption of the City of Grand Junction Housing Strategy. The Housing Division has grown to three full time staff and has supported a Colorado Mesa University intern, Bachelor of Social Work students, an Americorp Hometown Fellow and an Americorp CivicSpark Fellow

Grand Junction Housing Strategy

The Grand Junction Housing Strategy was formally adopted by City Council in 2021 which included twelve housing strategies for implementation to increase housing options, affordability, and increase access to services. In 2022, the City adopted a thirteenth housing strategy focused on community engagement and education.

Unhoused Strategies & Implementation Plan

The Unhoused Strategy & Implementation Plan is a community-wide plan that builds upon the research conducted by JG Research in the Unhoused Needs Assessment (UHNA) in 2023. It enhances the initial findings outlined in the Unhoused Strategy Report, transforming them into a comprehensive community-wide plan. The plan is aimed at addressing critical gaps and meeting the immediate needs of individuals experiencing homelessness in the Grand Junction area and aligning with the overarching community objective of achieving Functional Zero. The Unhoused Strategy & Implementation Plan was formally adopted by City Council on July 3, 2024 through [Resolution 49-24](#).



Funding

From 2022 to its adopted 2024 budget, the City has committed \$19 million in housing and houseless needs. This funding encompasses capital projects, operational support for service providers, emergency assistance during COVID, funding for housing and homeless projects, matching and securing grants for housing initiatives, and actively expanding the City's role in addressing housing and houselessness issues.

Award Recipient

The City of Grand Junction's Housing Division received the 2023 Mary J. Nelson Inspirational Award from United Way of Mesa County for their outstanding work in implementation of housing initiatives and community education efforts.

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ACKNOWLEDGEMENT:

A thank you to Shae-Lynn Watts, a data consultant formerly at the Mesa County Public Health Department, for her guidance and insight in structuring and interpreting data.

Additionally, we want to thank CivicSpark Fellowship for providing Augusto Latorre the opportunity to serve the City of Grand Junction and help guide this research endeavor.

Last, but certainly not least, this report expresses deep appreciation for the individuals currently experiencing houselessness who participated in the survey and shared their stories. Their voices matter, and it is essential to ensure their experiences are genuinely heard and acknowledged. This research aims to honor their stories and contribute to the effort to end houselessness for all.

Photos appearing in this report were sourced from Canva Pro.

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A SNAPSHOT OF EXISTING COMMUNITY HOUSING & HOMELESSNESS DATA

To contextualize the survey findings, it's important to understand Grand Junction's recent housing and homelessness trends. Local data indicate a community under strain from housing affordability challenges and rising homelessness:

- **Housing Voucher Demand:** In Mesa County, nearly 2,973 households (about 5,999 individuals) are on the waiting list to receive a housing voucher, 94% of whom have incomes below 50% of the area median income. This highlights the significant unmet need for subsidized housing assistance.
- **Affordability Gap:** Grand Junction's Housing Strategy Update (2024) identified rising housing costs, stagnant wages, and a mismatch between housing supply and local incomes as key risk factors for housing instability. More specifically, the rental market saw significant losses of units priced below \$800 per month and increases in units priced above \$1500 per month. The rental gaps analysis shows a rental affordability gap of 1,211 units priced below \$625 (affordable to households earning less than 25%). Affordability has further dwindled for home purchasing as interest rates have increased. Between 2019 and 2024, home prices in Mesa County rose by 67.45% while wages did not keep pace. Entry-level home inventory has also dwindled, with homes under \$250,000 increasingly rare due to rising costs and cash buyers.

City Housing Production Goal:

The City's Housing Production Goal (as adopted by Resolution 48-22 and adjusted by Prop 123 alignment in Resolutions 64-23 and 65-23) is to: Increase affordable housing stock by 9% over three years (374 units) or approximately 125 units annually by December 31, 2026.

In Year 1 (2023-2024), the City anticipates producing 97 affordable housing units toward its cumulative 374-unit production goal, representing a 177% increase from the historical annual production of 35 units. While the City was on track to meet its 2024 goal, permitting delays have shifted 54 units to January 2025. For Year 2 (2024-2025), projections estimate an additional 80-155 permitted units. Finalized production counts for 2024 are anticipated to be available by June 2025, pending final guidance on unit counting.

To view the City's Housing Strategy Update 2024:



<https://www.gjcity.org/DocumentCenter/View/13851/GJ-Housing-Strategy-Update-with-Appendices-9-24-24?bidId=>

MEDIAN RENT: \$1500
44% INCREASE SINCE 2019
MEDIAN HOME PRICE: \$400,000
67.45% INCREASE SINCE 2019



35 } PRE-2023 AVG. UNIT production

374 } GOAL: AVG. UNIT (125/YR)

256.19% INCREASE

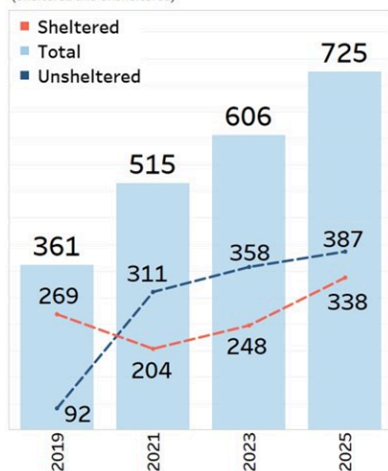
YEAR ONE 97* 177% ANNUAL INCREASE

*DEPENDENT ON FINAL STATE GUIDANCE FROM DOLA



A SNAPSHOT OF EXISTING COMMUNITY HOUSING & HOMELESSNESS DATA CONTINUED

PIT Count Totals - Mesa County 2025
(Sheltered and Unsheltered)



Housing pressures, particularly for low-income renters and chronically underserved populations, continue to intensify. The 2025 Point-in-Time (PIT) Count for Mesa County identified 725 individuals experiencing homelessness—a 100.83% increase since 2019. However, due to limitations inherent in the PIT methodology, alternative approaches can offer a more accurate representation of the true scale of homelessness in the community.

One such approach, the Economic Roundtable Methodology, estimates that approximately 2,415 individuals in Mesa County experienced homelessness or were living in doubled-up situations over the past year. This reflects a 5% increase compared to the 2023 estimate of 2,300 individuals using the same methodology.

In 2024, the region's By Name List—a housing waitlist for unhoused individuals—consistently included over 400 individuals per month. On average, only 10–20 people were housed monthly, with wait times exceeding 150 days across all demographic groups.

At the conclusion of the 2024 academic year, 823 students in School District 51 were identified as facing homelessness or housing insecurity. While this represents a 9.26% decrease from 2023, the number remains deeply concerning. Additionally, in 2024, 17 individuals died while experiencing homelessness or shortly after being housed—a 57.5% decrease from the 40 deaths reported in 2023. Notably, none of these deaths were attributed to weather-related causes; instead, they were primarily due to medical issues, natural causes, car accidents, and drug overdoses.

Overall key PIT count trends:

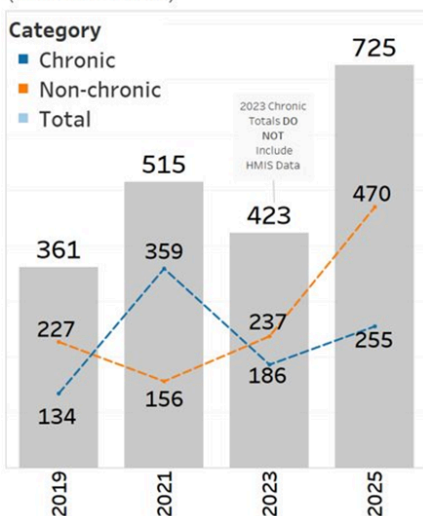
Unsheltered homelessness continues to grow, rising from 92 individuals in 2019 to 387 in 2025 (a 320.65% increase), highlighting the ongoing gap in immediate shelter and outreach services.

Sheltered homelessness has also increased, rising from 269 individuals in 2019 to 338 in 2025, a 25.65% increase. The greater use of shelter space, combined with housing market challenges that delay securing permanent housing, is causing people to stay in shelters longer. This, in turn, limits bed availability for newly unhoused individuals or those currently living unsheltered.

Chronic homelessness rose from 134 in 2023 to 255 individuals in 2025 (90.3% increase), while non-chronic cases saw the largest spike, increasing from 227 in 2023 to 470 in 2025 (107.05% increase), indicating a rise in people newly entering homelessness.

In short, based on local data, Grand Junction is not facing a temporary surge, but navigating a long-term affordability crisis that is pushing more people into homelessness. In 2020, the U.S. Government Accountability Office (GAO) found that for every \$100 increase in rent, homelessness rises by approximately 9% nationwide. In Grand Junction, that rate is significantly higher—an estimated 14.84% increase in homelessness for every \$100 rent increase. This highlights how structural challenges drive people into homelessness and underscores the importance of the City's Housing Strategies, including the goal of increasing the affordable housing stock by 3% annually. It also reinforces the need for a dedicated Unhoused Strategy & Implementation Plan—because complex problems require coordinated, sustained solutions.

PIT Count Totals 2025
(Chronic and Non-Chronic)



TERMINOLOGY

Point-in-Time (PIT) Count: An annual count of people experiencing homelessness on a single night in January, required by HUD. Sheltered PEH are counted every year and unsheltered PEH every other year. The PIT is known to undercount actual homelessness, but it is useful for tracking trends and for federal funding.

Sheltered: People residing in emergency shelters, transitional housing, or other temporary accommodations.

Unsheltered: People staying in places not meant for habitation (streets, cars, parks, abandoned buildings, etc).

INTRODUCTION

In August 2023, the City of Grand Junction's Housing Division began developing a refreshed version of the Unhoused Needs Survey to build on insights from the 2023 survey. The goal was to hear directly from people experiencing houselessness in order to better understand the current gateways into—and barriers to exiting—houselessness in Grand Junction. The 2024 survey was informed by a systems-thinking approach that frames houselessness not as a personal failing but as a solvable systems issue (Acharya, 2021).

Drawing on feedback from service providers, first responders, unhoused residents, and community stakeholders, the updated survey sought to illuminate how individuals become unhoused, what keeps them unhoused, and how local resources and interventions are shaping those experiences.

The impetus for this survey emerged from growing community concern. In 2022, business owners, service providers, and unhoused individuals alike noted that houselessness in Grand Junction was rising and straining both individuals and systems. As highlighted in the City's **2023 Unhoused Needs Assessment (UHNA)** and reinforced by this report, houselessness remains a prevalent — and rising — challenge in our community.

With input from partners like the Mesa County Public Health Research & Planning Team and Colorado Mesa University sociology professor Dr. Stephen Merino, the City developed a 44-question survey tool for the inaugural 2023 report. That first survey (conducted in December 2023) laid the groundwork for structured tracking of needs and trends. Over 70 surveys were completed in a two-week period, offering a snapshot of the local landscape.

In 2024, the survey was retained and refined rather than overhauled. Three new questions were introduced, and several existing ones were clarified to more accurately capture evolving experiences of PEH. 90 individuals were surveyed in a 2.5 week period. These updates aimed to strengthen the City's ability to monitor trends, identify gaps, and design responsive policies based on year-over-year insights. By maintaining consistency while making targeted improvements, the City can compare data across survey years to inform policy and track progress. More information about the Survey Methodology can be found in Appendix A. This report will provide a summary of findings. Specific data will be in Appendix C.

Importantly, this annual survey effort is one piece of a larger strategy to address homelessness in Grand Junction. Insights from these surveys directly inform ongoing initiatives such as the **Grand Junction Unhoused Strategy & Implementation Plan** (adopted July 2024 - more information in Appendix B). That community-wide plan, developed in response to the UHNA, lays out a coordinated roadmap to address critical gaps and meet immediate needs with the ultimate goal of achieving *Functional Zero* homelessness (i.e. making homelessness rare and brief). As this report will discuss, many of the challenges and needs identified in the survey align with the focus areas of the Implementation Plan's nine workgroups, from Housing Stability to Community Resilience, ensuring that data drives action on the ground.

PURPOSE

This report aims to deepen the City of Grand Junction's understanding of the realities faced by people experiencing homelessness (PEH) in our community. Specifically, the 2024 survey seeks to:

- **Understand** the characteristics and lived experiences of PEH in the Grand Junction area.
- **Identify** how individuals enter houselessness, and the pathways that lead to housing instability.
- **Inform** local housing and homelessness policies by providing actionable insights for the City and its community partners.
- **Support education and awareness** for elected officials, City staff, and the broader public about the systemic and personal challenges that shape the realities of houselessness in our region.
- **Track progress and change over time** by comparing 2024 findings with 2023 data, identifying shifts in needs, challenges, and service access.
- **Showcase local efforts and strategies** that have shaped the current landscape - while also identifying gaps that call for updated approaches and data-informed action.

TERMINOLOGY

Throughout this report, we use terms like **People Experiencing Houselessness (PEH)** instead of "homeless people," emphasizing homelessness as an experience rather than a defining characteristic. Whenever possible, we say **"houseless"** or **"unhoused"** interchangeable with "homeless." Many PEH feel they have a home even if they lack a traditional housing structure and people have diverse experiences of houselessness.

Note: This report avoids terms like "vagrant," "transient," or "hobo" due to their negative and derogatory connotations. Such terms have vague definitions and carry stigma. Instead, we use terminology grounded in data and respectful of individuals' dignity.

**Built
For
Zero.**

In 2019, the Homeless Coalition, a collaboration of more than 43 local service agencies, government entities, and community members, pledged to transition into a "Built for Zero" community—a movement focused on achieving "functional zero" in homelessness by implementing a systematic approach to minimize new entries into homelessness, promptly identify and address individuals' needs, and ensure swift exits, aiming to make homelessness rare and brief.



KEY FINDINGS & SURVEY RESULTS



TERMINOLOGY

Chronic Houselessness: Individuals without housing for more than one year, or had at least four episodes of houselessness in the past three years. (Note: Federal definitions of chronic homelessness often also require a disability and unsheltered status)

Episodic (Non-Chronic) Houselessness: Individuals experiencing three or fewer episodes of houselessness within a year. This often affects teens and young adults, those earning low wages, or anyone in unstable housing situations.

Transitional Houselessness: houselessness resulting from a significant life change or crisis. Often triggered by economic factors (rent increases, job loss, eviction). Individuals tend to be younger and typically require only short-term assistance or temporary housing before regaining stability.

Hidden Houselessness: undocumented or underreported houselessness. Individuals may be “couch-surfing” or temporarily staying with others without a permanent arrangement. They might not seek services due to embarrassment, mistrust of systems, or not realizing they qualify. Without intervention, hidden houselessness can lead to episodic or chronic houselessness.

DEMOGRAPHIC TRENDS

Gender and household composition data remained consistent with previous years. A slight majority of respondents identified as male (58%), with fewer identifying as female (40%) and even fewer (less than 2%) as non-binary or who did not answer. Most were adults without children in their care, and very few were part of family units—suggesting possible underrepresentation of families in the survey or may be accessing services through separate, more targeted channels.

While most respondents identified as White (85%), reflecting Mesa County’s overall population, individuals identifying as Native American, Hispanic/Latino, and African American were also present. Though the proportion of non-white respondents (15%) was lower than national trends, this likely reflects survey limitations rather than a lack of disparity. National research consistently shows that that people of color are overrepresented among unhoused populations. Locally, Native American and Black residents, though a small portion of the general population, appear disproportionately among those seeking services. This points to possible gaps in outreach – particularly to Hispanic families and migrant communities – and emphasizes the need for more inclusive and culturally responsive engagement in future surveys.

The 2024 survey data reveals a significant demographic shift that mirrors a growing national concern: the “graying” of houselessness. This year, 62% of respondents were aged 45 or older

up from 48% since 2023 – signaling that older adults are increasingly impacted by housing instability in Mesa County. Nationally, over half of unhoused adults in the U.S. are now over the age of 50. Alarming, Mesa County’s older adult homelessness rate is nearly double the state average. These trends point to the growing need for housing solutions that address both economic vulnerability and aging-related health needs. Service providers such as the Joseph Center, Catholic Outreach, and Mutual Aid report a visible rise in seniors seeking housing support.

Full demographic details are available in the Demographics Section of Appendix C.

CHRONIC HOUSELESSNESS

Survey results allow for a closer look at the differences between those experiencing chronic homelessness and those who are episodically or newly homeless in the Grand Junction area. This distinction is important because strategies to help may differ between the groups.

As defined earlier, chronic houselessness in this study refers to being unhoused for over a year or repeatedly (4+ episodes in 3 years). In our 2024 sample, about one-third of respondents met the chronic definition, and two-thirds were non-chronic (homeless for less than a year or just a few short episodes).

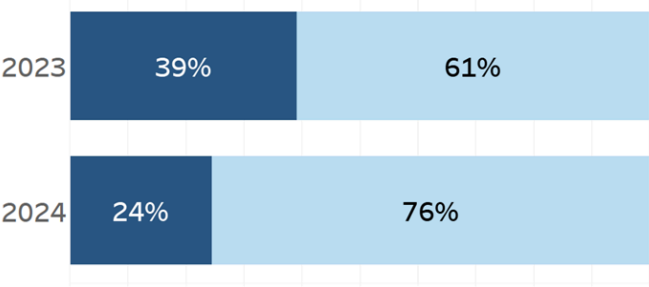
This shift marks a significant worsening of long-term homelessness in Grand Junction. By comparison, the national rate is roughly 31% (2023 AHAR), placing Grand Junction at over 2.5 times the national average, suggesting entrenched systemic barriers to housing stability in the region. The rise in chronic homelessness may reflect missed opportunities to resolve housing crises early – before they become long-term. While fewer newly homeless individuals entering the system might partially explain this trend, it’s more likely that episodic homelessness is becoming entrenched due to a lack of affordable housing, insufficient case management, and limited early intervention support.

**\$36,000/
year**

The average cost of chronic houselessness on taxpayers. (National Alliance, 2017)



Chronicity Status Distribution



Chronic homelessness continues to disproportionately impact older adults. This mirrors statewide and national patterns, but the local rise is particularly steep. In 2024, 58% of chronically unhoused individuals were over age 45, while only 27% of the non-chronic group fell into that age range. This mirrors findings from 2023, but the share of non-chronic respondents over 45 rose by nearly 39% year-over-year, suggesting that older adults are increasingly vulnerable across all homelessness categories. Local service providers—including The Joseph Center, Catholic Outreach, and Mutual Aid Partners—have reported a visible rise in seniors seeking housing-related support. This observation aligns with quantitative data and highlights a growing need for aging-friendly services, supportive housing, and care coordination.

Gender differences also emerged. While 77.37% of non-chronic respondents identified as men and 22.73% as women, those figures shifted significantly in the chronic group, where women made up 46%, a 23-point increase. Compared to 2023, the proportion of women in the non-chronic category also grew, from 22% to 34%, reflecting both changing trends and possibly better outreach to unhoused women. Still, consistent with national data, men remain overrepresented in the overall unhoused population (Henry, 2020).

In summary, chronic homelessness in Grand Junction is characterized by older individuals with deeper health and economic challenges who are heavily engaged with services but still lack the housing or support to exit homelessness. Non-chronic homelessness spans a range of ages (though increasingly older as well) and often results from acute economic or personal crises; these individuals might resolve their situation faster if they get a bit of help or if their crisis passes. The City's strategies need to address both: prevent those short-term crises from turning into long-term homelessness (through prevention and rapid rehousing), and provide intensive support and housing options for those already chronically homeless (through permanent supportive housing, case management, etc.). The UHNA's recommended strategies included both ends - from expanding rental assistance and eviction diversion to creating more permanent supportive housing units - directly targeting these needs.

Additional details on Chronic vs. Non-Chronic Houselessness can be found in Appendix C.

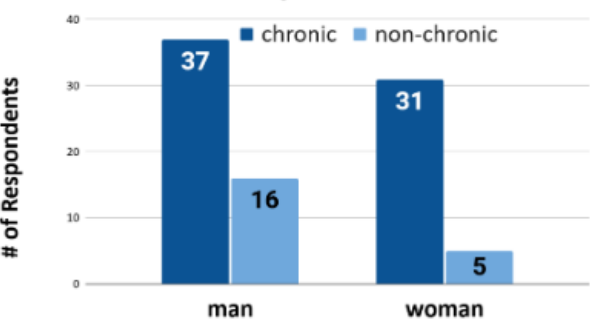
ROOTED IN COMMUNITY - HOMEGROWN HOUSELESSNESS

One of the most important and frequently overlooked findings is the strong local connection of those experiencing houselessness in Grand Junction. Consistent across both the 2023 and 2024 surveys, over 80% of respondents reported living in the Grand Junction area prior to becoming unhoused. Many have longstanding ties to the community, with more than half stating that they had been living in their own home or apartment before losing housing. Another 27% had been staying with friends or family, while only about 6% had arrived from outside the area or were staying in temporary accommodations such as motels. These findings challenge persistent myths that unhoused individuals are primarily "outsiders" drawn to the area of services or leniency, or bused here from other locations. Instead they reflect a deeply rooted local crisis driven by economic hardship, lack of affordable housing, and insufficient safety nets.

15.8 years

Average number of years individuals have lived in Mesa County

Gender Distribution - by Chronic Status



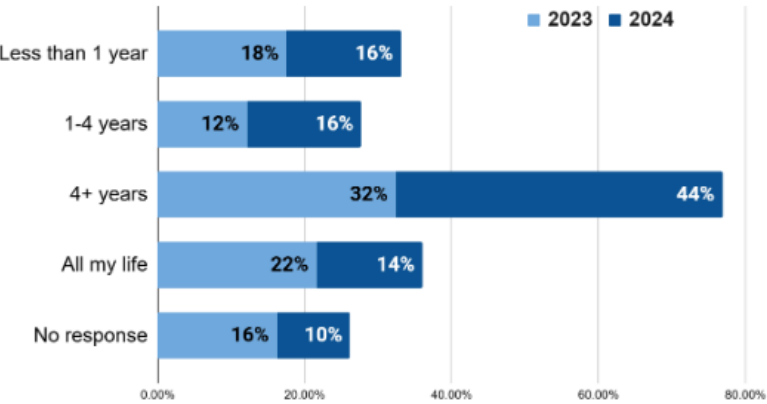
In 2024, more than two-thirds (68%) of respondents reported living in Mesa County for over a year. Nearly half (44%) had lived here for more than four years, and another 14% reported living here all their lives. Only 16% of respondents said they had been in Mesa County for less than one year at the time they became unhoused - a figure consistent with the previous year's data (18% in 2023).

Even among those who did come to Grand Junction recently, very few cited services as the reason. Of the small number of respondents who said they arrived in Mesa County due to being bused here or attracted by specific services (19 people in total), the majority of those (12) were non-chronic, and only 7 were chronically homeless individuals. Moreover, one of the key relationships between time spent in Mesa County and chronic houselessness is especially telling. Among 2024 respondents, 85% of chronic respondents had lived in Mesa County for over a year, and 67% for four or more years. In contrast, 36% of non-chronic respondents had lived in Mesa County for less than one year, and only one non-chronic respondent reported being a lifelong resident.



A similar pattern appeared in 2023. 63% of chronic respondents had been in Mesa County for 4+ years or their entire life, while non-chronic respondents were more likely to be recent arrivals.

Time in Mesa County (2023 & 2024)



The overwhelming narrative is that people experiencing homelessness in Mesa County are our neighbors, not outsiders. They are people who once had housing here, have family here, or moved here for the same reasons anyone might – jobs, safety, or family – and then fell into homelessness. **This distinction is crucial: it means our homelessness challenge is largely home-grown. And, it highlights the need to invest in local, long-term housing solutions for our community members.** Ultimately, why someone came to Grand Junction should not determine whether they are offered help or a path to stability. The focus must remain on reducing homelessness through compassionate, data-informed solutions that meet people where they are – regardless of their origin.

At the same time, being rooted in the community hasn’t shielded these individuals from significant barriers. Many are still facing obstacles that prevent them from regaining housing, which we explore later in this report (see Barriers to Housing and Exiting Homelessness). In short, people experiencing homelessness here are local and want to remain part of this community, but they need systemic issues addressed to be able to return to stable housing.

More data on Living in Mesa County can be found in Appendix C.

LOSING HOUSING: COMPLEX PATHS

42%

of respondents indicated 2 or more reasons for losing housing

The reasons people lose their housing are rarely simple or singular. Instead, they reflect a web of interconnected personal hardships and systemic gaps that accumulate over time. Data from both 2023 and 2024 show that respondents frequently cited multiple reasons for losing housing, illustrating how overlapping stressors – like job loss, health challenges, and rising rents – can create a tipping point into homelessness.

In 2024, the most frequently cited primary reasons for becoming unhoused were: **job loss, addiction or substance use, mental illness, eviction, and an open-ended category of “other” causes.** Often, these factors were interconnected. For example, a job loss might coincide with a health crisis or untreated mental illness, which in turn makes it harder to find a new job or pay rent, eventually leading to eviction. The “other” category captured deeply personal or situational circumstances that didn’t fit neatly into predefined options – **such as fleeing domestic violence, the death of a family member (and resulting loss of income or support), or needing to leave substandard or unsafe housing conditions.** Each of these represents a cascade of events rather than a single incident.

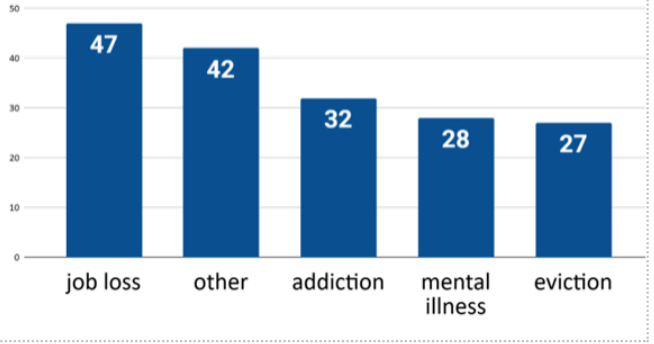
Notably, nearly **50%** of respondents selected *two or more reasons for losing housing*, and **16%** selected *four or more contributing factors*. This emphasizes the cumulative impact of hardships: houselessness often results from a combination of events and pressures rather than one isolated trigger.

This finding reinforces that houselessness is often the culmination of compounding problems. For many, it was the interplay of economic and health struggles that proved overwhelming. Without a safety net or timely intervention, a tough break becomes a breaking point.

Falling From Stability

Further underlining the complexity, the data shows that more than half of survey participants were relatively stable before they became unhoused – as noted, 54.9% had been in their own home or apartment, and another 27.4% with friends. **This means roughly 82% were housed in conventional situations until something went wrong.** Only a minority (around 18%) were in precarious or marginal situations (Prison/Jail (9%), Foster Care (3%), Other(5%) before homelessness. Many participants were one crisis away from losing housing – and that crisis came, whether in the form of an illness, a lost job, a rent hike, or a personal tragedy. While this finding reflects those surveyed, it is important to recognize that harder-to-reach populations may experience different pathways into homelessness.

Why do you think you ended up losing housing? (Top 5, 2023 & 2024 combined)



This insight has important implications: **strengthening the safety nets that catch people when they experience job loss, health issues, or other crises could prevent many cases of homelessness.** It also suggests that interventions like short-term rental assistance, eviction prevention, and accessible behavioral health care can make a decisive difference in keeping people housed. The UHNA completed in 2023 similarly found that many individuals in Grand Junction initially fell into homelessness from seemingly stable living arrangements, such as personal residences or living with family.

However, without timely support, many who experience an initial crisis face prolonged barriers to rehousing — a pattern reflected in the high rates of chronic homelessness documented across 2023 and 2024 survey respondents. This underscores the importance of prevention strategies — a focus area that the City's Unhoused Strategy & Implementation Plan addresses.

80 hrs/week

Average number of hours a minimum wage worker (\$14.51/hr) would have to work to afford a 2 - bd apartment (\$1550/mo)



Systemic Issues

While there are many reasons for losing housing cut across both chronic and non-chronic respondents, some distinctions point to deeper systemic trends:

- **Eviction** was more common among non-chronic respondents (11.3% vs. 7.6%), suggesting that abrupt housing displacement — without compounded legal or health barriers — may be more recoverable through shorter episodes of homelessness.
- **Divorce** also appeared more often among non-chronic respondents, reflecting relationship-driven instability rather than structural exclusion.
- In contrast, criminal records and domestic violence were cited more frequently by chronic respondents, pointing to the compounding effects of trauma, institutional exclusion, and long-term barriers to rehousing.
- **COVID-19** revealed a shifting pattern: while in 2023, both groups cited the pandemic as a contributing factor, by 2024 all 11 respondents who named COVID-19 were chronically unhoused — suggesting that what began as a temporary disruption evolved into prolonged instability for some.

What distinguishes chronic homelessness is not how it begins, but how long it lasts — and how hard it becomes to exit without sustained, coordinated support.

ACCESSING SERVICES - BASIC NEEDS

Survey participants were asked about their most pressing current needs — what resources or assistance would most help them right now. By understanding which needs are top priorities, the City and partners can target resources where they're needed most. We also compared the 2024 responses to the 2023 data to see how needs might be shifting as services evolve.

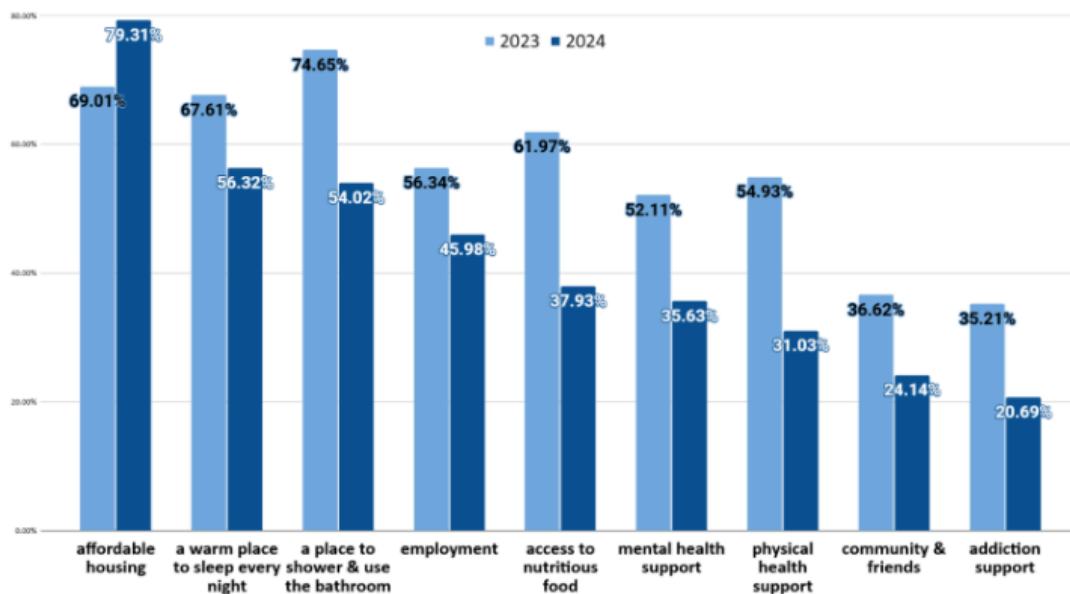
The results rank the top needs reported, and (in parentheses) show the change in percentage of respondents naming that need compared to the 2023 data. It's important to note that the up/down percentages indicate the relative change in how often a need was selected, 2024 vs 2023. For example, "Affordable Housing" was already the top need in 2023 and saw even greater emphasis in 2024, whereas needs like food, showers, and nightly shelter were cited less often in 2024 than before.

Ranking of Top Unhoused Needs		
	2024	2023
1	Affordable Housing (↑10%)	A Place to Shower & Use the Bathroom
2	A Warm Place to Sleep Every Night (↓11%)	Affordable Housing
3	A Place to Shower & Use the Bathroom (↓21%)	A Warm Place to Sleep Every Night
4	Employment (↓10%)	Access to Nutritious Food
5	Access to Nutritious Food (↓24%)	Employment

Affordable housing remains the #1 identified need by a wide margin (around 72% of all respondents named it as one of their top needs in both surveys). This is unsurprising given that housing is the ultimate solution to homelessness; however, it's important to note that when respondents say "affordable housing," they often mean more than just a low rent. They are expressing the need for housing options that they can actually access given their situation — more information can be found in the later section on Exiting Homelessness. A person with bad credit and no job doesn't just need a cheap apartment; they need an apartment where those circumstances aren't automatic disqualifiers, possibly paired with supportive services.



What Are the Most Important Unhoused Needs to You? (2023 & 2024)



As one provider put it, “It’s hard to think about a job interview when you’re hungry and haven’t bathed.” **The survey data suggest more people were able to get a meal or a shower in 2024 than in 2023, which is a positive sign of system improvement.**

Meanwhile, some longer-term needs saw a relative increase. Employment as a priority need rose by 11% from 2023. **This could indicate that more people are seeking opportunities to work, or that having secured some basic stability (through shelter or food), they now recognize employment as key to moving forward.** It may also reflect the outreach by workforce programs; for example, workforce liaisons have been more present at the RC and shelter, possibly spurring interest. Additionally, community and friends (social support) was mentioned by some, especially among chronically homeless respondents, highlighting the importance of human connection and support networks in recovery.

A particularly interesting change was the drop in stated need for mental health and addiction support, which both declined in frequency compared to 2023. Initially, one might worry that fewer people listing mental health services means they’ve given up on getting help. However, outreach staff believe the opposite: they attribute the decline to expanded on-site case management and the consistent presence of mental health and peer support professionals at places like the RC. In the past year, partnerships with Mind Springs Health and other providers have brought more counseling, substance use counseling, and recovery navigation directly to unhoused individuals. **As a result, some folks may feel their mental health needs are being addressed better now, making them less likely to list it as an unmet need. It’s worth noting, however, that on a systems level, behavioral health remains a critical priority.** The UHNA’s broader community input identified behavioral health services as the highest-priority need to address, which suggests that while the people we surveyed might be getting more support now, the overall service system still has gaps (for instance, in detox facilities or long-term treatment options). We should interpret the survey’s decline in this need cautiously and ensure we continue investing in mental health and substance use support, given how pivotal they are in the journey out of houselessness.

Differences by Chronicity: Stability vs. Survival

Needs varied significantly between individuals experiencing chronic homelessness and those who were newly or temporarily unhoused. Compared to non-chronic respondents, chronic PEH were more likely to prioritize long-term or stability-focused solutions such as: Affordable housing (71% vs. 72% – still the top priority for both groups); Employment (44% vs. 32%); physical health support (31% vs. 7%); and Community and friends (25% vs. 12%) – reflecting the importance of social connection in long-term recovery. In contrast, non-chronic respondents were more likely to prioritize transitional or short-term needs like: A warm place to sleep every night (64% vs. 46%), Access to showers and hygiene facilities (52% vs. 46%),

Encouragingly, basic survival needs like food and hygiene, while still important, were less frequently listed as top unmet needs in 2024. For example, the share of respondents needing better access to nutritious food dropped by 24%, and those needing access to a place to shower and use the bathroom dropped by 21%. Similarly, the need for a warm place to sleep every night (interpreted as either shelter or a safe place to camp) dropped by 11%. It would be a mistake to conclude that these needs are “solved” – clearly, people still require food, hygiene, and shelter.

However, the decline likely reflects improvements on those fronts over the past year. The launch of the Resource Center (RC) has provided a central daytime location offering meals, showers, laundry, and connections to services. Various nonprofits and faith groups have coordinated to expand free meal services and mobile outreach. And, combined with the efforts of more community collaboration through the Mesa County Collaborative for the Unhoused (MCCUH) and the City’s Neighbor 2 Neighbor Team the data suggests that these efforts have started to make a dent: when immediate survival needs are being met more reliably, individuals can begin to focus on longer-term goals like housing and employment. **In other words, better coverage of basic needs shifts the priority landscape upward.**

These developments are critical: meeting basic needs is a foundational step that allows people to then pursue stability.

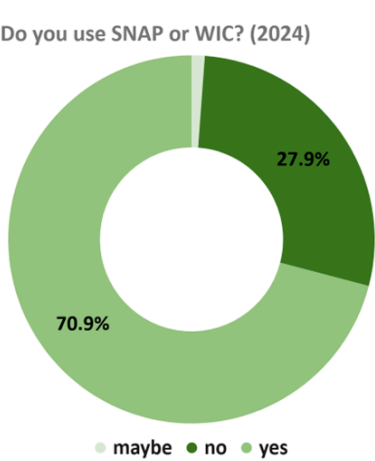


These differences reflect broader trends: the longer someone remains unhoused, the more their needs shift from immediate relief to systemic, stability-focused services. Early in a homelessness episode, a person is scrambling to meet basic needs (food, shelter, clean up) and safety. Over time, once those day-to-day survival needs are managed (even if in a rough way), the person may start thinking about how to get out of homelessness (housing, job, healthcare). However, the irony is that by the time someone has been homeless long enough to focus on stability, they often face more complex issues that make achieving stability harder. Our data show that chronic respondents engage with nearly twice as many support organizations on average as non-chronic individuals (about 5.2 vs 2.9 organizations). This indicates that those with deeper, more persistent needs have to navigate more complex systems of assistance, from shelters to clinics to social services. It reinforces national findings that the longer a person is unhoused, the more complex and intertwined their service needs become.



This insight has practical implications: to truly reduce chronic homelessness, we need to intervene earlier (so people don’t become chronic) and also tailor services for those already chronic to address multiple needs simultaneously. Grand Junction’s move toward a more coordinated system (with data sharing, case conferencing, and the like) as part of the Unhoused Strategy is aimed at exactly this: making the system easier to navigate for those with the most complex needs.

In essence, we see that **needs are not static**; they respond to what services are available. As the community ramps up certain services, immediate needs shift toward more long-term ones. **This is a positive trajectory: it means the system is (slowly) moving from just triaging emergencies to enabling progress.** The key is to keep all these plates spinning – maintain the basic services (so needs like food and hygiene don’t resurge) while aggressively pursuing housing solutions and supportive programs.



Meals
In 2024, grocery stores remained the top reported meal source for unhoused individuals (62 respondents), followed closely by Catholic Outreach (52). These trends align with 2023 patterns, but notable shifts emerged and increased mention of grocery convenience stores. These changes may reflect evolving habits or slightly improved access to public benefits like SNAP and WIC. As reported by 2-1-1, food insecurity no longer ranked among the top five unmet needs in 2024. Out of 357 calls, 211 reported having met food needs. Andrew Escamilla states, “A lot of that has to do with the fact that most of our communities have established and reliable avenues for food help, so a lot of people know about those resources and don’t need to call 211”.

Still, systemic barriers remain. Nearly 28% of respondents reported not using SNAP or WIC benefits — a figure consistent with 2023 and far below national uptake rates among eligible individuals. According to the USDA (2023), about 85% of eligible U.S. residents access SNAP, but participation among people experiencing homelessness (PEH) remains significantly lower due to bureaucratic hurdles, stigma, and ID/documentation challenges.

Food insecurity remains a reality for many, especially for those relying on dumpster diving or similar food sources (13 respondents). While relatively few, these responses highlight persistent gaps in reliable, dignified access to meals. Access to consistent, nutritious meals is a foundational component of public health and stability — as emphasized in Principle 10 of the City’s Comprehensive Plan.

These efforts not only reduce food insecurity but also ease the daily burden on individuals working toward housing stability. While progress is evident, food access challenges remain closely tied to broader housing insecurity, especially for families and older adults, as identified in the City’s Unhoused Needs Assessment.

Where Do You Get Your Meals? (2023 & 2024)

	2023	2024
Grocery Stores	66%	69%
Catholic Outreach Soup Kitchen	66%	66%
Whitman Park / Solidarity Not Charity**	53%	
Convenience Stores/Gas Stations	39%	56%
HomewardBound	47%	43%
Resource Center*		42%
Community Food Bank	35%	40%
Mutual Aid Partners	30%	30%
Church “blessing boxes”	27%	27%
The Joseph Center	20%	27%
Dumpster Diving	15%	18%
GV Peace & Justice	19%	8%
Other	4%	17%

\$202/mo

The average SNAP benefit for a single-person



Where Have You Slept While Homeless in Mesa County? (2023 & 2024)

	2023	2024
Homeless Shelter (sheltered)	59%	62%
Street (unsheltered)	57%	64%
Friend's/Family's Home (sheltered)	47%	44%
Car/RV (unsheltered)	46%	39%
Hotel/Motel (sheltered)	46%	38%
River Encampment (unsheltered)	39%	39%
Public Park (unsheltered)	36%	36%
Public Lands (unsheltered)	32%	28%
Transit Stop (unsheltered)	18%	14%
Day Center (sheltered)	7%	22%
Transit (unsheltered)	9%	9%
Other	4%	5%
Courthouse (sheltered)		2%
Desert (unsheltered)	1%	

Two major patterns emerge: 1) more individuals are entering homelessness and 2) a growing number of individuals are staying homeless long enough to meet the criteria for chronic homelessness, with limited options for safe, long-term housing.

Even though more chronic respondents selected sheltered locations in 2024 than in 2023, the proportion of chronic PEH relying on unsheltered sleeping remains alarmingly high. **This reinforces the need for deeply affordable, low-barrier housing and long-term solutions that meet the needs of those with the most severe vulnerabilities.**

Safety and Support

In 2024, the survey shifted to a multiple-choice format to better capture which organizations provide support to unhoused individuals in the Grand Valley. Catholic Outreach, the Resource Center, and the Community Food Bank were the most frequently listed – suggesting that respondents often equated “support” with direct access to meals, case management, and consistent presence. This overlap with top-ranked meal sources reinforces a key insight: when asked about “support,” many respondents gravitate toward highly visible organizations that meet immediate, tangible needs like food, hygiene, and day services. These types of services are not only essential, but also the most consistently encountered in daily survival routines – especially for those cycling through chronic homelessness.

Less-visible but critical organizations, such as Rocky Mountain Health Network or GV Connects, appeared less frequently – not necessarily due to lower impact, but because they often operate on longer feedback loops, are more specialized, or serve individuals at specific stages in their housing journey. This highlights a broader takeaway: visibility and consistency often shape perceptions of support, even as low-barrier and behind-the-scenes services remain vital to long-term housing stability.

Sleeping

In 2024, chronic PEH were more likely to report sleeping in unsheltered locations than in 2023, signaling both a growing crisis and increased pressure on shelter systems. Despite a slight increase in reported shelter use—potentially influenced by expanded outreach through the Resource Center—**shelter access has not kept pace with need. A larger share of individuals, especially those experiencing chronic homelessness, are cycling through multiple unsheltered locations, often without a stable place to rest.**

This shift stems from compounding issues, including shelter avoidance due to capacity or policy barriers, proximity to essential services, and increased enforcement in visible areas.:

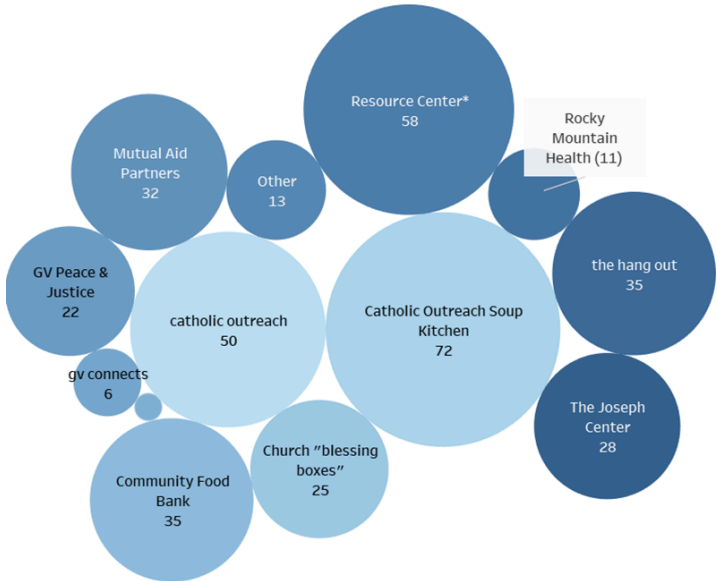
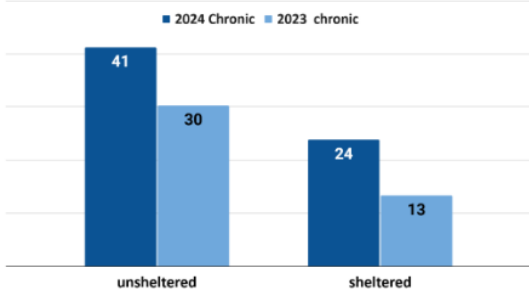
- Barriers to Shelter: Individuals often report challenges such as limited capacity, curfews, substance use restrictions, safety concerns, or a lack of privacy as reasons for avoiding shelters.
- Proximity to Services: Encampments are often closer to food banks, outreach teams, and health services, making unsheltered options more accessible despite their risks.
- Enforcement & Displacement: Street encampments are more visible to the public and law enforcement, contributing to frequent displacement and instability.

Chronic PEH reported sleeping in an average of 4+ locations, compared to 2.5 locations for non-chronic respondents, further illustrating their lack of stable housing solutions.

When comparing 2023 and 2024 trends:

- Street sleeping and use of public lands remain among the most frequent unsheltered locations.
- Car/RV and river encampment usage remains consistent with 2023, but the visibility of chronic unsheltered homelessness has grown.
- Shelter usage saw a modest increase in 2024 – likely influenced by expanded outreach efforts – but capacity remains a major constraint. Shelters, like those operated by HomewardBound, continue to operate at full capacity.

Frequency of Chronic PEH Sleeping Sheltered and Unsheltered



Organizations that Support You -2024



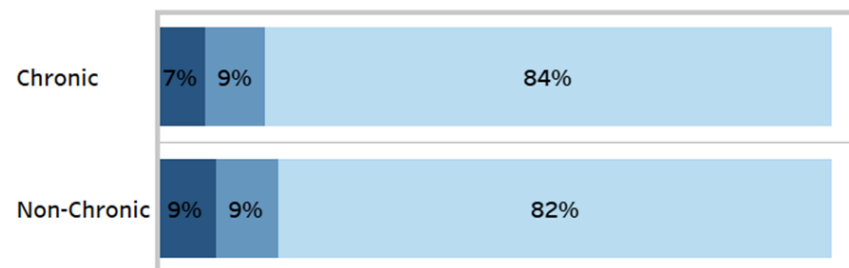
Medicare/Medicaid Enrollment

In 2024, the survey added a new question on Medicaid and Medicare enrollment to better understand healthcare access among people experiencing homelessness in Grand Junction. The data reveals that participation rates were nearly identical between chronic and non-chronic groups — with just 9% of respondents in each group reporting active Medicaid or Medicare enrollment.

This is significantly lower than expected, especially for Medicaid. In Medicaid expansion states like Colorado, about 94% of adults under 65 who are eligible are enrolled in Medicaid (Kaiser Family Foundation, 2023). Even in non-expansion states where access gaps persist, enrollment rates among the eligible still hover around 75–80%. Given that nearly all unhoused individuals surveyed would meet Medicaid eligibility thresholds, these findings point to local access barriers — likely tied to documentation challenges, stigma, or lack of sustained outreach.

For Medicare, which covers adults 65 and older, only 87.5% of respondents reported being enrolled, compared to the national average of ~95%. This gap, while smaller, still reflects missed opportunities to connect aging unhoused residents to critical health coverage.

Do You Receive Medicare/Medicaid? (2024)



Income bracket	2023	2024
\$1-249	5.4%	2.2%
\$250-499	1.4%	4.4%
\$500-999	13.5%	7.8%
\$1000-1999	9.5%	12.2%
\$2000+	2.7%	2.2%
No income	55.4%	47.8%
No response	12.1%	23.3%

Income

Income remains one of the most persistent barriers to housing stability. Among 117 respondents across 2023 and 2024 who said yes or maybe to looking for housing, **66% reported earning less than \$1,000/month** — well below Mesa County's average rent, which increased from **\$1,468 in 2023 to \$1,567 in 2024**. That rent hike (+6.7%) further strained the already fragile connection between income and housing access. (CMU GJ Economic Report)

In both years, most participants reported **no income at all**. In 2024, **38% of respondents reported having some form of income** — a slight increase from 2023. The second most common bracket after "\$0" was **\$1,000–\$1,999/month**, still well below the threshold needed for sustainable housing without a subsidy.

Despite this, at least 21 respondents in 2024 reported income levels that would qualify them for SNAP, but they were not receiving benefits — reinforcing the barriers discussed earlier (e.g., stigma, documentation, or outreach gaps).

When averaging reported income:

- 2024 monthly income among those reporting any amount: \$1,107.48
- Including \$0 earners, the average falls to just \$417.31
- (For context, SSI in Colorado is \$943/month for a single adult in 2024)

This sharp drop when including \$0 income shows just how economically precarious many respondents are — particularly those with chronic homelessness.

The gap between income and rent is widening, but this isn't just a financial issue — it's a systems issue. A growing body of research — and the City's own survey data — show that supportive services, access to benefits, and low-barrier housing pathways are just as critical as wages in helping people stay housed.

\$417/mo

Average monthly income
(including \$0 earners)

LOOKING FOR HOUSING

In 2024, when asked if they were looking for housing, 75% of people experiencing homelessness (PEH) responded "yes," with an additional 8.24% answering "maybe." This means over 86% of respondents expressed that they were actively seeking or intending to seek housing—representing a 14.67% increase from 2023. This represents that a sizeable majority of PEH who were surveyed have interest in housing.

Since January 2024, the average number of individuals and/or households on the local By Name List has been approximately 560— a 41.46% increase from the average in 2023 (398).

The rising demand reflects increased awareness among PEH of available housing services and support programs. Additionally, the increase of PEH may also be attributed to heightened awareness of the By-Name list and housing options among housing and outreach providers. Frontline staff to many agencies report growing trust in the service systems, more frequent referrals to housing and case management, awareness of the Coordinated Entry system, and better communication of housing availability.



These two changes are likely the result of extensive outreach, coordinated efforts, and shared data systems used by service providers and community partners through the City's Unhoused Strategies & Implementation Plan, the Neighbor 2 Neighbor Team, and the Mesa County Collaborative for the Unhoused (MCCUH). Together, these efforts represent a more unified regional approach to reducing long-term homelessness through housing-focused solutions—and a growing recognition that stable housing remains the primary unmet need for most PEH.

86%

of surveyed individuals said “yes” or “maybe” when asked “are you looking for housing?”

It’s possible that among the 17.65% of respondents who said, “no”, there are still individuals who would be interested in obtaining housing if given the right circumstances and/or have disengaged from a system that has failed them. Feedback from providers and previous studies suggest that some of these individuals may be reluctant to pursue housing due to lack of trust, fear of restrictive environments (ie cannot live with spouse or a bring their pet, etc.), or are discouraged by the long waitlists, reinforcing the need for more housing options.

And, regardless of whether someone said, “yes,” “maybe” or “no”, financial barriers continue to make housing unattainable for many. And as mentioned in the income section, 64% of respondents reported having no income, 72% of respondents in both years ranked affordable housing as their top need, and “Paying for housing” was cited as the number one concern about moving into housing by both chronic and non-chronic PEH.

This presents a stark paradox: while more PEH are actively seeking housing, many lack the financial resources to secure it. It reinforces the urgency of expanding deeply affordable housing, income supports, and low-barrier housing programs that address the unique economic challenges faced by this population.

Looking for housing	2024 Chronic %	2024 non-chronic %	2023 Chronic %	2023 non-chronic %
Maybe	4.76%	13.64%	23.26%	3.70%
No	15.87%	22.73%	37.21%	29.63%
Yes	79.37%	63.64%	39.53%	66.67%

HOUSING NEEDS

Ending homelessness requires more than simply increasing the number of housing units—it requires creating housing options that truly work for people, particularly those who have been unhoused the longest. The survey results reflect this need. While non-chronic individuals experiencing homelessness often prioritize affordability or immediate shelter, chronic PEH are more likely to express specific preferences shaped by years of adaptation, autonomy, and trauma recovery. 47% of chronic PEH said they needed housing that allows pets (compared to 10% of non-chronic). 40% prioritized being housed with a partner (vs. 5% of non-chronic). Only 5% sought shelter-based housing (vs. 17% of non-chronic).

These findings underscore that chronic PEH are not simply looking for any roof over their heads—they are seeking housing that respects the lives they’ve built while surviving without one.

The experience of long-term homelessness reshapes a person’s habits, identity, and relationships. As people remain unhoused, they often develop unique coping mechanisms, build survival networks, and adapt to systems that do not prioritize their needs. For many, transitioning into conventional housing — particularly models that impose restrictions — can feel disorienting or even unsafe. This can explain why interest in pet-friendly housing, partner-inclusive housing, and low-restriction environments ranked significantly higher among chronic PEH.

When asked about housing priorities, chronic PEH emphasized choice, safety, and support. This aligns with national research, which has consistently shown that housing retention and long-term stability improve when housing is paired with wraparound supports, such as mental health care, peer navigation, and case management. Services typically found and supported through Housing First models — not only those that offer units, but those that build supportive environments for sustained recovery.


TERMINOLOGY

By-Name List: A by-name list is a real-time, continuously updated list of individuals or households in a community who are experiencing homelessness. It includes key information about each person’s housing status, needs, and history. It allows service providers to coordinate care, prioritize resources, and track progress toward housing. Unlike general data reports, a by-name list is person-specific—each entry represents a real person known by outreach workers or service providers. The purpose is to ensure that homelessness is addressed at an individual level through collaborative, data-driven approaches that support faster and more effective housing placements.

Coordinated Entry System: A coordinated and streamlined process used by a community to assess, prioritize and connect PEH to available housing units based on their level of need and vulnerabilities.

The By-Name List in Mesa County is managed through Grand Valley Catholic Outreach as part of the Coordinated Entry System. Every other week approximately 40 individuals representing 14 local service providers meet to review cases and connect individuals to available housing units.





80% of chronically homeless individuals remained housed after five years when provided with both housing and support services.
-National Low Income Housing Coalition, 2020

HOUSING RE-ENTRY

For many, reentering housing is not only a physical transition—it's an emotional and psychological one. The 2024 survey reveals that the top concerns for people experiencing homelessness (PEH) when thinking about moving into housing remained remarkably consistent with 2023: **paying for housing, being alone, and rules**. Together, these top concerns reflect deep-seated fears about the sustainability of housing, the emotional risks of isolation, and the systemic or personal barriers that may arise—even when housing becomes available.

This insight is echoed in the **consistent concern about being alone**, reported by nearly a third of all respondents in 2024. **It underscores the vital role of social and emotional stability in housing retention. Bonds formed during homelessness—though not always labeled as “friendships”—often function as survival networks.**

The fear of losing these connections when entering housing may explain why “leaving friends” and “being inside” remain persistent worries across both years. In fact, while “leaving friends” consistently ranked lower overall, the high concern for being alone suggests that PEH may be reluctant to enter environments that lack connection or familiarity. These findings align with research by Dr. Marisa Zapata at Portland State University, who emphasizes that “successful rehousing is not only about getting people indoors, but about ensuring they can stay there—physically, emotionally, and socially.”

“Housing First”

Housing First is an evidence-based approach to ending homelessness that prioritizes providing people experiencing homelessness with permanent, stable housing as quickly as possible, without preconditions such as sobriety, employment or participation in treatment or services. The philosophy is simple: housing is a basic human need and should not be conditional.

Housing First gained momentum in the early 2000's when the success of Pathways to Housing, a nonprofit who developed the Housing First Model under the leadership of Dr Sam Tsemberis in 1992. The model was a response to a traditional “treatment first” model that required individuals to achieve sobriety or psychiatric stability before being eligible. Independent evaluations showed a high housing retention (85-90%) and reduced the use of emergency services – compared to 30-50% in traditional models. A systematic review also found that Housing First reduced homelessness by 88% and improved housing stability by 41%.

In 2003, Housing First began being endorsed under the Bush Administration’s “Chronic Homelessness Initiative”. Despite occasional criticism or confusion about its principles, bipartisan support for Housing First remains strong particularly for permanent supportive housing and veteran services. It was expanded and funded under Presidents Obama, Trump (1st term), and Biden.

Housing First has strong evidence backing its effectiveness, but it's not without critiques. A key concern is that it is often confused with “Housing Only,” where housing is provided without sufficient supportive services. While the model is built on offering voluntary services, critics argue that without strong mental health and addiction support, individuals may struggle to remain housed. Local implementation challenges, such as a lack of affordable units and underfunded wraparound services,

can dilute its impact and create public concern, especially when visible issues like substance use persist.

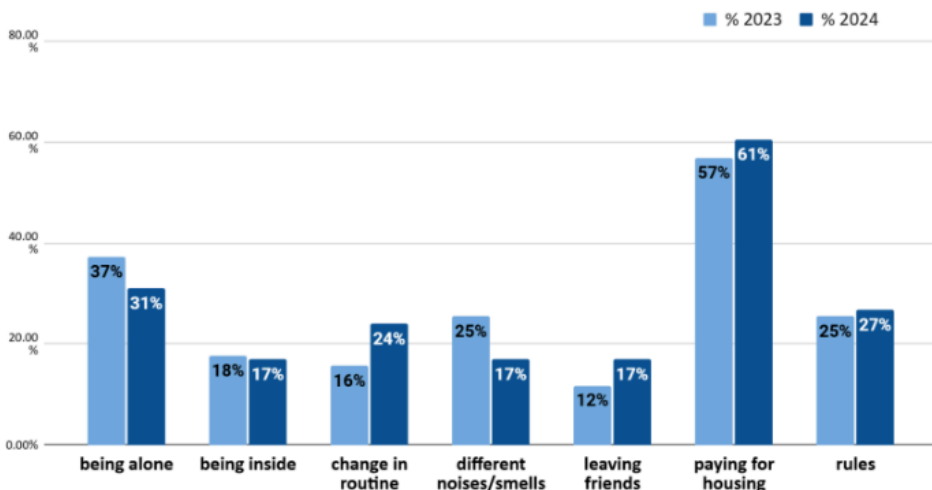
Others argue that Housing First is resource-intensive and may not be the best fit for all populations—such as families or youth with short-term housing needs—and can seem unfair to individuals who are low-income but not chronically homeless. Still, evidence shows that when properly implemented with robust services, Housing First significantly improves housing stability and reduces emergency system use. Its success ultimately hinges on adequate investment, community support, and a well-coordinated service system.

In addition to housing outcomes, participants in Housing First programs are more likely to engage with supportive services once housed.

- A study in Denver found that Housing First participants had more office-based psychiatric care visits, increased prescription medication use, and fewer emergency room dept visits compared to traditional programs.
- A Toronto based program found that participants experienced significant improvements in community functioning and quality of life over two years.

From its roots in 1992, Housing First has evolved from a local innovation to an endorsed strategy for ending chronic and veteran homelessness. It has received strong support across administrations – Democrat and Republican alike, because of its results: higher housing stability, lower public service costs and better outcomes for people with the most complex needs. Housing First is NOT “housing only” or “housing without structure”. When done correctly, it leads to improved housing stability, better health outcomes and reduced use of crisis services.

What worries you the most about moving into housing?



When we disaggregate responses by chronicity, distinct differences emerge:

- **Chronically unhoused respondents expressed greater concern for rules, change in routine** (27.27% vs. 12.5% among non-chronic), **and being inside** —issues that can feel disorienting or even triggering after long-term survival outside of structured systems.
- **Non-chronic respondents** were more likely to prioritize paying for **housing**, with 68.75% selecting it as their top concern, compared to 58.18% of chronic respondents.

These contrasts suggest that while affordability remains a shared concern, those who have been unhoused longer face more layered challenges—from emotional readiness to sensory overwhelm. **The longer a person remains unhoused, the more complex reentry becomes, as both psychological and structural barriers intensify.**

Poverty isn't just a lack of money, it's a lack of relationships - *Evicted*, by Matthew Desmond

BARRIERS TO HOUSING RE-ENTRY

Once someone becomes unhoused, returning to stable housing can be difficult due to numerous barriers. The survey asked respondents what **steps or changes** would be necessary *before* they could move into housing. The answers in 2024 mirror the patterns seen in 2023, painting a picture of the obstacles people face on the path out of homelessness.

The top steps cited are overwhelmingly centered on **eliminating discriminatory barriers and securing necessary income or documentation** before housing is attainable. In fact, over half of all respondents selected at least one form of discrimination as a key obstacle to getting housing.

Discrimination and "High Barriers"

At the top of the list were calls for "no discrimination" — whether based on credit history, criminal background, substance use, or behavioral health issues. **More than 80% of respondents in both 2023 and 2024 reported encountering some form of discrimination when trying to access housing.** Landlords or programs often require a clean rental history,

no past evictions, no criminal record, proof of sobriety, or adherence to strict rules. For individuals with complex histories — such as a past felony, a prior eviction, poor credit, or ongoing mental health and addiction challenges — these requirements present a nearly insurmountable barrier. **One respondent's comment encapsulated the frustration: "Sobriety — but it's too hard to stay sober on the streets."** This highlights the Catch-22 many face: housing programs demand stability (like sobriety or steady employment) as a precondition, yet obtaining that stability is incredibly difficult while living on the street.

This reflects a well-documented issue in houselessness systems. Research by the National Low Income Housing Coalition and evidence from Housing First programs show that high-barrier requirements (such as requiring sobriety, income, or good credit before providing housing) tend to exclude the very people who most need support.

In contrast, Housing First models, which Grand Junction is exploring, emphasize getting people into housing first and then providing wraparound services, without preconditions. These programs have shown higher rates of long-term housing retention and reduced returns to houselessness, even for those with behavioral health conditions or criminal justice involvement.

For Grand Junction, the prevalence of reports about discrimination and high barriers indicates a critical gap in our local housing system: **a lack of truly low-barrier housing options for individuals with complex histories.** The UHNA data reinforces this, noting that people cycling through jails, addiction treatment centers, or mental health facilities often face disproportionate barriers to re-entering into stable housing due to institutional stigma and limited reentry planning. In practice, this means some individuals shuttle between jail, hospital, and the streets precisely because they cannot access housing that would break that cycle. It's a revolving door that moves people from one institutional setting to another—without ever providing a home.



Financial Barriers

The other major theme in “steps before housing” is financial. In 2023, 79% of respondents said they would need “more money (income or savings)” before they could get housing. In 2024, that figure, while still high, declined to 65%.

Money remains a central concern – rents are high relative to incomes, and move-in costs (deposit, first month’s rent) can be prohibitive for someone starting from zero. The year-over-year drop of 14 percentage points might reflect some progress: possibly increased outreach about and access to financial assistance programs. Since last year, agencies and the City have expanded efforts to connect people with housing vouchers, emergency rental assistance, and income-based housing.

Indeed, **respondents in 2024 reported greater awareness of resources like housing vouchers, temporary housing programs, and rental assistance.** These supports may have eased some immediate affordability fears, particularly for first-time or newly unhoused individuals. However, two-thirds of respondents still feel they need more income to secure housing, underscoring that affordability remains a fundamental challenge. It also underscores the importance of the City’s housing efforts to increase affordable housing stock (e.g., the 3% growth goal in the Housing Strategy Update) and provide avenues for income growth or support for PEH.

Documentation and Administrative Hurdles

Another significant hurdle is obtaining the legal documents and paperwork needed for housing. Many housing programs (and even private landlords) require valid identification, social security cards, birth certificates, or proof of income. Replacing lost IDs or other documents can be a daunting task for someone who is homeless. **Encouragingly, our survey found a notable improvement on this front: the percentage of respondents citing “getting legal documents” as a necessary step before reentering housing dropped from 46% in 2023 to 34% in 2024.** This 12-point decrease may reflect the impact of better service coordination in the past year. Local organizations like The Peace & Justice Center have been actively helping PEH obtain IDs and vital records and a more centralized approach (through the Resource Center, Neighbor 2 Neighbor Program, and collaborations among service providers) likely made it easier for people to navigate bureaucracy.

This is a positive sign of progress – it suggests that targeted efforts to remove administrative barriers (like ID acquisition) are yielding results. It underscores that solving homelessness is not only about big policy changes or funding (though those are critical), but also about smoothing out the seemingly small, practical obstacles that can loom large in someone’s life. Simplifying processes, offering help with paperwork, and reducing administrative burden can directly translate into more people becoming “document-ready” for housing. **The Unhoused Strategy workgroup on Administrative Integration will be key to continuing this work of removing bureaucratic obstacles.**

HOUSING STABILITY

Housing is not just about placing a roof over someone’s head—it’s about helping them stay there. The 2024 survey results echo a truth long emphasized by both researchers and service providers: maintaining housing stability requires more than a lease and a key. It demands wraparound support, particularly for those who have faced long-term, repeated barriers to stable housing. In both 2023 and 2024, support paying rent was the most frequently selected need for staying housed, with nearly three-quarters (73%) of respondents in 2024 identifying it as essential. This represents an 8% increase from the previous year.

“

Some of our overnight guests have waited so long for housing that they have lost hope of ever obtaining it again. We hear the stories each night over dinner of what their searches were like that day. The struggle to find a place to lay your head, even with a voucher in hand, has become overwhelming for those with PTSD and other conditions.

Sherry Cole, Program Coordinator for The Peace and Justice Center
(formerly Grand Valley Peace and Justice)

”

TERMINOLOGY

“High-barrier vs Low-Barrier”: In the context of services for people experiencing homelessness, the terms “high-barrier” and “low-barrier” refer to how easy or difficult it is to access services—not whether rules exist.

- **Low-Barrier Services** are designed to be easily accessible with minimal requirements for entry. These services aim to reduce obstacles such as identification requirements, sobriety, program participation, or criminal background checks. Importantly, low-barrier does not mean rule-free. Reasonable rules are still in place to ensure safety and respect for all participants and staff, but they are not used to restrict access.
- **High-Barrier Services** have stricter entry requirements that can unintentionally exclude individuals who need help the most. These may include sobriety mandates, extensive documentation, or compliance with certain conditions before accessing shelter, housing, or other resources.

There is substantial confusion around this terminology, often due to the misconception that “low-barrier” means a lack of structure or expectations. In reality, the distinction lies in whether barriers prevent people from getting in the door, not whether services maintain order once they’re inside.



The data also showed a striking difference between chronic and non-chronic respondents: 57% of chronic respondents selected rent support compared to just 17% of non-chronic respondents.

This disparity reflects how **long-term unhoused individuals are often more deeply impacted by structural poverty and rent burden, limiting their ability to stabilize even when housing is made available.** This aligns with national data from the National Low Income Housing Coalition (2023), which found that rent burden affects over 70% of extremely low-income renters.

Beyond rent, **other recurring needs in 2024 included transportation (64%), support paying for things outside of rent (58%), and employment (62%).** These priorities reflect not only financial fragility, but also the need for practical tools to regain independence and participate in community life.

Compared to non-chronic respondents, chronically unhoused individuals consistently selected more support needs across the board, particularly in categories tied to long-term vulnerability. **Chronic respondents were over four times more likely to request support for addiction recovery (16.46% vs. 2.53%), and over four times more likely to identify mental health support (27.85% vs. 6.33%) and physical health support (21.52% vs. 3.8%) as critical for maintaining housing.** These trends echo national studies estimating that 40% of unhoused individuals experience mental health conditions (SAMHSA, 2023) and support broader calls for trauma-informed housing models tailored to those with more complex needs.

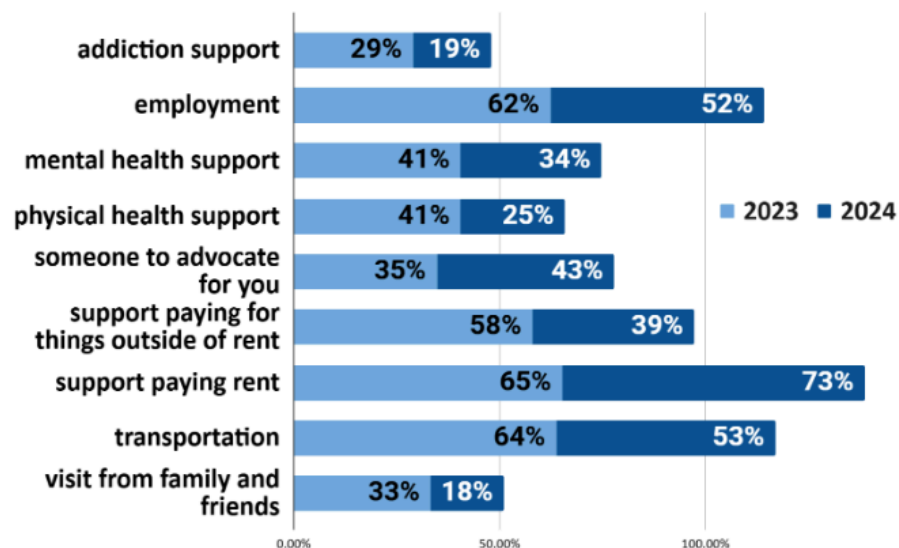
Chronically unhoused respondents were also more likely to select "someone to advocate for me" (32.91% vs. 10.13%). These responses often stem from compounding barriers—including past interactions with institutions, systemic mistrust, or a lack of social support networks. In particular, women were more likely than men to report advocacy needs, reflecting how intersecting issues like domestic violence, legal vulnerabilities, and childcare responsibilities disproportionately affect unhoused women (National Coalition for the Homeless, 2023). Meanwhile, employment remained a top response among both groups—but with notable differences.



LOCAL CHALLENGES

In Grand Junction, homelessness is shaped by a combination of broader structural issues and specific local dynamics. Key challenges include the mismatch between wages and rising housing costs, affordable and supportive housing supply, with even employed individuals unable to secure stable housing due to a lack of affordable units. Gaps in behavioral health services leave many without access to necessary treatment for mental illness or substance use, making housing retention more difficult. The erosion of the social safety net—such as limited disability benefits and long waitlists for assistance—further compounds vulnerability. Stigma and community resistance can slow the expansion of needed housing and services, while interactions with the justice system often create barriers to stability. While transportation did not explicitly rank as a top need, it remains a key underlying barrier – affecting access to employment, services, and housing opportunities.

What do you need to stay in housing? (2023 & 2024)



Employment support was selected by 39.24% of chronic respondents and only 12.66% of non-chronic individuals in 2024, indicating that job access is a meaningful aspiration but often difficult to achieve without foundational supports. These findings are consistent with HUD's 2021 Employment & Homelessness Report, which highlighted the difficulties PEH face in maintaining employment amid instability.

Notably, **the proportion of respondents citing addiction support as a housing retention need dropped from 28.99% in 2023 to 18.99% in 2024.** This decline may reflect shifts in prioritization—where housing affordability and mental health support now take precedence—or possibly growing access to addiction-related services through community health partners.

As in 2023, transportation remained a critical factor for stability, especially for chronic respondents. Rural and semi-rural geographies like Mesa County increase reliance on public systems like GVT, and for individuals facing medical appointments, job searches, or probation requirements, reliable transit can be the linchpin that keeps them housed. **This need was cited by 32.91% of chronic and 20.25% of non-chronic respondents in 2024, reinforcing transportation as a structural stabilizer.**

Finally, a smaller but growing percentage of respondents noted "visits from friends or family" (33% in 2024, up from 18% in 2023) as helpful for housing retention. While less commonly cited overall, this increase points to the social dimensions of housing stability—how staying housed isn't only about money or services, but about feeling connected and supported.

The City and its partners are actively addressing these inequities and gaps through coordinated local action, targeted systemic change, and the ongoing implementation of the Unhoused Strategy & Implementation Plan. These efforts, led by the nine workgroups, continue to be strengthened and expanded to create lasting impact. It is clear that momentum is building, and sustained effort is needed to keep the ball rolling. Likewise, advocating for more state and federal resources (for vouchers, for treatment, for affordable housing development) is necessary because local government alone cannot fix wages or build enough housing without outside investment.

LOCAL PROGRESS

While significant challenges remain, Grand Junction is also positioned with several encouraging structural advantages and initiatives that support progress in addressing homelessness.

- **Improved Access to Services:** Fewer respondents this year cited unmet basic needs (food, hygiene) as top priorities, suggesting that services like the Resource Center are making an impact. The decline in need for help with IDs and documents suggests our community navigation efforts are working. These are tangible improvements in the system that have occurred in the past year. A significant increase in individuals added to the By Name List reflects both a strong community-wide effort by service providers and a growing willingness among people experiencing homelessness to engage with services – demonstrating that many are actively taking the necessary steps to access housing and support.
- **Increased Awareness of Resources:** Respondents in 2024 showed greater knowledge of available programs (housing vouchers, etc.). This implies outreach and information-sharing improved. People can't use help they don't know about – so better awareness is progress.
- **Policy Momentum:** Since the last survey, the City adopted the Unhoused Strategy & Implementation Plan (July 2024) and the Housing Strategy Update 2024 (Oct 2024). These mark significant progress at the policy level. There is now an official road map with specific strategies, workgroups formed, and measurable goals (like the 3% housing growth target) to tackle the issues that the surveys have identified. This alignment of data to policy action is progress in itself – it means the community is moving from understanding the problem to implementing solutions. For example, City Council's adoption of these plans and dedicating resources (as noted, millions in funding leveraged for housing) is a concrete step forward.
- **Funding Momentum:** The community has shown a clear commitment to addressing homelessness, with the City allocating and securing over \$22 million in funding through grants and other resources between 2022 and 2025—a substantial investment in housing and support initiatives.
- **New Collaborations:** The community has a strong collaborative environment, many agencies are working together evidenced by the multi-partner Unhoused Needs Assessment and the community-wide Unhoused Strategies & Implementation Plan. Moreover, the establishment of nine workgroups under the Implementation Plan has brought a wide array of stakeholders together. Seven of these workgroups launched in mid-2024, covering: Administrative Integration, Funding & Resource Stewardship, Outreach & Basic Needs, Access & Mobility, Housing Stability, Data Analysis, Policy & Public Engagement, and Community Resilience & Public Health (An additional advisory group of people with lived experience of homelessness is also being formed.). The very act of having these focused teams is progress – it creates accountability and momentum. Already, these groups have begun meeting to set action steps, whether that's streamlining referral processes or identifying potential sites for new housing.
- **Functional Zero Goal:** By aligning with the Built for Zero framework and explicitly aiming for functional zero homelessness, Grand Junction has adopted a best-practice goal. Functional zero doesn't mean no one will ever become homeless, but that the community will have a responsive system to quickly help anyone who does, so that homelessness is rare and brief. Embracing this goal (and joining statewide efforts) is itself a forward step that commits the city to outcome-focused work.
- **Interim Housing Code Updated:** A key finding from the Unhoused Needs Assessment highlighted that many unsheltered individuals currently have no safe or stable place to stay, increasing their vulnerability and exposure to harsh conditions. In response to this urgent need, the City approved an interim housing code designed to allow for more innovative and flexible non-congregate shelter options throughout the community. This change aims to expand shelter capacity beyond traditional congregate settings, offering safer, more dignified, and accessible alternatives that better meet the diverse needs of those experiencing homelessness. Through an anticipated 2025 Request for Proposals (RFP) focused on funding homeless and housing solutions, the City is hopeful that new options will emerge to expand the continuum of shelter and housing.
- **Increased Housing Units:** The City's goal to increase affordable housing production by 3% annually is ambitious—and early results are promising. In the first year alone, production rose approximately 177% over previous years, with another significant increase anticipated in the second year. These gains reflect major progress toward reducing homelessness.



The Neighbor 2 Neighbor Team with many partners gathered to outreach to encampments and to refer individuals to resources





Local agencies and City Staff host a bike clinic for unhoused individuals at the Resource Center

CONCLUSION AND NEXT STEPS

The 2024 Unhoused Needs Survey reinforces key findings from 2023: homelessness in Grand Junction is a complex, local issue driven by housing affordability, unmet health needs, and systemic gaps. Most individuals experiencing homelessness are long-time residents who seek stability, connection, and support—but face persistent barriers. The common myth that people are drawn here for services is not supported by the data. Our focus should remain on supporting members of our own community through increased access to services and housing. While affordability is at the heart of the crisis, housing alone is not enough—particularly for those who have experienced long-term homelessness. Continued progress will require both supportive services and sustained investment. Fewer respondents cited lack of documentation or information as a barrier, indicating that improved coordination is making a difference. Community engagement and education remain essential, and addressing homelessness will take the collective effort of residents, businesses, and civic groups. Improved access to basic services, growing awareness of resources, and stronger system coordination through the City's Unhoused Strategy & Implementation Plan and active community collaboration, Grand Junction is making meaningful strides. **Continued focus on expanding deeply affordable housing, strengthening support services, and engaging the broader public will be essential to sustain progress and move closer to a future where homelessness is rare, brief, and non-recurring.**

Looking ahead to the 2025 Unhoused Needs Survey, we aim to implement the lessons learned. We will strive for a larger and more inclusive sample (reaching youth, families, and others), perhaps reinstituting incentives to boost participation. We will likely add questions on emerging topics (for instance, how many have attempted to access safe parking or would use it if available, or more detail on employment barriers). We will also be able to measure the impact of the new initiatives launched in 2024. By then, some new housing should be online, the workgroups will have had time to implement solutions, and hopefully the PIT count or other measures might show a slowing or reduction of homelessness growth.

Grand Junction's comprehensive approach – **aligning data, community input, strategic planning, and on-the-ground action – is grounds for optimism.** It is rare for a city of our size to have conducted a rigorous needs assessment, followed it with annual surveys, and stood up a structured implementation framework in such a short time. **This reflects both the urgency of the issue and the commitment of city leadership and community partners.** As this report shows, there is no single cause or simple fix for homelessness in our area, but there is a clear direction: increase housing options, bolster support services, and remove barriers, all while keeping the humanity of those affected at the forefront.

In conclusion, the 2024 Unhoused Needs Survey Report confirms that we are on the right track with our strategies, even as it calls for sustained and expanded efforts. **The challenges identified are being actively addressed by the collaborative work underway, but much work remains.** By continuing to ground our policies in data and lived experience, and by fostering collaboration through the Implementation Plan workgroups, Grand Junction is building a path toward the Comprehensive Plan's vision: a city where homelessness is rare, brief, and non-recurring, and where **"people of all income levels can meet their needs and have access to amenities that provide for a meaningful, high-quality life."** With ongoing dedication, resources, and compassion, we move closer to the day when every Grand Junction resident has a place to call home.



APPENDIX A –SURVEY METHODOLOGY

Developing the Survey

The 2024 Unhoused Needs Survey built on the 2023 foundation with a refined approach to deepen insights, broaden participation, and address previous gaps. A major change was shifting from provider- or volunteer-administered surveys in 2023 to primarily self-administered surveys in 2024. While this allowed for greater privacy and reach—potentially reducing social desirability bias—it also raised concerns around accessibility and question interpretation.

To improve clarity and accuracy, the 2024 survey featured simplified language, expanded multiple-choice options, and new questions based on lessons from the previous year. As with all self-reported data, limitations such as recall bias and underrepresentation of hard-to-reach populations remain.

The survey design drew from nationally recognized models, including those by the RAND Corporation, UC San Francisco’s BHHI, and Portland State University. These established frameworks ensured methodological rigor and alignment with the City’s systems-thinking approach to understanding homelessness and shaping long-term housing strategies.

Partners & Collaborators

Survey development and distribution were made possible by continued collaboration across academic, public health, and direct service networks. The following partners were instrumental in shaping and implementing both the 2023 and 2024 survey efforts:

- Mesa County Public Health – Research & Planning Team
- Dr. Stephen Merino – Colorado Mesa University (Sociology)
- Jan Moorman – Retired Ethnographic Researcher
- Portland State University – Homelessness Research & Action Collaborative
- Local Service Providers: Grand Valley Peace & Justice; Catholic Outreach; HomewardBound of the Grand Valley; Hilltop Community Resources; U.S. Department of Veterans Affairs (VA).

These partners contributed feedback on question design, outreach strategies, accessibility, and ethics, helping ensure the survey reflected both academic rigor and community realities. Their involvement exemplifies the cross-sector commitment in Grand Junction to understanding and addressing homelessness.

Conducting the Survey

Building on the refined methodology, the 2024 survey was conducted through a mix of in-person outreach and self-administered questionnaires, aiming to capture a diverse cross-section of the unhoused population in Grand Junction.

Surveyor & Administration:

Led by Sherry Price (Housing Specialist, City of Grand Junction), the 2024 effort differed from 2023 by using a single dedicated surveyor to ensure consistency. Respondents completed the survey independently, with Sherry available for assistance. This approach improved privacy and likely encouraged more honest responses but may have affected understanding of some questions.

Survey Period:

Surveys were collected from July 22 to August 9, 2024.

Locations & Reach:

Surveys were distributed at high-traffic service sites such as the Resource Center, Catholic Outreach, and the Joseph Center, as well as in outdoor encampments. While this outreach reached a broad population, some groups—such as unaccompanied youth, people living in vehicles, or those couch-surfing—were likely underrepresented. Capturing these voices is a goal for future surveys.

Incentives:

Unlike 2023, which offered small incentives (e.g., \$10 gift cards), no incentives were provided in 2024. While this reduced costs and ensured voluntary participation, it may have lowered response rates, particularly among individuals with urgent survival needs. Future efforts may reconsider incentives to support participation equity.

Response Count:

A total of 90 surveys were completed, exceeding the target of 74. While this sample represents only a portion of the local unhoused population, the responses offer meaningful insights and highlight patterns that complement higher-level data.

Confidentiality:

Some respondents voluntarily provided contact information for service connection or follow-up. All data in this report is aggregated or anonymized, and confidentiality protocols were strictly followed to ensure participants felt safe and protected throughout the process.

Analyzing the Data

After the survey period concluded, all paper surveys were collected and digitized by Housing Division staff, with Senior Administrative Assistant Keli Sheridan overseeing data entry. Analysis of the compiled dataset was led by AmeriCorps CivicSpark Fellow Augusto Latorre, with support from data consultant Shae-Lynn Watt (formerly of Mesa County Public Health), as well as Housing Specialist Sherry Price and Housing Manager Ashley Chambers.

Given the relatively small sample size (90 responses), readers should use caution in generalizing percentages to the entire unhoused population. The conditions of outreach, the self-selection of participants, and the underrepresentation of



APPENDIX A –SURVEY METHODOLOGY CONTINUED

certain groups (notably youth, as discussed) can all influence the results. Wherever relevant, we contextualize the quantitative findings with qualitative insights and flag where certain populations (e.g. Hispanic families, youth, people living in vehicles) may be under-sampled or absent. Rather than viewing these statistics as definitive population metrics, it is more useful to interpret them as indicators of trends, needs, and issues reported by the survey participants.

Throughout the analysis, we compare 2024 data to the previous year's findings to identify notable changes. When we observe differences, we discuss possible explanations – whether due to actual shifts in the homeless community's situation or as a result of changes in survey methods and outreach. In some cases, improvements in services may cause a decline in reported need (for example, if more people have access to showers now, fewer list it as a top need). In other cases, worsening economic or social factors may be reflected in higher reported need or new challenges.

Survey Refinements & Future Considerations

The 2024 survey experience highlighted key improvements made since 2023 and pointed to opportunities for further enhancing data quality, inclusivity, and impact in future iterations:

- **Survey Refinements:** Updates in 2024 – including clearer wording on questions, expanded multiple-choice options, and added questions on income and benefits – yielded richer data and fewer ambiguous responses. These refinements built directly on feedback from last year's participants and partners. Future surveys should continue to evolve based on community and stakeholder input. For instance, developing a Spanish-language version of the survey would improve accessibility, and adding new topics (such as disability status or detailed health information) could capture additional important aspects of homelessness.
- **Outreach & Inclusion:** The self-administered format in 2024 appeared to increase honesty in responses (respondents may have felt more comfortable disclosing sensitive information privately). However, it may have posed barriers for participants with limited literacy or those not fluent in English. In the future, a hybrid approach could be beneficial – for example, offering assistance or an interviewer for those who need it, while still allowing privacy for those who prefer it. Additionally, partnering with organizations that serve underrepresented groups (youth, LGBTQ+ individuals, people living in vehicles, etc.) during the outreach phase could improve the reach and equity of the survey sample. Targeted efforts to include these voices will ensure the survey paints a more complete picture of the unhoused community.

Looking ahead, these considerations will guide the planning of the 2025 survey. Continuous improvement of the survey process will help Grand Junction build a robust, year-by-year dataset to inform policy – one that is inclusive of all who experience homelessness, and sensitive to how we ask questions and gather information.

Representation Gaps

While the survey offers valuable insights, it's important to acknowledge whom it might have missed and what structural factors underpin the observed trends.

Underrepresented Groups: As discussed in the methodology, the 2024 survey likely under-sampled certain subpopulations of the unhoused community:

- **Youth (under 25):** We did not specifically reach out to youth programs, and minors were generally not part of this survey. Youth experiencing homelessness (often couch-surfing or in unstable family situations) have different challenges, such as school disruption or vulnerability to exploitation. Their absence here is a gap.
- **Families with Children:** Similarly, families tend to seek help from places like HomewardBound's family shelter or through Department of Human Services, which might not have been captured in our survey venues. Family homelessness is present in Mesa County (school districts identify dozens of homeless students each year), but their voices are not prominent in this data.
- **People living in vehicles:** Some individuals or families live in their cars or RVs, which can be somewhat hidden. Our survey got a few, but not many. They might have unique needs like vehicle repairs, fuel, and legal parking.
- **People experiencing domestic violence:** Those fleeing domestic violence often access shelter through different channels (e.g., Hilltop's Latimer House) and may not identify as "homeless" in the same way. We suspect some portion of the "other" reasons for homelessness (in the prior section) relates to domestic violence, but it wasn't explicitly captured unless they volunteered it.
- **Rural homelessness:** Our focus was Grand Junction proper, but Mesa County has homelessness in smaller communities (like Fruita, Palisade, Clifton) which might not be fully represented. The UHNA identified Fruita and the SE area (Clifton/Riverside) as having high risk of homelessness. Those areas might have people doubling up in trailers or living in cars that we didn't reach.



The UHNA (2023) identified 5 key needs:

- 1. Shortage of affordable housing.
- 2. Shelter and housing options for acute needs.
- 3. Housing instability and displacement.
- 4. Access to supportive services and basic needs.
- 5. System Improvement, coordination, and collaboration.

The Unhoused Strategies aim to achieve seven key strategic objectives: (Each specific objective aligns with one or more overarching strategies)

- 1 Reduce the number of people experiencing houselessness.
- 2 Reduce the length of time individuals remain unhoused.
- 3 Reduce the number of people who enter first-time houselessness.
- 4 Reduce the number of people who return to houselessness.
- 5 Increase the number of people entering permanent housing.
- 6 Increase successful placements of people of unsheltered PEH into both transitional and permanent housing.
- 7 Increase successful referrals to behavioral health treatment and supportive services.

APPENDIX B

UNHOUSED

STRATEGY & IMPLEMENTATION PLAN

To view the full plan & action steps here:



<https://www.gjcity.org/DocumentCenter/View/13576/Unhoused-StrategyImplementation-Plan?bidId=>

The Unhoused Strategy & Implementation Plan builds upon the findings of the Unhoused Needs Assessment (UHNA) by JG Research and the Unhoused Strategy Report, transforming initial insights into a comprehensive, community-wide approach. The plan addresses critical gaps and immediate needs of people experiencing homelessness (PEH) in the Grand Junction area, with the shared goal of achieving Functional Zero. It outlines seven key strategic outcomes that support a systemic response to prevent homelessness, reduce its duration, and improve access to shelter, services, and permanent housing. Envisioning an integrated, adaptable, and interconnected service network, the plan promotes restoration, stability, and self-determination for all individuals, regardless of their economic or social status. It emphasizes collaboration across jurisdictions, business sectors, non-profits, faith-based groups, philanthropy, and both housed and unhoused individuals. Designed as a dynamic working document, it supports ongoing strategy implementation, goal tracking, and periodic updates as community needs evolve.

UNHOUSED STRATEGIES

STRATEGY 1 ESTABLISH A COMMUNITY-WIDE FRAMEWORK FOR ENHANCING THE COORDINATED ENTRY SYSTEM OF CARE PROCESSES

STRATEGY 2 ESTABLISH A FLEXIBLE CITY-COUNTY HOUSING FUND TO SUPPORT HOUSING SECURITY AND INCREASE COLLABORATION BETWEEN SERVICES

STRATEGY 3 INCREASE ACCESS TO PREVENTION, DIVERSION, AND HOUSING NAVIGATION

STRATEGY 4 EXPAND ACCESSIBILITY TO BASIC NEEDS AND HYGIENE

STRATEGY 5 EXPAND MENTAL HEALTH CARE, HEALTHCARE AND SUBSTANCE USE TREATMENT SERVICE OPTIONS

STRATEGY 6 INCREASE ACCESSIBILITY AND EXPAND TRANSPORTATION SERVICES TO PEH

STRATEGY 7 INCREASE NON-MARKET HOUSING OPTIONS INCLUDING INTERIM HOUSING & SHELTER UNITS



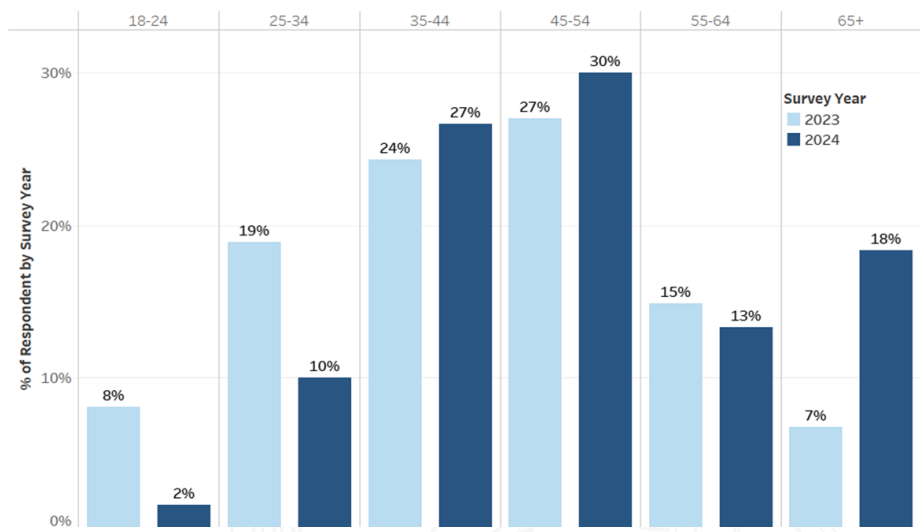
APPENDIX C - CHARACTERISTICS & EXPERIENCES OF PEH IN THE GRAND JUNCTION AREA

Demographics

Gender : In 2024, 53 of the 90 survey respondents were male, 36 were female, and a few individuals identified as non-binary or declined to state. Gender identity followed a similar distribution to previous years, though 2024 saw a notable absence of self-identified non-binary individuals. While this could be due to low sampling, it may also reflect broader issues such as discomfort with disclosing identity in stigmatized environments. 53% of respondents identified as men, 36% as women, and no respondents identified as non-binary.

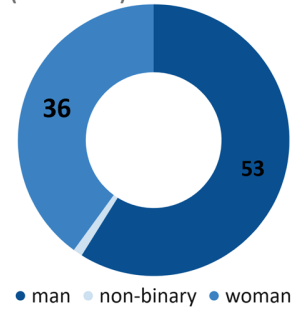
Household: Most respondents were adults without dependent children currently with them. Only a handful of surveyed PEH were part of family units with children, which may indicate that unhoused families are underrepresented in the survey or seeking assistance through other channels.

Age Distribution (2023 & 2024 side-by-side)



However, in the preliminary 2025 Point-in-Time (PIT) count, only 8.8% of individuals identified as veterans, representing a 30.7% decrease since the 2019 PIT. Nationally, the 2023 HUD Annual Homeless Assessment Report to Congress reported a 55% reduction in veteran homelessness since 2010, driven by increased funding, coordinated system-wide efforts, and strategic policy initiatives across federal, state, and local levels.

Gender (2024 Totals)

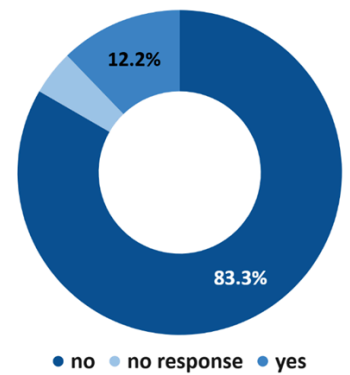


Age and the “Graying” of Homelessness:

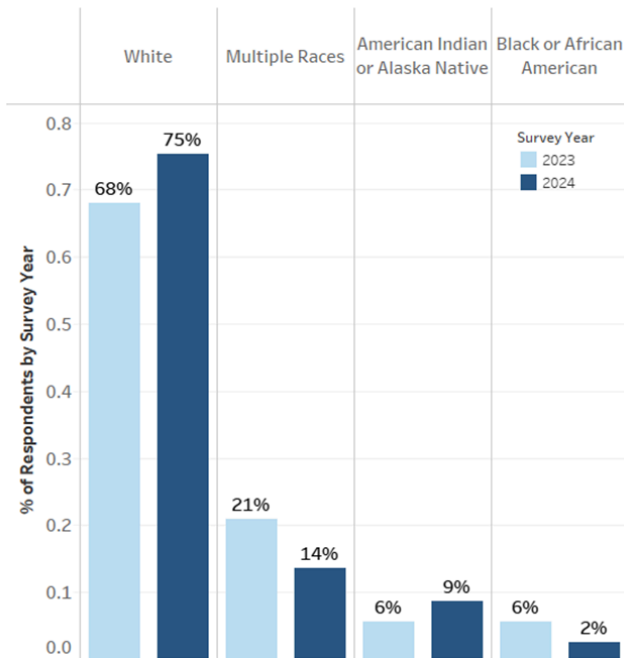
The 2024 data show a notable shift toward an older respondent base. Individuals aged 45 and older accounted for 62% of survey respondents, a significant increase from 48% in 2023. This aligns with a growing national trend of “graying homelessness,” where more than half of unhoused adults in the U.S. are over 50. Grand Junction’s local trend reflects both demographic aging and deepening economic vulnerability: older adults living on fixed incomes are increasingly unable to keep pace with rising rents and home prices, leaving them just one setback away from housing loss. In fact, 62% of PEH in Mesa County are age 45+ - nearly double the statewide average - underscoring how heavily homelessness here is impacting older residents. These findings also underscore the need to ensure housing solutions meet both the economic and health-related needs of older residents. Local service providers (including the Joseph Center, Catholic Outreach, and Mutual Aid Partners) report a visible rise in seniors seeking housing-related support, aligning with our data that older adults are a growing portion of those in need.

Veteran Status: When asked about veteran status, 12.2% of respondents reported having served in the military—nearly double the Colorado state average of 7% (Colorado Coalition for the Homeless). This elevated rate likely reflects successful local outreach efforts targeting veterans, who often have more direct access to services through programs like HUD-VASH.

Have you served in the Military? (2024)



Race distribution



Race and Ethnicity: The majority of respondents in both years identified as White/Caucasian, which is unsurprising given that over 85% of Mesa County’s general population is White. However, people of color were still present among those surveyed, including individuals identifying as Native American, Hispanic/Latino, and African American. The share of non-white respondents (around 15%) is somewhat lower than the disproportionate representation of people of color observed in homelessness nationally. This likely reflects *under-sampling* in our survey rather than an absence of racial disparities. Research consistently shows that people of color are disproportionately impacted by homelessness even when they are underrepresented in point-in-time surveys. In Mesa County, for instance, Native American and Black residents make up a small fraction of the overall population but a higher fraction of those seeking homelessness services than their population share. Our findings point to potential representation gaps in our outreach – for example, Hispanic families and migrants might not have been fully reached – and highlight structural inequities that make homelessness more prevalent among minority groups including cultural stigma, language access issues, and a preference for informal or doubled-up housing arrangements that may go uncounted in formal outreach. We acknowledge these gaps and aim to improve outreach to underrepresented racial/ethnic groups in future surveys.

Chronic vs. Non-Chronic Homelessness

Age Disparity: Chronic homelessness disproportionately impacts older adults in our sample. In 2024, a striking 58% of chronically unhoused respondents were over age 45, compared to only 27% of the non-chronic group in that age range. In other words, older individuals were much more likely to be in the long-term homeless category. This mirrors statewide and national patterns – older adults are a growing segment of the chronic homeless population – but the local rise is particularly steep. The year-over-year data showed that the share of non-chronic respondents over 45 grew nearly 39%, suggesting more older adults are falling into homelessness across the board, not just in chronic cases. Still, chronic homelessness skews older, which may be because it takes years for some to exhaust all options. It could also be that younger people find exits more quickly or are not captured as much in our survey (especially youth under 25, who were underrepresented).

Local Connection: Both chronic and non-chronic groups mostly have local roots, but an even higher percentage of chronically homeless folks reported long-term ties to the area. Many chronic respondents have cycled through local institutions (jail, hospitals) or lived in the region for many years before becoming homeless. This reinforces that our chronic homelessness issue is local people stuck in homelessness, not an influx from elsewhere.

Service Utilization: As noted, chronic respondents reported engaging with an average of 5.18 support organizations, versus 2.85 for non-chronic. This indicates that those in long-term homelessness are accessing a patchwork of services – shelter, soup kitchen, medical clinic, food pantry, case management, etc. Despite accessing more services, they remain homeless, implying that either the services aren’t sufficient to resolve their situation or there are gaps (like no housing available after they complete a program). Non-chronic individuals, especially newly homeless, might only touch one or two agencies (perhaps just a shelter and a food bank) before they self-resolve or disappear from view.

Health and Benefits: We found significant differences in health needs and benefit enrollment. For example, chronically homeless respondents were four times more likely to identify mental health support and physical health support as critical to maintaining housing (about 28% for chronic vs 6% for non-chronic for mental health; 22% vs 4% for physical health). Chronic homelessness often either stems from or exacerbates health problems. Many chronic PEH have disabilities or chronic illnesses; some qualify for disability benefits. Our data showed many were not yet on those benefits, however. Only 87.5% of respondents eligible for Medicare (age 65+ or disabled) reported being enrolled, compared to a ~95% national average. And enrollment in Medicaid (for those under 65) was also lower than one would expect given Colorado’s Medicaid expansion – indicating some are not accessing healthcare coverage they could use. These gaps likely tie to documentation issues or lack of help navigating the systems. They represent an opportunity: ensuring every chronically homeless individual is enrolled in benefits like Medicaid/Medicare and food assistance (SNAP) could improve their stability and access to care.

Veteran Status: A subset of respondents identified as veterans. Veterans often have additional resources available (VA housing vouchers, VA healthcare), yet some still experience homelessness. The chronic homeless veteran population is a focus of national Built for Zero efforts. While our sample size is small, we did note that veterans in our survey tended to have higher rates of chronic homelessness than non-veterans (many have service-related trauma or disabilities). The City and partners like the VA and Welcome Home Alliance are working toward achieving “functional zero” for veteran homelessness, and survey insights can help by identifying remaining barriers for vets (which often mirror the general ones: housing affordability, mental health, etc., plus sometimes discharge status issues).



Families and Youth: Chronic homelessness is less common in families with children and youth populations; those tend to be episodic. Indeed, very few survey respondents in 2024 were part of a family with minor children or were unaccompanied youth, and none of those fell under chronic. This doesn't mean family and youth homelessness doesn't exist here; it means those groups might be accessing different systems (e.g., family shelters, school district McKinney-Vento services, or youth programs like The House). It points to a limitation of our survey outreach and suggests partnering with those programs next year to ensure their clients' voices are included.

Living in Mesa County

A persistent belief in the community is that many people experiencing homelessness (PEH) in Mesa County arrived here from elsewhere — often bused in or drawn by the area's services. However, survey findings from both 2023 and 2024 continue to challenge this assumption.

The majority of respondents reported strong preexisting ties to the area. When asked what initially brought them to Mesa County, the top responses across both years were:

Chronic vs. Non-Chronic Differences

When looking more closely at chronic vs. non-chronic respondents, additional patterns emerge:

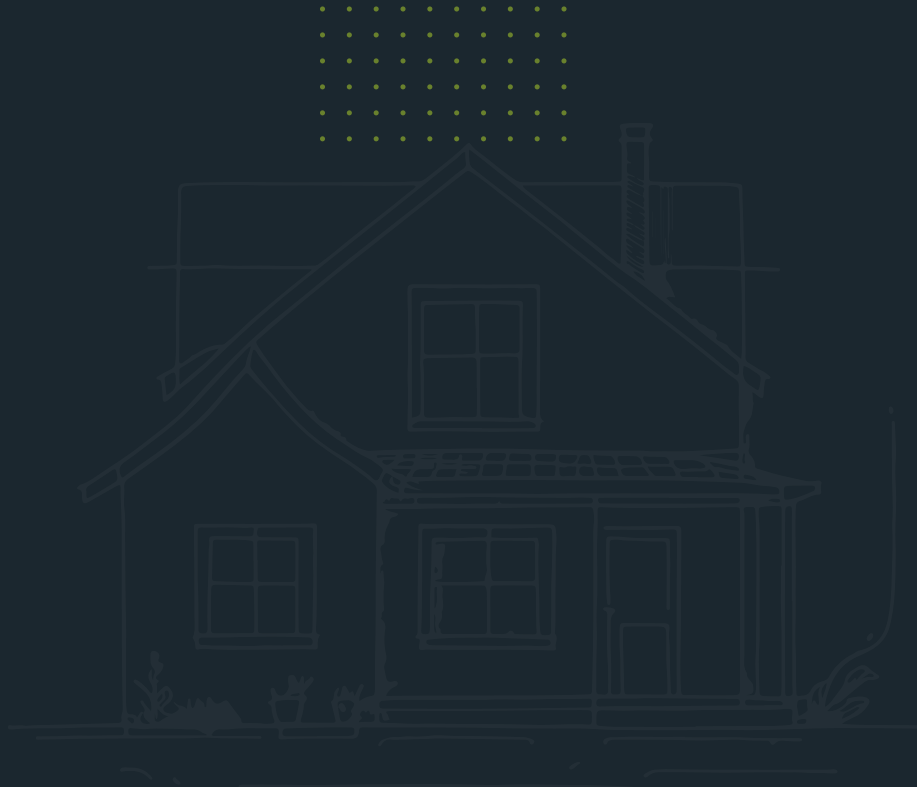
- Chronic respondents were especially likely to cite family/friend ties or growing up in the area as the reason they were in Mesa County.
- Nearly 90% of chronic respondents reported some form of prior connection to the region.
- Non-chronic respondents had a slightly more diverse set of responses, but still primarily reported personal or family ties rather than service-related reasons.
- Of the 19 respondents who cited services or being bused as the reason they came to Mesa County, only 7 were chronic.

These findings reinforce the idea that many unhoused individuals are long-time members of the community who became unhoused here — not transplants from elsewhere. This distinction is crucial: it highlights the need to invest in local, long-term housing solutions rather than focusing on restrictive eligibility or access based on how or why someone arrived.

What Brought you Mesa County? Top 5 (2023 & 2024)	Total	Percent
1. Grew up in the area	48	29.3%
2. Relatives & friends in the area	36	22.0%
3. Other	26	15.9%
4. Left behind and couldn't leave	15	9.2%
5. Bused from another location	13	7.9%

*"other" responses often described previous housing, employment, or familial ties to the area





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