

A NEW PATH HOME: FUNDING SOLUTIONS TO END HOMELESSNESS

Louisville faces an acute homelessness crisis. Our shelters are full and we lack affordable housing. To address this crisis, our efforts must be strategic, evidence-based, and results-driven. It is imperative that we identify a reliable source of annual funding locally for these critical efforts.

1 ESTABLISH RIGHT TO SHELTER.

PROBLEM: Our shelter system—intended for short-term emergencies—is underfunded and overwhelmed. We have 750-850 shelter spots (dependent on inclement weather), which are mostly for individuals and in congregate spaces that are open overnight—but nearly 1,200 Louisvillians experience homelessness every night (and over 10,000 do so annually).

SOLUTION: Pass a Right to Shelter ordinance to create 375 more daily shelter options to meet the need. In year one, spend \$8 million on a new non-congregate, well-staffed, trauma-informed shelter for 200 people (i.e., through the purchase of hotels). Annually, commit \$5.3 million for an additional 175 new short-term options (e.g., hotel stays) plus new shelter operation costs.

RESULT: With enough shelter to meet specific needs, no Louisvillian has to sleep outdoors.

2 FUND AFFORDABLE HOUSING.

PROBLEM: Louisville needs 31,000 affordable housing units for our poorest households.

SOLUTION: Establish a revenue stream of \$187.5 million annually for extremely low-income housing; encourage businesses to donate; and leverage these local dollars for up to \$562.6 million in federal matching dollars. (Where needed, services to be coordinated by the Coalition for the Homeless through our HUD Continuum of Care funding.)

RESULT: A plan to fund the creation of 3,750 units of housing every year for 8 years.

3 FUND MEDICAL RESPITE.

PROBLEM: Unhoused patients are often discharged to the streets, thwarting their recovery.

SOLUTION: Fund 45 new 24-hour medical respite beds for unhoused people who have ongoing medical needs when they exit our hospitals—leveraging state and federal funding and Medicaid reimbursement—working with Norton/UofL and Family Health Centers. Costs TBD but will include building purchase and operations of new and existing programs.

RESULT: Patients have time to fully recover, reducing health crises for hundreds of people.

4 FUND EVICTION PREVENTION.

PROBLEM: Louisville's pre-COVID eviction rate was twice the national average. With COVID relief efforts, we cut that number in half, but we need new funds to maintain that progress.

SOLUTION: Dedicate a minimum of \$16 million annually for mediation, rental/utility assistance, deposits, and expanded Right to Counsel.

RESULT: Louisville prevents homelessness for thousands of poor people each year.