



Supporting Unhoused Populations in Billings

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Billings MT Unhoused Population

- 600-1000 from various census efforts
- BPS estimates 600 youth, both with caregivers and unaccompanied
- Many more living in unstable and/or unsafe housing situations, as well as many at risk of losing housing.

Welcome

HOM BILLINGS

Opening doors to end homelessness.

*City of Billings
Homeless Initiatives*

Our **VISION** is a thriving community with

- Accessible, safe shelter
- Affordable housing
- Compassionate neighboring
- A dedication to hope, unity, and equity

where homelessness is brief, rare and non-recurring and no one faces housing instability alone.

The **MISSION** of the Continuum of Care is to create sustainable pathways to safe and stable housing for people who are at risk of or actually experiencing homelessness in Yellowstone County.

CORE VALUES

- Leadership
- Dignity
- Accountability
- Innovation
- Trust

PREVENTION:

Identify the root causes of homelessness in Billings & implement targeted prevention strategies to reduce new incidences of homelessness by 25% between 2021 and 2025.

SYSTEMS

ALIGNMENT:

Support the development and implementation of a coordinated Crisis Continuum for all persons at risk of or actually experiencing homelessness by December 2025.

INFRASTRUCTURE:

Invest in 1-2 critical infrastructure projects in the community to prevent and reduce homelessness.

CAPACITY BUILDING:

Build and enhance the community capacity to tackle homelessness and housing issues so that comprehensive housing policies and equitable employment practices can be adopted and implemented by critical stakeholders in the community.

OPERATIONS:

Formalize and strengthen Continuum of Care structures so that the coalition can sustain operations over time.





Photo credits: Yellowstone Valley Woman, Billings Gazette, MRM website, Yellowstone Public Radio, KTVQ

Challenges

- Characterizing the needs and the solutions accurately
- Existence of resources \neq capacity to support the need
 - Coordination among providers is challenging
 - “Duplication of services”
 - Resources build equitably across the state
- Nexus of public health and public safety
 - Housing First vs Housing _____
 - Reentry and recidivism
 - Domestic violence
- Generations of trauma



Recommendations

1

Need coordinated, localized planning supported by State partners

2

Concentrate more on prevention – SUD, MH, housing risk. We must get to root causes.

3

Explore strategies to move to 24-hour continuum of response/outreach

4

Consider carefully the impact on local governments of policy related to Medicaid expansion



Questions/ Discussion