

CONSOLIDATED PLAN

2025 - 2029



Prepared for:

Indiana Housing & Community Development Authority
Indiana Office of Community and Rural Affairs

Table of Contents

Table of Contents.....	i
Executive Summary.....	1
ES-05 Executive Summary - 91.300(c), 91.320(b).....	1
The Process	12
PR-05 Lead & Responsible Agencies 24 CFR 91.300(b)	12
PR-10 Consultation – 91.100, 91.110, 91.200(b), 91.300(b), 91.200(l) and 91.315(l).....	13
PR-15 Citizen Participation – 91.105, 91.115, 91.200(c) and 91.300(c)	24
Needs Assessment	26
NA-05 Overview	26
NA-10 Housing Needs Assessment - 24 CFR 91.305 (a,b,c).....	31
NA-15 Disproportionately Greater Need: Housing Problems - 91.305 (b)(2).....	43
NA-20 Disproportionately Greater Need: Severe Housing Problems – 91.305(b)(2)	47
NA-25 Disproportionately Greater Need: Housing Cost Burdens – 91.305 (b)(2).....	50
NA-30 Disproportionately Greater Need: Discussion – 91.305 (b)(2)	52
NA-35 Public Housing – (Optional).....	55
NA-40 Homeless Needs Assessment – 91.305(c)	59
NA-45 Non-Homeless Special Needs Assessment – 91.305 (b,d).....	71
NA-50 Non-Housing Community Development Needs - 91.315 (f).....	77
Housing Market Analysis.....	80
MA-05 Overview.....	80
MA-10 Number of Housing Units – 91.310(a)	85
MA-15 Cost of Housing – 91.310(a)	95
MA-20 Condition of Housing – 91.310(a)	99

MA-25 Public and Assisted Housing – (Optional)	103
MA-30 Homeless Facilities – 91.310(b)	105
MA-35 Special Needs Facilities and Services – 91.310(c)	108
MA-40 Barriers to Affordable Housing – 91.310(d).....	110
MA-45 Non-Housing Community Development Assets -91.315(f).....	112
MA-50 Needs and Market Analysis Discussion	125
MA-60 Broadband Needs of Housing occupied by Low- and Moderate-Income Households - 91.210(a)(4), 91.310(a)(2)	131
MA-65 Hazard Mitigation - 91.210(a)(5), 91.310(a)(3) Describe the jurisdiction’s increased natural hazard risks associated with climate change.	134
Strategic Plan	141
SP-05 Overview	141
SP-10 Geographic Priorities – 91.315(a)(1)	144
SP-25 Priority Needs – 91.315(a)(2)	145
SP-30 Influence of Market Conditions – 91.315(b)	146
SP-50 Public Housing Accessibility and Involvement – 91.315(c).....	159
SP-55 Barriers to affordable housing – 91.315(h)	160
SP-60 Homelessness Strategy – 91.315(d)	162
SP-65 Lead based paint Hazards – 91.315(i)	165
SP-70 Anti-Poverty Strategy – 91.315(j)	167
SP-80 Monitoring – 91.330.....	169
Expected Resources	171
AP-15 Expected Resources – 91.320(c)(1,2)	171
Annual Goals and Objectives.....	175
AP-25 Allocation Priorities – 91.320(d)	177
AP-30 Methods of Distribution – 91.320(d)&(k)	178

AP-38 Project Summary	181
AP-40 Section 108 Loan Guarantee – 91.320(k)(1)(ii)	183
AP-45 Community Revitalization Strategies – 91.320(k)(1)(ii)	184
AP-50 Geographic Distribution – 91.320(f)	185
Affordable Housing	186
AP-55 Affordable Housing – 24 CFR 91.320(g)	186
AP-60 Public Housing - 24 CFR 91.320(j)	187
AP-65 Homeless and Other Special Needs Activities – 91.320(h)	189
AP-70 HOPWA Goals – 91.320(k)(4)	192
AP-75 Barriers to affordable housing – 91.320(i)	193
AP-85 Other Actions – 91.320(j)	195
Program Specific Requirements	203
Appendices	
Methods of Distribution and Funding Applications	
CDBG Method of Distribution	
HOME Homebuyer Program Policy	
https://www.in.gov/ihcda/files/HOME-Homebuyer-Final-Policy_eff.-2023.pdf	
HOME Rental Construction Policy, TBRA, and ARPA Supportive Services	
https://www.in.gov/ihcda/files/PY24-25-HOME-Rental-Application-Policy-FINALv2.pdf	
National Housing Trust Fund (NHTF) Application Policy	
https://www.in.gov/ihcda/files/2023-Action-Plan-HTF-Policy-Final.pdf	
ESG and HOPWA MOD	
NHTF Rehabilitation Standards	
Citizen Participation	
Public Notices	
Public Comments	
Updated Citizen Participation Plan	
Survey Analysis	
Stakeholder Focus Group Summary	

Executive Summary

ES-05 Executive Summary - 91.300(c), 91.320(b)

1. Introduction

The State of Indiana is eligible to receive grant funds from the U.S. Department of Housing and Urban Development (HUD) to help address housing and community development needs. These grant funds include the: Community Development Block Grant (CDBG), HOME Investment Partnerships Program (HOME), Emergency Solutions Grant (ESG), Housing Opportunities for People with AIDS (HOPWA) and the National Housing Trust Fund (HTF). The dollars are primarily meant for investment in the State's less populated and rural areas ("non-entitlement" areas), which do not receive such funds directly from HUD.

The Indiana Office of Rural and Community Affairs (OCRA) receives and administers CDBG. The Indiana Housing & Community Development Authority (IHCDA) receives and administers HOME, ESG, HOPWA, and HTF. As a condition for receiving HUD block grant funding, the State must complete a five-year strategic plan called a Consolidated Plan for Housing and Community Development (Consolidated Plan). The Consolidated Plan identifies the State's housing and community development needs and specifies how block grant funds will be used to address the needs. Each year, the state completes an Annual Action Plan which determines how the funds will be spent in the coming program year (PY).

This document is the new Five-year Consolidated Plan, covering program years (PY) 2025 through 2029. It also contains the first year Action Plan, which describes how OCRA and IHCDA plan to allocate HUD block grant funds during the 2025 program year (PY2025), which runs from July 1, 2025, through June 30, 2026.

2. Summary of the objectives and outcomes identified in the Plan Needs Assessment Overview

At the time this document was prepared, the State of Indiana's PY2025 block grant allocation had not been provided by HUD. The draft plan assumed an allocation similar to PY2024. HUD announced funding awards in May 2025.

During PY2025, the State of Indiana is eligible to receive:

- \$30,689,455 in the Community Development Block Grant (CDBG);
- \$13,583,551.13 in the HOME Investment Partnerships grant (HOME);
- \$3,947,545 in the Emergency Solutions Grant (ESG);
- \$2,237,532 in the Housing Opportunities for Persons with HIV/AIDS grant (HOPWA); and
- \$3,296,362.68 for the National Housing Trust Fund (HTF).

Contingency plans were developed to adjust the allocation if PY2025 funding is different than estimated in the draft plan.

CDBG Contingency Plan:

If cuts are less than 25%:

- CDBG Stellar Pathways funding amount will remain at current proposed percentages (of the total CDBG allocation).
- Admin and Technical Assistance will be adjusted to remain at allowable percentages.
- Remaining percentage reduction(s) needed will be spread throughout all other existing programs based on current need as determined by OCRA.

If cuts are greater than 25%:

- Stellar Pathways funding amount will remain at current proposed percentage (of the total CDBG allocation).
- Admin and Technical Assistance will be adjusted to remain at allowable percentages.
- Remaining percentage reduction(s) will be spread throughout all other existing programs based on current need as determined by OCRA.

Priority Needs for the Five-year Consolidated Plan:

CDBG: Wastewater Drinking systems and Stormwater improvements; Revitalization activities for Indiana's smaller communities (economic development, Main Street, public facilities); Owner-occupied rehabilitation; and.

HOME: Rental construction, followed by Affordable homeownership.

ESG: Rapid rehousing, Homelessness prevention, Housing relocation services, Rental assistance, Shelter operations, Street outreach.

HOPWA: Rental assistance, STRMU, Housing information services and permanent housing placement, Facility-based subsidies.

HTF: Supportive housing for extremely low income households.

3. Evaluation of past performance

OCRA remains committed to continuous improvement, and to ensuring that its CDBG programs consistently serve and prioritize the most current needs of rural areas. A study conducted by Ball State University (BSU) and commissioned by the Office of Community and Rural Affairs in 2022 showed that many Hoosier counties are primed for success, and that how OCRA develops plans and program to enhance that potential is critical. Recommendations outlined in the BSU study have assisted OCRA in the development of strategies and approaches to more effectively deliver programming in rural communities throughout the State of Indiana.

OCRA has continued to routinely review its entire CDBG grant program with the goal of reducing redundancies, and unnecessary burdens placed on communities. In 2024, OCRA completed a series of in-person round table meetings (4 total meetings) with local grant administrators and a focus group with stakeholders to gather feedback on OCRA's current programs. During these meetings, OCRA collected perspectives on the evolving needs and opportunities within non-entitlement communities, along with recommendations for improving the delivery of its CDBG program.

This review has resulted in ongoing improvements to the grant programs and process such as:

- Updating OCRA's existing policy adoption process to prioritize and increase stakeholder engagement during development.
- Revising OCRA's existing CDBG procurement forms and available admin guides to comply with the Buy American Build America Act, along with available Income Survey resources to ensure they are user-friendly and comply with all current federal and state requirements.
- Leveraging partners, such as ACEC, Indiana Finance Authority and Indiana Association of Regional Councils, to offer new training opportunities to OCRA's certified grant administrators, including training focused on state and federal procurement procedures to enhance local skills and knowledge on best practices and requirements.
- Making improvements to OCRA's electronic grants management system (eGMS) to better assess data and process applications including new upgrades to application scoresheets, new program income reporting, modification request, automation of notices for publication.
- Encourage community initiatives that are customized to address their specific needs
- Review the application process for CDBG grant programs to simplify and minimize cumbersome requirements.
- Simplify additional program administration procedures and utilize the electronic grants management system more effectively
- Increase training opportunities for program staff to develop them as subject matter experts, and reestablish training requirements for community liaisons to enhance technical assistance for communities.
- Reallocating funds to ensure obligation and expenditure rates.

As the needs of communities have continued to evolve, OCRA made adjustments to its program allocations during PY2024 and will continue to do so in PY2025. These adjustments will include the

reinstatement of funding for formerly suspended programs (Stellar Pathways Program) based on feedback from communities and various stakeholder organizations about how these programs could be adapted to meet the changing needs of the residents they serve.

The Office of Community and Rural Affairs acknowledges the importance of including home modifications to support not only Hoosiers with disabilities but also those aging in place. It is OCRA'S goal to integrate these modifications into the owner-occupied program within the 2025-2029 Consolidated Plan. OCRA will implement these changes into our programmatic policies, which will be shared with the public once they are developed. Additionally, OCRA is actively exploring the development of supplementary programs to address other pressing needs that are not currently covered by the existing program and anticipated for the incorporation of these programs within the 2025-2029 Consolidate Plan and their respective Action Plans.

Additional changes that will be implemented in 2025 Round 2 include:

OCRA has partnered with Stats Indiana, an Indiana University entity, a new measure of community resiliency. The Community Resilience Index is designed to be more forward-looking by focusing on a community's capacity for future economic growth. The resilience index gauges this capacity for future growth along the following dimensions:

- Structure of local economy
 - Entrepreneurial activity
 - Human capital
 - Social networks/ Social connectivity
 - Broadband connectivity
 - Wealth Gaps
 - Homeownership (an indicator of community attachment)
- Community Resilience Index scores, which are updated and published annually, can be found at: <https://www.stats.indiana.edu/topic/cdbg.asp>.

Regional bonus points will be substituted for Wastewater Drinking Water (WDW), Storm Improvement Program (SIP), Owner Occupied Rehabilitation Program (OOR), Main Street Revitalization Program (MSRP) and Planning (PL) program. The Community Resilience Index will be employed to revise the existing policy on bonus points related to regional collaboration, ensuring alignment with community resilience objectives. OCRA is dedicated to fostering and improving the resilience of rural communities. To support this initiative, each grant application will receive a maximum of 25 points for the submission of a community resilience improvement plan and their corresponding point awarded value from the Community Resilience Index as provided by Stats Indiana. The points awarded value are provided to grant applications that submit the required community resilience improvement plan as part of the application program specific review process.

Program Specific Points will be adjusted for the Wastewater Drinking Water (WDW) program.

- For WDW, OCRA will continue to adjust its dated User Rate Benchmarks to address legislative taskforce recommendations and to better align with other common funding sources. OCRA will explore additional adjustments to these benchmarks in future funding years.
- WDW - Combined utility rates for the ongoing operation and maintenance activities of the wastewater, drinking water, and/or stormwater systems.
 - 0 points – Less than \$55 combined user rates
 - 10 points – \$55-\$100 combined user rates
 - 25 points – More than \$100 combined user rates

Supporting communities' housing development needs through the planning program and facilitating proactive resilience building in communities through the planning program.. Adjustments to the local match percentage required for the Planning (PL) program will be set to at least 8% rather than 10%. Set a \$7,000 flat fee rather than 8% rate for indirect costs associated with administration fees for managing CDBG grants within the planning program.

The criteria for the Blight Clearance National Objective will be revised to facilitate the rehabilitation and restoration of historic buildings through the Public Facilities Program.

Program-specific elements will be adjusted to encourage sustainable practices by integrating green infrastructure into several programs. Planning Grant Program Specific Points will be adjusted to reduce documentation requirements.

Program changes made in response to public comment:

The Blight Clearance Program will be expanded to address residential and non-residential buildings that pose significant health and safety concerns in communities and meet the definition of blight.

OCRA recognizes that communities throughout the state impacted by natural disasters frequently experience heightened financial needs and restricted access to resources. To assist these communities, additional bonus points will be granted to those affected by disasters. These bonus points are intended to help address some of the unmet needs within the CDBG program.

OCRA has adjusted the funding cycle for their planning and owner-occupied programs to include three rounds, with the possibility of a fourth round each year, contingent upon available funding. The planning and owner-occupied programs now require that community liaisons must be notified within 15 days of a funding round opening to be eligible to submit an application for that round. This notification must be specific to the funding cycle from which the community is seeking funding assistance.

IHCDA's programs success is summarized in the graphics that follow. IHCDA updates its policies annually as it identifies improvements through stakeholder and partner outreach. IHCDA has also provided tailored technical assistance to partners who are serving Indiana residents with the most acute needs, and is making process improvements to the Coordinated Entry System (CES).

IHCDA has evaluated the success of investments from the previous Consolidated Plan (2020-2024) in its design of the 2025-2029 Consolidated Plan and the 2025 Annual Action Plan.

People Served by Select IHCD Programs, 2024

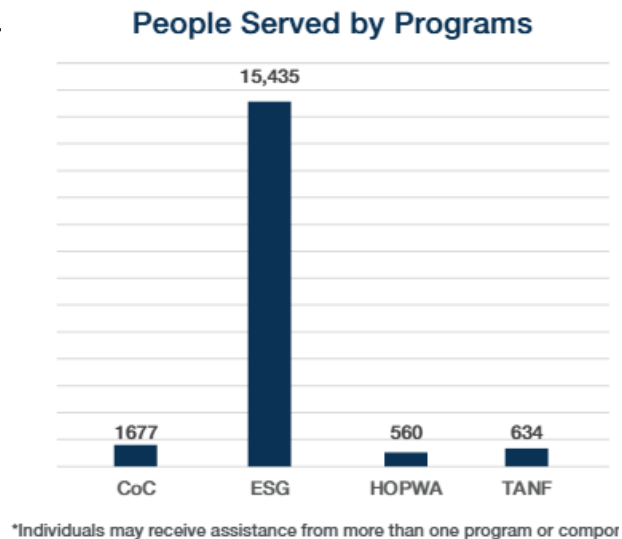
Note:

Individuals may receive assistance from more than one program or component.

Includes individuals served within the IN Balance of State Continuum of Care (all IN counties except for Marion County).

Source:

IHCDA 2024 Annual Report, p. 32



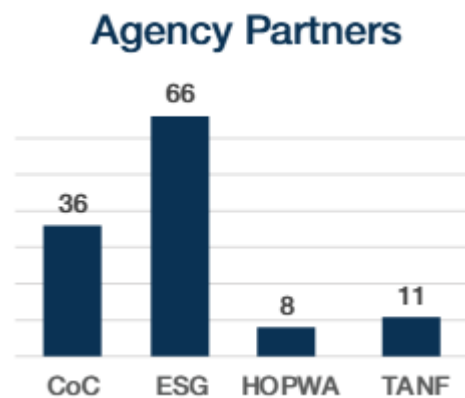
IHCDA Agency Partners, 2024

Note:

Includes partners within the IN Balance of State Continuum of Care (all IN counties except for Marion County) and IHCDA.

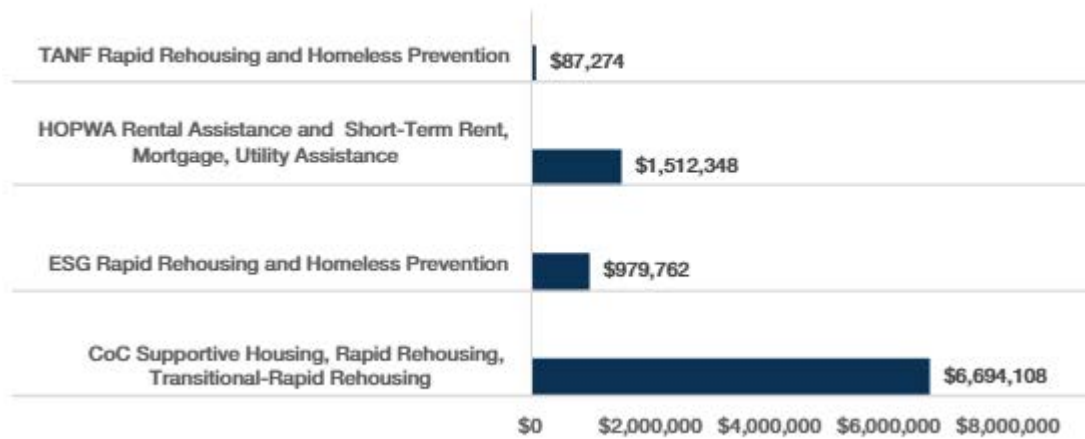
Source:

IHCDA 2024 Annual Report, p. 32.



Direct Client Assistance Provided, Indiana Balance of State Continuum of Care, 2024

Direct Client Assistance Provided



Source: IHCD 2024 Annual Report, p. 33.

ESG Funded Projects, Indiana Balance of State Continuum of Care, 2024



Source: IHCD 2024 Annual Report, p. 38.

HOME

IHCDA reviewed past uses of its HOME program and the method of distribution. IHCDA also considered demand and market for various housing types (rental, homebuyer and tenant-based rental assistance), the number of annual applications for HOME funding, increases in construction costs, increases in rental rates, and the need for homebuyer affordability. IHCDA has continually met with specialized working groups (the Community Housing Development Organization (CHDO) and the HOME Homebuyer working groups) to garner feedback on policy design and allocation set-asides.

IHCDA further utilizes data to determine the need for affordable housing development in the evaluation of proposals for HOME funding. The Opportunity Index considers unemployment, poverty rate, and median household income to incentivize development in areas of opportunity. Health and Quality of Life Factors, such as access to primary care and fresh produce and proximity to positive land uses are considered to link health outcomes to affordable housing. The Housing Need Index utilizes both HUD's Comprehensive Housing Affordability Strategy, as well as the Indiana Housing Dashboard to better target the use of HOME in areas that are rent burdened, have aging housing stock, or are in age-restricted rental housing deserts. Lastly, IHCDA continually reviews the needs of areas underserved by the HOME program and the need for IHCDA HOME funding in small Participating Jurisdictions and rural localities.

IHCDA values strong performance of organizations that receive HOME funds. To ensure such performance, the agency monitors subrecipient funding for compliance on an annual basis. These performance reviews are taken into consideration during future funding rounds and opportunities. Furthermore, IHCDA has mechanisms throughout the program year to track and review compliance for performance more frequently.

IHCDA efforts include:

- IHCDA has implemented a policy which expands the number of eligible project locations by allowing for nonprofits certified as CHDOs to request funding for projects located in participating jurisdictions receiving less than \$500,000 of HOME funding within a Program Year. To increase the number of total applicants for the HOME program, IHCDA has developed scoring criteria for new HOME applicants to ensure a variety of projects in applications. IHCDA is also tracking the number of rental units and homeownership units awarded each Program Year and those projects closed every year.
- IHCDA will continue to assess public comments on various policies and completed projects, and will continue to make changes to the policies when appropriate.

ESG and HOPWA

The Community Services Team that oversees ESG and HOPWA has identified minor barriers to efficiency and effectiveness of ESG and HOPWA. Changes to ESG and HOPWA are being made to: 1) ensure accuracy and compliance with requirements; 2) address gaps and barriers to effective program administration; and 3) opportunities to enhance program delivery and maximize the quality of services.

The Program Manager will make several changes to ESG in the Consolidated Plan.

- 1) Updating the program metrics tracked and reported in ESG to focus on essential outcomes for homeless services programs and ensure all metrics can be collected from HMIS.
- 2) Adding eligible activities in Rapid Rehousing/Homeless Prevention to include providing support for housing navigation for clients served in the Coordinated Entry system.
- 3) Adding expenses related to the HMIS system as an eligible cost. This will allow us flexibility in allocations or reallocations.

The Grant Analyst and Grants Manager will make several changes to HOPWA in the Consolidated Plan.

- 1) Removing funding restrictions that are not included in HOPWA regulation.
- 2) Adding the eligible cost of “Resource Identification” which will support HOPWA programs coordination with their Regional Planning Council, Coordinated Entry, healthcare networks and collaborative groups, and other initiatives that support the coordination of multiple resources and funding opportunities to support clients.
- 3) Adjusting language on requiring subrecipients to be IDOH Care Coordination sites. First, the terminology is now “Non-Medical Case Management” Provider (NMCMP). Second, staff also propose we require subrecipients to either operate as a designated NMCMP or have a formal agreement with one.

4. Summary of citizen participation process and consultation process

Public comment period. The opportunity to comment on the Draft Five-year Consolidated Plan was held between April 3, 2025, through June 1, 2025. The draft plan was posted on both the OCRA and IHCD websites beginning on April 3, 2025.

Public hearings. Two public hearings were held virtually and in-person. The first hearing was held on February 10, 2025 from 4 to 5 p.m. through zoom and at OCRA’s location in Indianapolis. That hearing discussed the updated Citizen Participation Plan (CPP) and the community engagement planned for the Five-year Consolidated Plan; it also provided an opportunity for attendees to identify the primary housing and community development needs in their communities.

The second hearing was held on April 7, 2025 after the Draft Plan had been released and provided an opportunity for the State to discuss changes to policies and proposed funding allocations among activities, in addition to taking comments on the Draft Plan.

Notifications of the hearings were posted through RED notices, a statewide press release, and through Community Liaisons team. Notices reached more than 4,000 people.

Stakeholder focus groups. Stakeholder interviews were conducted with local government officials, economic development organizations, housing and social service providers, organizational leaders, advocacy groups, planners, housing authorities, and other individuals serving Indiana residents with special needs.

Community survey. A statewide survey of stakeholders and residents was fielded in February and March 2025. Survey questions focused on housing and community and economic development needs; housing challenges and shortages; community development needs; and rural revitalization needs.

5. Summary of public comments

Two public comments were received after the first public hearing to discuss the Plan and updated Citizen Participation Plan (CPP):

- One commenter expressed concern about renters of mobile homes who experience water access shut offs yet are required to continue paying rent.
- Another commenter asked for a return of funding from the Department of Labor (or creation of new funding programs by OCRA or IHCD) to assist farmers with minor repairs and/or the development of farmworker housing. Indiana was removed from the Department of Labor's funding plan during 2024.

Five verbal public comments were received during the second public hearing to discuss the Draft Consolidated Plan and proposed allocation:

- One commenter said they disagreed with the decision to eliminate points in the community resilience index scoring for CDBG and that this is inconsistent with regional community strategic planning and coordination.
- One commenter wanted to be sure that the allocation of community resilience points would benefit smaller communities that are less resilient.
- Another commenter had technical recommendations on the administrative fee change.
- One commenter said it was a great idea to incorporate residences into Blight Clearance program eligibility.
- One commenter said it is critical for IHCD to allocate funds for transitional housing projects, as this type of housing is both urgent and growing in need.

In addition to these verbal comments, 14 written comments were received. The vast majority of these requested that the owner occupied rehabilitation program (OOR) funded with CDBG include interior improvements.

Other comments concerned the community resilience bonus points (ensuring that scoring is not a disadvantage for rural communities); recommending that Stellar funding be reallocated to water system improvements and homebuyer assistance programs and transitional housing; and recommending a CDBG administrative cap of 10%.

Another commenter noted that the federal Department of Labor eliminated Indiana's funding to assist farmers with major repairs and/or development of new farmworker housing, and encouraged IHCD and OCRA to invest in farmworker housing to better serve seasonal workers.

6. Summary of comments or views not accepted and the reasons for not accepting them.
N/A; all comments were accepted and reviewed.

The Process

PR-05 Lead & Responsible Agencies 24 CFR 91.300(b)

1. Describe agency/entity responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source

The following are the agencies/entities responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source.

Table 1 – Responsible Agencies

Agency Role	Name	Department/Agency
Lead Agency	INDIANA	
CDBG Administrator	Steven St. John	Indiana Office of Community and Rural Affairs
HOME, HTF Administrator	Andrea Lynch	Indiana Housing & Community Development Authority
ESG, HOPWA Administrator	Kristin Svyantek Garvey	Indiana Housing & Community Development Authority

Consolidated Plan Public Contact Information

Steven St. John, CDBG Program Director
OCRA
One North Capitol Ave, Suite 600
Indianapolis, IN 46204
317.499.6563 | ocra.IN.gov | ssjohn@ocra.IN.gov

PR-10 Consultation – 91.100, 91.110, 91.200(b), 91.300(b), 91.200(I) and 91.315(I)

Introduction:

Low and Moderate Income resident consultation: Consultation of LMI residents is conducted by interviewing service providers and organizations that work directly with these populations; findings from the Indiana resident housing survey; and resident focus groups.

Public Housing Authority consultation: IHCD acts as the statewide housing authority for areas not otherwise covered in Indiana. IHCD administers the Section 8 housing voucher program for the balance of state. IHCD was an active participant in drafting the Five-year Consolidated Plan and 2025 Action Plan through review, edits, input, and public hearings.

Provide a concise summary of the state's activities to enhance between public and assisted housing providers and private and governmental health, mental health and service agencies (91.215(I))

OCRA aims to continue its commitment to expanding coordination between private and public social services providers. This will include ongoing meetings with:

- Advocacy organizations that serve Indiana residents with special needs, including seniors;
- Bankers and investors who are involved with economic development and revitalization funding;
- Bankers who can funding resources available for homeowners with eligible repairs in order to create cross promotion strategies; and
- The Indiana Department of Health, to ensure that shelter is safer for all residents.

In October 2024, OCRA staff was invited to present at a conference hosted by Indiana Association of Regional Counties on the environmental review process that are required in all of the CDBG programs and provide the agencies vision of automating and streamlining procedures with other funding agencies such as the Indiana Finance Authority and USDA-RD. This engagement led to follow up conversations with other local subject matter experts on best practices to support the effective design of streamline procedures.

CDBG staff also collaborated with the IU Environmental Resilience Institute to gain insights into the challenges that hinder the development of resilient and healthy communities. The Institute is partnering with local governments, as well as private and nonprofit organizations across the state, to enhance Indiana's capacity to cope with health and environmental challenges. One significant barrier identified is the limited availability of funding for rural communities, which restricts their ability to address the project needs essential for promoting healthy communities. CDBG staff continue to work with the IU Environmental Resilience Institute to further understand these obstacles and find solutions. OCRA staff provided an overview of the current agency programs and initiatives, including the owner-occupied

rehabilitation program and others in progress. The aim of this collaboration is to strengthen the partnership with IU Environmental Resilience, ensuring that the CDBG program effectively promotes the development of healthy communities through its Owner Occupied Rehabilitation Program, Public Facilities Program, and Main Street Rehabilitation Program. Additionally, the initiative seeks to enhance understanding among institute members regarding actions that can be taken in rural communities to support these programs, benefiting low- to moderate-income individuals and areas across the state.

OCRA staff also collaborated with the Indiana State Department of Health to create a radon and lead policy designed to enhance the Owner-Occupied Rehabilitation Program and Public Facilities Program. This initiative aims to ensure that all facilities funded with CDBG resources comply with health and safety standards aligned with federal and state requirements. CDBG and Community Liaison staff met with representatives from Star Financial Bank to discuss complementary funding resources available for homeowners with eligible repairs in order to create cross promotion strategies that will allow communities to more holistically leverage all available opportunities.

OCRA has also engaged the Governor's Council for People with Disabilities (GCPD) to explore new opportunities for strengthening inclusively across OCRA programming. OCRA staff meet regularly with representatives from GCPD to discuss options and to explore new potential program resources for engaging communities on how to prioritize these efforts. OCRA staff collaborated with GCPD to conduct a training session for Main Street business owners. The training aimed to equip business owners with strategies to encourage individuals with disabilities to apply for jobs at their local businesses, as well as to provide the necessary tools to support a workforce with special needs. The Office of Community and Rural Affairs (OCRA) adopted a Strategic Plan for Rural Indiana (effective 2023-2024) to align the unique challenges of the state's rural areas with the agency's programs and place-making efforts.

OCRA remains committed to growing the expertise of its staff through ongoing professional development training. This training is designed to increase their knowledge in the areas of federal grants management, CDBG programming requirements, resource optimization, problem mediation and facilitation. As a result of this training, OCRA has been able to improve its technical assistance provision to grant administrators and rural communities. Lessons learned have been instrumental in identifying needed enhancements to OCRA's grants management procedures and CDBG programming. In total, OCRA staff members have completed 624 hours of training provided by reputable organizations such as the National Grants Management Association (NGMA), Ivy Tech Community College, Ball State University, and the Council of State Community Development Agencies (COSCDA).

In the past year, OCRA has dedicated a significant amount of its resources and staff time to create a more comprehensive and functional CDBG handbook. This handbook serves as a key resource for OCRA-certified grant administrators who help rural communities obtain CDBG funding across the state. We will transition the handbook into an interactive and user-friendly format using Articulate in PY25. The platform and updated display will enhance the development of OCRA's training menu, streamlining the annual CDBG training sessions for individuals seeking certification to administer CDBG funding from the agency.

The work on the handbook has provided OCRA with a new opportunity to explore its policy structure more thoroughly and has contributed to the development of a new agency policy manual and income survey manual during PY2025. These resources will assist OCRA with training and development of new staff, while ensuring current policies are communicated to stakeholders with more transparency and efficiency. With one consolidated policy manual resource, OCRA is better equipped to stay engaged with federal regulatory changes from agencies. OCRA's approach to regulatory tracking has also been enhanced, which has better prepared the agency to proactively implement and address necessary changes in the program while reducing the impact on communities. This has also driven OCRA to improve and update program policies. The revision of policies has also encouraged the improvement and creation of cohesive forms that help reduce compliance costs and learning costs associated with the difficulty of understanding and navigating federal funding systems. OCRA has updated all 18 forms and integrated modifications requests along with program income reporting into the electronic grants management system (eGMS). These enhancements minimize the information required from grantees while also streamlining the process and ensuring that complete files are maintained for the review of grant files.

The State of Indiana has introduced user-friendly website tools that have enabled OCRA staff to redesign the website's navigation, making it simpler for the public and stakeholders to access information about the CDBG programs.

IHCDA offers training and webinars to partner organizations on topics ranging from program application requirements to funds management to weatherization courses. IHCDA maintains resources on its website with detailed manuals that instruct its partners on how to develop and administer programs.

IHCDA has implemented a second iteration of the IndianaHousingDashboard.com, a website that has curated demographic, economic, educational, housing, and other publicly available statistics for use by local units of government, community development corporations and boards, for-profit and non-profit developers, and other interested parties. These statistics can be viewed on a 10-year time horizon and in comparison between any number of local geographies within the state. The latest version of the Dashboard also provides guidance for public outreach, cooperation with local government, zoning and permitting processes, and much more. The goal of the Dashboard is to empower housing providers and local planning boards to work together on setting goals with solid data behind their decisions.

In addition to HMIS, IHCDA maintains a comparable database for victim service providers. This database allows IHCDA to provide the same level of service, data tracking, and aggregated reports for the 32 agencies providing housing services to survivors of DV.

Continued partnerships and involvement in state taskforces with multiple state agencies and key stakeholders include:

- IHCDA has partnered with the State's Division of Mental Health and Addiction and the Family and Social Service Agency to provide capital HOME funding to support the construction of housing

specifically for persons at risk of homelessness who have a Substance Use Disorder or Mental Health Disorder.

- In cooperation with FSSA Division of Aging, IHCD has published a study on the projected supply and demand of age-restricted and assisted living units and services across the state.
- IHCD also manages the CHDO Working Group – of which 8-10 Community Housing Development Organizations meet quarterly to discuss best practices in their implementation of HOME-funded affordable housing projects.
- The HOME Homebuyer Working Group consists of all HOME Homebuyer awardees to discuss HOME regulations, best practices, market updates and ideas for policy.
- The IHCD Community Services division has entered into a partnership with the Indiana Family and Social Services Administration (FSSA) to administer a Temporary Assistance for Needy Families (TANF) program that provides funding for short-term Rapid Re-Housing (RRH) and Homeless Prevention (HP) efforts to any nonprofit in the State of Indiana to provide rental and utility assistance to eligible families who are either experiencing homelessness or are at imminent risk of homelessness.
- In 2025, the IHCD Community Services division will also convene a multi-agency group to provide advisory assistance for a homelessness response systems improvement grant as it relates to youth and young adults.

IHCD maintains good relationships and communication with the Indiana Affordable Housing Council and the Affordable Housing Association of Indiana, both groups which include developers, owners, and property managers who are involved in affordable housing. We collaborate in trainings, conferences, and other conversations throughout the year.

Describe coordination with the Continuum of Care and efforts to address the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans, and unaccompanied youth) and persons at risk of homelessness

In 2023, IHCD and the Indiana Balance of State Continuum of Care (CoC) engaged a contractor to create a new Coordinated Entry System (CES) assessment process to produce more effective outcomes and ensure households are served in a more trauma-informed manner, stably housed quickly, and matched with the appropriate housing placement. IHCD and the CoC have engaged a contractor to provide an *annual evaluation* of the CES, which is required by HUD. In 2023, the contractor submitted a benchmark evaluation of the entire CES and over the course of the next four years, the contract will provide a more extensive evaluation of four regions each year.

The Indiana Balance of State Continuum of Care Strategic Plan 2023-2025 has established an objective to provide guidance, training, and technical assistance to support Regional Planning Councils in order to strengthen internal operations to ensure organizations and people are supported within the homeless response system. Action steps towards fulfilling this objective require a monitoring schedule of ESG projects to ensure that necessary information is included to meet HUD and CoC requirements and use of

consistent metrics to evaluate active participation by HUD-funded programs in Coordinated Entry and Housing First implementation. This allows for continuity and consistency across programs policies and procedures, ensuring individuals are tracked throughout their experience in homelessness. In April 2025, the CoC and IHCD hosted a Regional Leadership Summit that includes training on responsibilities, including those related to ESG.

In 2024, the IN BoS CoC launched the Collaborative Housing Assessment Tool (CHAT) as its new CE process. Unifying this process across all regions has helped to standardize the process across the various regions and with all stakeholders who use the Coordinated Entry System (CES). The CHAT process was designed with intentional language choices informed by PLE, DV Survivors, both COC and ESG service providers, and other special population stakeholders. The process was designed to be conversational and phased, collecting only necessary information at each stage. The process was also created with intentional break points to allow the participants to pause the assessment at each phase if they would prefer. During 2025, the CHAT Evaluation Task Force will be reviewing the tool to gauge outcomes and identify any updates, edits, or corrections needed. The Service Provision Committee (SPC) of the IN BoS CoC Board includes regional representation from each Region across the CoC and offers opportunities for ESG and CoC services providers to provide input on policy changes being considered. The SPC reviews the CE Policies and Procedures annually.

The State ESG program presents their program plans to the BoS CoC Board, in addition to entitlement cities at their meeting annually. In March 2024, the IN BoS CoC Board aligned its committee structure to be able to address the needs of its 2023-2025 CoC Strategic Plan better and allow for collaboration with key stakeholders and partners that will build a more efficient and performance-based system to respond to homelessness. The IN BoS CoC conducted a soft launch of the new CE assessment in January and February 2024 to test the process and gain feedback from clients and assessors. The task force is reviewing the prioritization policy in order to align it with the new assessment.

Describe consultation with the Continuum(s) of Care that serves the state in determining how to allocate ESG funds, develop performance standards and evaluate outcomes, and develop funding, policies and procedures for the administration of HMIS.

The IN-502 Continuum of Care (CoC) Board serves and acts as the oversight and planning body on preventing and ending homelessness for the CoC General Membership Body. The Board comprises a variety of geographically representative stakeholders with the knowledge and expertise to create policy priorities and make funding decisions related to homelessness. The CoC Board or the Executive Committee meets a minimum of 4 times per year. IN-502 covers every county in the state except Marion County (equivalent to the City of Indianapolis).

The CoC Board members represent populations in the homeless community, including subpopulations such as chronic homeless, seriously mentally ill, chronic substance abuse, families, domestic violence, youth and veterans as well as two representatives from the Regional Planning Councils on Homelessness.

As the Collaborative Applicant and HMIS Lead for the BoS CoC board, IHCD, through the Community Services (CS) Division, oversees CoC, ESG, and HOPWA funding sources. This structure allows for open communication and collaboration between CoC and ESG subrecipients, which contributes to effective and equitable coordination of efforts to address the needs of homeless persons as well as continuity across funding sources and performance measures. Being located in Indianapolis also allows IHCD to meet and partner with the Indianapolis CoC for statewide communication and coordination.

In 2023, the BoS CoC board restructured its committees to include the Community Engagement Committee, which is tasked with engaging and strategically sharing information with the IN BoS CoC's interest groups regarding CoC initiatives, activities, and progress-to-date, collecting information from interest groups in order to uplift any requests to the full Board as appropriate, and helping reach special populations experiencing homelessness. Committee work also continues around the governance of the CoC and its funds and organizational effectiveness to address homelessness throughout the state. The BoS CoC approved their 2023-2025 CoC Strategic Plan, which was informed by stakeholders who observed additional challenges due to the COVID-19 pandemic and are concerned about the reduction and expiration of resources provided through the CARES Act. As part of the Strategic Plan, the IN BoS CoC has been working to advocate for more resources that support the homeless response system and to right-size and refine programs across the housing spectrum for people experiencing homelessness. The Board is poised to revisit the strategic planning process to set forth a new Strategic Plan in 2026.

The State ESG program presents their program plans to the BoS CoC Board, in addition to entitlement cities at their meeting annually. In determining the ESG Allocation, a request for proposals is distributed to all the Regional Planning Councils throughout the Balance of State, current subrecipients of the ESG program, and current permanent supportive housing rental assistance programs who have had experience with rental assistance. The application is also available publicly on the IHCD website and any new partners interested in the funds are sent a reminder once it is public.

Each proposal is reviewed by at least one IHCD Community Services staff person. The reviewer completes a built in scoring tool in the application, assigning points based on the following program design components: outreach system, commitment to the coordinated access intake point, systems coordination, organizational capacity, permanent housing placement strategy, history of administering the rental assistance programs, amount of match provided and coordination with ESG Entitlement City funds (as applicable). Once applications have been scored they are presented to the IHCD board for approval and the CoC Board as a courtesy.

The performance standards for ESG were developed in collaboration with the governing body for the Balance of State CoC Board through the Funding & Resource Committee and approved by the Balance of State CoC Board by using the national standards outlined in Section 427 of the McKinney-Vento Act, as amended by the HEARTH Act. These performance standards will be reviewed annually to reaffirm that performance standards continue to be in alignment. The 2023-2025 CoC Strategic Plan included an

Action Item to develop metrics for participation in HUD-funded programs in Coordinated Entry and Housing First.

2. Describe Agencies, groups, organizations and others who participated in the process and describe the jurisdictions consultations with housing, social service agencies and other entities.

Six stakeholder focus groups held between March 4th–13th, 2025, to inform the development of the State of Indiana’s 2025-29 Consolidated Plan. The focus groups were organized around specific topics and stakeholders were invited to participate in any of the discussions that best aligned with their expertise and interests. The topics were:

- Housing Affordability and Development (two (2) focus groups);
- Special Needs Populations (two (2) focus groups); and
- Business and Economic Development (two (2) focus groups).

Representatives from the following organizations participated in the focus groups:

- AARP Indiana
- Arc of Indiana
- Area 10 Agency on Aging
- Bedford Housing Authority
- Blue River Services
- Brazil Housing Authority
- Coburn Place Safe Haven
- Evansville Regional Economic Partnership
- Grace Horizon
- GRW Engineers
- HAND, Inc.
- HealthPlus Indiana
- HIV/AIDS service providers
- Housing Matters
- Immigrant Welcome Center
- Indiana Coalition to End Domestic Violence
- Indiana Coalition to End Sexual Assault
- Indiana Economic Development Corporation
- Indiana Landmarks
- Indiana Statewide Independent Living Council
- IU Environmental Resilience Institute
- IU Extension
- Kokomo Housing Authority
- Lacasa
- Milestone Ventures
- Muncie Housing Authority
- Perry County Development Corporation
- Prosperity Indiana
- Purdue Extension
- Radiant CDC
- Rauch Incorporated
- River Hills Economic Development District
- Riverhills Regional Planning Commission
- SIHCDC
- SIRPC
- YWCA Central Indiana

Identify any Agency Types not consulted and provide rationale for not consulting. N/A

Other local/regional/state/federal planning efforts considered when preparing the Plan

Table 2 – Other local / regional / federal planning efforts

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
Continuum of Care and IN Balance of State PIT Count, 2024	IHCDA	ESG goals are developed in collaboration with CoC planning through the inclusion of one board member that represents an ESG entitlement city collaborate interest
2020 Next Level Agenda	State of Indiana Governor’s Office	CDBG goals and priorities support many aspects of the plan including supporting recovery from substance abuse addiction and enhancing educational attainment and broadband access.
OCRA Strategic Plan	OCRA	CDBG goals and priorities relate to rural challenges identified in the plan including the addiction crisis, affordable housing shortages, and aging water infrastructure.
Indiana Institute for a Sustainable Future	Purdue University	Data were used to inform the hazard risk analysis
Connecting Indiana: Indiana Broadband Five Year Action Plan	U.S. Department of Commerce	CDBG community investment activities will provide leverage to communities applying for broadband investment grants
2024 Annual Report	IHCDA	Goals were based on past program outcomes
IN Housing Dashboard	IHCDA	Data informed needs assessment and market analysis sections of the Consolidated Plan, where were used for priority needs

Describe cooperation and coordination among the State and any units of general local government, in the implementation of the Consolidated Plan (91.315(I))

IHCDA partners with the State Department of Health (IDOH) on mitigating the danger of Lead-based Paint through the Healthy Homes Resource Program and coordinates referrals from IDOH caseworkers to assist families who have children with an elevated blood lead level. As part of this effort, IHCDA has entered into an MOA with IDOH to share data across agencies and to receive referrals for households who are experiencing issues with mold and moisture intrusion, leading to asthma. Continuum of Care and ESG recipients are taking Lead Based Paint training to be able to better assist clients with identifying health concerns in units older than 1978.

IHCDA also established a strong relationship with the Family and Social Services Administration (FSSA) to coordinate affordable assisted living rental housing production and housing for persons with intellectual or developmental disabilities, or persons who have a chemical addiction.

IHCDA maintains its leadership role among Indiana Public Housing Authorities to promote the development of Permanent Supportive Housing and increase utilization of the VASH program. IHCDA has utilized its housing choice voucher program to provide rental assistance in PSH developments around the state. In the VASH program, IHCDA has developed relationships with PHAs around the state to allow veterans to utilize the VASH program where they would like regardless of if the local PHA has a VASH program.

The Continuum of Care continues its work with entitlement cities that receive ESG funds to provide consultation and review project performance. The 2023-2025 CoC Strategic plan modified the terms of service of all board members. Board members (including the ESG representative) serve a 2-year term that can be renewed for another two years. Terms can be renewed three times. This is a collaboration between the Cities, State and the HUD CPD office to begin the process of utilizing funding with efficiency and to meet the most pressing needs statewide. IHCDA will continue to sponsor a host of learning opportunities for ESG and HOPWA grantees on the topics of Rapid Rehousing (RRH), Housing First, property management best practices, and other case management trainings to support their work statewide.

Finally, IHCDA staff members participate on a number of housing and community related boards and councils where key staff meet on a regular basis to train, plan, and partner. IHCDA staff currently or have served on the following housing and community related boards and groups.

- IHCDA Compliance Working Group
- IHCDA CHDO Working Group
- IHCDA HOME Homebuyer Roundtable
- Main Street Council
- Indianapolis Metropolitan Planning Organization Central Indiana Housing Steering Committee
- Hamilton County Housing Collaborative

- Indiana University Community Advisory Board
- Morgan County Long Term Housing
- Indiana Chapter of Women in Affordable Housing Network
- Urban Land Institute
- National Association of Housing and Redevelopment Officials (NAHRO) Board,
- Youth Justice Oversight Committee,
- Indiana Mental Health and Addiction (IMHA) Planning and Advisory Council,
- Indiana Housing Trust Fund Advisory Committee,
- Family and Social Services Administration (FSSA) Division of Aging workgroup for the Indiana Master Plan on Aging,
- Back Home in Indiana Alliance Steering Committee,
- National Association of Homebuilders Housing Credit Certified Professionals Technical Advisory Board,
- Recovery Supports Workgroup (DMHA/FSSA),
- Indiana Pregnancy Promise Steering Committee (FSSA),
- CoC network for the Balance of State and Marion County,
- Marion County Re-Entry Coalition, and
- Affordable Housing Association of Indiana Board.

PR-15 Citizen Participation – 91.105, 91.115, 91.200(c) and 91.300(c)

1. Summary of citizen participation process/Efforts made to broaden citizen participation.

In addition to two public hearings and a public comment period, extensive outreach was conducted through stakeholder focus groups and a resident and stakeholder survey. Stakeholders representing organizations working in housing, community and economic development, and supportive service who primarily serve nonentitlement communities were sent an email invitation to request their participation in a virtual focus group of their choice. The survey was open to all residents and stakeholders and promoted through OCRA and IHCD partnership networks and public notices. This outreach offered respondents an opportunity to prioritize housing and community development needs and recommend solutions.

2. Summarize citizen participation process and how it impacted goal-setting

OCRA and IHCD reviewed the findings from the citizen participation against their proposed funding allocations, and five-year priorities and goals.

Citizen Participation Outreach

Table 3 – Citizen Participation Outreach

Sort Order	Mode of Outreach	Target of Outreach	Summary of Response / Attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
1	Public Hearings on February 10 and April 7	All interested residents and stakeholders	Approximately 50 Attendees at each hearing	Please see the Engagement Appendix	N/A	N/A
2	Public Comment Period	All interested residents and stakeholders	A 60-day public comment period was held between April 3, 2025, and June 1, 2025. The draft plan was posted on both the OCRA and IHCD websites beginning on April 3, 2025. Notices about the availability of the Draft Action Plan were emailed to partner stakeholders.	Please see the Engagement Appendix	All public comments were reviewed and considered in finalizing the Action Plan for submittal to HUD.	N/A
3	Resident and stakeholder survey	Targeted to nonentitlement communities	The survey was available online in English and promoted through stakeholder networks and email lists. 153 respondents completed the survey. Stakeholders represented counties from across the state	Please see the Engagement Appendix	N/A	
4	Focus groups	Stakeholders who work in the fields of housing, community and economic development, and services	Virtual focus groups conducted in mid-March with 37 stakeholders. A broad group of stakeholders were invited to participate and select the group that met their topic of interest and expertise	Please see the Engagement Appendix	N/A	N/A

Needs Assessment

NA-05 Overview

Needs Assessment Overview

The Comprehensive Housing Affordability Strategy (CHAS) data, used throughout the Needs Assessment section, is a special tabulation of American Community Survey (ACS) data derived from the U.S. Census Bureau and is provided by HUD to be used in the Consolidated Plan. These data include most areas of the state, mostly non-entitlement areas. For the 2025-2029 State of Indiana Consolidated Plan, the latest data provided by HUD within the eCon Plan tool is for the 2016-2020 period. When HUD provided data is not required, more current data including the 2023 1-year ACS—reflecting the entire state—is utilized.

The current and five-year projected needs by household income and household type, based on CHAS data and ACS estimates (for single person households), are presented in the table below. The number of households with housing needs reflects the number of households experiencing at least one of the four HUD designated housing problems: 1. lacks complete kitchen facilities, 2. lacks complete plumbing facilities, 3. more than one person per room (overcrowding), 4. cost burden greater than 30%. The number of households with needs are projected to increase in the next five years based on the state's 10.1% overall growth in households from 2010 to 2023.

Current Needs and 5-Year Needs Projections

Household Type	Current		Future	
	Total HH	# HH With Housing Need	% with Housing Need	Housing Need in 5 Years
All Low Income Households (<80% AMI)	1,057,000	605,160	57%	627,976
By Income				
Extremely low income households (<30% AMI)	305,535	264,290	87%	274,254
Very low income households (30-50% AMI)	300,925	193,425	64%	200,717
Low income households (50-80% AMI)	450,540	147,445	33%	153,004
By Tenure				
Low Income Renters (<80% AMI)	527,610	333,070	63%	345,627
Low Income Owners (<80% AMI)	529,395	235,695	45%	244,581
By HH Type				
Low Income Small Related HH	334,390	185,250	55%	192,234
Single Person HH	823,709	90,826	11%	94,250
With disability	704,410	217,130	31%	225,316
Low Income Large Related HH	77,270	37,565	49%	38,981
Elderly Low Income HH	385,855	157,240	41%	163,168

The most pressing housing needs in the state of Indiana and the populations most affected, based on the analysis of CHAS and associated data as well as citizen participation findings, are listed below.

Cost burden and severe cost burden, for both renter and owner households, are the most common housing problems in Indiana, with low to moderate income renters experiencing cost burden at a higher rate (51%—affecting 310,335 renters) than low to moderate income owners (34%—affecting 247,835 owners). Cost burden or paying 30% or more of gross household income for housing costs affects 70% of renters and 71% of owners at the extremely low income level (0-30% AMI), 71% of renters and 49% of owners at the very low income level (31-50% AMI), and 32% of renters and 28% of owners at the low income level (51-80% AMI).

Severe cost burdened households—those who pay 50% or more of gross household income for housing costs—are considered at risk of homelessness. The population experiencing severe cost burden and considered at risk of homelessness in Indiana includes 58% of renters and 54% of owners at the extremely low income level, 22% of renters and 20% of owners at the very low income level, and 3% of renters and 5% of owners earning low incomes (51-80% AMI).

Black/African American households have by far the highest rates of overall cost burden (42%, compared to 23% for the state’s households overall) and severe cost burden (22%, more than twice as high as the state’s overall 10%).

Stakeholder- and resident-identified challenges. A statewide stakeholder and resident survey gathered input on housing, community, and economic development needs in Indiana. The top need identified by service providers, government stakeholders, and residents was rental housing for extremely low-income households, while economic and community development stakeholders selected workforce housing at the highest proportion. The most frequently reported unmet housing needs by service providers responding to the survey were rental housing for extremely low income households (selected by 33% of service providers), rental housing for very low income households (selected by 31%), housing for homeless families (29%), rental housing for low income households (27%), and homeownership opportunities for low income households (26%). Unmet housing needs varied by region: housing for homeless families was the top unmet need in Northwest and West Central regions, while items related to homeownership opportunities and emergency shelters were selected at the highest proportions in Northeast Indiana.

Stakeholders participating in topic-oriented focus groups identified the top needs as:

1) Affordable rental housing for extremely and very low income residents, noting that inflation is compounding the effect of rental gaps:

“Even when rents aren’t going up, increased prices for other household needs are disproportionately impacting households with income 30% or less, which in turn makes their housing situation more vulnerable.”

“Slight increases in rent can result in homelessness for residents currently living in subsidized housing.”

2) Poor quality housing and poor quality infrastructure. One stakeholder noted that the water is still regularly brown in some rural areas.

3) Limited housing support to attract workers to rural areas, which is exacerbated by rising construction costs and lack of local funding to close gaps.. Stakeholders advocated for new funding sources to be identified because as one stakeholder shared, *“local governments are not able to provide gap funding to projects.”*

4) For stakeholders serving residents with HIV/AIDS, major barriers to housing and economic stability include stigma/landlords not accepting vouchers and “background barriers” such as substance use or dependence; lack of life skills; lower level education/low wage jobs; lack of a strong support network—as well as public transportation to move residents to and from jobs.

Homelessness. Half (50%) of all stakeholders responding to the stakeholder and resident survey identified finding permanent housing options as the primary challenge faced by persons and families experiencing homelessness in Indiana. This item was followed by finding temporary shelter (31%), accessing rental assistance (26%), remaining housed (20%), and accessing needed services (18%). These items suggest that there are not enough adequate housing options and services to facilitate housing stability for families exiting homelessness. Reported needs of people experiencing homelessness varied regionally. Finding temporary housing, finding permanent housing options, and accessing rental assistance were identified as challenges for persons experiencing homelessness in all regions of Indiana. Transportation was identified as a challenge in Northwest, Southeast, and West Central regions. Accessing needed services was identified as a challenge in the East Central and Southeast regions.

Non-homeless special needs. Special needs groups identified in this plan include elderly and frail elderly residents, residents with disabilities, residents with alcohol or other addictions, persons living with HIV/AIDS, survivors of domestic violence, families with children, and households with limited English proficiency. Stakeholders also identified justice-involved individuals as a special needs group—due to the shortage of housing for those leaving institutions, particularly 1-2 bedroom multifamily apartments in rural areas. Re-entry programs are available to help with employment but when housing is unavailable, the employment programs are less successful.

Estimates of these groups’ overall sizes and the number of residents and households belonging to these groups with housing and service needs are presented and discussed in section NA-45 and summarized below. Due to limitations in data available, it is necessary to use a wide range of sources including American Community Survey (ACS) from the Census Bureau, CHAS data from HUD, the National HIV Surveillance System (NHSS), the National Survey on Drug use and Health (NSDUH), and the National Intimate Partner and Sexual Violence Survey (NISVS). Resultantly, estimates of these populations’ housing and service needs reflect different needs. For example, needs estimates for households containing at least one member with a disability use CHAS estimates reflecting how many of these households have housing needs including but not limited to cost burden, substandard housing conditions, need for accessibility modifications, overcrowding, or substandard housing condition; whereas needs estimates for persons with alcohol or other drug addiction reflect the national rate at which persons with alcohol or drug

addiction need and are not receiving treatment (and so do not necessarily capture housing needs). These needs are clarified for each group below.

By size, the largest special needs populations in the state include elderly residents (1,445,099 residents); persons with mental, physical, and/or developmental disabilities (979,762 residents); persons with alcohol or other drug addictions (estimated at 953,905 people based on national rates); and families with children (777,093 families). Survivors of domestic violence are also a large group, estimated based on national rates to include 193,549 Indiana residents annually.

The groups with the highest estimated rates of housing and supportive service need are persons with alcohol or other drug addiction (estimated at 42% to reflect national rates at which persons have alcohol or drug addictions and need and are not receiving treatment), households containing at least one member with a disability (CHAS data estimate that 31% have housing needs including but not limited to cost burden, substandard housing conditions, need for accessibility modifications, overcrowding, or substandard housing condition), and single parents with children (estimated at 29% to reflect the poverty rate of single parents with children in Indiana). While these groups have the highest rates of needs—meaning, the largest *shares* of their populations who have housing or service needs—it is also important to consider the groups with the greatest *volume* of need. This is because a large population with a relatively low rate of needs may have a larger number of households with needs than a small population with a relatively high rate of needs.

The groups with the greatest volume of need—meaning, the largest number of residents or households with needs—are persons with alcohol or other drug addiction (402,047 people with needs; based on national rates at which persons have alcohol or other drug addictions and need and are not receiving treatment); households containing at least one member with a disability (CHAS data estimate that 217,130 have housing needs including but not limited to cost burden, substandard housing conditions, need for accessibility modifications, overcrowding, or substandard housing condition- many people reflected in this estimate are elderly), and elderly residents (142,058 live in poverty, which serves as a proxy for housing and supportive service needs). Families with children also have substantial housing and service needs: 100,020 live in poverty, including 77,102 single parents with children). Lastly, many survivors of domestic violence have housing needs: 2,658 of the estimated 25,805 annual victims will need access to a range of housing support services in their lifetimes based on national rates.

Residents and stakeholders responding to the housing survey and participating in workshops and focus groups reported that rental housing for extremely low and very low income households, emergency shelters, and - are acute housing needs across special needs groups.

Non-housing community development needs. The top community and economic development needs identified by resident and stakeholder survey respondents were affordable childcare (37%), services for persons who are currently unhoused (25%), supportive services for vulnerable populations (25%), public transportation (20%), funding for homeowner repair assistance (20%), blighted residential properties (13%), and sidewalk and streetlight improvements (11%). Affordable childcare was identified as a top need

across region. When respondents were asked to rate public facilities from 1, does not exist, to 10, easy to access and available affordable childcare and center for abused children received the lowest ratings, indicating that these facilities do not exist in several areas of the state.

Services for unhoused were prioritized in the Northwest, East Central, and West Central regions. Economic and community development stakeholders prioritized funding for homeowner repair and transportation while service providers prioritized services for unhoused and supportive services for vulnerable populations.

When asked to rate services from 1—does not exist, to 10—easy to access and available, survey respondents rated advocacy and counseling for veterans and survivors of domestic violence the highest while childcare, education, and transportation services for homeless received the lowest average ratings. Counseling services for survivors of domestic violence were rated lowest in East Central Indiana and highest in the Southeast region. Homeless advocacy and advocacy for homeless youth were rated highest in West Central Indiana and lowest in Northeast Indiana.

Participants in focus groups noted poor quality infrastructure, poor quality water (and water and sewer systems), and transportation as top needs. Some mentioned lack of fresh food, noting that the only store in town is often a Dollar General.

NA-10 Housing Needs Assessment - 24 CFR 91.305 (a,b,c)

Indiana's population increased by 5.8% from 6.48 million in 2010 to 6.86 million in 2023. Growth in households was faster: the number of households in the state increased by 10.1% from 2.50 million in 2010 to 2.75 million in 2023. Average household sizes decreased as a result.

Median household income increased by 55.7% between 2010 and 2023, from \$44,613 to \$69,477. According to CHAS data, 53% of the state's households earn low to moderate incomes (earning 0-100% AMI each year, equivalent to up to \$64,900 for two person households in lower income areas of the state and up to \$83,900 in Dearborn and Ohio counties). This includes the 12% of households who earn extremely low incomes/ELI (0-30% AMI), the 12% who earn very low incomes/VLI (31-50% AMI), the 18% who earn low incomes (51-80% AMI), and the 11% who earn moderate incomes (81-100% AMI).

Of the household types presented in the "Number of Households" table below, households containing at least one person age 75 or older and households with one or more children 6 years old or younger are most likely to earn low to moderate incomes, with 72% and 63% of households earning low to moderate incomes, respectively. Just over half (52%) of households containing at least one person 62-74 years old and approximately half (49%) of large family households, defined as families with five or more members, earn low to moderate incomes. Approximately 41% of small family households, families with two to four members, earn low to moderate incomes, making them the most likely to earn more than 100% AMI.

Table 4 - Housing Needs Assessment Demographics

Demographics	Base Year: 2010	Most Recent Year: 2023	% Change
Population	6,483,802	6,862,199	5.8%
Households	2,502,154	2,754,881	10.1%
Median Income	\$44,613	\$69,477	55.7%

Data Source: 2010 Census and 1-year ACS (Median Income), 2023 1-year ACS

Number of Households Table

Table 5 - Total Households Table

	0-30% HAMFI	>30-50% HAMFI	>50-80% HAMFI	>80-100% HAMFI	>100% HAMFI
Total Households	305,535	300,925	450,540	276,820	1,203,370
Small Family Households	93,995	89,870	150,525	104,520	640,735
Large Family Households	18,645	22,300	36,325	23,730	103,235
Household contains at least one person 62-74 years of age	49,930	63,875	101,140	67,340	261,500
Household contains at least one person age 75 or older	35,805	62,895	72,210	32,130	78,740

	0-30% HAMFI	>30-50% HAMFI	>50-80% HAMFI	>80-100% HAMFI	>100% HAMFI
Households with one or more children 6 years old or younger	56,140	49,095	70,195	43,430	130,945

Data Source: 2016-2020 CHAS

Housing Needs Summary Tables

HUD designated housing problems presented in the table below include:

- “Substandard Housing,” defined as lacking complete plumbing or kitchen facilities,
- “Severely Overcrowded,” defined as a household with greater than 1.51 people per room (and complete kitchen and plumbing),
- “Overcrowded,” defined as a household with between 1.01 and 1.5 people per room,
- “Severe Housing cost burden” defined as dedicating more than 50% of household income to housing costs (referred to as “Severely Cost Burdened” in this document),
- “Housing cost burden” defined as dedicating more than 30% of income (referred to as “Cost Burdened” in this document),
- “Zero/negative Income.”

Cost burden is important because it indicates how well a household can manage other expenses (childcare, transportation, health care, etc.) and how much disposable income a household has to contribute to the economy. The higher the cost burden, the higher the risk of eviction, foreclosure, and homelessness due to the challenges of households managing housing costs. Severely cost burdened households are vulnerable to even minor shifts in rents, property taxes, and/or incomes and are considered at risk of homelessness. Families with persistent cost burden can struggle to attain upward economic mobility, which can contribute to lifelong challenges for children.

Based on the tables below, Indiana’s households have significant housing needs. The Housing Problems tables indicate that the three most common housing problems in Indiana are:

1. **Cost burden and severe cost burden:** as shown in Table 7, 22% of the state’s low to moderate income (LMI) households (298,885 households, including 25% of LMI renter households and 20% of LMI owner households) pay 30-50% of their gross household income in housing costs and are cost burdened. Another 19% of the state’s LMI households (259,285 households, including 26% of LMI renter households and 14% of LMI owner households) are severely cost burdened and pay more than 50% of their gross household income for housing. Altogether, 42% of LMI households in the state are cost burdened or severely cost burdened, including 51% of LMI renters and 34% of LMI owners. Extremely low-income (ELI) renters are more likely to experience severe cost burden than cost burden (58% of ELI renters are severely cost burdened, and another 11% are cost burdened) due to a shortage of affordable units and rent subsidies (e.g. vouchers) to serve these households.

2. **Overcrowding and severe overcrowding:** In total, 2.4% of Indiana’s LMI households are overcrowded or severely overcrowded, and this is more common among LMI renters (3.4%) than LMI homeowners (1.5%). Though this is the second most common housing problem, it is far less common than cost burden and severe cost burden.
3. **Substandard housing,** affecting 1.2% of low to moderate income households. Note that the criteria for substandard housing are extreme, and that this is a very low level estimate of the share of households that live in units needing repairs or modifications.

Analysis of the numbers in Table 8 reveal that 63% of ELI renters and 57% of ELI owners have at least one of the four HUD-designated severe housing problems: 1. Lacks kitchen, 2. Lacks complete plumbing, 3. Severely overcrowded, or 4. Severely cost burdened. Overall, 31% of LMI renters and 17% of LMI owners have severe housing problems.

Tables 9 and 10 reveal that 52% of low income households pay 30-50% of monthly income for housing costs, and that 25% of low income households pay more than 50% of monthly income for housing and are at risk for homelessness. Small related households—family households with 2-4 members—are cost burdened and severely cost burdened at higher rates than other types of households.

Table 11 presents details on overcrowding. According to the table, 21,535 LMI renter households are overcrowded, compared to 11,530 LMI owner households. Most (80%) of these households are single families, while the next greatest share (12%) are households of multiple unrelated families who may be “doubling up” or sharing the housing of others to manage housing costs.

1. Housing Problems (Households with one of the listed needs)

Table 6 – Housing Problems Table

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Substandard Housing - Lacking complete plumbing or kitchen facilities	3,415	3,230	3,355	1,045	11,045	1,510	1,645	1,380	990	5,525
Severely Overcrowded - With >1.51 people per room (and complete kitchen and plumbing)	2,190	1,505	1,490	735	5,920	430	340	750	415	1,935
Overcrowded - With 1.01-1.5 people per room (and none of the above problems)	4,955	4,125	4,280	1,670	15,030	1,325	1,795	3,575	2,270	8,965
Housing cost burden greater than 50% of income (and none of the above problems)	116,700	34,380	4,440	470	155,990	56,580	29,300	14,275	3,140	103,295
Housing cost burden greater than 30% of income (and none of the above problems)	22,985	74,970	51,050	5,340	154,345	17,805	42,135	62,850	21,750	144,540

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
Zero/negative Income (and none of the above problems)	24,855	0	0	0	24,855	11,540	0	0	0	11,540

Source: 2016-2020 CHAS

2. Housing Problems 2 (Households with one or more Severe Housing Problems: Lacks kitchen or complete plumbing, severe overcrowding, severe cost burden)

Table 7 – Housing Problems 2

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Having 1 or more of four housing problems	127,260	43,235	13,565	3,920	187,980	59,850	33,080	19,985	6,820	119,735
Having none of four housing problems	48,735	110,740	159,220	77,255	395,950	33,300	113,870	257,770	188,825	593,765
Household has negative income, but none of the other housing problems	24,855	0	0	0	24,855	11,540	0	0	0	11,540

Source: 2016-2020 CHAS

3. Cost Burden > 30%

Table 8 – Cost Burden > 30%

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
NUMBER OF HOUSEHOLDS								
Small Related	53,650	42,625	19,325	115,600	20,265	20,990	28,395	69,650
Large Related	10,175	8,050	2,960	21,185	4,540	6,435	5,405	16,380
Elderly	24,330	25,115	12,340	61,785	33,140	33,765	28,550	95,455
Other	59,985	39,525	23,095	122,605	18,645	11,990	15,365	46,000
Total need by income	148,140	115,315	57,720	321,175	76,590	73,180	77,715	227,485

Source: 2016-2020 CHAS

4. Cost Burden > 50%

Table 9 – Cost Burden > 50%

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
NUMBER OF HOUSEHOLDS								
Small Related	45,830	10,850	825	57,505	16,445	8,330	4,550	29,325
Large Related	8,430	1,670	40	10,140	3,055	1,905	805	5,765
Elderly	17,540	9,710	2,555	29,805	23,115	13,550	6,210	42,875
Other	51,640	13,870	2,015	67,525	15,435	5,960	2,805	24,200
Total need by income	123,440	36,100	5,435	164,975	58,050	29,745	14,370	102,165

Source: 2016-2020 CHAS

5. Crowding (More than one person per room)

Table 10 – Crowding Information – 1/2

	Renter					Owner				
	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
NUMBER OF HOUSEHOLDS										
Single family households	6,205	4,850	4,545	1,685	17,285	1,440	1,890	3,500	2,055	8,885
Multiple, unrelated family households	725	535	925	345	2,530	410	445	885	665	2,405
Other, non-family households	375	370	505	470	1,720	65	15	100	60	240
Total need by income	7,305	5,755	5,975	2,500	21,535	1,915	2,350	4,485	2,780	11,530

Source: 2016-2020 CHAS

Table 11 – Crowding Information – 2/2

	Renter				Owner			
	0-30% AMI	>30-50% AMI	>50-80% AMI	Total	0-30% AMI	>30-50% AMI	>50-80% AMI	Total
Households with Children Present								

Describe the number and type of single person households in need of housing assistance.

According to 2023 ACS estimates, there are 823,709 single person households in Indiana, approximately 11% of whom (90,826 residents) live in poverty. Because households living in poverty are likely to have a broad range of housing needs including but not limited to needs for rental assistance, needs for financial assistance for home repairs, and/or overcrowded housing conditions, it is estimated that 90,826 single person households need housing assistance. The number of single person households in need of assistance is projected to grow to 94,250 in the next five years based on household growth trends.

Estimate the number and type of families in need of housing assistance who are disabled or victims of domestic violence, dating violence, sexual assault and stalking.

Households with disabilities. Households with disabilities have very high rates of housing needs. According to 2017-2021 CHAS data reflecting the entire state of Indiana, there are 704,410 households

containing an individual with a disability, representing 26% of households in the state.¹ Overall, 31% of households containing an individual with a disability have one or more of the four HUD-designated housing problems, though this rate differs by disability type. According to CHAS data,

- 96,640 of 276,055 households (35%) with a cognitive limitation have housing problems;
- 98,275 of 291,485 households (34%) with a self-care or independent living limitation have housing problems;
- 126,705 of 386,185 households (33%) with an ambulatory limitation have housing problems; and
- 89,315 of 322,625 households (28%) with hearing or vision impairments have housing problems.

Note that these data include elderly residents with disabilities and that households containing individuals with multiple disabilities are counted in multiple of these groups.

Frail elderly. According to 2016-2020 Comprehensive Housing Affordability Strategy (CHAS) estimates, there are 825,565 households with at least one person aged 62 or older in Indiana, representing 30% of households. Of Indiana residents aged 62 or older, 10.5% or 87,038 are considered frail (defined as an elderly person who requires assistance with three or more activities of daily living, such as bathing, walking, and performing light housework).

Survivors of domestic violence. According to CDC data from the National Intimate Partner and Sexual Violence Survey (NISVS), 4.5% of women and 2.8% of men in the United States experience stalking, physical violence, and/or contact sexual violence (such as rape, sexual coercion, and/or unwanted sexual contact) by an intimate partner resulting in related impacts each year. These related impacts include any of the following: being fearful, concerned for safety, any post-traumatic stress disorder symptoms, injury, need for medical care, needed help from law enforcement, missed at least one day of work, missed at least one day of school. Based on these national rates, it is estimated that 193,549 Indiana residents experience domestic violence resulting in related impacts each year.

The supportive and housing services needed by intimate partner violence (IPV) victims vary. According to the National Alliance to End Homelessness, domestic violence can contribute to homelessness for survivors. Survivors who are not homeless may also require housing assistance. NISVS data show that nationally, 13.4% of female victims and 5.3% of male victims will need housing assistance as a result of domestic violence. Based on these rates and the estimates of annual domestic violence incidence estimated above, approximately 20,085 of the 193,549 annual victims will need housing assistance at some point of their lives. The National Alliance to End Homelessness has found that affordable housing is critical in preventing both homelessness and future violence for domestic violence survivors.²

¹ HUD definition of disability: [Information for Individuals with Disabilities | HUD.gov / U.S. Department of Housing and Urban Development \(HUD\)](https://www.hud.gov/program_offices/elderly_disabled/information_for_individuals_with_disabilities)

² <https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/domestic-violence/>

There are currently 32 agencies providing housing services to survivors of domestic violence in Indiana according to IHCD's 2024 Annual Report.

In the focus groups, stakeholders advocated for more housing developments to be built with special needs populations in mind—such as more project-based vouchers to be set aside for special needs populations. One stakeholder wanted to see LIHTC developments have set aside units for survivors of domestic violence.

What are the most common housing problems?

The Housing Problems tables indicate that the three most common housing problems in Indiana are:

1. **Cost burden and severe cost burden:** These account for 85% of LMI renter-reported housing problems and 89% of owner-reported housing problems. Approximately 22% of the state's low to moderate income (LMI) households (298,885 households, including 25% of LMI renter households and 20% of LMI owner households) pay 30-50% of their gross household income in housing costs and are cost burdened. Another 19% of the state's LMI households (259,285 households, including 26% of LMI renter households and 14% of LMI owner households) are severely cost burdened and pay more than 50% of their gross household income for housing. Altogether, 42% of LMI households in the state are cost burdened or severely cost burdened, including 51% of LMI renters and 34% of LMI owners. Extremely low-income (ELI) renters are more likely to experience severe cost burden than cost burden (58% of ELI renters are severely cost burdened, and another 11% are cost burdened) due to a shortage of affordable units and rent subsidies (e.g. vouchers) to serve these households.
2. **Overcrowding and severe overcrowding:** In total, 2.4% of Indiana's LMI households are overcrowded or severely overcrowded, and this is more common among LMI renters (3.4%) than LMI homeowners (1.5%). Though this is the second most common housing problem, it is far less common than cost burden and severe cost burden.
3. **Substandard housing,** affecting 1.2% of low to moderate income households. Note that the criteria for substandard housing are extreme, and that this is a very low level estimate of the share of households that live in units needing repairs or modifications.

Are any populations/household types more affected than others by these problems?

The shares of households experiencing housing problems³ are highest for the lowest income households and lowest for the highest income households. Overall, 86% of ELI (0-30% AMI) households have at least 1 housing problem, compared to 64% of VLI households (31-50% AMI), 33% of low income households (51-80% AMI), and 14% of moderate income households (80-100% AMI). Severe housing problems follow

³ HUD-defined housing problems include: 1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4. Cost Burden greater than 30%. HUD-defined severe housing problems include: 1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%. For a complete discussion of housing problems, refer to the narrative earlier in the NA-10 section of this Consolidated Plan.

a similar pattern, affecting 61% of ELI households but only 7% of low income households and 4% of moderate income households.

LMI renter households are more likely than LMI owner households to experience housing problems and severe housing problems. According to CHAS data, 60% of LMI renters have housing problems, compared to 38% of LMI owners. Approximately 31% of renters and 17% of owners have at least one severe housing problem.

Small related households are defined by HUD as families with two to four members. Large related households are families with five or more members. Low income (0-80% AMI) small related households are cost burdened at a higher rate (55%) than other types of low income households (49% of low income large related households and 41% of elderly households). Small related households are also more likely to be severely cost burdened: 26% of small related households are cost burdened compared to 25% of households overall, 21% of large related households, and 19% of elderly households.

Thirty-one percent of households containing at least one member with a disability have housing needs. Housing needs were most common for households containing individuals with cognitive limitations (35% of these households had needs) and households containing individuals with self-care or independent living limitations (34% of these households had needs).

Describe the characteristics and needs of Low-income individuals and families with children (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered 91.205(c)/91.305(c)). Also discuss the needs of formerly homeless families and individuals who are receiving rapid re-housing assistance and are nearing the termination of that assistance

Households that spend 50% or more of their income on housing and are severely cost burdened are considered at risk of homelessness. These households have limited capacity to adjust to rising home prices making them vulnerable to even minor shifts in rents, property taxes, and/or incomes.

CHAS data indicate that 259,285 total low to moderate income Indiana households (155,990 renters and 103,295 owners) are at risk of homelessness. This includes 57% of extremely low income households, 21% of very low income households, 4% of low income households, and 1% of moderate income households. By type, households at risk of homelessness include 26% of low income (0-80% AMI) small related households, 21% of low income large related households, and 19% of low income elderly households.

If a jurisdiction provides estimates of the at-risk population(s), it should also include a description of the operational definition of the at-risk group and the methodology used to generate the estimates:

IHCDA follows the operational definition provided by HUD for those who are an at-risk group.

For individuals and families that includes An individual or family who: (i) Has an annual income below 30% of median family income for the area; AND (ii) Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; AND (iii) Meets one of the following conditions: (A) Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR (B) Is living in the home of another because of economic hardship; OR (C) Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; OR (D) Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; OR (E) Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR (F) Is exiting a publicly funded institution or system of care; OR (G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved Con Plan.

Specify particular housing characteristics that have been linked with instability and an increased risk of homelessness

In focus groups and interviews, stakeholders shared the housing characteristics that lead to housing instability and homelessness:

- For residents with HIV/AIDS: Stigma associated with being HIV positive or having AIDS, leading to landlords refusing rentals;
- Being a victim of domestic violence: Lack of transitional and affordable housing for survivors of domestic violence which leads them to stay with their violent partners or face homelessness;
- Not attending college or developing a trade: Stagnant and low wages and few employment opportunities in rural areas;
- Households who have not learned life skills from parents or caregivers;
- Substance use and dependence;
- Mental and behavioral health challenges; and
- Living with a disability that restricts your ability to work full time.

NA-15 Disproportionately Greater Need: Housing Problems - 91.305 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction

Utilizing HUD's CHAS data, this section identifies disproportionately greater rates of housing problems of particular resident groups. The findings from that analysis appear after the needs tables.

0%-30% of Area Median Income

Table 12 - Disproportionally Greater Need 0 - 30% AMI

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	239,184	82,054	0
White	163,844	56,578	0
Black / African American	47,914	16,513	0
Asian	4,981	2,762	0
American Indian, Alaska Native	702	136	0
Pacific Islander	8	0	0
Hispanic	16,016	4,690	0

Data Source: 2016-2020 CHAS

*The four housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4. Cost Burden greater than 30%

30%-50% of Area Median Income

Table 13 - Disproportionally Greater Need 30 - 50% AMI

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	192,283	125,583	0
White	137,970	102,186	0
Black / African American	31,562	11,249	0

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Asian	3,828	1,451	0
American Indian, Alaska Native	478	218	0
Pacific Islander	20	29	0
Hispanic	13,852	7,634	0

Data Source: 2016-2020 CHAS

*The four housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4. Cost Burden greater than 30%

50%-80% of Area Median Income

Table 14 - Disproportionally Greater Need 50 - 80% AMI

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	128,304	348,541	0
White	96,973	282,186	0
Black / African American	16,326	33,131	0
Asian	3,064	4,926	0
American Indian, Alaska Native	211	616	0
Pacific Islander	73	84	0
Hispanic	8,415	20,692	0

Data Source: 2016-2020 CHAS

*The four housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4. Cost Burden greater than 30%

80%-100% of Area Median Income

Table 15 - Disproportionally Greater Need 80 - 100% AMI

Housing Problems	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	31,016	264,304	0
White	25,887	222,116	0
Black / African American	2,228	20,726	0
Asian	899	3,690	0
American Indian, Alaska Native	25	368	0
Pacific Islander	0	93	0
Hispanic	1,461	13,747	0

Data Source: 2016-2020 CHAS

*The four housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4. Cost Burden greater than 30%

Discussion

A disproportionate need exists when any group has a housing need that is 10 percentage points or more greater than the rate for the state as a whole. This section assesses the needs of racial and ethnic groups with disproportionately high needs.

The tables above show housing needs for households by area median income range and by race and ethnicity. Rates of housing needs at each income level are not discussed for racial and ethnic groups with fewer than 50 households. The data indicate that:

- For 0-30% AMI households, needs are significant across racial and ethnic groups: 74% of White households, 74% of Black households, 77% of Hispanic households, 64% of Asian households, and 84% of American Indian, Alaska Native households have housing needs. Data show that American Indian, Alaska Native households have disproportionate needs compared to the state as a whole.
- For 31-50% AMI households, needs are lowest for White (57%) households and greatest for Black (74%), Asian (73%), American Indian, Alaska Native (69%), and Hispanic (64%) households. Black and Asian households have disproportionate needs compared to the state as a whole.
- For 51-80% AMI households, needs are less severe for American Indian, Alaska Native (26%) and White (26%) households and highest for Black (33%), Asian (38%), and Pacific Islander (46%) households. Needs are disproportionately high relative to the state overall for Asian and Pacific Islander households, though it should be noted that there are relatively few Pacific Islander households.

- For moderate income (81-100% AMI) households, needs are much lower overall. Asian households have the highest rate of need at 20%, though this is not disproportionately higher than the state's overall rate of 11%. Other racial and ethnic groups have housing problems at rates of 0-10%.

NA-20 Disproportionately Greater Need: Severe Housing Problems – 91.305(b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction

Utilizing HUD's CHAS data, this section identifies disproportionately greater rates of *severe* housing problems of particular resident groups. The findings from that analysis appear after the needs tables.

0%-30% of Area Median Income

Table 16 – Severe Housing Problems 0 - 30% AMI

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	191,506	129,663	0
White	128,658	91,787	0
Black / African American	39,759	24,633	0
Asian	4,409	3,329	0
American Indian, Alaska Native	547	291	0
Pacific Islander	8	0	0
Hispanic	13,487	7,211	0

Data Source: 2016-2020 CHAS

*The four severe housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%

30%-50% of Area Median Income

Table 17 – Severe Housing Problems 30 - 50% AMI

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	68,076	249,937	0
White	48,512	191,696	0
Black / African American	11,278	31,586	0
Asian	2,117	3,141	0

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
American Indian, Alaska Native	159	542	0
Pacific Islander	0	49	0
Hispanic	4,515	16,972	0

Data Source: 2016-2020 CHAS

*The four severe housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%

50%-80% of Area Median Income

Table 18 – Severe Housing Problems 50 - 80% AMI

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	28,676	448,258	0
White	21,520	357,661	0
Black / African American	2,446	46,994	0
Asian	1,110	6,871	0
American Indian, Alaska Native	34	798	0
Pacific Islander	19	138	0
Hispanic	2,990	26,059	0

Data Source: 2016-2020 CHAS

*The four severe housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%

80%-100% of Area Median Income

Table 19 – Severe Housing Problems 80 - 100% AMI

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
Jurisdiction as a whole	10,429	284,880	0

Severe Housing Problems*	Has one or more of four housing problems	Has none of the four housing problems	Household has no/negative income, but none of the other housing problems
White	8,223	239,821	0
Black / African American	552	22,396	0
Asian	538	4,054	0
American Indian, Alaska Native	25	368	0
Pacific Islander	0	93	0
Hispanic	865	14,330	0

Data Source: 2016-2020 CHAS

*The four severe housing problems are:

1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than 1.5 persons per room, 4. Cost Burden over 50%

Discussion

A disproportionate need exists when any group has a housing need that is 10 percentage points or more greater than the rate for the state as a whole. This section assesses the needs of racial and ethnic groups with disproportionately high rates of *severe* housing needs.

The tables above show *severe* housing problems for households by area median income range and by race and ethnicity. Rates of housing needs at each income level are not discussed for racial and ethnic groups with fewer than 50 households. The data indicate that:

- All racial and ethnic groups have high rates of severe housing needs—57% or higher—at the 0-30% AMI level. While no group has disproportionately high rates of severe housing needs, severe housing needs are highest among American Indian, Alaska Native (65%) and Hispanic (65%) households.
- For 31-50% AMI households, the rate of severe housing needs is disproportionately high for Asian households (40% compared to 21% for the state overall) and approximately 20-26% for all other groups.
- For 51-80% AMI households, rates of severe housing needs are lower for White (6%), Black (5%), and American Indian, Alaska Native (4%) households and higher—though not disproportionately high—for Hispanic (10%), Pacific Islander (12%), and Asian (14%) households.
- For moderate income households, no racial or ethnic group has a disproportionately high rate of severe housing need, though needs are highest for Asian households (12%) and lower (0-6%) for all other groups.

NA-25 Disproportionately Greater Need: Housing Cost Burdens – 91.305 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

Introduction

Utilizing HUD's CHAS data, this section identifies disproportionately greater rates of cost burden of particular resident groups, which is discussed below and based on the Housing Cost Burden table.

Housing Cost Burden

Table 20 – Greater Need: Housing Cost Burdens AMI

Housing Cost Burden	<=30%	30-50%	>50%	No / negative income (not computed)
Jurisdiction as a whole	1,980,544	323,225	261,883	36,472
White	1,691,664	242,559	183,684	20,734
Black / African American	132,219	46,471	49,473	9,389
Asian	34,665	5,522	6,515	2,480
American Indian, Alaska Native	3,115	770	643	43
Pacific Islander	339	74	8	0
Hispanic	89,105	19,997	15,826	3,138

Data Source: 2016-2020 CHAS

Discussion

According to 2016-2020 CHAS data, cost burden (excluding severe cost burden) affects 323,225 households or 13% of total households in Indiana. Rates of cost burden (excluding severe cost burden) are highest—though not disproportionately high—for Black/African American (20%), Pacific Islander (18%), and American Indian, Alaska Native (17%) households and lowest for White (11%) households.

Severe cost burden affects another 261,883 or 10% of Indiana households. Black/African American households face a disproportionately high rate of severe cost burden at 22%. This means that 22% of the state's Black/African American households are at risk of homelessness. Severe cost burden is also relatively high—around 13-14%—for Asian, American Indian, Alaska Native, and Hispanic households.

Combining cost burden and severe cost burden to determine the number of households that pay more than 30% of their income in housing costs ("overall cost burden"), 23% of households in Indiana experience overall cost burden. The rate of overall cost burden is disproportionately high for Black/African American households at 42%, a rate 19 percentage points higher than that for households overall. Overall

cost burden is also relatively high, though not disproportionately high—between 29% and 31%—for American Indian, Alaska Native and Hispanic households.

NA-30 Disproportionately Greater Need: Discussion – 91.305 (b)(2)

Are there any Income categories in which a racial or ethnic group has disproportionately greater need than the needs of that income category as a whole?

Considering low to moderate income (LMI) households overall, Black households experience housing problems at a disproportionately high rate (55%, compared to 42% of LMI households in the state). Rates of housing problems are also relatively high for LMI American Indian, Alaska Native households (51%) and LMI Asian households (50%). These groups have disproportionately high rates of housing needs relative to the rate of LMI White households (39%), but not relative to the rate of households overall.

Asian LMI households have the highest rate of severe housing problems at 32%, and this is disproportionately high relative to the rate of severe housing problems for LMI households overall (21%) and White LMI households (19%). LMI Black/African American households have severe housing problems at a disproportionately high rate (30%) relative to LMI White households (19%) but not relative to households overall.

The data discussed in NA-15, NA-20, and NA-25 show that disproportionate needs vary by income level. At the extremely low income level, American Indian or Alaska Native households are disproportionately impacted by housing problems. Among very low income households, Black or African American households are disproportionately impacted by housing problems and Asian households are disproportionately impacted by overall housing problems and *severe* housing problems. Among low income households, Asian and Pacific Islander households are disproportionately impacted by housing problems. Among households earning 80-100% AMI, Asian households have high—but not disproportionately high—rates of needs.

Black/African American households constitute by far the largest group of the racial or ethnic groups that experience housing needs at higher-than-average rates, so in numerical terms, their total need is largest.

If they have needs not identified above, what are those needs?

Residents in the state with needs that are not adequately captured in secondary data like that above include survivors of domestic violence and people with disabilities—all of whom need far more transitional and permanent supportive housing tailored to their needs than is available in the state.

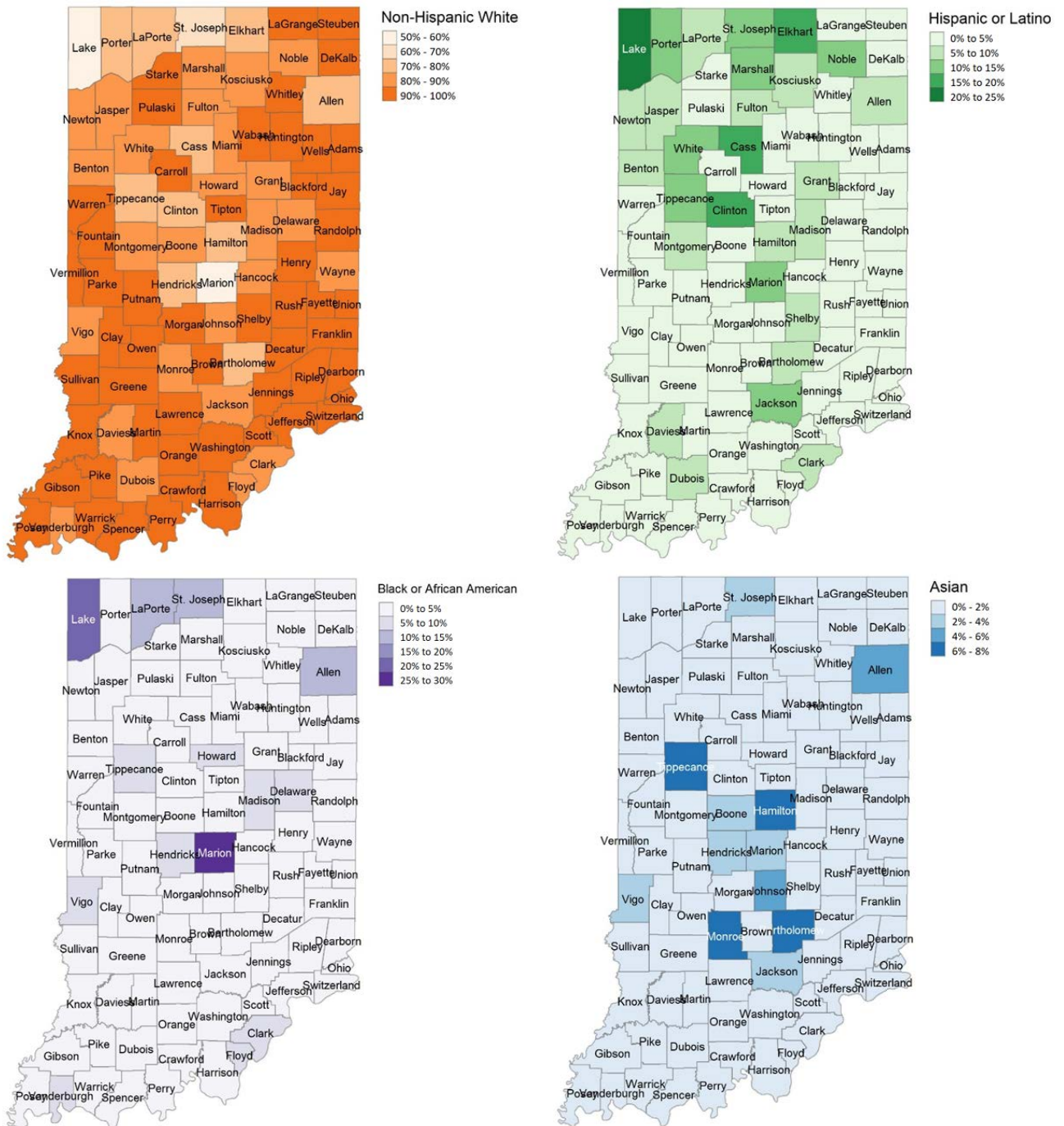
Are any of those racial or ethnic groups located in specific areas or neighborhoods in your community?

The state's largest racial and ethnic groups are mapped as shares of county populations below. Concentrations of American Indian, Alaska Native, Native Hawaiian or Pacific Islander, and other residents have not been mapped because these residents constitute very small shares of the population in each county. American Indian, Alaska Native residents are most concentrated in Pike County at 1.3% of the population (0.3% or less in all other counties). Native Hawaiian or Pacific Islander residents are most

concentrated in Brown and Vanderburgh counties where they constitute 0.3% of the population. Residents of other races and ethnicities are most concentrated in Fulton County at 1.5% of the population. The maps show that:

- Concentrations of non-Hispanic White residents are high across the state, making up at least 70% of the populations of all counties except for Marion County (where non-Hispanic White residents make up 50% of the population) and Lake County (where non-Hispanic White residents make up 52% of the population), indicating that Marion and Lake counties have the greatest concentrations of residents of color (50% and 48%, respectively). Residents of color constitute 28-30% of the populations of St. Joseph, Allen, Elkhart, and Tippecanoe counties.
- Hispanic residents constitute up to 20-21% of county populations in Lake and Elkhart counties and 18-19% of county populations in Clinton and Cass counties. Hispanic residents constitute less than 5% of the population in 63 of the state's 92 counties.
- Black or African American residents make up the greatest share (27%) of the population in Marion County, followed by Lake County (23%). Black or African American residents make up 12% or less of the population in all other counties.
- Asian residents constitute 7-8% of the population in Tippecanoe, Bartholomew, Hamilton, and Monroe counties and 5% or less of the population in all other counties.

Residents by Race and Ethnicity as Shares of County Populations, Indiana, 2023



Source: 2023 5-year ACS estimates and Root Policy Research.

NA-35 Public Housing – (Optional)

Introduction. The tables below show the numbers of vouchers by type administered by IHCD, and the characteristics of the households assisted, as of March 2025. Most households are White, seniors with disabilities, and receive tenant based vouchers.

Totals in Use

Table 21 - Public Housing by Program Type

Program Type	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project based	Tenant based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers in use	0	0	0	4,875	0	4,241	313	21	30

*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition

Data Source: IHCD.

Characteristics of Residents

Table 22 – Characteristics of Public Housing Residents by Program Type

Program Type	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project based	Tenant based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	
# Homeless at admission	0	0	0	954	0	620	313	21	

Program Type								
	Certificate	Mod-Rehab	Public Housing	Vouchers				
				Total	Project based	Tenant based	Special Purpose Voucher	
							Veterans Affairs Supportive Housing	Family Unification Program
# of Elderly Program Participants (>62)	0	0	0	1,898	0	unknown	0	0
# of Disabled Families	0	0	0	3,030	0	unknown	0	0
# of Families requesting accessibility features	0	0	0	unknown	0	unknown	unknown	0
# of HIV/AIDS program participants	0	0	0	0	0	0	0	0
# of DV victims	0	0	0	0	0	0	0	0

Data Source: IHCDA.

Race of Residents

Table 23 – Race of Public Housing Residents by Program Type

Program Type									
Race	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project based	Tenant based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
White	0	0	0	3,867	0	unknown	2	0	75
Black/African American	0	0	0	1,066	0	unknown	0	0	17
Asian	0	0	0	15	0	unknown	0	0	0

Program Type									
Race	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project based	Tenant based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
American Indian/Alaska Native	0	0	0	46	0	unknown	0	0	1
Pacific Islander	0	0	0	9	0	unknown	0	0	0
Other	0	0	0	0	0	unknown	0	0	0
*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition									

Data Source: IHCD.

Ethnicity of Residents

Table 24 – Ethnicity of Public Housing Residents by Program Type

Program Type									
Ethnicity	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project - based	Tenant - based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
Hispanic	0	0	0	unknown	0	unknown	0	0	unknown
Not Hispanic	0	0	0	unknown	0	unknown	unknown	0	unknown
*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition									

Data Source: IHCD.

Section 504 Needs Assessment: Describe the needs of public housing tenants and applicants on the waiting list for accessible units:

All questions are N/A, as IHCD does not maintain public housing.

What are the number and type of families on the waiting lists for public housing and section 8 tenant-based rental assistance? Based on the information above, and any other information available to the jurisdiction, what are the most immediate needs of residents of public housing and Housing Choice voucher holders? How do these needs compare to the housing needs of the population at large?

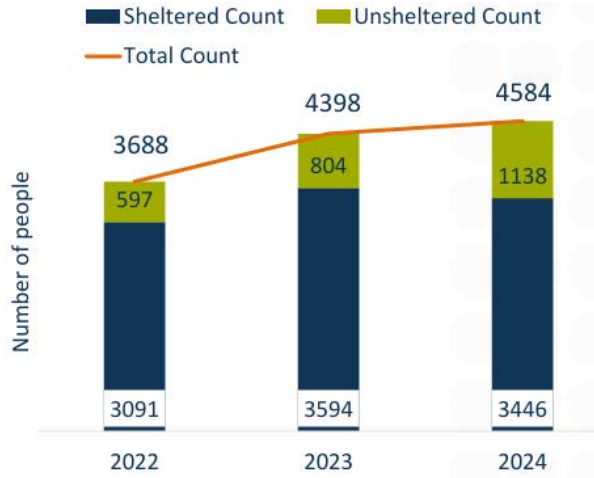
IHCD does not maintain public housing. The most immediate needs of Housing Choice voucher holders are the same as very low income renters—the top need is finding affordable rental housing that accepts Housing Choice vouchers.

NA-40 Homeless Needs Assessment – 91.305(c)

Introduction

The Indiana Balance of State Continuum of Care (IN BoS CoC) is responsible for the PIT Count in 91 of the 92 counties in Indiana. Indianapolis/Marion County is a separate COC and conducts its own PIT Count. The IN BoS CoC partners with IHCD, who serves as the Homeless Management Information System (HMIS) Lead. IHCD coordinates the annual PIT Count with local service providers and volunteers throughout the IN BoS CoC Network. Unless otherwise noted, this section uses data from the IN BoS CoC, all areas of the state excluding Marion County. The 2024 IN BoS CoC PIT Count took place on January 24, 2024 and identified 4,584 people experiencing homelessness, including 3,446 sheltered people and 1,138 unsheltered people. The number in 2024 was 4% higher than the 2023 count of 4,398 people and 24% higher than the 2022 count of 3,688 people. The rise in homelessness since 2022 is due to increases in both sheltered and unsheltered homelessness, though the rise in unsheltered homelessness has been more dramatic: 597 people experiencing homelessness were unsheltered at the time of the 2022 PIT Count, and this nearly doubled (increasing by 91%) to 1,138 by 2024. Approximately 23% of people experiencing homelessness were sleeping in places not meant for human habitation—such as cars, parks, abandoned buildings, bus stations, streets, and encampments—in 2024, up from 18% in 2023 and 16% in 2022.

Figure 1.
People Experiencing Homelessness, IN BoS CoC



Note: IN BoS CoC includes 91 of the 92 counties in IN. 67 of these counties participated in the 2024 PIT Count, 61 counties participated in 2023, and 68 counties participated in 2022. Counts from 2021 are not representative and cannot be used to compare with 2022-2024 numbers. "Indianapolis" represents the Indianapolis Continuum of Care, which covers Marion County. Source: IHCD and IN BoS CoC PIT Count.

Figure 2.
People Experiencing Homelessness, Indiana and U.S.

Geographic Area	2022	2023	2024	Percentage Change '22-'23	Percent Change '23-'24
U.S. *	582,462	653,104	----	12%	----
Indiana	5,449	6,017	6,285	10.4%	4.5%
Indiana Balance of State	3,688	4,398	4,584	19.3%	4.2%
Indianapolis	1,761	1,619	1,701	-(8.1%)	5.1%

Figure 2 shows that an additional 1,701 people were identified as experiencing homelessness in the Indianapolis Continuum of Care's service area (Marion County) in 2024, meaning that a total of 6,285 people were counted as experiencing homelessness in Indiana's 2024 PIT Counts. The number of people experiencing homelessness in Indianapolis/Marion County *decreased* by approximately 3% between 2022 and 2024 as the number of people experiencing homelessness in the rest of the state *increased* by 24%. Approximately 73% of people experiencing homelessness in Indiana were in areas outside of Marion County in 2023 and 2024, up from 68% in 2022.

As shown in Figure 3, women constituted just over one third of people experiencing unsheltered homelessness and 46% of people experiencing sheltered homelessness in areas outside of Marion County. Figure 4 shows that Black, African American, or African residents are more than three times overrepresented in the population experiencing homelessness: they make up 21% of residents experiencing homelessness but only 6% of residents overall.

Figure 3.
People Experiencing Homelessness by Gender,
IN BoS CoC, 2024

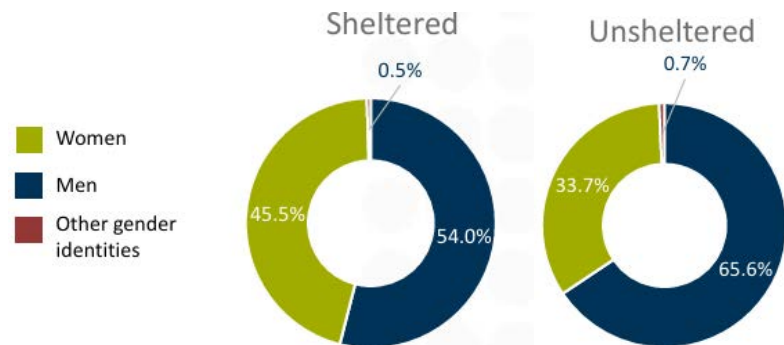
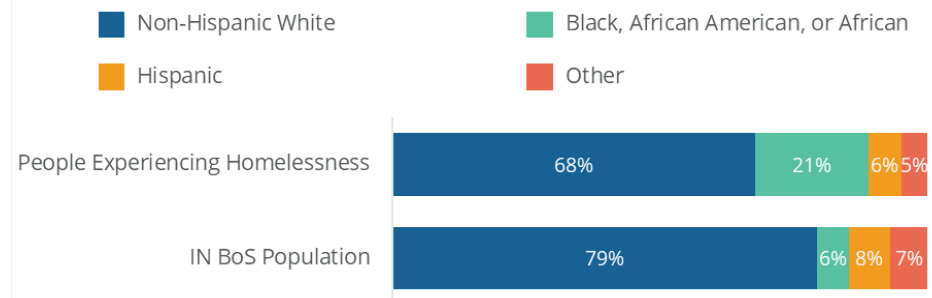


Figure 4.
People Experiencing Homelessness by Race and
Ethnicity, IN BoS CoC, 2024



Source: IHCD and 2024 IN BoS CoC PIT Count. Note: "Hispanic" includes Hispanic of any race. All other races include non-Hispanic individuals only. "IN BoS Population" includes the combined populations of all Indiana counties except for Marion County. **Source:** IHCD, 2024 IN BoS CoC PIT Count, 2023 1-year ACS, and Root Policy Research.

Approximately 24% of those counted as homeless in the 2024 IN BoS PIT Count were under 24 years old, 56% were 25-54 years old, and the remaining 20% were 55 or older. Among adults (those 18 or older) experiencing homelessness in 2024, 33% reported having mental health issues, 23% reported having substance use disorders, 10% reported being survivors of domestic violence, and 1% reported having HIV/AIDS.

Populations Experiencing Homelessness, 2024 IN BoS CoC PIT Count

	Sheltered					Total	
	ES	TH	SH	Total	Unsheltered	Number	% of Adults 18+ Experiencing Homelessness
Adults with a serious mental illness	721	124	3	848	373	1,221	33%
Adults with substance use disorder	492	87	3	582	275	857	23%
Adults with HIV/AIDS	24	7	0	31	18	49	1%
Adult survivors of domestic violence	288	93	0	381	0	381	10%

Note: ES = emergency shelter, TH = transitional housing, SH = safe haven.

Source: IHCD and 2024 IN BoS CoC PIT Count.

People experiencing unsheltered homelessness were identified in 67 of the 91 counties in Indiana in 2024, but only 55 counties reported having housing resources to serve unhoused people. People experiencing homelessness have significant, widespread, and varied needs, discussed in this section.

If data is not available for the categories "number of persons becoming and exiting homelessness each year," and "number of days that persons experience homelessness," describe these categories for each homeless population type (including chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth):

The information in this section refers to people experiencing homelessness in areas of Indiana outside of Marion County.

Chronically homeless individuals and families. 365 people were counted as experiencing chronic homelessness in the 2024 IN BoS CoC PIT Count, and all were sheltered. Most (332) of people experiencing chronic homelessness were in households with no children, while the rest (43) were in households containing adults and children. Of the 365 people experiencing chronic homelessness, 33 (9%) were veterans, 8 (2%) were unaccompanied youth 24 or younger, and five (1%) were in parenting youth households.

Families with children. The 2024 IN BoS CoC PIT Count identified 395 households with at least one adult and one child (containing a total of 1,282 people) experiencing homelessness, 383 of which were sheltered and 12 of which were unsheltered. The total number of families with children experiencing homelessness is down slightly from 427 in 2023. 15 of these households were chronically homeless (all were sheltered).

Veterans and their families. In 2024, 252 veterans were counted as experiencing homelessness (equivalent to 5% of the population experiencing homelessness), down from 306 in 2023 and 315 in 2022. At the time of the PIT Count, 21% of veterans experiencing homelessness were unsheltered and 33 veterans (13% of veterans experiencing homelessness) were experiencing chronic homelessness. The PIT Count identified 11 veteran families with children experiencing homelessness (including 27 people), and three of these households were unsheltered.

Unaccompanied youth. Beginning with the 2024 PIT Count, the IN BoS CoC is making an effort to count youth and young adults who do not fully meet the definition of homelessness as set by HUD. If an individual does not sleep in a place not meant for human habitation, an Emergency Shelter, a Transitional Housing site, or a Safe Haven and is between the ages of 14 and 24, volunteers ask supplemental questions about their experience with housing instability. This allows the CoC to identify youth aged 14 to 24 who are in doubled-up conditions not captured by HUD's definition of homelessness—a type of homelessness that the CoC refers to as "Category 3."

The 2024 PIT Count identified 1,132 youth and young adults under 25 as experiencing homelessness, 97 of whom were unsheltered. This includes 39 youth aged 14 to 24 who are experiencing category 3 homelessness and who would not be considered homeless under HUD's definition of homelessness. It also includes 786 accompanied youth and 307 unaccompanied youth, 113 of whom are parenting youth 18-24 and their children. Nearly one in four (24% of) unaccompanied youth were under the age of 18, just over half were males, and one third of unaccompanied youth identified as black. There is a significant need to increase access to shelter for unaccompanied youth: 31% of unaccompanied youth are unsheltered (a new high in the last six years). Five unsheltered parenting youth households were identified in 2024, up from only one in the last five years.

Figure 5.
Youth Homelessness Breakdown, IN BoS CoC,
2024

Note:

Definitions-

"Accompanied Youth"- Youth under 25 who live with someone 25 years old or older

"Unaccompanied Youth"- Youth under 25 who do not live with someone 25 years old or older

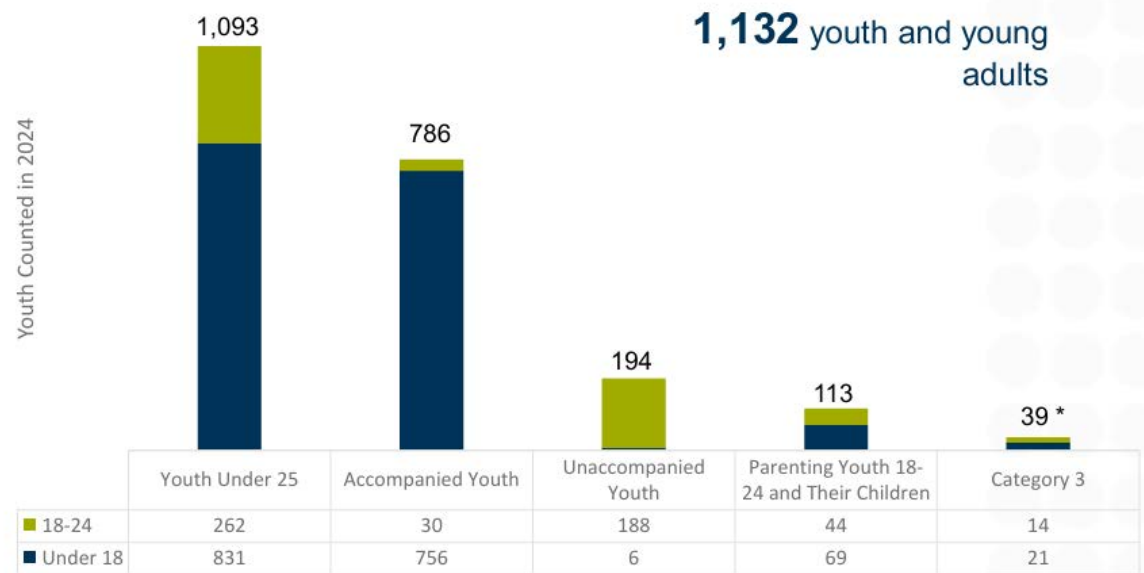
"Parenting Youth"- Youth under 25 who are parents

"Category 3"- Youth aged 14-24 in doubled-up situations not captured by HUD's definition of homelessness

Source:

IHCDA and 2024 IN BoS CoC PIT Count.

YOUTH HOMELESSNESS BREAKDOWN



Youth under 25 are more vulnerable to being survivors of domestic violence, being single parents, and struggling with mental health issues which contribute to their housing stability. 36% of young adults 18-24 experiencing homelessness reported being survivors of domestic violence compared to 10% of the adult population experiencing homelessness, and two thirds of women experiencing homelessness who reported being survivors of domestic violence were currently fleeing domestic violence. 41% of youth 18-24 struggled with mental health issues and 20% reported having substance use issues.

Estimate the number and type of families in need of housing assistance for families with children and the families of veterans.

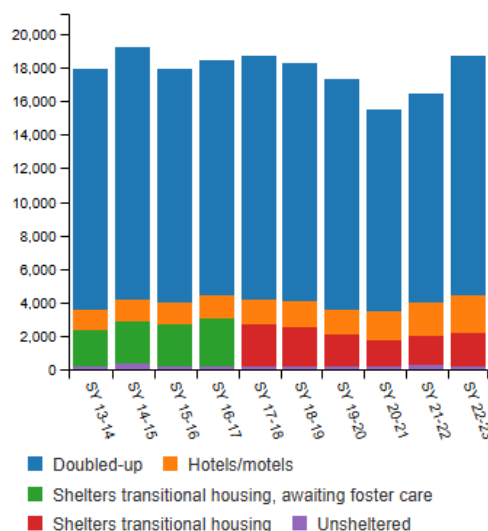
Families with children. The 2024 IN BoS CoC PIT Count identified 395 households with at least one adult and one child (containing a total of 1,282 people) experiencing homelessness, 383 of which were sheltered and 12 of which were unsheltered. The total number of families with children experiencing homelessness is down slightly from 427 in 2023. 15 of these households were chronically homeless (all were sheltered).

Homelessness among families with children can also be captured with data on homelessness among public school students. This data is made available through programs of the McKinney-Vento Homeless Assistance Act and uses a more expansive definition of homelessness than that used in PIT Counts: “homeless children and youths” means individuals who lack a fixed, regular, and adequate nighttime residence. Notably, this includes children and youths who are “doubled up”: sharing the housing of others due to loss of housing, economic hardship, or a similar reason.

The figure below shows trends in the numbers of Indiana public school students experiencing homelessness by primary nighttime residence. Note that 2020-2021 counts and to a lesser extent, 2021-2022 counts may be falsely deflated due to low attendance during the pandemic. A total of 18,701 children enrolled in public school were experiencing homelessness in Indiana in 2022-2023, most (14,247) were doubled up.

McKinney-Vento Homeless Students Enrolled by Primary Nighttime Residence, State of Indiana

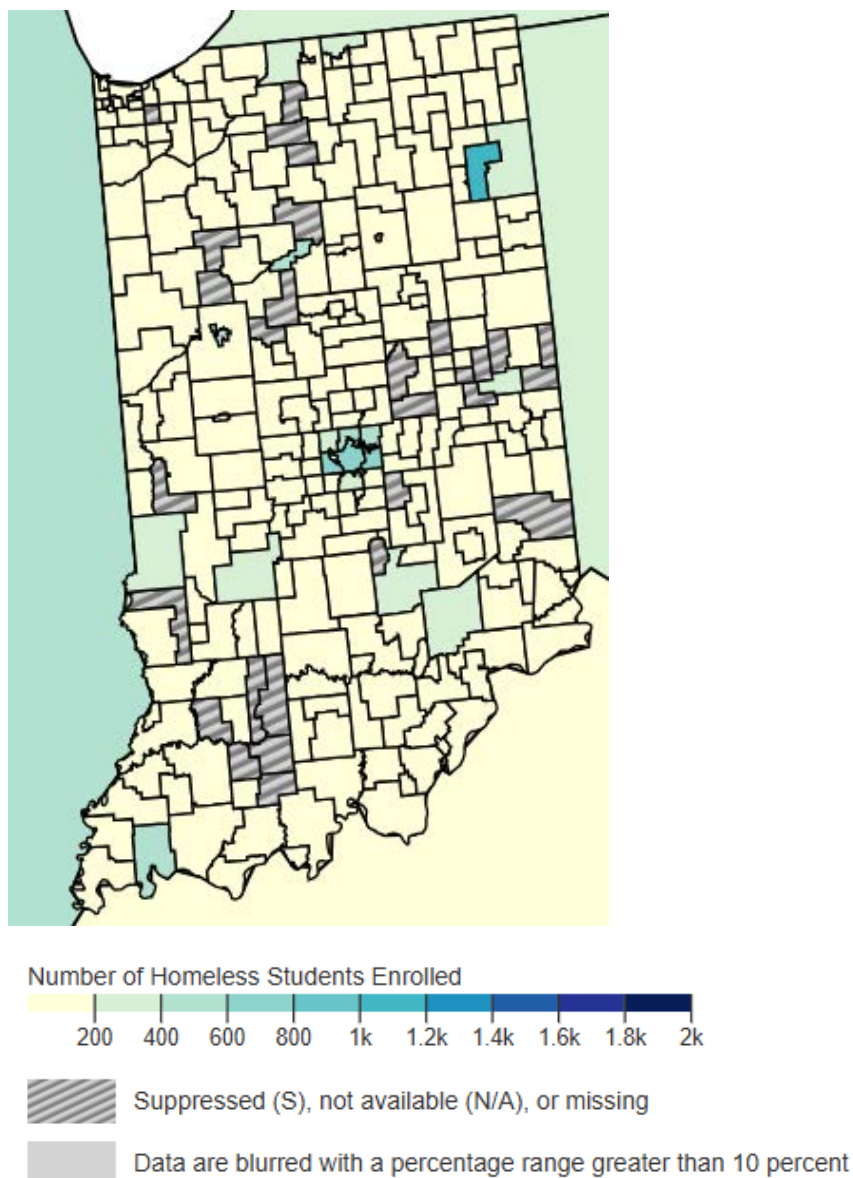
Source:
Ed Data Express



The figure below maps the number of students experiencing homelessness by district. Fort Wayne Community Schools had the largest number of homeless students enrolled at 1,156.

McKinney-Vento Homeless Students by School District, Indiana, 2022-2023

Source:
Ed Data Express

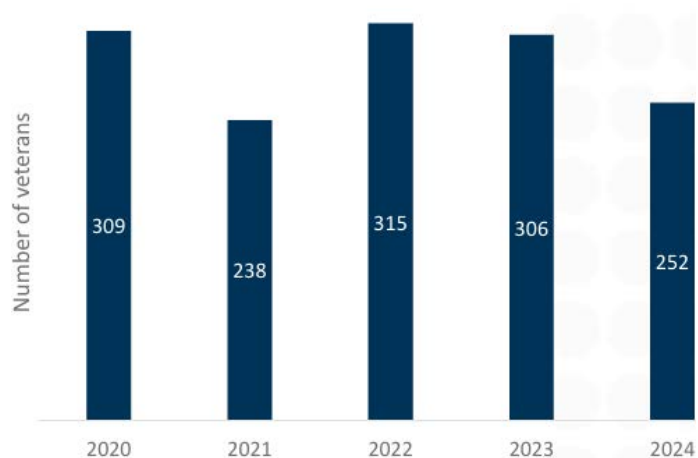


Veterans. In 2024, 252 veterans were counted as experiencing homelessness (equivalent to 5% of the population experiencing homelessness), down from 306 in 2023 and 315 in 2022.

Figure 6.
Veterans Experiencing Homelessness, IN
BoS CoC, 2020–2024

Source:

IHCDA and 2024 IN BoS CoC PIT Count.

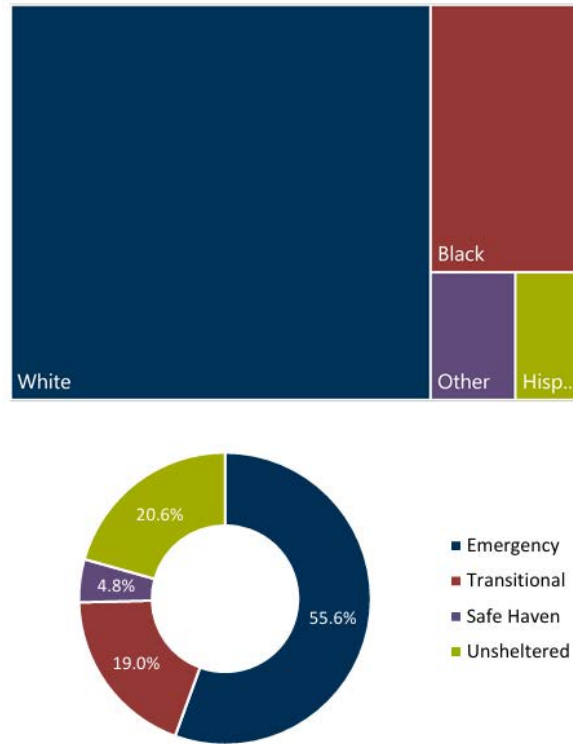


At the time of the PIT Count, 21% of veterans experiencing homelessness were unsheltered and 33 veterans (13% of veterans experiencing homelessness) were experiencing chronic homelessness. The PIT Count identified 11 veteran families with children experiencing homelessness (including 27 people), and three of these households were unsheltered.

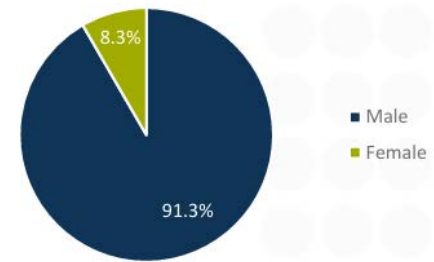
The racial and ethnic composition of veterans experiencing homelessness is similar to that of the homeless population overall. Over 91% of veterans experiencing homelessness were men, with the rest (approximately 8%) being women. At the time of the PIT Count, 21% of veterans experiencing homelessness were unsheltered.

Figure 7.
Profile of Veteran Homelessness,
IN BoS CoC, 2024

Source:
 IHCD and 2024 IN BoS CoC PIT Count.



PROFILE OF VETERAN HOMELESSNESS



Describe the Nature and Extent of Homelessness by Racial and Ethnic Group.

The table below presents the number of people experiencing sheltered and unsheltered homelessness by race and ethnicity.

Population Experiencing Homelessness by Race and Ethnicity, 2024 IN BoS CoC PIT Count

	Sheltered					
	ES	TH	SH	Total	Unsheltered	Total
Hispanic/Latina/e/o	173	56	0	229	51	280
American Indian or Alaska Native, or Indigenous	10	5	0	15	11	26
Asian or Asian American	8	1	1	10	2	12
Black, African-American, or African	602	207	5	814	151	965
Middle Eastern or North African	0	0	0	0	1	1
Native Hawaiian or Pacific Islander	28	0	0	28	4	32
White	1,799	396	7	2,202	868	3,070
Multiracial	89	32	0	121	29	150

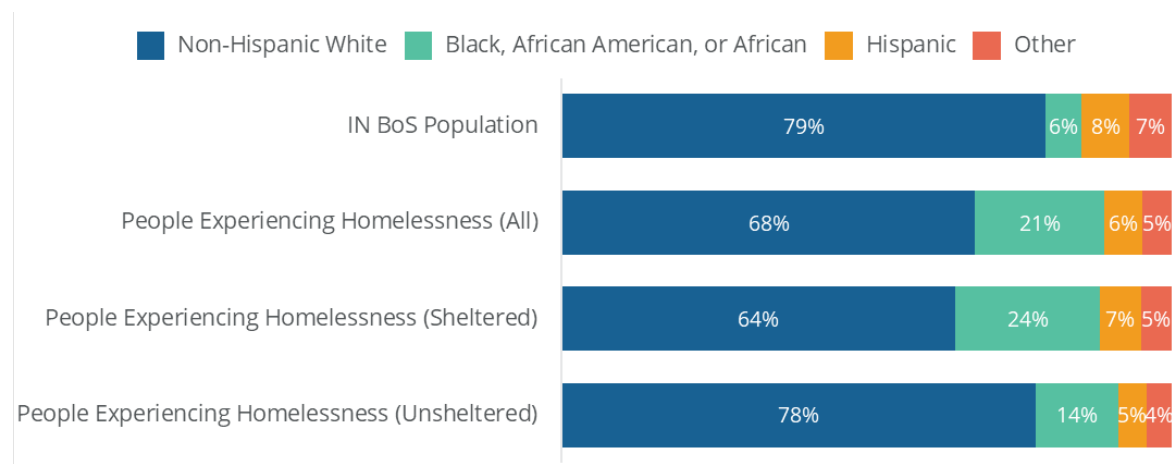
Note: ES = emergency shelter, TH = transitional housing, SH = safe haven. "Hispanic/Latina/e/o" includes Hispanic of any race. All other groups include non-Hispanic individuals only.

Source: IHCD and 2024 IN BoS CoC PIT Count.

Figure 8 compares the racial and ethnic distribution of the population experiencing homelessness in areas of Indiana outside of Marion County with the racial and ethnic distribution of the area's population overall. This analysis shows that **Black, African American, or African residents are more than three times overrepresented in the population experiencing homelessness**: they make up 21% of residents experiencing homelessness but only 6% of residents overall. All other racial and ethnic groups are underrepresented in the homeless population compared to their shares of the population overall.

Figure 8.

People Experiencing Homelessness and Total Population by Race and Ethnicity, IN BoS CoC, 2023/24



Note: “Hispanic” includes Hispanic of any race. All other races include non-Hispanic individuals only.
 “IN BoS Population” includes the combined populations of all Indiana counties except for Marion County.
 Source: IHCD, 2024 IN BoS CoC PIT Count, 2023 1-year ACS, and Root Policy Research.

Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.

The 2024 IN BoS CoC PIT Count on the night of January 24th, 2024 and identified 4,854 people experiencing homelessness, including 3,346 sheltered people and 1,138 unsheltered people. This means that

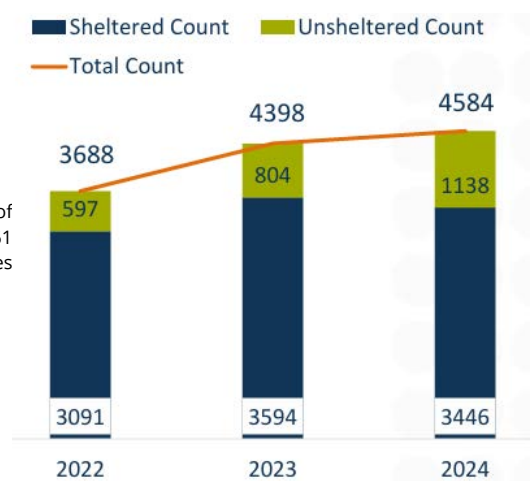
approximately 23% of people experiencing homelessness were sleeping in places not meant for human habitation—such as cars, parks, abandoned buildings, bus stations, streets, and encampments—in 2024, up from 18% in 2023 and 16% in 2022.

The number of people identified as experiencing homelessness in 2024 was 4% higher than the 2023 count of 4,398 people and 24% higher than the 2022 count of 3,688 people. The rise in homelessness since 2022 is due to increases in both sheltered and unsheltered homelessness, though the rise in unsheltered homelessness has been more dramatic: 597 people experiencing homelessness were unsheltered at the time of the 2022 PIT Count, and this nearly doubled (increasing by 91%) to 1,138 by 2024.

Figure 9.
People Experiencing Homelessness, IN BoS CoC, 2022–2024

Note:
 IN BoS CoC includes 91 of the 92 counties in IN. 67 of these counties participated in the 2024 PIT Count, 61 counties participated in 2023, and 68 counties participated in 2022.

Source:
 IHCD and 2024 IN BoS CoC PIT Count.



NA-45 Non-Homeless Special Needs Assessment – 91.305 (b,d)

Introduction

This section provides data and information about special needs populations in Indiana. “Special needs” populations include those that face greater challenges than most low and moderate income households in the housing market. The special needs groups for which Consolidated Plan regulations require estimates of supportive housing needs include:

- Elderly (62 and older) and frail elderly (an elderly person who requires assistance with three or more activities of daily living such as bathing, walking, and performing light housework),
- Persons with mental, physical, and/or developmental disabilities,
- Persons with alcohol or other drug addiction,
- Victims of domestic violence, dating violence, sexual assault, and stalking, and
- Persons with HIV/AIDS and their families.

This Consolidated Plan also includes needs estimates for:

- Families with children including large families (those with three or more children) and single parent families with children,
- Households with a member with a hearing, vision, cognitive, ambulatory, self-care, and/or independent living disability, and
- Households for whom English is not their first language, sometimes referred to as English Language Learner households. These households are also referred to as Limited English Proficiency (LEP) households

Due to limitations in data available, it is necessary to use a wide range of sources including American Community Survey (ACS) from the Census Bureau, Comprehensive Housing Affordability Strategy (CHAS) data from HUD, the National HIV Surveillance System (NHSS), the National Survey on Drug use and Health (NSDUH), and the National Intimate Partner and Sexual Violence Survey (NISVS). Resultantly, estimates of these populations’ housing and service needs reflect different needs. For example, needs estimates for households containing at least one member with a disability use CHAS estimates reflecting how many of these households have housing needs including but not limited to cost burden, substandard housing conditions, need for accessibility modifications, overcrowding, or substandard housing condition; whereas needs estimates for persons with alcohol or other drug addiction reflect the national rate at which persons with alcohol or drug addiction need and are not receiving treatment (and so do not necessarily capture housing needs). These needs are clarified for each group as they are discussed below. The discussion of needs is supported by citizen and stakeholder participation findings.

HOPWA

Table 25 – HOPWA Data

Current HOPWA formula use:	
Cumulative cases of AIDS reported	6,520
Area incidence of AIDS	
Number of new cases prior year (3 years of data)	118
Rate per population	
Rate per population (3 years of data)	
Current HIV surveillance data:	
Number of Persons living with HIC (PLWH)	7,710
Area Prevalence (PLWH per population)	
Number of new HIV cases reported last year	522

Data Source: IDOH Annual 2023 Surveillance Report: Spotlight on HIV, STI, & Viral Hepatitis

HIV Housing Need (HOPWA Grantees Only)

Table 26 – HIV Housing Need

Type of HOPWA Assistance	Estimates of Unmet Need
Tenant based rental assistance	1022
Short-term Rent, Mortgage, and Utility	400
Facility Based Housing (Permanent, short-term or transitional)	0

Note: Estimates for HIV Tenant Based Rental Assistance are based on the prevalence of survey respondents living in a precarious housing situation reported in the 2019 Needs Assessment for People Living with HIV in Indiana by the State of Indiana Department of Health.

Data Source: HOPWA CAPER and HOPWA Beneficiary Verification Worksheet

Describe the characteristics of special needs populations in your community:

Needs are presented in the table below and discussed in subsequent paragraphs.

Special Needs Populations, State of Indiana, 2023

Special Needs Population	Total	# with Housing or Service Need	% with Housing or Service Need
Elderly Population	1,445,099	142,058	10%
<i>Frail Elderly Population</i>	87,038	8,556	10%
Households with Disabilities	704,410	217,130	31%
<i>Hearing or Vision Impairment</i>	322,625	89,315	28%
<i>Ambulatory Limitation</i>	386,185	126,705	33%
<i>Cognitive Limitation</i>	276,055	96,640	35%
<i>Self-Care/Independent Living Limitation</i>	291,485	98,275	34%
Persons with Alcohol or Substance Use Disorder	953,905	402,047	42%
Families with Children	777,093	100,020	13%
<i>Families with 3+ Children</i>	173,998	33,650	19%
<i>Single Parents with Children</i>	269,852	77,102	29%
Persons with HIV/AIDS	12,829	No Data	No Data
Survivors of Domestic Violence	193,549	20,085	10%
LEP Households	62,186	9,587	15%

Note: Elderly households contain at least one person aged 62 years or older; their needs are based on their poverty rate. Households with LEP have Limited English Proficiency; their needs are based on the proportion of LEP residents living in poverty. Victims of domestic violence include rape, physical violence and/or stalking by an intimate partner and their counts are *annual* counts.

Source: CHAS 2016-2020 and 2017-2021, 2023 1-year ACS, CDC, U.S. Department of Health.

Elderly and frail elderly. According to 2016-2020 Comprehensive Housing Affordability Strategy (CHAS) estimates, there are 825,565 households with at least one person aged 62 or older in Indiana, representing 30% of households. There are 1,445,099 residents 62 and older in Indiana. Of these residents, 142,058 or 10% have incomes below the poverty level—a proxy for housing and supportive service needs. The elderly population includes 87,038 “frail elderly” residents who require assistance with three or more activities of daily living such as bathing, walking, and performing light housework. Based on the state’s senior poverty rate, 8,556 frail elderly residents live below the poverty level.

According to the National Low Income Housing Coalition’s Out of Reach dashboard for Indiana, home health and personal care aides earn \$14.79/hour at the median—significantly less than the minimum of \$18.24/hour required in order to afford a modest one bedroom rental unit at Fair Market Rent in Indiana.

Persons and households with disabilities. The noninstitutionalized population with a disability in Indiana totals 979,762 residents. Of these residents, 20% live below the poverty level and have housing and supportive service needs according to ACS data—putting those with needs at 199,871 residents. HUD CHAS data provides an alternative measure of need for this population: 2017-2021 CHAS data reflecting

the entire state of Indiana show that there are 704,410 households containing an individual with a disability, representing 26% of households in the state.⁴ Overall, 31% of households containing an individual with a disability have one or more of the four HUD-designated housing problems and have housing needs, though this rate differs by disability type. According to CHAS data,

- 96,640 of 276,055 households (35%) with a cognitive limitation have housing problems;
- 98,275 of 291,485 households (34%) with a self-care or independent living limitation have housing problems;
- 126,705 of 386,185 households (33%) with an ambulatory limitation have housing problems; and
- 89,315 of 322,625 households (28%) with hearing or vision impairments have housing problems.

Note that these data include elderly residents with disabilities and that households containing individuals with multiple disabilities are counted in multiple of these groups.

In the statewide stakeholder and resident survey, the top challenges faced by persons with disabilities were identified as acquiring housing and remaining housed (31%), finding housing or services that support independent living (23%), getting needed services (18%), affordable in-home care (17%), availability of public transportation (17%), and not enough facilities to avoid institutionalization (14%). Regionally, acquiring housing and remaining housed was a challenge for persons with disabilities across regions. Affordable in-home care was a challenge in the Northeast and Southeast regions. Public transportation was identified as a challenge in the Northeast, East Central, Southeast, and West Central regions. Stakeholders in the East Central and Southeast regions identified lack of facilities to avoid institutionalization as a challenge.

Individuals with intellectual or developmental disabilities (I/DD) face a severe shortage of safe, affordable, and accessible housing and are vulnerable to housing discrimination. Where housing is available for people with I/DD, housing is rarely integrated in the community, leading to high levels of isolation among these individuals. Providing supportive housing to I/DD individuals and their families is essential to meeting these individuals' housing and supportive services needs and preventing placement in group homes. Access to safe and supportive environments reduces stress, anxiety, and risks of exploitation or abuse. Supported living arrangements offer help with regular tasks while respecting individual autonomy. Supportive housing for individuals with I/DD facilitates integration with neighbors and broader communities, promoting access to employment opportunities, self-sufficiency, healthcare, counseling, and skill programs. IHCD is committed to increasing access to supportive housing for individuals with I/DD and has been recognized for these efforts by the National Council of State Housing Agencies.

⁴ HUD definition of disability: [Information for Individuals with Disabilities | HUD.gov / U.S. Department of Housing and Urban Development \(HUD\)](https://www.hud.gov/program_offices/development/ehfa/development/individuals_with_disabilities)

Survivors of domestic violence. According to CDC data from the National Intimate Partner and Sexual Violence Survey (NISVS), 4.5% of women and 2.8% of men in the United States experience stalking, physical violence, and/or contact sexual violence (such as rape, sexual coercion, and/or unwanted sexual contact) by an intimate partner resulting in related impacts each year.⁵ Based on these national rates, it is estimated that 193,549 Indiana residents experience domestic violence resulting in related impacts each year.

The supportive and housing services needed by intimate partner violence (IPV) victims vary. According to the National Alliance to End Homelessness, domestic violence can contribute to homelessness for survivors. Survivors who are not homeless may also require housing assistance. NISVS data show that nationally, 13.4% of female victims and 5.3% of male victims will need housing assistance as a result of domestic violence. Based on these rates and the estimates of annual domestic violence incidence estimated above, approximately 20,085 of the 193,549 annual victims will need housing assistance at some point of their lives.

The National Alliance to End Homelessness has found that affordable housing is critical in preventing both homelessness and future violence for domestic violence survivors.⁶ Approximately 10% of adults experiencing homelessness at the time of the Indiana Balance of State Continuum of Care's 2024 Point In Time (PIT) Count (covering all Indiana counties except for Marion County/Indianapolis) reported that they were survivors of domestic violence, and two thirds of women experiencing homelessness who reported being survivors of domestic violence were currently fleeing domestic violence. Surviving domestic violence is especially common among young adults 18-24 experiencing homelessness: 36% of this population reported being survivors of domestic violence.

The Indiana Balance of State Continuum of Care's 2024 Housing Inventory Count found that there are a total of 940 beds for survivors of domestic violence experiencing homelessness in the continuum of care's service area (all areas of Indiana except for Marion County/Indianapolis). This is equivalent to 11% of the continuum of care's 8,482 beds for people experiencing homelessness.

The results of the statewide resident and stakeholder survey suggest that needs for housing resources and counseling services for survivors of domestic violence are highest in East Central Indiana.

Families with Children. According to ACS data, there are 777,093 families with children in Indiana, 13% of whom live below the poverty line and have housing or service needs. Poverty rates are higher—indicating higher rates of housing or service needs—for families with three or more children (19%) and for single parents with children (29%).

⁵ According to the CDC, these related impacts include any of the following: being fearful, concerned for safety, any post-traumatic stress disorder symptoms, injury, need for medical care, needed help from law enforcement, missed at least one day of work, missed at least one day of school.

⁶ <https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/domestic-violence/>

Households with Limited English Proficiency. According to ACS data, 62,186 households in Indiana have limited English proficiency, meaning that household members over the age of 14 cannot speak English well or very well. An estimated 15% of these households (9,587 households) have incomes below the poverty line and have housing and supportive service needs.

Persons with Alcohol or Substance Use Disorder. An estimated 953,905 Indiana residents have alcohol or other drug addictions based on national incidence rates applied to the state population. Based on the national rate at which people have substance use disorder and need and are not receiving treatment, 42% of these residents or 402,047 Indiana residents need and are not receiving treatment for their addiction.

What are the housing and supportive service needs of these populations and how are these needs determined?

The housing and supportive service needs in the table above are based on the incidence of poverty, incidence of disability, cost burden, and national statistics on the likelihood of special needs groups to have both short- and long-term housing and service needs. Needs were also informed by findings from the resident survey and feedback from service providers, stakeholders, and residents in focus groups. These needs are discussed by special needs population group in the answer to the question above.

Discuss the size and characteristics of the population with HIV/AIDS and their families within the Eligible Metropolitan Statistical Area:

According to the CDC and the National HIV Surveillance System (NHSS), there were 223.0 people living with HIV/AIDS per 100,000 residents age 13 or older in Indiana in 2022, roughly equivalent to 12,829 Indiana residents living with HIV/AIDS.

The HOPWA program administered by IHCD is available within 77 of Indiana's 92 counties, is based on the number of Hoosiers with AIDS/HIV, and is only awarded to those agencies that show as a part of their mission a focus on servicing these persons. The remaining counties receive their funds through Indianapolis, Cincinnati, and Louisville.

If the PJ will establish a preference for a HOME TBRA activity for persons with a specific category of disabilities (e.g., persons with HIV/AIDS or chronic mental illness), describe their unmet need for housing and services needed to narrow the gap in benefits and services received by such persons. (See 24 CFR 92.209(c)(2) (ii))

IHCD will focus HOME TBRA on persons experiencing homelessness regardless of types of disability. Unmet needs of special needs populations, are discussed above.

NA-50 Non-Housing Community Development Needs - 91.315 (f)

Describe the jurisdiction's need for Public Facilities:

Statewide resident and stakeholder survey respondents were asked to rate public facilities from 1, does not exist, to 10, easy to access and available. Libraries in good condition received the highest rating in the state while affordable childcare and a center for abused children received the lowest rating, indicating that these facilities do not exist in several areas of the state. Service providers gave the lowest ratings to affordable childcare, homeless shelters, and centers for abused children.

Ratings of the condition of schools varied regionally, where the highest average rating was in the West Central region and lowest in the East Central region of the state. Stakeholders in the East Central region gave most facilities the lowest average ratings across items compared to stakeholders in other regions. East Central did have higher ratings for accessible transit facilities compared to the Southeast and Northwest regions.

How were these needs determined?

Needs were informed by citizen and stakeholder participation in a statewide survey.

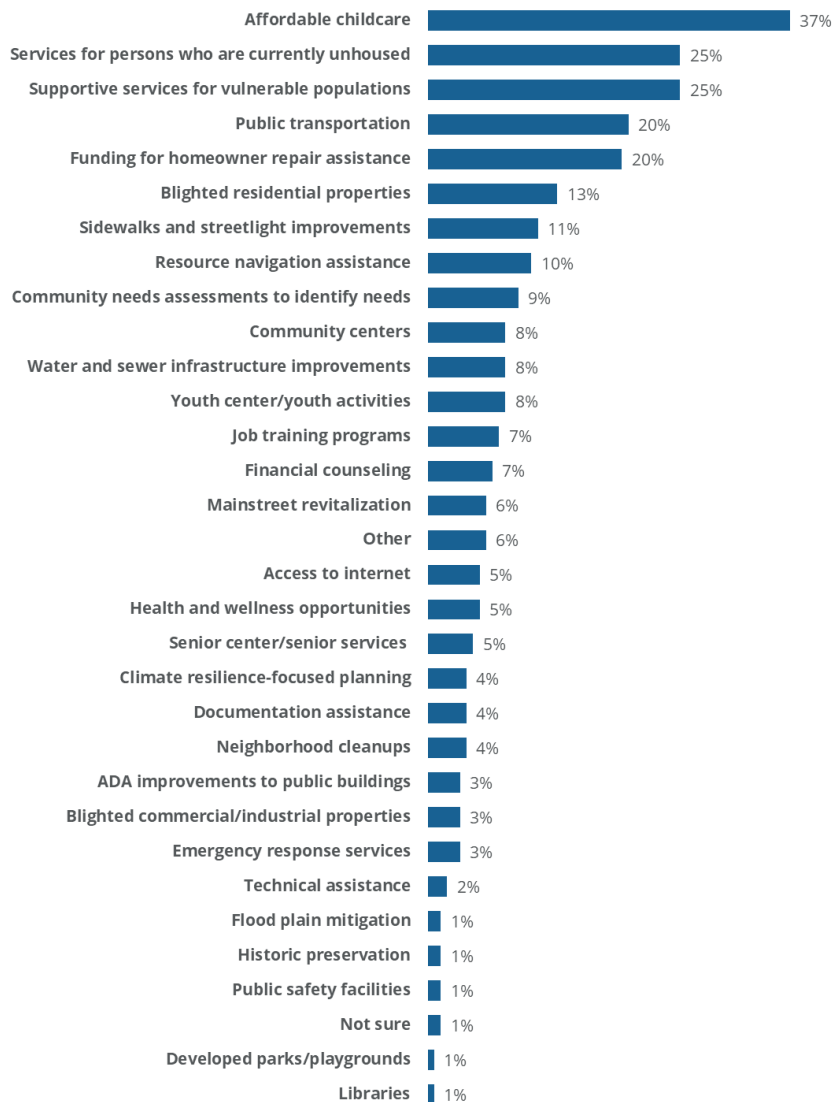
Describe the jurisdiction's need for Public Improvements:

The following figure, from an analysis of resident and stakeholder survey findings, shows the items that were reported as the state's greatest unmet community and economic development needs. Based on survey analysis, the state's most needed public improvements include public transportation, sidewalks and streetlight improvements, water and sewer infrastructure improvements, and Main Street revitalization.

Greatest Unmet Community and Economic Development Needs in Indiana

Note:
n = 153.

Source:
Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.



How were these needs determined?

Needs were informed by citizen and stakeholder participation in a statewide survey.

Describe the jurisdiction's need for Public Services:

Statewide resident and stakeholder survey respondents were asked to rate public services from 1, does not exist, to 10, easy to access and available. Overall, respondents rated advocacy and counseling for veterans and survivors of domestic violence the highest while childcare, education, and transportation services for homeless received the lowest average ratings.

Regionally, counseling services for survivors of domestic violence were rated lowest in East Central Indiana and highest in the Southeast region. Homeless advocacy and advocacy for homeless youth was rated highest in West Central Indiana and lowest in Northeast Indiana. West Central Indiana had the highest ratings for services for survivors of domestic violence, homeless youth, and homeless individuals but had the lowest rating for housing resources for people with HIV/AIDS. Rental and mortgage assistance received the highest average ratings in Northwest and Southeast regions.

Service providers rated homeless advocacy and advocacy for youth lower than other stakeholder groups while economic and community development stakeholders rated all services generally lower than other groups. Government stakeholders rated community-based resources for low-income families, mortgage assistance, utilities assistance, and childcare and education services for low-income families the lowest of all groups.

How were these needs determined?

Needs were informed by citizen and stakeholder participation in a statewide survey.

Housing Market Analysis

MA-05 Overview

Housing Market Analysis Overview

Primary findings about the state of Indiana’s housing market from the Indiana Housing Dashboard⁷ and from analysis conducted for this Consolidated Plan are summarized here. The balance of this section reviews housing stock, affordability, provision of publicly assisted housing, the housing needs of special populations, barriers to affordable housing development, in addition to needs for broadband service and displacement risks caused by natural hazards.

Between 2018 and 2023, growth in housing units (+3%) lagged growth in households (+6%) in Indiana. As a result, the share of housing units that are vacant decreased from 10.5% in 2018 to 8.2% in 2023. The 8.2% vacancy rate is moderate to high, suggesting a relatively loose housing market in the state overall. Residential vacancy rates are low—between 3.4% and 4% and indicating tight markets—in Hancock, Boone, Hendricks, and Dearborn counties. The figure below shows the share of units that are vacant *and available*—the share of units that are vacant and are for rent or for sale. Currently, 2.3% of homes in the state are vacant and available—a slightly lower share than homes in the United States overall (2.4%).

Overall, 70% of Indiana households own their homes, though this varies significantly by county. Homeownership is highest at 85-86% in Brown, Pike, and Dearborn counties and lowest at 54-56% in Tippecanoe, Monroe, and Marion counties.

Rental Market

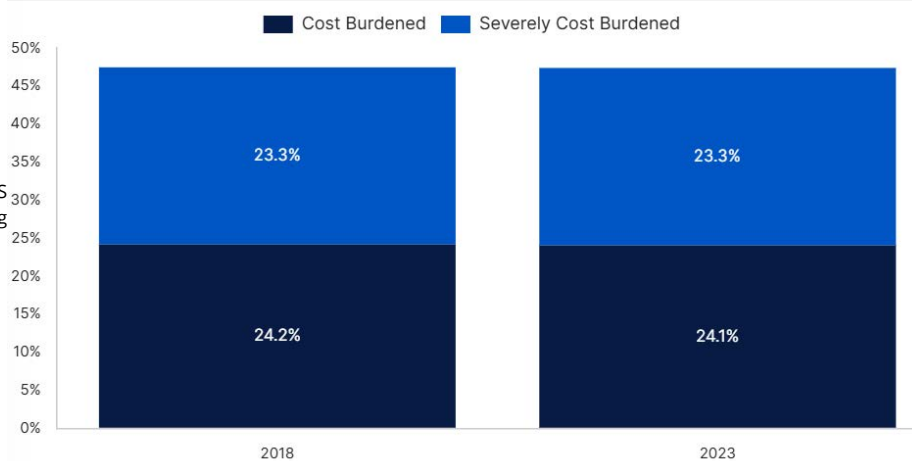
Median gross rent in Indiana increased by 27% between 2018 and 2023 (from \$820 to \$1,044). At the state level, median renter household incomes increased by 26% between 2018 and 2023, roughly keeping up with growth in median gross rent (27%), from \$33,204 to \$41,757. Because renter incomes roughly kept up with rising rents, renter cost burden remained relatively stable overall since 2018: 47.5% of renter households were cost burdened in 2018, compared to 47.4% in 2023.

⁷ The Indiana Housing Dashboard is available here: <https://indianahousingdashboard.com/>

Renter Cost Burden, Indiana, 2018 and 2023

Source:

American Community Survey (ACS), US Census Bureau from the Indiana Housing Dashboard.



Rental gaps—which occur when demand from renter households outweighs the supply of affordable rental units—are present at all income levels up to \$20,000 to \$24,999. The analysis found a shortage of approximately 137,000 rental units priced below \$625/month including utilities to serve households earning less than \$25,000 per year: there are 243,850 renter households earning less than \$25,000 per year, yet only 106,828 units to serve them.

Cumulative shortages—the result of lower income renters renting more expensive units due to limited supply of units affordable to them—affect households earning up to \$35,000. There are approximately 59,000 more renter households earning less than \$35,000 than there are units affordable to them. Cumulatively, rental affordability gaps affect 42% of renter households in Indiana.

Rental Affordability Gaps, Indiana, 2023

Rental Gaps					
Income Range	Maximum Affordable Gross Rent	# of Renter Households	# of Rental Units Affordable	Rental Gap	Cumulative Gap
Less than \$5,000	\$125	53,537	2,730	-50,807	-50,807
\$5,000 to \$9,999	\$250	30,863	10,546	-20,317	-71,124
\$10,000 to \$14,999	\$375	62,120	25,011	-37,109	-108,233
\$15,000 to \$19,999	\$500	45,810	24,351	-21,459	-129,692
\$20,000 to \$24,999	\$625	51,520	44,190	-7,330	-137,022
\$25,000 to \$34,999	\$875	97,255	175,265	78,010	-59,012
\$35,000 to \$49,999	\$1,250	124,814	311,831	187,017	128,005
\$50,000 to \$74,999	\$1,875	164,745	198,187	33,442	161,447
\$75,000 to \$99,999	\$2,500	83,845	54,445	-29,400	132,047
\$100,000 or more		99,929	17,759	-82,170	49,877

Source: 2023 1-year ACS and Root Policy Research..

According to the National Low Income Housing Coalition's Out of Reach dashboard for Indiana (<https://nlihc.org/oor/state/in>), residents earning the minimum wage of \$7.25/hour would have to work 101 hours each week to afford a modest 1 bedroom rental home at fair market rent in Indiana. Workers

who earn median hourly wages in the following professions (which range from \$11.82/hour to \$18.12/hour) cannot afford to rent a modest 1 bedroom rental home at fair market rent:

- Waiters and waitresses
- Fast food and counter workers
- Cashiers
- Home health and personal care aides
- Retail salespersons
- Restaurant cooks
- Janitors and cleaners, except maids and housekeeping cleaners
- Stockers and order fillers
- Nursing assistants

For Sale Market

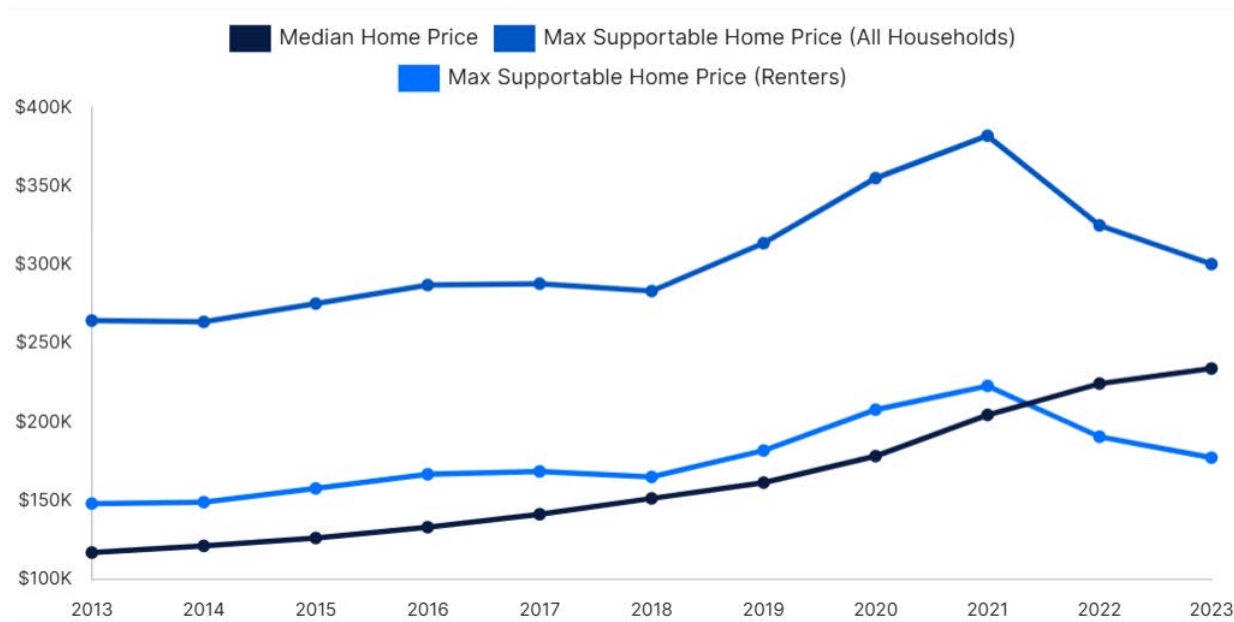
While purchasing power remained relatively constant over the past five years, losses in home purchase affordability were significant. Median home values in Indiana grew faster than median gross rent, increasing by 53% from \$147,300 in 2018 to \$225,900 in 2023.

Further reducing purchase affordability, average mortgage interest rates increased from 4.54% in 2018 (and 2.96% in 2021) to 6.72% in 2024. Applying the 2024 interest rate to the 2023 median home value, the income required to afford a median value home nearly doubled, increasing by 95%, between 2018 and 2023/2024: a household earning \$35,279/year could have afforded a median priced home in Indiana in 2018, but in 2023/2024, households need to earn \$66,774/year to afford a median priced home.⁸ By contrast, median household income increased by only 25% across this time. The figure below from the Indiana Housing Dashboard visualizes these changes: median priced homes were affordable to median income renter households and median income households overall in 2021 and earlier, but median income renter households have been unable to afford a median priced home since 2022.

Homeowners have gained equity from market appreciation, but increased home prices and interest rate hikes have made the market more challenging for renters who wish to buy. Owner households saw a slight increase in cost burden between 2018 and 2023: 17.6% of owner households in Indiana are cost burdened in 2023, compared to 16.6% in 2018.

⁸ Purchase affordability calculations assume a 30-year mortgage at average annual interest rates with a 20% down payment and 30% of the monthly payment to insurance, property taxes, and other expenses.

Median Home Price and Maximum Supportable Home Price at Median Household Income and Median Renter Household Income, Indiana, 2013-2023



Note: Figure and data are from the Indiana Housing Dashboard. Home values come from Zillow where available, or else from the American Community Survey (ACS). HR&A calculates affordable home prices using median incomes from the ACS; the national annual average 30-year fixed mortgage rate from Freddie Mac provided by the Federal Reserve Bank of St. Louis; effective property tax rates calculated from ACS median property taxes and median home values; and an assumed 20% down payment.

Source: Median home price refers to typical home values from the Zillow Home Value Index. The maximum supportable home price is the home price for which payments cost less than 30% of the median household income. Payment costs include 30-year fixed-rate mortgage payments with a 20% down payment and property tax payments.

Home purchase gaps—which occur when demand from potential first-time homebuyers outweighs the supply of affordable homes for sale—are concentrated among households earning \$50,000 or less. Cumulatively, these gaps limit the supply of homes for sale at prices affordable to households earning up to \$100,000. Specifically,

- Approximately 57% of renter households earn less than \$50,000 and would require homes priced at or below \$149,128 to afford to purchase a home, yet only 27% of owner occupied homes are affordable to them. Approximately 10% of renter households earn less than \$10,000 and are unlikely to purchase homes. Because 47% of renters earn between \$10,000 and \$50,000 and 27% of owner occupied homes are valued at or below \$149,128, the cumulative gap at \$50,000 is 20%.
- The cumulative gap persists at incomes up to \$99,999:
 - 20% of renters earn \$50,000 to \$74,999, and a greater share—22%—of homes are affordable within this group's price range. This surplus slightly narrows but does not resolve the cumulative purchase affordability gap: the share of renter households earning \$10,000 to

\$74,999 is 18 percentage points greater than the share of homes affordable at an annual income of \$74,999.

- The share of homes affordable at incomes of \$75,000 to \$99,999 (19%) is greater than the share of renters earning \$75,000 to \$99,999 (10%). A cumulative gap of 9 percentage points remains because 77% of renters earn less than \$100,000 while 68% of homes are affordable to them.

Purchase Affordability Gaps, Indiana, 2023

Renter Purchase Gaps					
Income Range	Maximum Affordable Price	% of Renter Households	% of Homes Affordable	Renter Purchase Gap	Cumulative Gap
Less than \$5,000	\$14,913	7%	2%	-4%	<i>excluded</i>
\$5,000 to \$9,999	\$29,823	4%	2%	-2%	<i>excluded</i>
\$10,000 to \$14,999	\$44,736	8%	1%	-6%	-2%
\$15,000 to \$19,999	\$59,649	6%	2%	-4%	-6%
\$20,000 to \$24,999	\$74,562	6%	2%	-4%	-10%
\$25,000 to \$34,999	\$104,389	12%	7%	-5%	-15%
\$35,000 to \$49,999	\$149,128	15%	11%	-5%	-20%
\$50,000 to \$74,999	\$223,693	20%	22%	2%	-18%
\$75,000 to \$99,999	\$298,259	10%	19%	8%	-9%
\$100,000 to \$149,999	\$447,390	8%	19%	10%	1%
\$150,000 or more		4%	13%	9%	

Note: Purchase affordability estimates assume a 10% downpayment, a 30-year mortgage with a 6.80% interest rate, and 30% of the monthly payment to property taxes, utilities, insurance, and other expenses. Renters earning less than \$15,000 are excluded from cumulative gap calculations because they are least likely to purchase homes.

Source: 2023 1-year ACS and Root Policy Research.

MA-10 Number of Housing Units – 91.310(a)

Introduction

Approximately 72% of housing units in Indiana are single family detached homes, and another 4% are single family attached homes (townhomes). Units in multifamily buildings of five or more units make up 13% of the state's housing units, and smaller shares of units—6% and 4% respectively—are units in du-/tri-/four-plexes and mobile homes, buses, RVs, vans, etc.

The Unit Size by Tenure table shows the distribution of owner occupied and renter occupied units in the state by number of bedrooms. Most (81% of) owner households live in units with three or more bedrooms, while only 29% of renter households live in units with three or more bedrooms. Renter households are more likely to live in units with two or fewer bedrooms.

All residential properties by number of units

Table 27 – Residential Properties by Unit Number

Property Type	Number	%
1-unit detached structure	2,175,794	72%
1-unit, attached structure	115,226	4%
2-4 units	184,863	6%
5-19 units	239,705	8%
20 or more units	158,304	5%
Mobile Home, boat, RV, van, etc	128,688	4%
<i>Total</i>	3,002,580	100%

Data Source: 2023 1-year ACS

Unit Size by Tenure

Table 28 – Unit Size by Tenure

	Owners		Renters	
	Number	%	Number	%
No bedroom	4,520	0%	34,940	4%
1 bedroom	32,382	2%	217,858	27%
2 bedrooms	335,666	17%	321,719	40%
3 or more bedrooms	1,567,875	81%	239,921	29%
<i>Total</i>	1,940,443	100%	814,438	100%

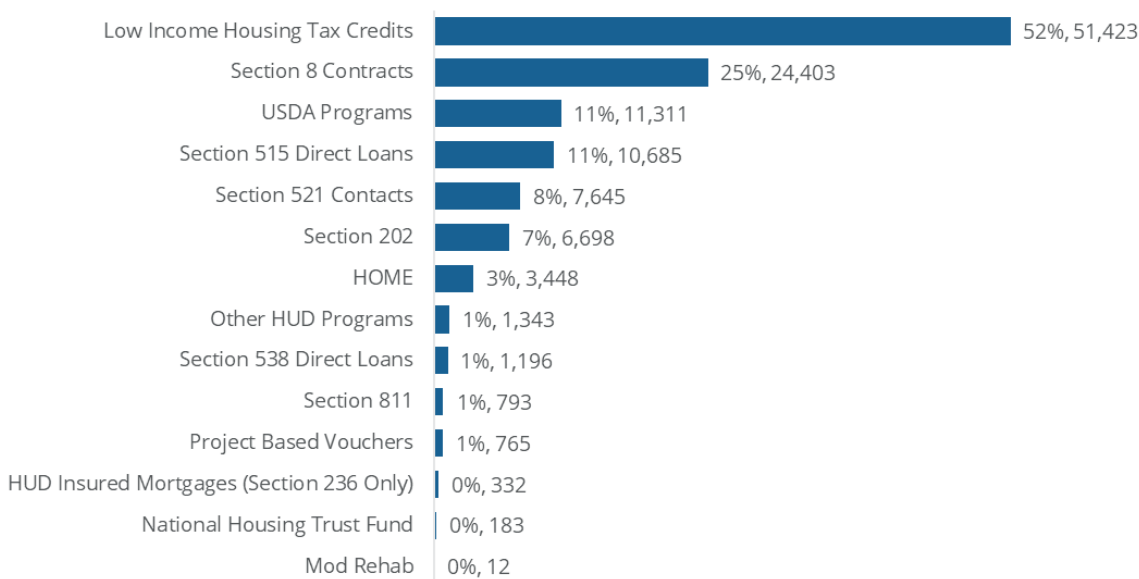
Data Source: 2023 1-year ACS

Describe the number and targeting (income level/type of family served) of units assisted with federal, state, and local programs.

According to data from the National Housing Preservation Database (NHPD) and the American Community Survey (ACS) presented in the Indiana Housing Dashboard, 13.6% of rental units in Indiana are deed restricted units affordable at incomes of 60% AMI or less.⁹

The National Housing Preservation Database's Federally Assisted Housing Dashboard for Indiana¹⁰ shows that as of December 2024, there are 98,524 federally assisted rental homes in 1,943 federally assisted rental properties in the state. The figure below shows the numbers and shares of federally assisted rental units in Indiana by subsidy type. Over half of federally assisted units in the state are made affordable through Low Income Housing Tax Credits (LIHTC), while the next largest share (25%) are made affordable through Section 8 Project Based Rental Assistance.

Federally Assisted Rental Units by Subsidy Type, Indiana, December 2024



Note: 44% of units are assisted by multiple subsidies.

Source: National Housing Preservation Database (NHPD) Federally Assisted Housing Dashboard for Indiana.

Over half (53%) of federally assisted rental units with target population information available are targeted to families, 43% are targeted to elderly people or people with disabilities, 4% are targeted to mixed populations, and less than 1% are targeted to other populations.

⁹ Indiana Housing Dashboard: <https://indianahousingdashboard.com/>

¹⁰ NHPD Federally Assisted Housing Dashboard:

https://public.tableau.com/app/profile/cateasp/viz/PreservationDashboard_17322891285080/US

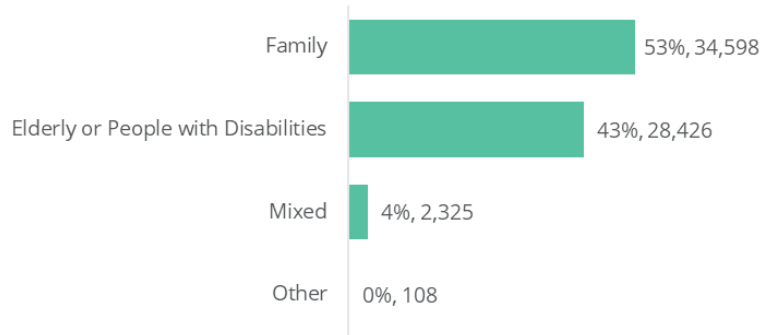
Federally Assisted Rental Units by Targeting, Indiana, December 2024

Note:

Excludes units without targeting information available.

Source:

NHPD Federally Assisted Housing Dashboard for Indiana.



IHCDA administers HCV throughout the state of Indiana with the assistance of local community action agencies who provide case management. The vouchers are administered by 15 local community action agencies throughout 83 counties in the state and include Housing Choice Vouchers, Project Based Vouchers, and referral-based special purpose vouchers. IHCDA additionally oversees HUD's 811 Project Rental Assistance Program, which was created for supportive housing for people with disabilities and oversees 17 units. In total, 6,402 total households were assisted by these programs in 2024. Vouchers administered by IHCDA in 2024 include 371 Veterans Affairs Supportive Housing (VASH) vouchers,¹¹ 408 Non-Elderly Disabled (NED) vouchers,¹² 37 Family Unification Program vouchers,¹³ and 25 Stability vouchers.¹⁴

Provide an assessment of units expected to be lost from the affordable housing inventory for any reason, such as expiration of Section 8 contracts.

The figure below shows the number and share of Indiana's federally assisted rental units that have expiration dates in the next five, ten, fifteen, twenty, twenty-five, and thirty years. Approximately 7% of the state's federally assisted rental units (7,101 units) are expected to expire in this Consolidated Plan period (2025-2029). Another 13% (12,450 units) have expiration dates in the next six to ten years.

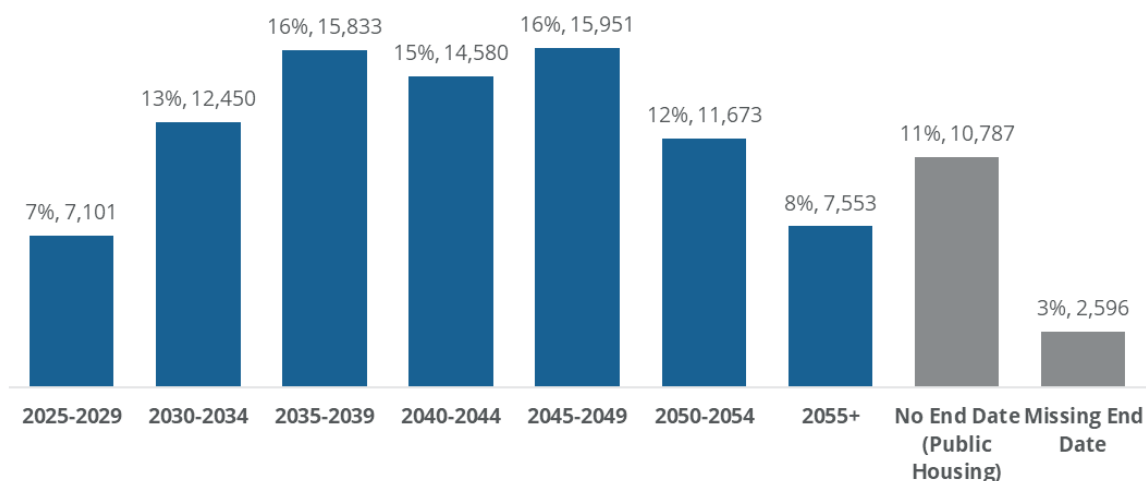
¹¹ Issued to veterans experiencing homelessness referred by the Department of Veterans Affairs. Includes a VASH voucher and requires recipients to work with a VA-appointed social worker to address personal needs in order to ameliorate homelessness.

¹² Issued to non-elderly disabled persons under age 62. Requires referral by eligible disability service provider.

¹³ Assists families referred by Indiana Department of Child Services (DCS) who are either aging out of foster care or whose main barrier to staying together is stable housing.

¹⁴ Makes HCVs available to Public Housing Agencies in partnership with the local Continuum of Care and Victim Service Providers to assist households who are experiencing, or at risk of, homelessness, fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, and veterans and families that include a veteran family member that meets one of the preceding criteria.

Number and Share of Federally Assisted Rental Units by Expiration Date, Indiana, December 2024



Source: National Housing Preservation Database.

Does the availability of housing units meet the needs of the population?

Broadly, the availability of housing units in Indiana does not meet the affordability needs of the population. This is especially severe for renter households earning \$25,000/year or less. Additional detail is provided below.

Housing supply. Growth in housing units (+3%) lagged growth in households (+6%) in Indiana over the past five years (2018-2023). This has resulted in a tightening of the state's housing supply: 10.5% of units were vacant in 2018, and this fell to 8.2% by 2023. Residential vacancy rates are low—between 3.4% and 4% and indicating tight markets—in Hancock, Boone, Hendricks, and Dearborn counties. The figure below shows the share of units that are vacant *and available*—the share of units that are vacant and are for rent or for sale. Currently, 2.3% of homes in the state are vacant and available—a slightly lower share than homes in the United States overall (2.4%). Indiana residents looking for housing face a slightly tighter market than United States residents.

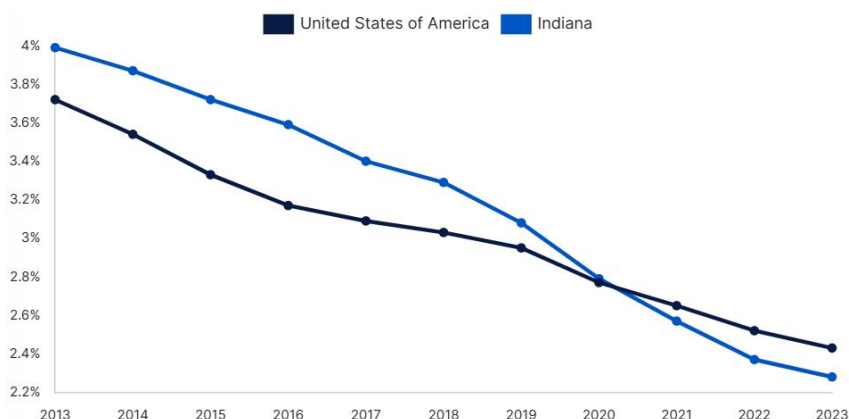
Share of Homes Vacant and Available

Note:

Homes are Vacant and Available if they are currently not occupied and are for rent or for sale.

Source:

American Community Survey (ACS), US Census Bureau from the Indiana Housing Dashboard



Rental market. The table below compares the number of renter households in Indiana by income in 2023 with the number of rental units in the market that were affordable to them.

The “Rental Gap” column in the table shows the difference between the number of renter households earning within each income range and the number of rental units affordable to them. Negative numbers indicate a shortage of units at the specific income level; positive units indicate an excess of units. Renters who cannot find affordable rents are not homeless—rather, they “rent up” and live in units that cost more than they can afford. These households are “cost burdened.” The “Cumulative Rental Gap” column accounts for lower income households “renting up” by showing the difference between the number of renter households earning less than the upper limit specified in the income range column and the number of rental units affordable to them.

It is important to note that the distribution of rental units in the “Rental Units Affordable” column is based on Indiana residents’ reporting of what they pay for monthly rental costs in Census surveys. Residents who receive subsidies such as Housing Choice Vouchers report what they pay after the subsidy is applied, not the market rent of the unit. Further, renter households who have occupied their units for a long time often pay less than market rate for their units. Relative to the distribution of rental units currently available for rent at market rate, the distribution of rental units used in this analysis overstates the number of units affordable to low income households.

The rental gaps analysis shows:

- Indiana has 192,330 renter households earning less than \$20,000 annually who can afford units that rent up to \$500/month. Including Housing Choice Vouchers and other forms of rental subsidies, there are only 62,638 rental units affordable to these households, leaving a gap of 129,692 units priced at or below \$500.
- There are 51,520 renters earning between \$20,000 and \$24,999, and only 44,190 rental units priced between \$500 and \$645/month (their affordability range), resulting in a rental gap of 7,330 rental units at this income level. Cumulatively, 243,850 renter households earn less than \$25,000 per year and only 106,828 units are priced at or below \$625 and are affordable to them.

- There are more rental units affordable (175,265) than renter households (97,255) at the \$25,000 to \$34,999 income level, but due to shortages of units priced affordably for households earning less than \$25,000, there remains a cumulative gap of 59,012 units for renter households earning up to \$35,000.
- 42% of renter households in Indiana earn less than \$35,000 and are affected by cumulative rental affordability gaps.
- The market oversupplies rental units priced affordably for households earning more than \$35,000.

Rental Affordability Gaps, Indiana, 2023

Income Range	Maximum Affordable Gross Rent	# of Renter Households	# of Rental Units Affordable	Rental Gap	Cumulative Gap
Less than \$5,000	\$125	53,537	2,730	-50,807	-50,807
\$5,000 to \$9,999	\$250	30,863	10,546	-20,317	-71,124
\$10,000 to \$14,999	\$375	62,120	25,011	-37,109	-108,233
\$15,000 to \$19,999	\$500	45,810	24,351	-21,459	-129,692
\$20,000 to \$24,999	\$625	51,520	44,190	-7,330	-137,022
\$25,000 to \$34,999	\$875	97,255	175,265	78,010	-59,012
\$35,000 to \$49,999	\$1,250	124,814	311,831	187,017	128,005
\$50,000 to \$74,999	\$1,875	164,745	198,187	33,442	161,447
\$75,000 to \$99,999	\$2,500	83,845	54,445	-29,400	132,047
\$100,000 or more		99,929	17,759	-82,170	49,877

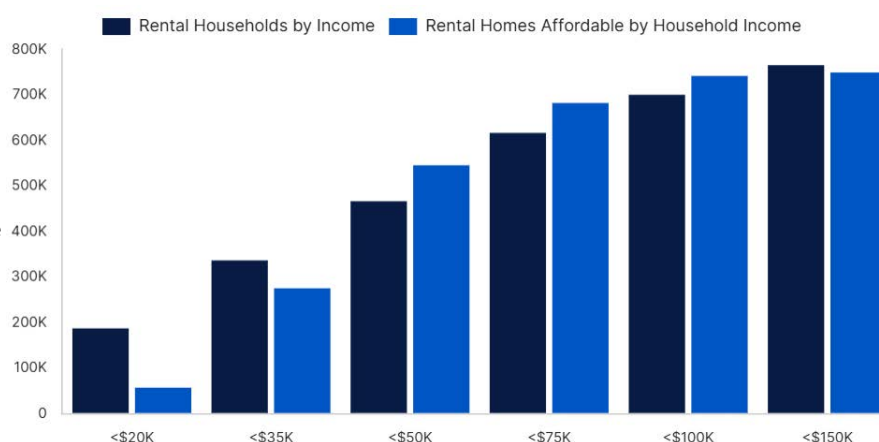
Source: 2023 1-year ACS and Root Policy Research..

This figure from the Indiana Housing Dashboard provides a visual representation of Indiana's rental affordability gaps:

Demand and Supply of Rental Housing by Income, Indiana, 2023

Source:

American Community Survey (ACS), US Census Bureau from the Indiana Housing Dashboard.



According to the National Low Income Housing Coalition's Out of Reach dashboard for Indiana (<https://nlihc.org/oor/state/in>), residents earning the minimum wage of \$7.25/hour would have to work 101 hours each week to afford a modest 1 bedroom rental home at fair market rent in Indiana. Workers

who earn median hourly wages in the following professions (which range from \$11.82/hour to \$18.12/hour) cannot afford to rent a modest 1 bedroom rental home at fair market rent:

- Waiters and waitresses
- Fast food and counter workers
- Cashiers
- Home health and personal care aides
- Retail salespersons
- Restaurant cooks
- Janitors and cleaners, except maids and housekeeping cleaners
- Stockers and order fillers
- Nursing assistants

Rental affordability varies by county within Indiana. Assuming that households do not pay more than 30% of gross income for housing, median income renter households cannot afford median gross rent in the following counties (this analysis compares median gross rent with median renter household income using 2023 5-year ACS estimates):

- Benton
- Blackford
- Brown
- Dearborn
- Delaware
- Elkhart
- Fayette
- Jennings
- Lake
- Lawrence
- Marion
- Monroe
- Montgomery
- Ohio
- Porter
- Randolph
- Scott
- St. Joseph
- Shelby
- Sullivan
- Tippecanoe
- Vanderburgh
- Vigo
- Wayne

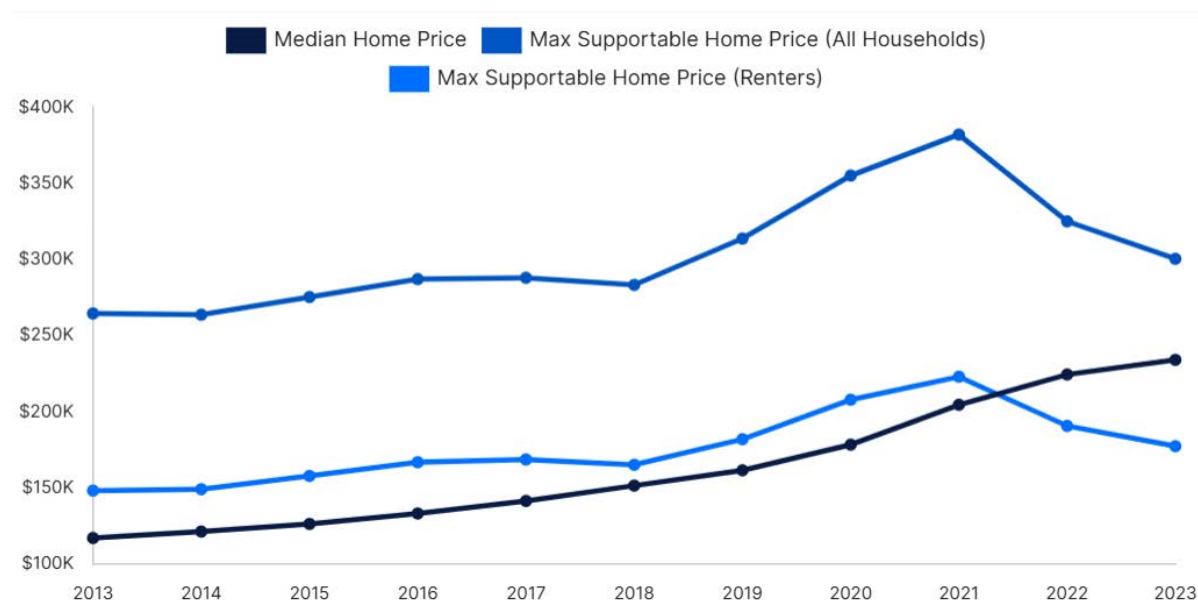
For Sale Market. Median home values in Indiana increased by 53% from \$147,300 in 2018 to \$225,900 in 2023. Further reducing purchase affordability, average mortgage interest rates increased from 4.54% in 2018 (and 2.96% in 2021) to 6.72% in 2024. Applying the 2024 interest rate to the 2023 median home value, the income required to afford a median value home nearly doubled, increasing by 95%, between 2018 and 2023/2024: a household earning \$35,279/year could have afforded a median priced home in Indiana in 2018, but in 2023/2024, households need to earn \$66,774/year to afford a median priced home.¹⁵ By contrast, median household income increased by only 25% across this time. The figure below from the Indiana Housing Dashboard visualizes these changes: median priced homes were affordable to median income renter households and median income households overall in 2021 and earlier, but median income renter households have been unable to afford a median priced home since 2022.

Homeowners have gained equity from market appreciation, but increased home prices and interest rate hikes have made the market more challenging for renters who wish to buy. Owner households saw a slight

¹⁵ Purchase affordability calculations assume a 30-year mortgage at average annual interest rates with a 20% down payment and 30% of the monthly payment to insurance, property taxes, and other expenses.

increase in cost burden between 2018 and 2023: 17.6% of owner households in Indiana are cost burdened in 2023, compared to 16.6% in 2018.

Median Home Price and Maximum Supportable Home Price at Median Household Income and Median Renter Household Income, Indiana, 2013-2023



Note: Figure and data are from the Indiana Housing Dashboard. Home values come from Zillow where available, or else from the American Community Survey (ACS). HR&A calculates affordable home prices using median incomes from the ACS; the national annual average 30-year fixed mortgage rate from Freddie Mac provided by the Federal Reserve Bank of St. Louis; effective property tax rates calculated from ACS median property taxes and median home values; and an assumed 20% down payment.

Source: Median home price refers to typical home values from the Zillow Home Value Index. The maximum supportable home price is the home price for which payments cost less than 30% of the median household income. Payment costs include 30-year fixed-rate mortgage payments with a 20% down payment and property tax payments.

Purchase affordability varies by county. In 2023, median income households (including owners *and* renters) can afford to purchase a median priced home in all counties except for Monroe and Tippecanoe counties. Median income renter households can afford to purchase a median priced home in only Cass, Clay, Fountain, Grant, Miami, Newton, and Vermillion counties.¹⁶

Home purchase gaps—which occur when demand from potential first-time homebuyers outweighs the supply of affordable homes for sale—are concentrated among households earning \$50,000 or less. Cumulatively, these gaps limit the supply of homes for sale at prices affordable to households earning up to \$100,000. Specifically,

- Approximately 57% of renter households earn less than \$50,000 and would require homes priced at or below \$149,128 to afford to purchase a home, yet only 27% of owner occupied homes are

¹⁶ These calculations assume a 30-year mortgage at the 2024 average interest rate of 6.72% with a 20% down payment and 30% of the monthly payment to property taxes, utilities, insurance, and other expenses.

affordable to them. Approximately 10% of renter households earn less than \$10,000 and are unlikely to purchase homes. Because 47% of renters earn between \$10,000 and \$50,000 and 27% of owner occupied homes are valued at or below \$149,128, the cumulative gap at \$50,000 is 20%.

- The cumulative gap persists at incomes up to \$99,999:
 - 20% of renters earn \$50,000 to \$74,999, and a greater share—22%—of homes are affordable within this group’s price range. This surplus slightly narrows but does not resolve the cumulative purchase affordability gap: the share of renter households earning \$10,000 to \$74,999 is 18 percentage points greater than the share of homes affordable at an annual income of \$74,999.
 - The share of homes affordable at incomes of \$75,000 to \$99,999 (19%) is greater than the share of renters earning \$75,000 to \$99,999 (10%). A cumulative gap of 9 percentage points remains because 77% of renters earn less than \$100,000 while 68% of homes are affordable to them.

Purchase Affordability Gaps, Indiana, 2023

Renter Purchase Gaps					
Income Range	Maximum Affordable Price	% of Renter Households	% of Homes Affordable	Renter Purchase Gap	Cumulative Gap
Less than \$5,000	\$14,913	7%	2%	-4%	excluded
\$5,000 to \$9,999	\$29,823	4%	2%	-2%	excluded
\$10,000 to \$14,999	\$44,736	8%	1%	-6%	-2%
\$15,000 to \$19,999	\$59,649	6%	2%	-4%	-6%
\$20,000 to \$24,999	\$74,562	6%	2%	-4%	-10%
\$25,000 to \$34,999	\$104,389	12%	7%	-5%	-15%
\$35,000 to \$49,999	\$149,128	15%	11%	-5%	-20%
\$50,000 to \$74,999	\$223,693	20%	22%	2%	-18%
\$75,000 to \$99,999	\$298,259	10%	19%	8%	-9%
\$100,000 to \$149,999	\$447,390	8%	19%	10%	1%
\$150,000 or more		4%	13%	9%	

Note: Purchase affordability estimates assume a 10% downpayment, a 30-year mortgage with a 6.80% interest rate, and 30% of the monthly payment to property taxes, utilities, insurance, and other expenses. Renters earning less than \$15,000 are excluded from cumulative gap calculations because they are least likely to purchase homes.

Source: 2023 1-year ACS and Root Policy Research.

Describe the need for specific types of housing:

1. Deeply affordable rental housing for households earning \$25,000/year or less. The maximum monthly housing payment affordable to households earning \$25,000 is \$625/month, including utilities and other fees. There are 243,850 renter households earning less than \$25,000 per year, yet only 106,828 units priced at or below \$625/month, resulting in a cumulative gap of 137,022 units priced

at or below \$625/month. This need could be met through construction of new deeply affordable rental units or through increased provision of vouchers or other subsidies.

2. Preservation of rental units for low income renters. Renters earning very low and low incomes depend on a combination of the public sector (units with low to moderate subsidies and vouchers) and the private market (where rents are less stable). According to the National Housing Preservation Database, 7% of the state’s federally assisted rental units (7,101 units) will expire in this Consolidated Plan period (2025-2029) and another 13% (12,450 units) will expire in the next six to ten years.

Discussion

IHCDA administers a Homeownership Program, designed to make homebuying more accessible and less financially challenging for first-time buyers. IHCDA partners with participating lenders to offer four avenues to help Hoosiers achieve homeownership:

- First step: offers qualifying first-time buyers with 6% of the price of the home in down payment assistance.
- Next step: a one-time refinancing opportunity for IHCDA first place and first step mortgages.
- Step down: allows for the buy down of the interest rate for first-time homebuyers, resulting in lower monthly payments.
- Next home: offers all qualifying homebuyers with up to 3.5% of the price of the home in down payment assistance.

In 2024, IHCDA’s Homeownership Program purchased 3,498 mortgages worth \$640.6 million and provided \$38.2 million in down payment assistance in 90 of the state’s 92 counties. The program has achieved record performance each year since it began.

IHCDA Homeownership Program Performance Metrics, 2019–2024



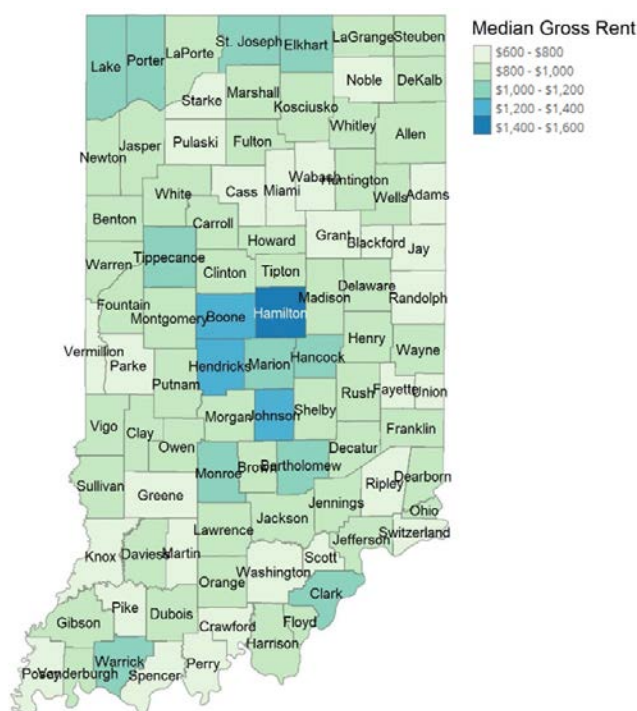
Source: IHCDA 2024 Annual Report, p. 46.

MA-15 Cost of Housing – 91.310(a)

Introduction

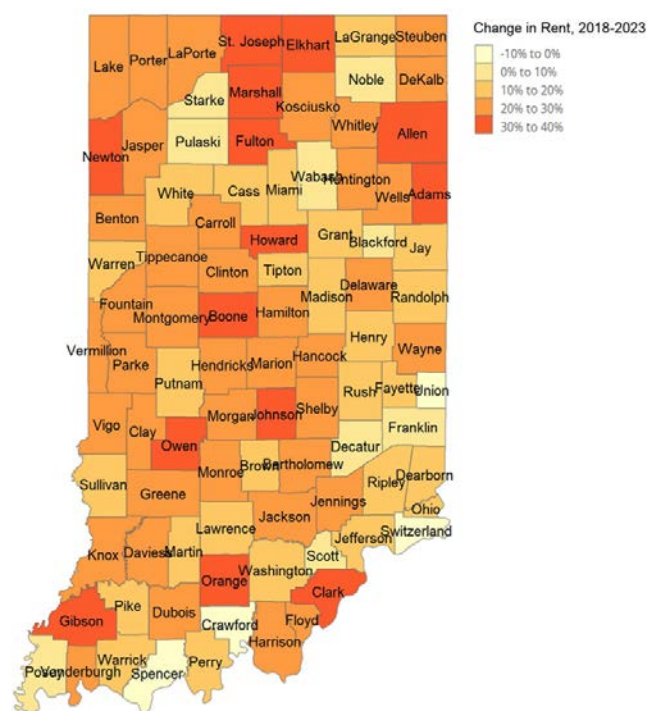
Median gross rent in Indiana increased by 27% between 2018 and 2023 (from \$820 to \$1,044). Within Indiana, median gross rent is highest in Hamilton County at \$1,468, followed by Hendricks (\$1,364), Boone (\$1,283), and Johnson (\$1,208) counties and lowest at \$629-\$650 in Crawford, Blackford, and Martin counties. Growth in median gross rent between 2018 and 2023 was fastest, increasing by 35%-37%, in Orange, Gibson, and Newton counties. Median gross rents decreased between 2018 and 2023 by 1%-6% in Switzerland, Crawford, Union, and St. Joseph counties.

Median Gross Rent, 2023



Source:
ACS estimates.

Change in Gross Rent, 2018-2023



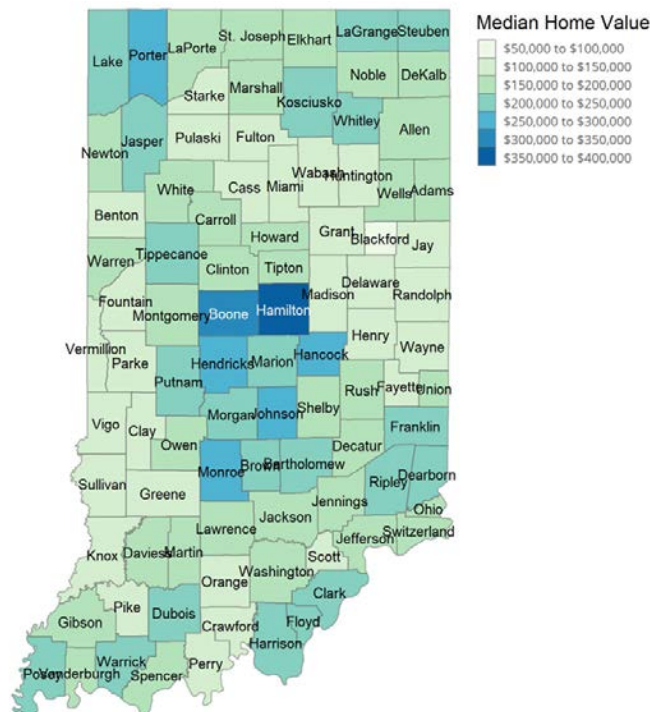
2023 5-year ACS estimates. Source: 2018 and 2023 5-year

At the state level, median renter household incomes increased by 26% between 2018 and 2023, roughly keeping up with growth in median gross rent (27%), from \$33,204 to \$41,757. Because renter incomes roughly kept up with rising rents, renter cost burden remained relatively stable overall since 2018: 47.5% of renter households were cost burdened in 2018, compared to 47.4% in 2023. As of 2023, approximately two thirds (66%) of rental units in the state rent for less than \$1,000.

While purchasing power remained relatively constant over the past five years, losses in home purchase affordability were significant. Median home values in Indiana grew faster than median gross rent, increasing by 53% from \$147,300 in 2018 to \$225,900 in 2023. As of 2023, median home values are highest in Hamilton County (\$379,100) and in Boone County (\$341,800) and lowest—between \$96,700 and

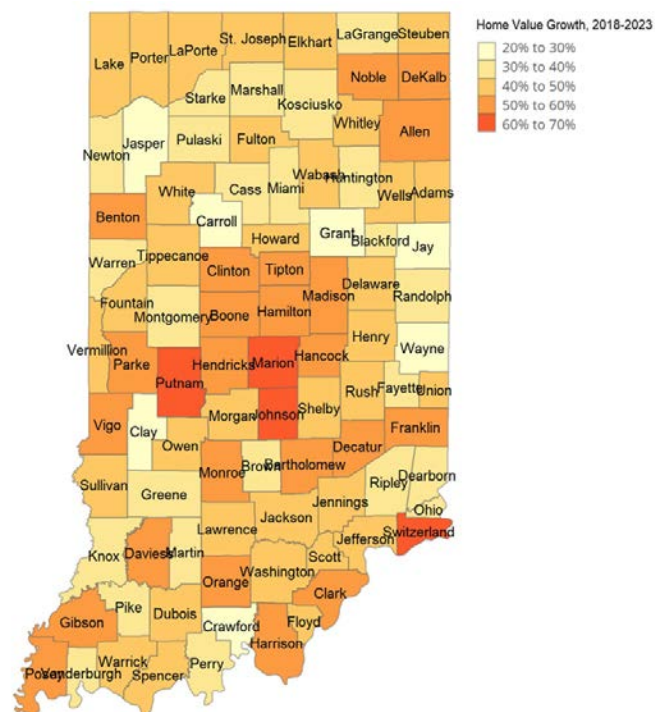
\$110,000—in Blackford, Randolph, and Vermillion counties. Growth in home values since 2018 was fastest at 65% to 70% in Putnam, Switzerland, and Johnson counties and slowest at 26% to 27% in Clay and Carroll counties.

Median Home Value, 2023



Source: 2023 5-year ACS estimates.

Change in Home Value, 2018-2023



Source: 2018 and 2023 5-year ACS estimates.

Further reducing purchase affordability, average mortgage interest rates increased from 4.54% in 2018 (and 2.96% in 2021) to 6.72% in 2024. Applying the 2024 interest rate to the 2023 median home value, the income required to afford a median value home nearly doubled, increasing by 95%, between 2018 and 2023/2024: a household earning \$35,279/year could have afforded a median priced home in Indiana in 2018, but in 2023/2024, households need to earn \$66,774/year to afford a median priced home.¹⁷ By contrast, median household income increased by only 25% across this time.

According to HUD CHAS data in Table 34, the state has maintained a solid inventory of housing affordable to renters and homebuyers across the income spectrum.

¹⁷ Purchase affordability calculations assume a 30-year mortgage at average annual interest rates with a 20% down payment and 30% of the monthly payment to insurance, property taxes, and other expenses.

Cost of Housing

Table 29 – Cost of Housing

	Base Year: 2010	Most Recent Year: 2023	% Change
Median Home Value	\$123,300	\$225,900	83%
Median Contract Rent	\$547	\$846	55%

Data Source: 2010 and 2023 1-year ACS

Table 30 - Rent Paid

Rent Paid	Number	%
Less than \$500	98,489	12.74%
\$500-999	412,710	53.37%
\$1,000-1,499	179,984	23.28%
\$1,500-1,999	60,823	7.87%
\$2,000 or more	21,239	2.75%
Total	773,245	100.00%

Data Source: 2023 1-year ACS

Housing Affordability

Table 31 – Housing Affordability

Number of Units affordable to Households earning	Renter	Owner
30% HAMFI	60,070	No Data
50% HAMFI	246,905	183,810
80% HAMFI	545,650	478,820
100% HAMFI	No Data	687,820
Total	852,625	1,350,450

Data Source: 2016-2020 CHAS

Monthly Rent

Table 32 – Monthly Rent

Monthly Rent (\$)	Efficiency (no bedroom)	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
Fair Market Rent	N/A	N/A	N/A	N/A	N/A
High HOME Rent	N/A	N/A	N/A	N/A	N/A
Low HOME Rent	N/A	N/A	N/A	N/A	N/A

Data Source: HUD FMR and HOME Rents

Is there sufficient housing for households at all income levels?

No. The rental affordability gaps conducted to support the Consolidated Plan found that Indiana needs 137,022 rental units affordable to renters with incomes of less than \$25,000: there are 243,850 renters with incomes under \$25,000 and 106,828 units affordable to them.

Purchase affordability gaps—which occur when demand from potential first-time homebuyers outweighs the supply of affordable homes for sale—exist for renters until they have incomes exceeding \$50,000. Cumulatively, purchase affordability gaps affect renters earning up to \$100,000: 77% of renters earn between \$10,000 and \$100,000, and 68% of owner occupied homes are affordable to them.

How is affordability of housing likely to change considering changes to home values and/or rents?

In the past five years, rent increases have been relatively modest as home prices increased quickly. Rents and home values are expected to continue to rise overall, and this may be exacerbated if residential construction continues to lag household growth. The Indiana Realtors Association notes that the below listed changes from 2022 to 2024 indicate “pent-up demand” from households:

- Indiana non-farm employment has grown by more than 100,000 jobs;
- Indiana has added roughly 50,000 new households;
- More than 150,000 children have been born across the state;
- Hundreds of thousands of Hoosiers have changed jobs within the state; and
- Indiana has had seven straight years of positive net domestic migration. In that time, the state has added 40,000 new residents from other states and 90,000 from other countries.

Resident and stakeholder sentiment expressed throughout the citizen participation process confirms that extremely low income households—who already face substantial affordability gaps in the rental and purchase markets—are likely to suffer the greatest consequences of rising prices and under provision of rental subsidies and assistance. Public subsidies are failing to keep up with increases in the costs to develop rental housing largely due to rising labor and material costs.

How do HOME rents / Fair Market Rent compare to Area Median Rent? How might this impact your strategy to produce or preserve affordable housing?

N/A at the state level.

MA-20 Condition of Housing – 91.310(a)

Introduction:

HUD defines housing “conditions” similarly to the definition of housing problems previously discussed in the Needs Assessment. These conditions are:

1. More than one person per room
2. Cost burden greater than 30%
3. Lack of complete plumbing
4. Lack of complete kitchen facilities

Describe the jurisdiction's definition of "standard condition" and "substandard condition but suitable for rehabilitation":

IHCDA does not include a definition of substandard condition (suitable or unsuitable for rehabilitation) in its applications for rehabilitation. Instead, IHCDA relies on the assessment of organizations administering its programs to evaluate the condition needs of housing units. In the past, IHCDA’s OOR program required that recipients follow a Rehabilitation Priority List to guide the development of the scope of work. IHCDA identifies several priorities:

1. Health and Safety: lead based paint hazards, moisture/mold, electrical hazards, urgent aging in place modifications etc.
2. Structural: foundation issues. Roof issues, interior walls etc.
3. Aging in Place: additional accessibility issues.
4. Energy: HVAC improvements, insulation and air sealing measures.

Any major household system repaired or replaced as part of the rehabilitation process must meet the stricter of the Indiana State Building Code or local building codes.

Condition of Units

As shown in Table 37 below, 25% of occupied units had one substandard condition, while 1% of occupied units had two substandard conditions. Renters were more likely than owners to report substandard conditions: 46% of renter-occupied units had at least one substandard condition, compared to only 18% of owner-occupied units.

Table 33 - Condition of Units

Condition of Units	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
With one selected Condition	338,003	17%	355,009	44%
With two selected Conditions	10,028	1%	21,717	3%
With three selected Conditions	903	0%	251	0%

Condition of Units	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
With four selected Conditions	0	0%	0	0%
No selected Conditions	1,591,509	82%	437,461	54%
<i>Total</i>	1,940,443	100%	814,438	100%

Data Source: 2023 1-year ACS

Year Unit Built

Table 38 shows that 47% of renter occupied units and 46% of owner occupied units in Indiana were built after 1980, equating to 47% of all occupied units. 53% of all units, including 53% of renter occupied units and 54% of owner occupied units, were built before 1980. The state has a considerable supply of units built before 1950, making up 18% of renter-occupied units and 20% of owner-occupied units.

Table 34 – Year Unit Built

Year Unit Built	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
2000 or later	466,113	24%	183,245	22%
1980-1999	433,442	22%	203,337	25%
1950-1979	647,080	33%	279,472	34%
Before 1950	393,808	20%	148,384	18%
<i>Total</i>	1,940,443	100%	814,438	100%

Data Source: 2023 1-year ACS

Risk of Lead-Based Paint Hazards

Homes built before 1980 have the greatest risk of lead-based paint hazard, as the federal government banned lead from paint beginning in 1978. According to the federal Environmental Protection Agency (EPA), 24% of homes built between 1960 and 1977, 69% of homes built between 1940 and 1959, and 87% of homes built before 1940 contain lead-based paint.

As discussed above, 53% of the state's housing units were built before 1980 and could have lead based paint. One in five (20%) of the state's units have an especially high risk due to being built before 1950.

The estimated number of units with lead-based paint risk is shown in the table below. A total of 1,040,888 owner occupied units and 427,856 renter occupied units were built before 1980 and could have lead paint. The risk is similar in owner occupied and renter occupied units: 53-54% of owner occupied and renter occupied units were built before 1980. CHAS data on the numbers of owner occupied and renter occupied housing units built before 1980 with children present (the second row of the table) are not available, but it is possible to estimate these numbers based on the shares of owner occupied and renter occupied households that have children under the age of 18 (26.9% and 22.9% respectively in the state according to 2023 1-year ACS estimates). Approximately 280,437 owner households and 97,850 renter households

in the state have children under the age of 18 and live in units that may have lead based paint.

IHCDA's Healthy Homes Resource Program (HHRP) works directly with contractors across Indiana to assist income-eligible families by providing work to address lead, radon, and other common health hazards in their homes. This program assisted more than 45 households in 24 counties in 2024 (its first year), with a waiting list of several hundred households across the state, indicating high levels of need for residential health hazard mitigation.

Table 35 – Risk of Lead-Based Paint

Risk of Lead-Based Paint Hazards	Owner-Occupied		Renter-Occupied	
	Number	%	Number	%
Total Number of Units Built Before 1980.	1,040,888	54%	427,856	53%
Housing units built before 1980 with children present	280,437	27%	97,850	23%

Data Source: 2023 1-year ACS

Vacant Units

According to 1-year 2023 ACS estimates, there are 247,699 vacant units in the Indiana, translating to a vacancy rate of 8.2%. Residential vacancy has decreased since 2018 (when 10.5% of units were vacant) due to household growth that was faster than growth in housing units. Residential vacancy rates are low—between 3.4% and 4% and indicating tight markets—in Hancock, Boone, Hendricks, and Dearborn counties. The share of units that are vacant *and available*—meaning for sale or for rent—was much lower at 2.3%. This is a slightly lower share than homes in the United States overall (2.4%). Indiana residents looking for housing face a slightly tighter market than United States residents.

Table 36 - Vacant Units

	Suitable for Rehabilitation	Not Suitable for Rehabilitation	Total
Vacant Units	N/A	N/A	247,699
Abandoned Vacant Units	N/A	N/A	N/A
REO Properties	N/A	N/A	N/A
Abandoned REO Properties	N/A	N/A	N/A

Need for Owner and Rental Rehabilitation

Of the 1,940,443 owner occupied units in Indiana, 348,934 units (18%) are reported to have one or more housing conditions. The incidence of housing problems is higher in renter occupied units at 46% (376,977 of the 814,438 renter occupied units). There are a total of 725,911 units with one or more conditions that could benefit from rehabilitation. About 54% of the state's housing stock was constructed before 1980. These units are reaching a need for rehabilitation due to age.

Citizen participation in the Consolidated Plan process confirmed widespread need for rehabilitation of owner occupied units. “Funding for homeowner repair assistance” was the fifth most frequently reported “greatest unmet community and economic development need” by resident and stakeholder survey respondents, behind only affordable childcare, services for people who are unhoused, supportive services for vulnerable populations, and public transportation and ahead of 27 other needs. Stakeholders reported that OCRA’s Owner-Occupied Rehabilitation Program is essential and could be more beneficial if expanded. Still, stakeholders reported that the program is difficult for homeowners to apply for and access and could be made more accessible through application help, application accessibility improvements, or opening the program to nonprofit partners.

Estimated Number of Housing Units Occupied by Low or Moderate Income Families with LBP Hazards

As shown in Table 38, 1,040,888 owner occupied and 427,856 renter occupied units were built before 1980 and may have lead based paint. Based on the overall shares of owner and renter households that have children under the age of 18 (26.9% and 22.9% respectively in the state according to 2023 1-year ACS estimates), 280,437 owner households and 97,850 renter households in the state have children under the age of 18 and live in units that may have lead based paint. Based on the overall poverty rate for families with children in the state (12.9% of families with children in the state live in poverty according to 2023 1-year ACS estimates) then 36,095 owner occupied and 12,594 renter occupied units house families with children below poverty and could contain lead based paint hazards.

MA-25 Public and Assisted Housing – (Optional)

Introduction: The table below shows the numbers of vouchers by type administered by IHCD, as of March 2025.

Totals Number of Units

Table 37 – Total Number of Units by Program Type

Program Type									
	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project-based	Tenant-based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers available				4,875		4,241	313	21	30
# of accessible units				unknown		unknown	unknown	unknown	unknown
*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition									

Data Source: PIC (PIH Information Center)

Describe the supply of public housing developments:

Describe the number and physical condition of public housing units in the jurisdiction, including those that are participating in an approved Public Housing Agency Plan:

The National Housing Preservation Database's Federally Assisted Housing Dashboard for Indiana¹⁸ shows that there are 10,787 public housing units in the state, 1,694 or 16% of which have failing REAC scores.

Describe the Restoration and Revitalization Needs of public housing units in the jurisdiction:

The National Housing Preservation Database's Federally Assisted Housing Dashboard for Indiana¹⁹ shows that 1,694 or 16% of public housing units in Indiana have failing REAC scores.

¹⁸ NHPD Federally Assisted Housing Dashboard:

https://public.tableau.com/app/profile/cateasp/viz/PreservationDashboard_17322891285080/US

¹⁹ NHPD Federally Assisted Housing Dashboard:

https://public.tableau.com/app/profile/cateasp/viz/PreservationDashboard_17322891285080/US

Describe the public housing agency's strategy for improving the living environment of low- and moderate-income families residing in public housing:

IHCDA does not own and operate public housing. However, IHCDA can support other Public Housing Authorities operating in the state in their efforts to improve the living environment of public housing tenants and voucher holders.

IHCDA has taken a leadership role among Indiana Public Housing Authorities to promote the development of Permanent Supportive Housing and increase utilization of the VASH program. IHCDA has utilized its housing choice voucher program to provide rental assistance in PSH developments around the state. In the VASH program, IHCDA has developed relationships with PHAs around the state to allow veterans to utilize the VASH program where they would like regardless of if the local PHA has a VASH program.

MA-30 Homeless Facilities – 91.310(b)

Introduction

The Housing Inventory Count (HIC) is an inventory of beds and units available for housing individuals and families experiencing homelessness in one single night in January. IHCD compiles this information for the Balance of State (BoS), which includes 91 of the 92 counties in Indiana except Marion County/Indianapolis, and reports it annually to HUD. Housing projects for unhoused people include emergency shelters, transitional housing, permanent supportive housing, rapid re-housing, and safe haven projects. This section uses data from the 2024 Indiana Balance of State HIC.

Facilities Targeted to Homeless Persons

Table 38 - Facilities Targeted to Homeless Persons

	Emergency Shelter Beds		Transitional Housing Beds	Permanent Supportive Housing Beds	
	Year Round Beds (Current & New)	Voucher / Seasonal / Overflow Beds	Current & New	Current & New	Under Development
Households with Adult(s) and Child(ren)	1349		593	767	
Households with Only Adults	2313		507	2061	
Chronically Homeless Households	0		0	772	
Veterans	207		121	909	
Unaccompanied Youth	15		16	0	

Source: https://www.in.gov/ihcda/indiana-balance-of-state-continuum-of-care/hmis_data_portal/

Describe mainstream services, such as health, mental health, and employment services to the extent those services are used to complement services targeted to homeless persons.

IHCDA partners with BoS CoC to connect individuals experiencing homelessness to these types of services. As there is a strong partnership with the ESG/HOPWA subrecipients, mentioned above, these services are then shared with ESG and HOPWA subrecipients. Overall, each region in the CoC works to bring these partners together in their given service area. The CoC BoS board is currently going through a board member recruitment process to continue to strengthen relationships such as these at a higher, more decision-making level. Now, many of these services are represented through board members on the BoS CoC board and through partnerships formed by IHCDA or the CoC. IHCDA subrecipients themselves are often mental health and health care providers who administer CoC, ESG, and/or HOPWA funds. Moreover, IHCDA has a strong relationship with several state agencies and/or statewide associations. Those include, but are not limited to, the Division of Mental Health through the Family and Social Services Agency who oversee the local Community Mental Health Agencies, the Department of Workforce Development and their Work One employment centers, the Indiana Commission for Higher Education (ICHE) and their options for school scholarships, and the Indiana Primary Health Care Association who train all Federally Qualified Healthcare Centers.

List and describe services and facilities that meet the needs of homeless persons, particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth. If the services and facilities are listed on screen SP-40 Institutional Delivery Structure or screen MA-35 Special Needs Facilities and Services, describe how these facilities and services specifically address the needs of these populations.

HIV Non-Medical Case Management is a specialized form of HIV case management. Its mission is to successfully coordinate a variety of health and social services that assist those living with HIV.

HIV Non-Medical Case Management provides an individualized plan of care that includes medical, psychosocial, financial, and other supportive services, as needed. The primary goals of the program are to ensure the continuity of care, promote self-sufficiency, and enhance the quality of life for individuals living with HIV. HIV care coordination can be done by Non-Medical Case Management Providers (NMCMP - as designated by IDOH). Care Coordinators at NMCMPs are trained professionals who can offer assistance in the following areas:

- Access to health insurance to obtain medications. This includes Medicaid, Medicare, Early Intervention Plan (EIP), AIDS Drug Assistance Plan (ADAP), Health Insurance Assistance Plan (HIAP), Indiana Comprehensive Health Insurance Association (ICHIA), Wishard Advantage, and the Ryan White Program (Parts A, B& C) offered through the Marion County Health Department, etc.
- Access to housing programs such as Section 8, Housing Opportunities for Persons with AIDS (HOPWA), Continuum of Care and ESG funds, etc.
- Access to emergency funds, such as Direct Emergency Financial Assistance (DEFA) to assist with rent, utilities, medications, etc.
- Access to mental health and substance abuse programs

- Referrals for optical and dental care
- Referrals to community and government programs, such as Social Security
- Referrals to local food pantries
- Referrals to support groups
- Referrals to legal assistance
- Assistance with medication management
- Assistance with transportation (e.g., bus passes)
- Access to HIV testing and prevention counseling services
- Access to HIV prevention and education services

Most HOPWA subrecipients also have permanent supportive housing programs that they can offer to a person with HIV/AIDS if they become chronically homeless. If the HOPWA subrecipients do not have the program within their area, there are other permanent supportive housing programs for this population.

Describe programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

IHCDA works consistently to improve the awareness of programs and how individuals might access the Coordinated Entry system to receive appropriate supportive housing. IHCDA currently funds several Community Mental Health centers which help directly connect individuals moving out of mental institutions. IHCDA also has a partnership with CSH to conduct a Medicaid Crosswalk. This will inform how the agency might further connect their housing funds to supportive services across other agencies. Finally, the Community Services Director at IHCDA attends a monthly Recovery Housing Support Group to cross collaborate between NAMI, the Indiana Family Social Services Agency (FSSA), the Department of Workforce Development (DWD) on addressing unmet needs for those experiencing substance abuse disorder. New partnerships are currently being formed with the state wide primary care network and their connections to FQHC to educate providers on how to connect individuals with services. Additionally the IN BoS CoC board is working through a recruitment process for new board members who can improve these connections and IHCDA Community Services staff will be working to identify ways to strengthen connections for the CoC network and ESG subrecipients, . IHCDA is recruiting individuals who have experience with homeless healthcare, transitions out of institutions, and other supportive service needs.

Services include: 1) enrollment in Medicaid, Food Stamps, TANF, & SSI; 2) issuance of birth certificates and BMV identification; 3) participation in workforce development programs; 4) limited rental assistance; and 5) referral to other community services. There are still people leaving corrections without stable housing. IDOC is linking their data system with the CoC Assessment–Access system and HMIS to link people to appropriate services and housing.

In some regions, faith based groups have joined up with an IDOC in reach program to mentor people while in jail and prison and continue to do so upon release, to help people use a social support network to find housing, employment and support.

MA-35 Special Needs Facilities and Services – 91.310(c)

HOPWA Assistance Baseline Table

Table 39 – HOPWA Assistance Baseline

Type of HOWA Assistance	Number of Units Designated or Available for People with HIV/AIDS and their families
TBRA	130
PH in Facilities	27
STRMU	222
ST or TH Facilities	
PH Placement	40

Data Source: HOPWA CAPER and HOPWA Beneficiary Verification Worksheet

To the extent information is available, describe the facilities and services that assist persons who are not homeless but who require supportive housing, and programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

Services include: 1) enrollment in Medicaid, Food Stamps, TANF, & SSI; 2) issuance of birth certificates and BMV identification; 3) participation in workforce development programs; 4) limited rental assistance; and 5) referral to other community services. There are still people leaving corrections without stable housing.

Describe programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

IHCDA works consistently to improve the awareness of programs and how individuals might access the Coordinated Entry system to receive appropriate supportive housing. IHCDA currently funds several Community Mental Health centers which help directly connect individuals moving out of institutions. The Community Services Director at IHCDA attends a monthly Recovery Housing Support Group to cross collaborate between NAMI, the Indiana Family Social Services Agency (FSSA), the Department of Workforce Development (DWD) on addressing unmet needs for those experiencing substance abuse disorder. New partnerships are currently being formed with the state wide primary care network and their connections to FQHC to educate providers on how to connect individuals with services.

Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. 91.315(e)

ESG dollars are linked to rapid rehousing, outreach, and shelter operational dollars to prevent homelessness. HOPWA will be allocated to TBRA, rental/utilities/mortgage assistance and housing

information services to support persons living with HIV/AIDS who are not homeless but who need housing support.

For entitlement/consortia grantees: Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. (91.220(2))

N/A

MA-40 Barriers to Affordable Housing – 91.310(d)

Negative Effects of Public Policies on Affordable Housing and Residential Investment

Barriers to addressing affordable housing needs that have been identified in the housing analysis from the Consolidated Plan and supporting studies:

- Poor condition of affordable housing stock according to residents and stakeholders. Inability of residents to make needed improvements due to low incomes. Difficulty obtaining private sector loans to complete needed improvements due to low incomes of those living in units in poor condition.
- Disproportionately high levels of cost burden and lower homeownership rates for certain populations due to historically low incomes, high mortgage denial rates, and lack of affordable/ publicly subsidized housing to meet their needs. Cost burden gaps are greatest for residents earning between 30 and 50% AMI—those just over the poverty level. Homeownership rates are lowest for Black or African American residents.
- High mortgage loan denial rates for non-White residents, even when adjusting for income level.
- Non-White residents and residents with disabilities are most likely to express challenges with home buying associated with saving enough for down payments and meeting mortgage loan qualifications.
- Higher use of publicly-supported housing by African American residents, suggesting challenges obtaining private market housing.
- Housing choice for residents with disabilities restricted by the lack of available, affordable, accessible housing.
- Landlords not accepting service animals and charging higher rents or deposits for persons with disabilities requesting reasonable accommodations.
- Lack of rental housing for families with children: on average 72% of Housing Choice Voucher wait lists are families with children.

Economic Opportunity Issues

- Gaps in educational attainment for Hispanic residents.
- Residents with disabilities face challenges finding employment and those who are employed earn less than those without a disability.
- Economic differences contributing to segregation, mostly in urban areas. In some areas, lack of opportunity and lack of available housing perpetuate similar neighborhoods.
- Limitations (property tax caps) on State and local tax revenue generation.
- Severe lack of services and trained staff to deliver mental health and supportive services.

The factors contributing to these issues are:

- Economic weaknesses in some non-entitlement areas preventing residents from making needed repairs.
- Lack of accessible housing stock.
- Historically lower incomes of non-White and Hispanic residents and, for Hispanic residents, lower rates of educational attainment.
- Residents with disabilities facing lower employment opportunities and discrimination in housing markets.
- Families with children and non-White and Hispanic residents experiencing discrimination in rental market transactions.
- Landlords not complying with and/or not understanding laws, particularly reasonable accommodations.
- Insufficient resources to fund ADA improvements to public buildings and infrastructure, particularly in rural areas.

MA-45 Non-Housing Community Development Assets -91.315(f)

Introduction

This section summarizes economic development and needs in Indiana based on citizen and stakeholder participation findings, analysis of data, and Indiana's 2024-2027 Workforce Innovation and Opportunity Act (WIOA) Plan.²⁰

The figure below presents the unemployment rates for Indiana and the United States from 2010 to 2024. Unemployment spiked due to the pandemic in spring and summer of 2020, reaching 16.4% in Indiana and 14.4% in the United States in April 2020, and returned to pre-pandemic levels in Indiana by the last months of 2021. Total employment in Indiana fell from 3.27 million jobs in January and February 2020 to 3.14 million in March 2020 and 2.67 million in April 2020. As of November 2024, 3.30 million people are employed in Indiana.

Unemployment Rate, Indiana and United States



Total Employment, Indiana



Source: Local Area Unemployment Statistics (LAUS), US Bureau of Labor Statistics (BLS), except for data for the US overall, which comes from the Current Population Survey (CPS) Labor Force Statistics, US BLS from the Indiana Housing Dashboard.

²⁰ https://wioaplans.ed.gov/sites/default/files/pdfs/state-plan/2024/Indiana_PYs_2024-2027.docx

Economic Development Market Analysis

Business Activity

Table 40- Business Activity

Business by Sector	Number of Workers	Number of Jobs	Share of Workers %	Share of Jobs %	Jobs less workers %
Agriculture, Mining, Oil & Gas Extraction	19,506	19,563	0.7%	0.7%	0.0%
Arts, Entertainment, Accommodations	255,147	256,073	8.7%	8.9%	0.1%
Construction	150,749	146,730	5.2%	5.1%	-0.1%
Education and Health Care Services	660,461	656,468	22.6%	22.7%	0.1%
Finance, Insurance, and Real Estate	139,168	133,722	4.8%	4.6%	-0.1%
Information	32,887	31,371	1.1%	1.1%	0.0%
Manufacturing	524,121	527,506	18.0%	18.3%	0.3%
Other Services	80,713	79,881	2.8%	2.8%	0.0%
Professional, Scientific, Management Services	176,462	170,944	6.1%	5.9%	-0.1%
Administration and Support, Waste Management	169,987	166,114	5.8%	5.8%	-0.1%
Public Administration	104,938	103,941	3.6%	3.6%	0.0%
Retail Trade	290,387	291,540	10.0%	10.1%	0.1%
Transportation & Warehousing	185,341	180,072	6.4%	6.2%	-0.1%
Wholesale Trade	126,687	123,392	4.3%	4.3%	-0.1%
Grand Total	2,916,554	2,887,317	100.0%	100.0%	0.0%

Data Source: 2022 Longitudinal Employer-Household Dynamics

Labor Force

Table 41 - Labor Force

Total Population in the Civilian Labor Force	3,515,202
Civilian Employed Population 16 years and over	3,387,230
Unemployment Rate	3.64%
Unemployment Rate for Ages 16-24	7.23%
Unemployment Rate for Ages 25-65	2.99%

Data Source: 2023 1-year ACS

Table 42 – Occupations by Sector

Occupations by Sector	Number of People
Management, business and financial	539,101
Farming, fisheries and forestry occupations	10,372
Service	500,580
Sales and office	627,731
Construction, extraction, maintenance and repair	285,351
Production, transportation and material moving	638,024

Data Source: 2023 1-year ACS

Travel Time

Table 43 - Travel Time

Travel Time	Number	Percentage
< 30 Minutes	2,020,997	68%
30-59 Minutes	776,684	26%
60 or More Minutes	192,198	6%
Total	2,989,879	100%

Data Source: 2023 1-year ACS

Education:

Educational Attainment by Employment Status (Population 16 and Older)

Table 44 - Educational Attainment by Employment Status

Educational Attainment	In Labor Force		Not in Labor Force
	Civilian Employed	Unemployed	
Less than high school graduate	175,070	15,411	126,552
High school graduate (includes equivalency)	722,737	28,684	262,341
Some college or Associate's degree	791,179	22,463	177,894
Bachelor's degree or higher	974,115	15,966	116,120

Data Source: 2023 1-year ACS

Educational Attainment by Age

Table 45 - Educational Attainment by Age

	Age				
	18–24 yrs	25–34 yrs	35–44 yrs	45–65 yrs	65+ yrs
Less than 9th grade	17,661	29,584	33,907	58,595	44,531
9th to 12th grade, no diploma	74,208	50,551	48,985	95,411	79,455
High school graduate, GED, or alternative	260,128	257,148	220,655	537,478	468,758
Some college, no degree	201,776	171,629	166,422	315,714	218,105
Associate's degree	25,867	72,133	97,341	170,096	84,074
Bachelor's degree	78,652	220,483	204,585	310,292	146,951
Graduate or professional degree	8,031	91,332	106,884	174,177	139,694

Data Source: 2023 1-year ACS

Educational Attainment – Median Earnings in the Past 12 Months

Table 46 – Median Earnings in the Past 12 Months

Educational Attainment	Median Earnings in the Past 12 Months
Less than high school graduate	\$33,420
High school graduate (includes equivalency)	\$39,496
Some college or Associate's degree	\$46,180
Bachelor's degree	\$60,573
Graduate or professional degree	\$74,916

Data Source: 2023 1-year ACS

Based on the Business Activity table above, what are the major employment sectors within the state?

Indiana has long been a leader in advanced manufacturing, engineering, agriculture, biopharma, and life sciences. The three largest employment sectors in Indiana (entire state) are education and health care services (656,468 jobs, 22.7% of jobs in the state), manufacturing (527,506 jobs, 18.3% of jobs in the state), and retail trade (291,540 jobs, 10.1% of jobs in the state). These are also the three employment sectors that employ the most workers in the state.

The U.S. Bureau of Labor Statistics additionally publishes a “location quotient” for occupations to assess the concentration of workers by occupation compared to the nation as a whole. Higher location quotients signify local concentrations of employment in that occupation relative to concentrations in that industry in the country as a whole. The occupations with the highest location quotients in Indiana are metal-refining furnace operators and tenders, metal pourers and casters, and engine and other machine assemblers.

Describe the workforce and infrastructure needs of business in the state.

According to Indiana’s 2024-2027 Workforce Innovation and Opportunity Act (WIOA) Plan²¹, Indiana has two main workforce needs:

1. A decline in the number of workers available due to demographic shifts as employment reached an all time high: historically low unemployment in Indiana continues to squeeze the labor force (though unemployment remains below the national average), along with decreased (though still relatively high) labor force participation due in part to the ongoing retirement of Baby Boomers. The state has viewed the tight labor market and influx of federal projects as an opportunity to engage groups traditionally excluded from the workforce, developing initiatives to engage untapped talent pools including veterans, justice-involved individuals, people with disabilities and others.
2. A mismatch in workers’ skills and employers’ demand for highly technically skilled workers: many of the state’s workers lack the skills needed to remain competitive in an economy increasingly dependent on digital and technical skills and increasingly reliant on artificial intelligence (AI) and automation. Rapid change and disruption will continually require on-going training and skills development for workers. There is also a need for employer-led skills development initiatives. In response to the need for an increasingly skilled workforce, Indiana has worked to increase its college-going rate, which declined annually from 2015 to 2022 and college-going increased between 2022-2023 for the first time in 13 years. Indiana is a national leader in helping individuals obtain high-quality, short-term credentials for in-demand jobs because of the focus and efforts of more than a decade, but it lags in other areas, such as associate degrees.

²¹ https://wioaplans.ed.gov/sites/default/files/pdfs/state-plan/2024/Indiana_PYs_2024-2027.docx

Sectors that are projected to see greatest increase in employment from 2021 to 2031 include health care and social assistance (+45,029 jobs); accommodation and food services (+26,418 jobs); professional, scientific, and technical services (+20,845 jobs); transportation and warehousing (+18,310 jobs); and educational services (+13,585 jobs). The only sectors that are projected to see a decrease in employment in that time period are retail trade (-4,749 jobs); government (-1,611 jobs); and utilities (-879 jobs). Workforce needs in the state's three top industries by employment—included in the WIOA Plan and informed by projections from the U.S. Bureau of Economic Analysis, Bureau of Labor Statistics—are as follows:

- Manufacturing is expected to add 9,100 jobs between 2021 and 2031, with especially strong growth in transportation equipment manufacturing and job losses in machinery manufacturing, primary metal manufacturing, and fabricated metal product manufacturing. With nearly a quarter of the manufacturing sector's workforce 55 years and older, Indiana is focused on adapting workforce training programs and technology to ensure small, medium, and large-sized manufacturers are equipped with the talent needed for the future of manufacturing.
- Health care and social assistance will add more jobs than any other sector between 2021 and 2031 (+45,029 jobs), a nearly 10.5% job growth over ten years. All subsectors are expected to increase employment, with greatest growth in ambulatory health care services, social assistance, hospitals, and nursing and residential care facilities. While this sector has a strong talent pipeline, with nearly 66% of its workforce being between the ages of 25 and 54, relatively low wages may be a threat: average annual wage for health care and social assistance jobs in Indiana is \$57,528, which is less than the national average of \$63,710.
- Retail trade is projected to lose 4,749 jobs overall between 2021 and 2031—the largest projected decrease in jobs for a sector. Employment decreases within the sector are expected to be greatest in food and beverage stores and gasoline stations. Subsectors expected to add jobs include motor vehicles and parts dealers, as well as building material and garden equipment and supplies dealers. Fewer workers will be required to meet the projected growth in output for the retail sector.

Within the State's workforce development activities, there are needs for:

- Greater alignment and integration across programs and systems: case managers have limited awareness of job seekers' interactions with multiple programs, in part due to data system non-integration, and program staff are often unfamiliar with other resources to direct jobseekers to;
- Greater awareness of workforce system activities and services: Hoosiers often don't know what opportunities are available to them;
- Increased enrollment in postsecondary and training programs to meet the demands of an increasingly automated and technical skills-driven economy: this may be improved with a statewide marketing campaign; and
- Developing and adopting retention strategies and attracting workers from other areas to make up for Baby Boomers aging out of the workforce.

Describe any major changes that may have an economic impact, such as planned public or private sector investments or initiatives that have affected or may affect job and business growth opportunities during the planning period. Describe any needs for workforce development, business support or infrastructure these changes may create.

This excerpt from Indiana's 2024-2027 Workforce Innovation and Opportunity Act (WIOA) Plan²² summarizes major changes in Indiana's economy since the previous Consolidated Plan period and the effects that these changes will have in the coming years:

- Three major federal infrastructure bills passed during the 117th Congress (2022) and are bringing an unprecedented influx of financial investment and workforce opportunity to Indiana. There will be new jobs and increased talent demand in emerging industries including microelectronics and semiconductors, electric vehicles and mobility systems, smart manufacturing and robotics, and clean and alternative energy production.
- Key infrastructure projects, such as high-speed internet and enhancements to Indiana's roads, bridges, and waterways, are driving additional need for skilled tradespeople. Similarly, through programs established in this federal legislation, Indiana was awarded technology and innovation hubs in clean hydrogen energy through the Department of Energy, microelectronics through the Department of Defense, and biotechnology (building on the assets of Eli Lilly, Elanco, and Corteva as a foundation) through the Department of Commerce. Each of these will build upon the State's existing economic strengths to create new sectors and they will spur the need for new training programs and strategies. To that end, each hub application submitted on behalf of the State by the Applied Research Institute included plans to expand workforce development efforts in these sectors. Coordination at the State level, among local partners and across industry sectors is critical, as these projects significantly increase the demand and competition for workers where there are already existing labor constraints. Meanwhile, the State remains committed to in-demand jobs that are critical to the well-being of our communities, including healthcare and social assistance, education, public safety, and more.

In 2024, Indiana experienced an eighth consecutive record-breaking year for economic development, community development and entrepreneurship. The Indiana Economic Development Corporation (IEDC) secured 169 commitments from companies to locate or expand in Indiana, making plans to invest more than \$39.2 billion (+37% from 2023) in their operations and create 17,062 new jobs with an average wage of \$36.09/hour – or approximately \$75,067 annually (+7% the national average wage and +28% the state average wage). This marks the highest capital investment and annual record for average wages since the IEDC was established in 2005. Of these commitments, more than 72% are from companies already operating in Indiana committing to continued growth, nearly one third are from small businesses with less than 500 employees, 21% are from companies growing in rural and mixed-rural communities, and 20% are from foreign-owned businesses. The IEDC also helped launch 482 new small businesses and awarded

²² https://wioaplans.ed.gov/sites/default/files/pdfs/state-plan/2024/Indiana_PYs_2024-2027.docx

another \$500 million in quality of place funding to communities across the state through READI 2.0 (an expansion of the READI program, which awarded funding to support quality of place and quality of life initiatives in Indiana's 15 regions representing all 92 counties).²³

Indiana Governor Eric J. Holcomb and Indiana Secretary of Commerce David Rosenberg highlighted the 2024 economic successes in each focus area of the Indiana Economic Development Corporation's (IEDC) strategic vision, concluding an eighth consecutive record-breaking year for economic development, community development and entrepreneurship in Indiana. In 2024, the IEDC secured more than \$39.2 billion of committed capital investment – a new record, helped launch 482 new small businesses, and awarded another \$500 million in quality of place funding to communities across the state through READI 2.0.

In 2024, the IEDC secured 169 commitments from companies to locate or expand in Indiana, making plans to invest more than \$39.2 billion (+37% from 2023) in their operations and create 17,062 new jobs with an average wage of \$36.09/hour – or approximately \$75,067 annually (+7% the national average wage and +28% the state average wage). This marks the highest capital investment and annual record for average wages since the IEDC was established in 2005. Of these commitments, more than 72% are from companies already operating in Indiana committing to continued growth, nearly one third are from small businesses with less than 500 employees, 21% are from companies growing in rural and mixed-rural communities, and 20% are from foreign-owned businesses.

How do the skills and education of the current workforce correspond to employment opportunities in the state?

The figure below shows that educational attainment has increased in Indiana over the past ten years. Since 2013,

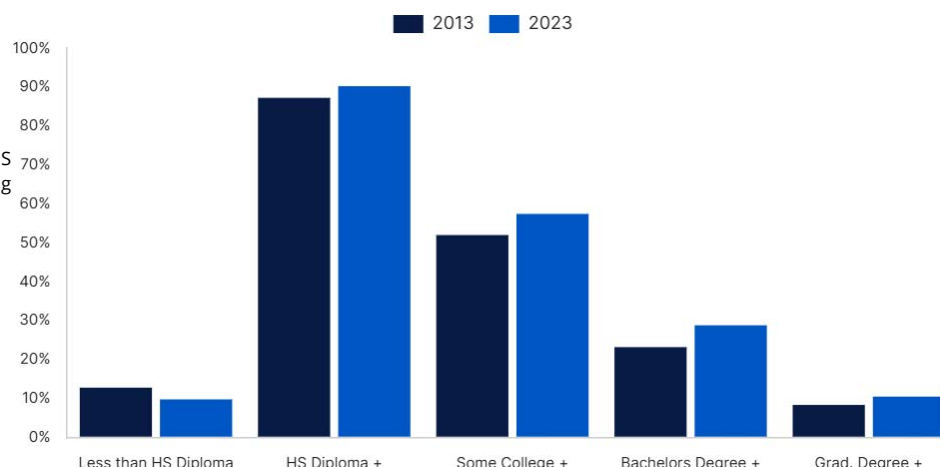
- The share of residents with less than a high school diploma decreased from 13% to 10%,
- The share of residents with a high school diploma or higher increased from 87% to 90%,
- The share of residents with some college or higher increased from 52% to 57%,
- The share of residents with a bachelors degree or higher increased from 23% to 29%, and
- The share of residents with a graduate degree increased from 8% to 11%.

²³ More information on recent developments in Indiana's economy is available in this 1/10/2025 article from the Indiana Economic Development Corporation: <https://www.iedc.in.gov/events/news/details/2025/01/10/iedc-closes-holcomb-term-with-eighth-consecutive-record-breaking-year-for-economic-development>

Educational Attainment, Indiana, 2013 and 2023

Source:

American Community Survey (ACS), US
Census Bureau from the Indiana Housing
Dashboard



Despite rising educational attainment overall since 2013, Indiana’s college-going rate has decreased annually from 2015 to 2022. Efforts to increase college-going have had some success as 2023 marked the first year that college enrollment in Indiana increased in the past 13 years.²⁴

The table below compares the share of jobs in Indiana with the shares of residents by highest level of educational attainment and the share of residents meeting educational requirements. The shares of the state’s jobs that require Bachelor’s and graduate degrees (22% and 13% respectively) are greater than the shares of the state’s population that have Bachelor’s and graduate degrees (18% and 10% respectively).

Distribution of Population 18+ by Highest Educational Attainment and Distribution of Jobs by Minimum Education Requirement, 2023

	% of Population 18+ by Highest Level of Educational Attainment	% of Population 18+ Meeting Education Requirement	% of Jobs by Minimum Education Requirement
High school diploma or equivalent	33%	90%	39%
Some college, no degree	20%	57%	7%
Postsecondary nondegree award			
Associate's degree	9%	37%	6%
Bachelor's degree	18%	28%	22%
Master's degree	10%	10%	13%
Doctoral or professional degree			

Note: % of Jobs by Minimum Education Requirement is based on all occupations at the 6-digit SOC level.

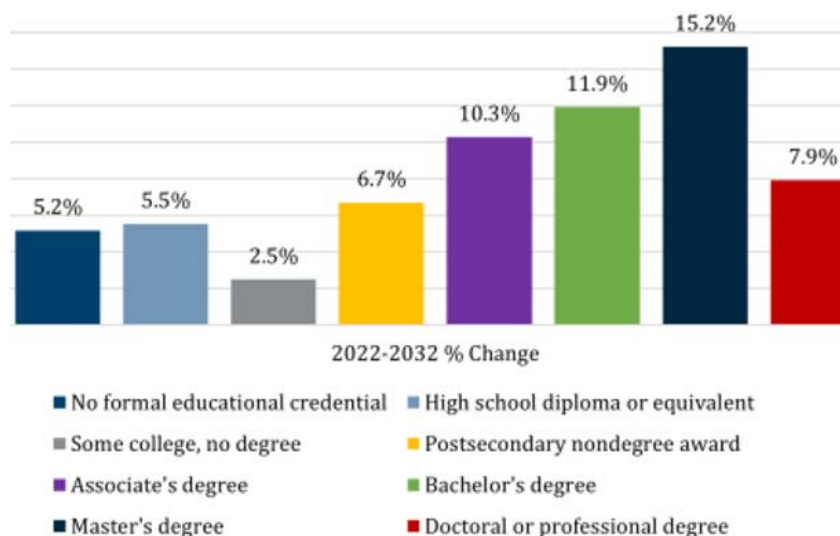
Source: 2023 1-year ACS estimates (Educational Attainment) and Indiana 2024-2027 WIOA Plan, p. 29- data from BLS Occupational Employment and Wage Statistics (OEWS).

²⁴ Indiana’s 2024-2027 Workforce Innovation and Opportunity Act (WIOA) Plan

The figure below from Indiana’s 2024-2027 Workforce Innovation and Opportunity Act (WIOA) Plan shows that Indiana’s job growth from 2022 to 2032 is expected to be fastest in occupations that require an Associate’s degree (+10.3%), Bachelor’s degree (+11.9%), Master’s degree (+15.2%), and Doctoral or professional degree (+7.9%). Jobs that do not require postsecondary education remain critically important; however, an increasing share of jobs will require a postsecondary credential as an entry-level requirement.

Projected Job Growth by Minimum Educational Requirement, Indiana, 2022–2032

Source:
Indiana 2024-2027 WIOA Plan, p. 57.



The WIOA Plan finds that jobs with lower education requirements are more susceptible to disruption from automation than jobs requiring bachelor’s and graduate degrees, and that Hispanic/Latino and Black workers will be at greater risk for automation than White or Asian workers because the state’s Black and Hispanic/Latino residents earn postsecondary credentials at lower rates and disproportionately work in jobs with lower educational requirements.

Describe current workforce training initiatives supported by the state. Describe how these efforts will support the state's Consolidated Plan.

This section summarizes workforce training initiatives supported by the state using Indiana’s 2024-2027 Workforce Innovation and Opportunity Act (WIOA) Plan.

Indiana’s workforce system operates in 12 geographically defined regions. To date, there are 20 comprehensive offices known as WorkOne Centers (Indiana’s term for American Job Centers, which offer training referrals, career counseling, job listings, and similar employment-related services) throughout the State. In addition to the comprehensive offices, Indiana has more than 70 WorkOne affiliate sites and access points across the State. Some counties with lower population totals utilize mobile services and rotating staff, which strategically travel across regions to best reach the individuals in need of services. Each region has a local workforce development board (LWDB) to manage Core and Partner Programs to meet the needs of their specific region. The LWDBs also serve employers within the region by helping meet their talent needs. Core and Partner programs are outlined below.

Core Programs:

- Title I – Adult: Adult services funding is allocated to Indiana’s 12 LWDBs, and services are provided in three categories: basic career services, individualized career services, and follow-up services. Based upon the needs of the individual, the State of Indiana uses the appropriate activities to engage and/or re-engage a person into the workforce system. The adult program is available to anyone 18 years and older, with priority service given to those with barriers to employment (e.g., low income, long-term unemployment, ex-offender, public assistance recipient, etc.).
- Title I – Dislocated Worker: Dislocated Workers include workers that have been terminated or laid off, or have received a notice of termination or layoff from employment; are eligible for or have exhausted unemployment insurance; have demonstrated an appropriate attachment to the workforce, but is not eligible for unemployment insurance and is unlikely to return to a previous industry or occupation; have been terminated or laid off or received notification of termination or layoff from employment as a result of a permanent closure or substantial layoff; are employed at a facility where the employer has made the general announcement that the facility will close within 180 days; were self-employed but is unemployed as a result of general economic conditions in the community or because of a natural disaster; or are a displaced homemaker who is no longer supported by another family member.
- Title I – In-School Youth: In-school youth are classified as youth who are attending secondary or postsecondary schools, not younger than the age of 14 and not older than 21 at time of enrollment. These youth are from low income backgrounds and may be basic skills deficient, an English language learner, an offender, a homeless individual or runaway, an individual in foster care or who has aged out of the foster care system, or has attained 16 years of age and left foster care for kinship guardianship or adoption, a child eligible for assistance under the social security act, an individual who is pregnant or parenting, an individual with a disability or an individual who requires additional assistance to complete an educational program or to secure or hold employment.
- Title I – Out-of-School Youth: Out-of-School youth are classified as youth who are not attending any school (as defined under State law), not younger than 16 nor older than 24 at the time of enrollment. These youth may be a school dropout, a youth who is within the age of compulsory school attendance but has not attended school for at least the most recent complete school year calendar quarter; a recipient of a secondary school diploma or its recognized equivalent who is a low-income individual and is either basic skills deficient or an English language learner; an offender; a homeless individual, a homeless child or youth, or a runaway; an individual in foster care or who has aged out of the foster care system or who has attained 16 years of age and left foster care for kinship guardianship or adoption, a child eligible for assistance under the social security act, or in and out-of- home placement; an individual who is pregnant or parenting; an individual with a disability; or a low-income individual who requires additional assistance to enter or complete an educational program or to secure or hold employment.

- Title II – Adult Education and Family Literacy Act: Adult education in Indiana ensures individuals have access to educational and career services. Through foundational skills development, adult education provides the remediation and advancement in academic competencies that allow Hoosiers the prospect of social and economic mobility.
- Title III – Wagner-Peyser: Wagner-Peyser funds provide State staff in the WorkOne Centers to support jobseekers, to provide employer engagement and recruitment services, and to fund the labor exchange/job matching system. Employer services are also provided through an online labor exchange system or through business service staff in WorkOnes. The goal of the Wagner-Peyser program is to bring together individuals seeking employment with employers seeking workers.
- Title IV – Vocational Rehabilitation: Vocational Rehabilitation services provide quality individualized services to enhance and support people with disabilities to prepare for, obtain or retain employment. Indiana Vocational Rehabilitation (VR) is a program for high school students and adults with disabilities. VR counselors can help eligible individuals with an identified disability (IEP or a 504 plan or with other physical, mental health, or learning concerns) gain skills, find a job, and start a career.

Partner Programs:

- Senior Community Service Employment Program (SCSEP): The Senior Community Service Employment Program is a community service and work-based job training program for older Americans. Participants must be at least 55 years old, unemployed, and have a family income of no more than 125% of the federal poverty level. Enrollment priority is given to veterans and qualified spouses, then to individuals who are over 65 years of age, have a disability, have low literacy skills or limited English proficiency, reside in a rural area, are homeless or at risk of homelessness, have low employment prospects, or have failed to find employment after using services through the WorkOne.
- Carl D. Perkins: Career and technical education programs authorized under the Carl D. Perkins Career and Technical Educational Act and is a funding pool provided to secondary and post-secondary career and technical education programs. Recipients in Indiana are Career and Technical Education (CTE) Districts, Vincennes University, and Ivy Tech Community College.
- Trade Adjustment Assistance (TAA)[1]: TAA assists workers who have been dislocated due to foreign trade impacts. The goal of the TAA program is to help each worker participating in the program obtain suitable employment whenever possible and return to employment as quickly as possible. The TAA Program provides trade-affected workers with opportunities to obtain the skills, credentials, resources, and support necessary to become reemployed in a good job. Together with its workforce development partners in the one-stop delivery system authorized under the Workforce Innovation and Opportunity Act (WIOA), the TAA Program helps retrain, retool, and rebuild the American workforce.

- Jobs for Veterans State Grant Programs (JVSG): JVSG funds are provided to states to fund two staff positions: the Disabled Veterans' Outreach Program Specialist (DVOP) and the Local Veterans' Employment Representative (LVER). These positions are fully integrated into the WorkOne offices. The DVOP's role is to provide individualized career services to veterans and other eligible persons with significant barriers to employment through case management. The LVER's role is to facilitate employment opportunities and advocate on behalf of veterans with employers.
- Unemployment Insurance (UI): In the State of Indiana, an individual is eligible for UI after submitting a claim through either the internet or through the nearest full service WorkOne Career Center. Information required to complete a claim includes the last employer's name, mailing address, phone number, and the dates of employment. Additionally, an individual must submit their address, social security number, and a telephone number.
- Temporary Assistance for Needy Families (TANF) Program: TANF provides financial assistance to families in need. To receive TANF benefits you must be a family in-need with a dependent child (a person under the age of 18, or 18 if a full-time student in secondary school). These individuals/families must meet income requirements which vary dependent on the size of the assistance group. Individuals must meet State residency, citizenship/immigration status, employment, and child support assignment requirements.
- Supplemental Nutrition Assistance Program (SNAP E&T) and Temporary Assistance for Needy Families (TANF): Indiana Manpower Placement and Comprehensive Training (IMPACT) provides services designed to help recipients of SNAP and TANF achieve economic self-sufficiency through education, training, job search and job placement activities. IMPACT offers much more than a job training services because it seeks to address a broad range of barriers that may inhibit individuals from seeking and maintaining employment. Over the next two years, we will evaluate potential duplicative services between IMPACT and our WorkOnes for value and outcomes.

There are a number of regional and local programs that also operate within the workforce system and broader talent development system as a whole. The state aims to improve cross-agency collaboration and program integration and to broaden awareness of activities and programs available for individuals and employers at the local level.

Describe any other state efforts to support economic growth.

The Governor's Workforce Cabinet was formed in 2018 to ensure a talent-driven education and workforce system by addressing current and future needs for Indiana employers and individuals, strengthen Indiana's economy by integrating state and federal resources, and provide strategic alignment for state agencies and organizations driving workforce, education and economic development.

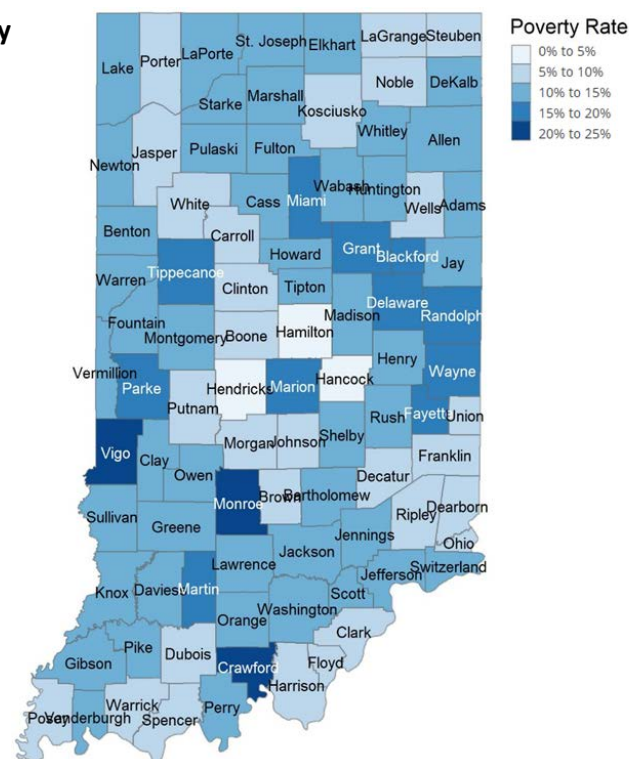
MA-50 Needs and Market Analysis Discussion

Are there areas where households with multiple housing problems are concentrated? (include a definition of "concentration")

As discussed earlier in this report, households living in poverty are very likely to have a range of housing and supportive services needs. Poverty is highest in Crawford County at 24% and next highest in Monroe, Vigo, and Delaware counties at 20%. Poverty is also high—over 15%—in Tippecanoe, Grant, Blackford, Parke, Wayne, Fayette, and Martin counties.

Poverty Rate by County, Indiana, 2023

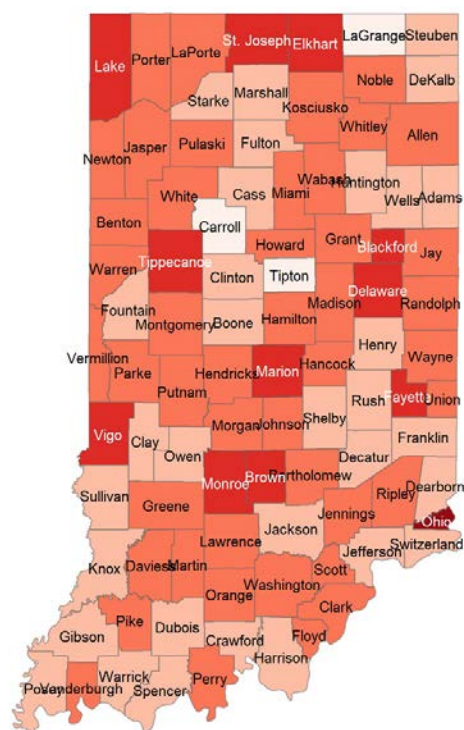
Source:
2023 5-year ACS
estimates.



The CHAS data in NA-10 show that cost burden and severe cost burden are the most common housing problems faced by owners and renters. The maps on the following page show rates of renter and owner cost burden (greater than 30%, including both cost burden and severe cost burden). Renter cost burden is highest in Ohio County (62%), followed by Monroe, Brown, and Tippecanoe counties (58%-59%). Half or more of renter households are also cost burdened in Vigo, Fayette, Delaware, Blackford, Lake, Marion, St. Joseph, and Elkhart counties. At least 40% of renter households are cost burdened in 57 of Indiana's 92 counties.

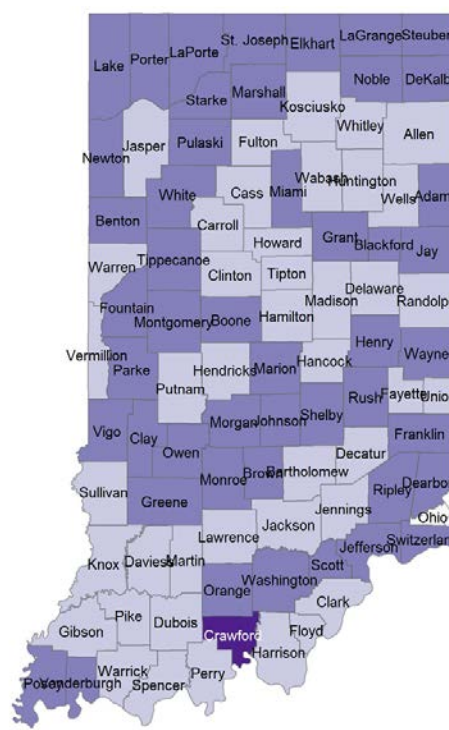
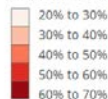
The following counties have poverty rates of 15% or more and rates of cost burden that are at least 18% for owner households and at least 45% for renter households: Vigo, Blackford, Marion, and Lake counties.

Percent of Renters and Owners Cost Burdened > 30%, 2023

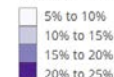


Source:

Renter cost burden



Owner cost burden



2023 5-year ACS estimates.

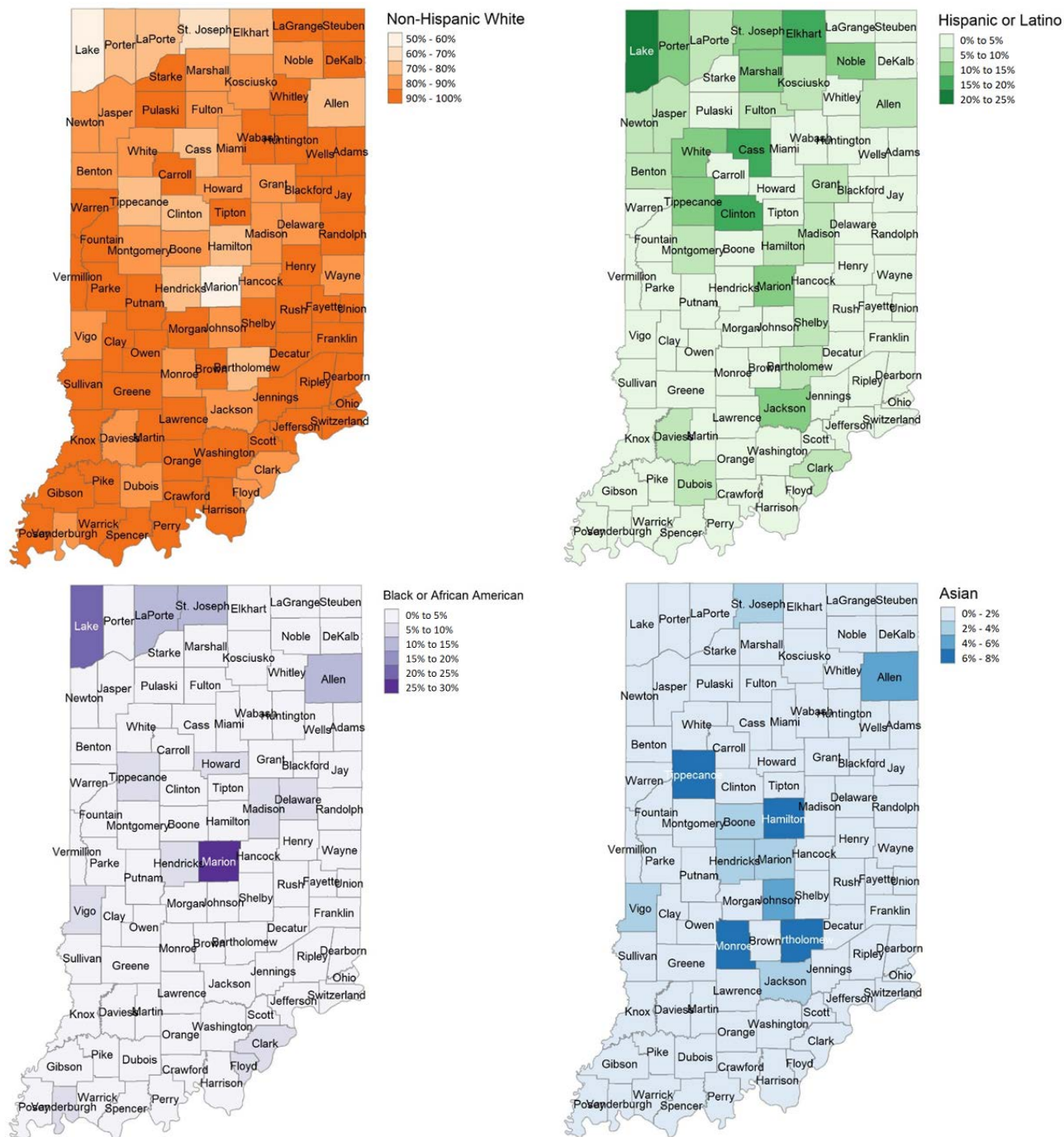
Are there any areas in the jurisdiction where racial or ethnic minorities or low-income families are concentrated? (include a definition of "concentration")

The state's largest racial and ethnic groups are mapped as shares of county populations below. Concentrations of American Indian, Alaska Native, Native Hawaiian or Pacific Islander, and other residents have not been mapped because these residents constitute very small shares of the population in each county. American Indian, Alaska Native residents are most concentrated in Pike County at 1.3% of the population (0.3% or less in all other counties). Native Hawaiian or Pacific Islander residents are most concentrated in Brown and Vanderburgh counties where they constitute 0.3% of the population. Residents of other races and ethnicities are most concentrated in Fulton County at 1.5% of the population. The maps show that:

- Concentrations of non-Hispanic White residents are high across the state, making up at least 70% of the populations of all counties except for Marion County (where non-Hispanic White residents make up 50% of the population) and Lake County (where non-Hispanic White residents make up 52% of the population), indicating that Marion and Lake counties have the greatest concentrations of residents of color (50% and 48%, respectively). Residents of color constitute 28-30% of the populations of St. Joseph, Allen, Elkhart, and Tippecanoe counties.
- Hispanic residents constitute up to 20-21% of county populations in Lake and Elkhart counties and 18-19% of county populations in Clinton and Cass counties. Hispanic residents constitute less than 5% of the population in 63 of the state's 92 counties.

- Black or African American residents make up the greatest share (27%) of the population in Marion County, followed by Lake County (23%). Black or African American residents make up 12% or less of the population in all other counties.
- Asian residents constitute 7-8% of the population in Tippecanoe, Bartholomew, Hamilton, and Monroe counties and 5% or less of the population in all other counties.

Residents by Race and Ethnicity as Shares of County Populations, Indiana, 2023

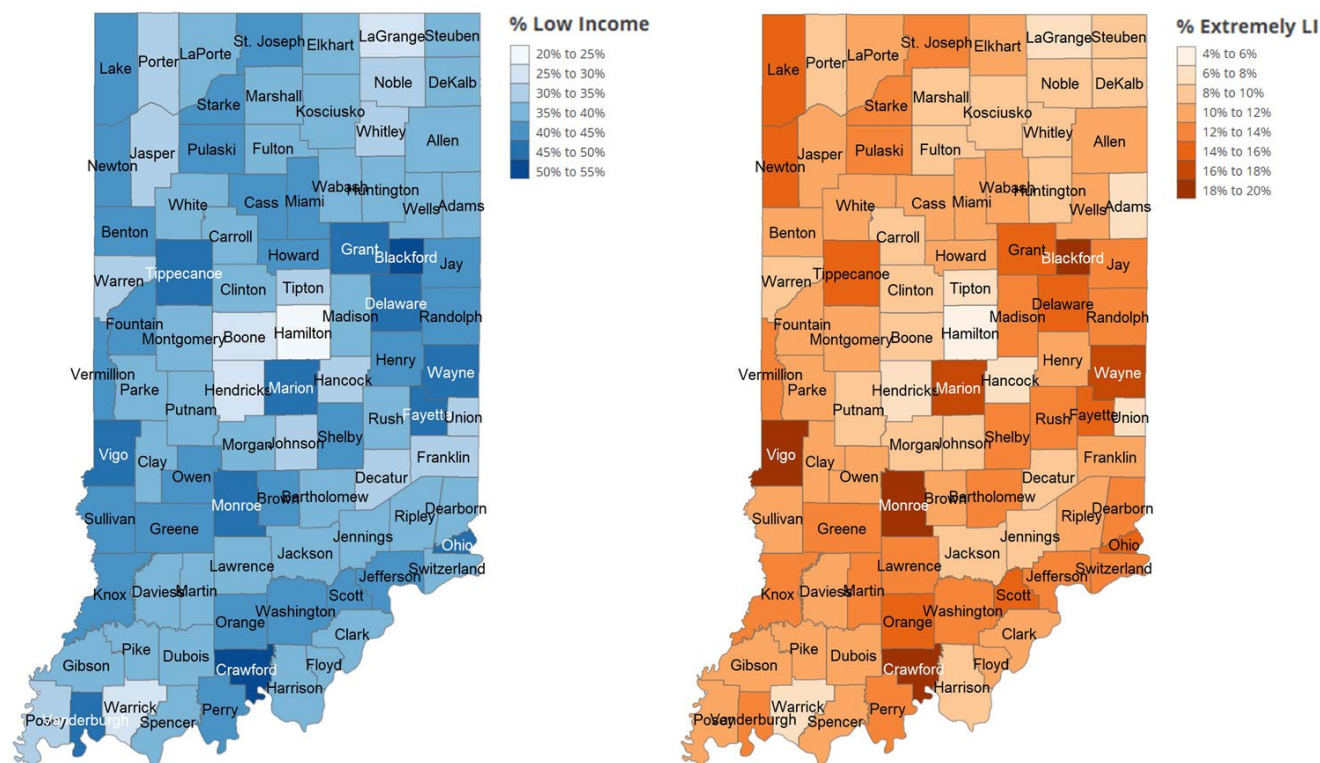


Source: 2023 5-year ACS estimates and Root Policy Research.

The maps below show the share of households earning low incomes (0-80% AMI) and extremely low incomes (0-30% AMI) by county based on local AMI limits for a 2-person household. Extremely low income households make up the largest shares of the population (18-19%) in Blackford, Monroe, Crawford, and Vigo counties. Other counties with large shares of households earning extremely low incomes (15-16%)

are Marion, Wayne, Tippecanoe, Delaware, and Fayette counties. Low income households—those with incomes up to 80% AMI—make up over half of households (52-53%) in Blackford and Crawford counties. Low income households also make up 45% or more of households in Marion, Vigo, Ohio, Grant, Delaware, Monroe, Tippecanoe, Wayne, Vanderburgh, and Fayette counties.

Shares of Households Earning Low and Extremely Low Incomes, Indiana, 2023



Note: Low-income households include those earning 0-80% AMI. Extremely low-income households include those earning 0-30% AMI.

Source: 2023 5-year ACS estimates and Root Policy Research.

Counties where populations are at least 15% people of color (defined as not non-Hispanic White) and at least 40% of households earn low incomes (0-80% AMI) are:

- Marion County
- Lake County
- St. Joseph County
- Tippecanoe County
- Cass County
- Vanderburgh County
- Monroe County
- Howard County
- Grant County
- Vigo County
- Delaware County

What are the characteristics of the market in these areas/neighborhoods?

As noted in the previous answer, counties where populations are at least 15% people of color (defined as not non-Hispanic White) and at least 40% of households earn low incomes (0-80% AMI) are:

- Marion County
- Lake County
- St. Joseph County
- Tippecanoe County
- Cass County
- Vanderburgh County
- Monroe County
- Howard County
- Grant County
- Vigo County
- Delaware County

Of these 11 counties, median income renter households can afford median gross rent in only three counties: Cass, Howard, and Grant counties. Housing units in these counties are more likely than housing units in other counties to be units in multifamily buildings of five or more units (18% vs. 9%), less likely than housing units in other counties to be single family detached homes (66% vs. 77%), and less likely than housing units in other counties to be mobile homes (2% vs. 6%). The combined housing stocks of these counties have a slightly higher residential vacancy rate (9.7%) than the housing stock in all other areas of the state (8.9%).

MA-60 Broadband Needs of Housing occupied by Low- and Moderate-Income Households - 91.210(a)(4), 91.310(a)(2)

Describe the need for broadband wiring and connections for households, including low- and moderate-income households and neighborhoods.

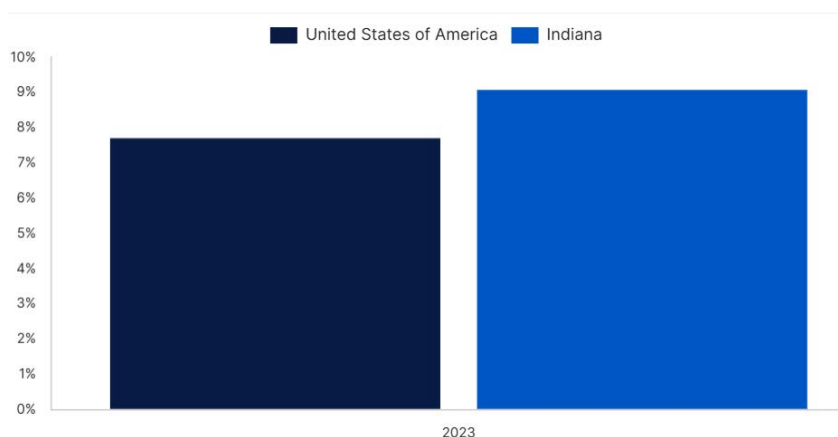
The figure below shows that 9.1% of Indiana households do not have broadband access—a large share relative to that of United States households that lack broadband access (7.7%).

Share of Households

**Without Broadband Access,
Indiana and United States,
2023**

Source:

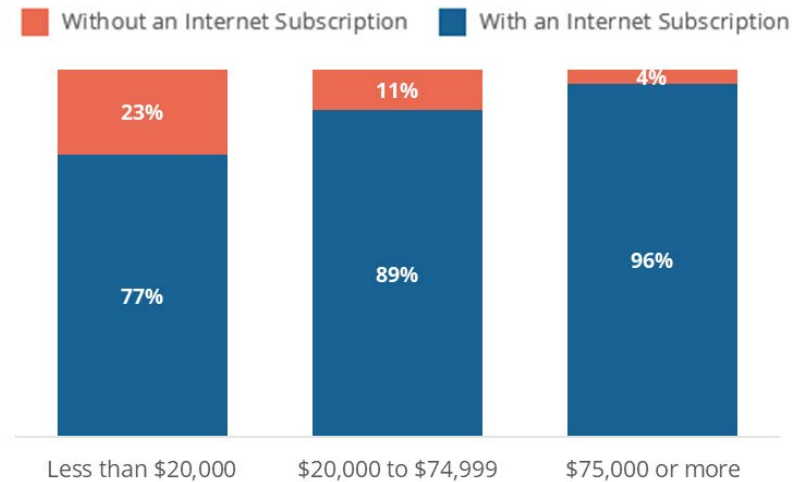
American Community Survey (ACS), US
Census Bureau from the Indiana
Housing Dashboard



The figure below shows that there are significant differences in broadband access by income in Indiana: 23% of households earning less than \$20,000 do not have an internet subscription. Access improves for households with incomes \$20,000 to \$74,999: 11% of these households do not have an internet subscription. Very few—4% of—households with incomes \$75,000 or more do not have an internet subscription.

Internet Subscription Rates by Income, Indiana, 2023

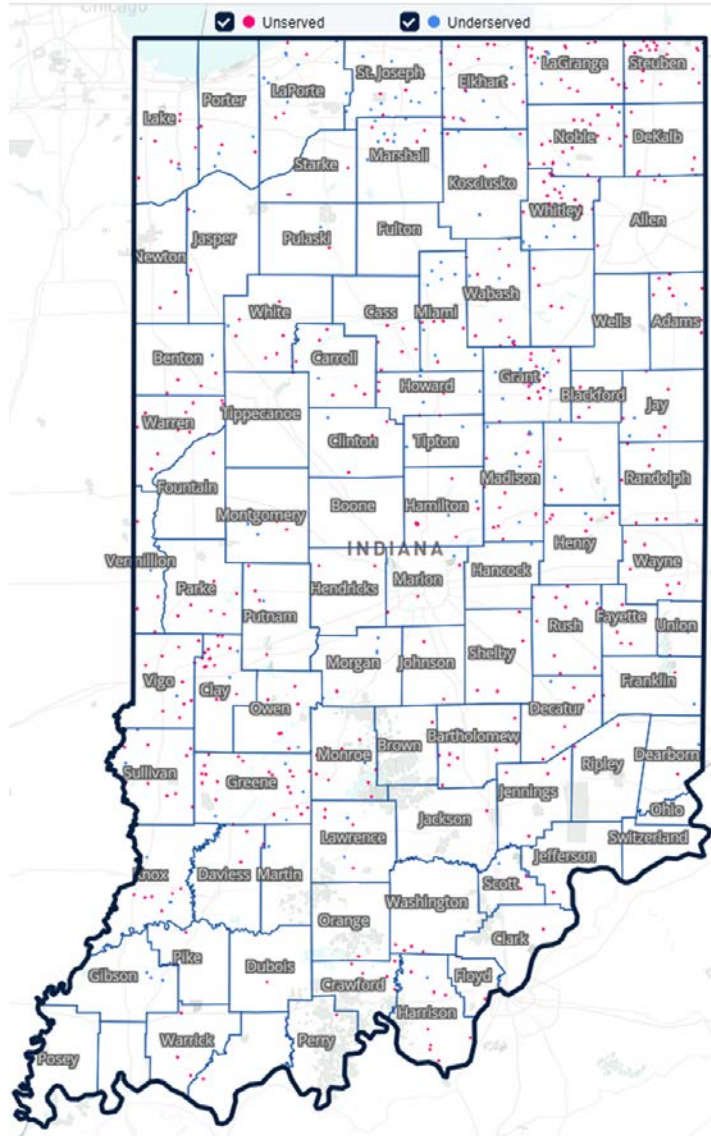
Source: 2023 1-year American
Community Survey (ACS).



The mission of the Indiana Broadband Office is to assist residents in need of affordable and reliable broadband connectivity. This mission of reaching Hoosiers where they live, work and play is accomplished by communicating with stakeholders, providing resources to communities and leveraging established relationships with elected officials, associations and providers. The Indiana Broadband Office supports OCRA's Indiana Connectivity Program, a state funded grant that can help many one-off locations get connected. Owners of residential and business locations unserved or underserved (access to actual speeds less than 100 Mbps download and 20 Mbps upload) can apply to receive broadband service. The figure below shows unserved and underserved areas of the state on the Indiana Broadband Map.

Locations Unserved and Underserved by Broadband, Indiana, 2023

Source: Indiana Broadband Map,
<https://connectingindiana.com/register/bead/map>



Describe the need for increased competition by having more than one broadband Internet service provider serve the jurisdiction.

Indiana's broadband expansion plan aims to provide service where it is lacking in Indiana, even if that is through only one provider. In a state like Indiana with many rural areas, it may be infeasible or too costly to ensure that multiple providers exist.

MA-65 Hazard Mitigation - 91.210(a)(5), 91.310(a)(3)

Describe the jurisdiction's increased natural hazard risks associated with climate change.

This section uses findings of the 2024 State of Indiana Standard Multi-Hazard Mitigation Plan to analyze the State of Indiana's natural hazard risks. The table below shows the incidence of the top ten types of storm events in Indiana from 2002 to 2022.

Top 10 Storm Events, Indiana, 2002–2022

Source:

2024 State of Indiana Standard Multi-Hazard Mitigation Plan.

Event Type		Occurrences 2002-2022
1	Thunderstorm Wind	10,010
2	Hail	5113
3	Flood	3,005
4	Flash Flood	1,753
5	Winter Weather	1,703
6	Winter Storm	1,534
7	Heavy Snow	905
8	Tornado	696
9	High Wind	683
10	Dense Fog	379

FEMA's National Risk Index (NRI) can be used to better understand the disproportionate risks facing certain residents of Indiana. The NRI utilizes source data for 18 different natural hazards along with social vulnerability indices and community resiliency rankings. By combining these three risk factors, the NRI applies an overall Risk Rating that considers the likelihood and impact of natural disasters, the social vulnerability of the area, and the measured community resilience. There are five counties in Indiana with a relatively moderate NRI rating: Lake, Allen, Hamilton, Marion, and Vanderburgh counties. While all other counties in Indiana have very low or relatively low ratings for risk to natural hazards overall, there are 8 counties that contain a census tract with a relatively high risk rating: Bartholomew, Harrison, Hendricks, Jefferson, Knox, Owen, Vanderburgh, and Vigo.

Lake, Allen, Johnson, Hamilton, Marion, and Vanderburgh counties have **relatively moderate** expected annual losses from natural hazards, and all other counties have relatively low or very low expected annual losses.

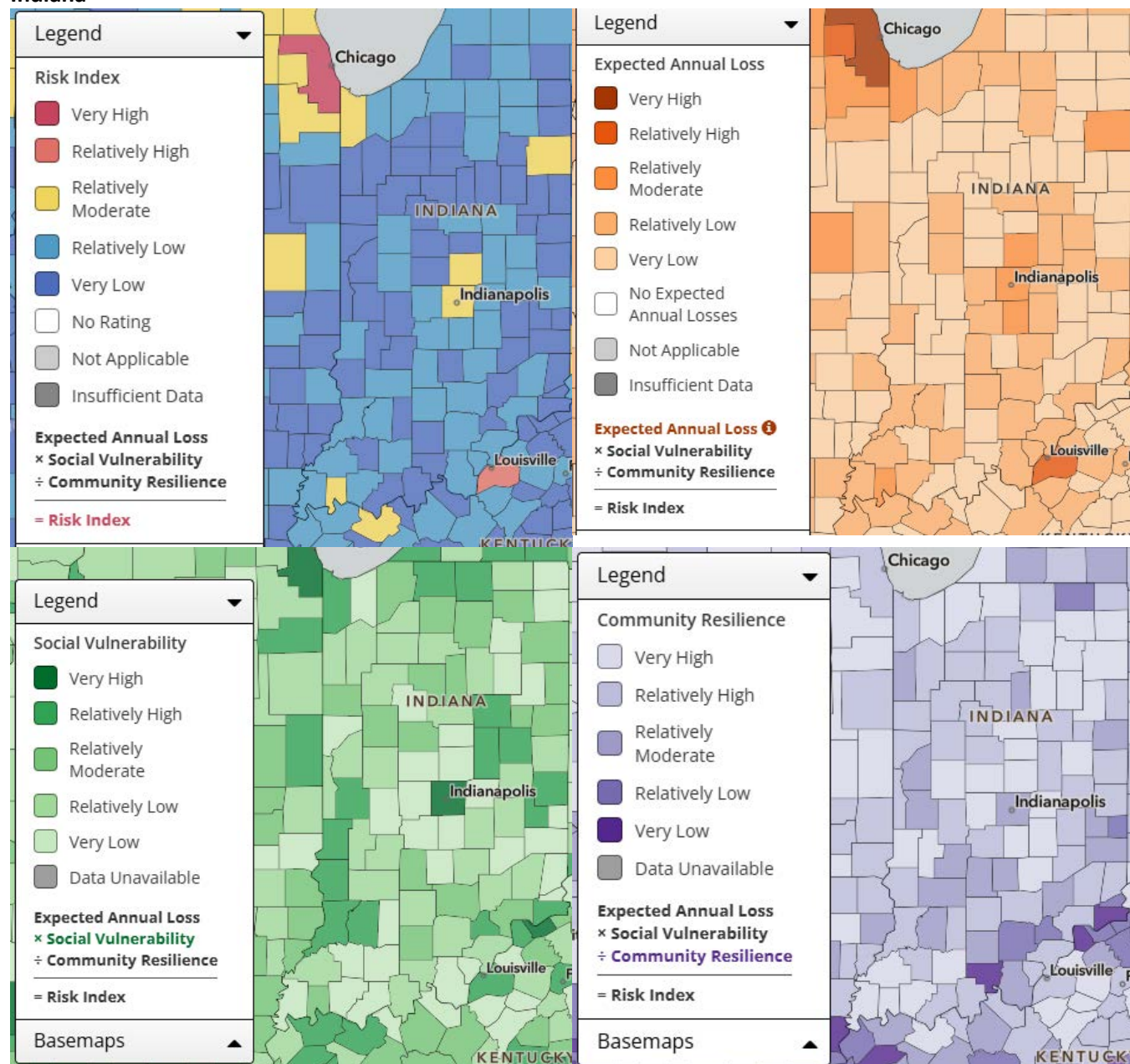
Social vulnerability is the susceptibility of social groups to the adverse impacts of natural hazards. Social vulnerability is very high in Marion County—meaning that Marion County has a social vulnerability ranking in the 80th-100th percentiles relative to all counties in the United states—and relatively high (60th-80th percentile in the country) in the following counties:

- Delaware
- Elkhart
- Fayette
- Grant
- Knox
- Lake
- Madison
- Parke
- St. Joseph
- Scott
- Sullivan
- Switzerland
- Vigo
- Wayne

While these are the only counties with relatively high or very high social vulnerability ratings, 88 of the state's 92 counties contain at least one Census tract with very high or relatively high social vulnerability.

Community resilience is the ability of a community to prepare for anticipated natural hazards, adapt to changing conditions, and withstand and recover rapidly from disruptions. Community resilience is very low—ranked in the lowest fifth of counties nationwide—in Crawford and Switzerland counties. Community resilience is relatively low—ranked in the 20th-40th percentile nationally—in LaGrange, Ohio, Scott, Union, and Washington counties. This means these counties are more likely to have more damages, injuries, and loss of life from disaster and will most likely have a harder time recovering from a disaster.

FEMA National Risk Index, Expected Annual Loss, Social Vulnerability, and Community Resilience, Indiana



Note: Ratings for Social Vulnerability and Community Resilience are on national percentiles: Very High = 80th to 100th percentiles; Relatively High = 60th to 80th percentiles; Relatively Moderate = 40th to 60th percentiles; Relatively Low = 20th to 40th percentiles; Very Low = 0th to 20th percentiles.

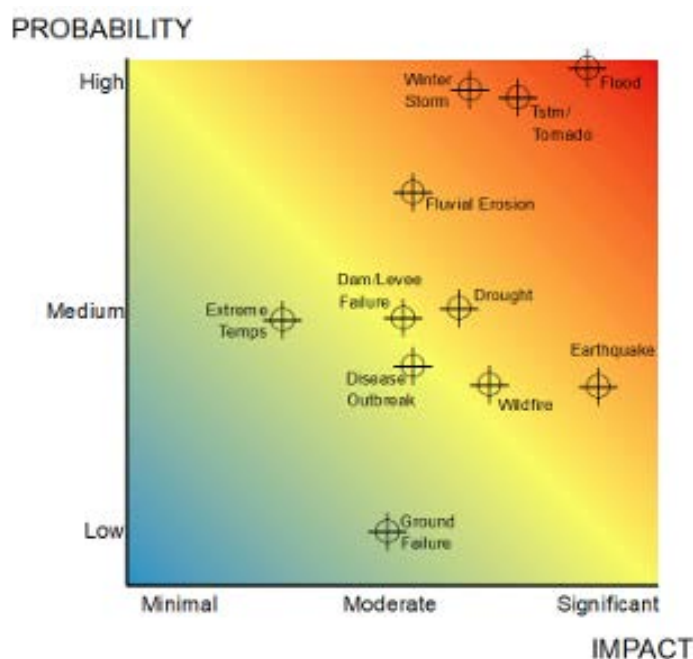
Source: FEMA National Risk Index, <https://hazards.fema.gov/nri/map>

The figure below presents the Hazards Risk Grid presented in the 2024 State of Indiana Standard Multi-Hazard Mitigation Plan. Probability and Impact ratings are summarized here:

- Probability:
 - Low = probable in the next 10 years
 - Medium = probable in the next 5 years
 - High = probable in the calendar year
- Impact:
 - Minimal = loss of public utilities, government, and social services up to 24 hours; response operations up to 72 hours; limited evacuations and sheltering required, local medical services can manage volume of injuries and fatalities
 - Moderate = local jurisdiction requires state assistance or mutual aid support, loss of public utilities, government, and social services up to 2 weeks; response operations up to 2 weeks; local area evacuations, shelter, and care of displaced residents and medical patients; local medical services cannot manage volume of injuries and fatalities.
 - High = local jurisdiction is overwhelmed and unable to effectively respond, complete loss of communications, massive state and federal response required; local medical services cannot manage fatalities and injuries; mass evacuation, sheltering, and care of displaced residents required; loss of public utilities, government, and social services for 30 days or more; response operations lasting up to 30 days may be required.

Hazards Risk Grid, Indiana

Source:
2024 State of Indiana Standard Multi-Hazard Mitigation Plan.



The three hazards with the highest probability are flood, tornado, and winter storm. The three hazards with the highest expected impact are flood, earthquake, and tornado. These four types of events are

discussed further here with information from the 2024 State of Indiana Standard Multi-Hazard Mitigation Plan:

- Flood: High probability; high impact. Flood events—including riverine and flash flooding—used to be rare in Indiana but are becoming more common. The National Risk Index for Riverine Flooding is relatively high in Bartholomew County and relatively moderate in Allen, Carroll, Clay, Crawford, Delaware, Greene, Harrison, Howard, Jackson, Johnson, Lake, Madison, Morgan, Owen, Perry, Tippecanoe, and Vigo counties.
- Tornado: High probability; moderate-significant impact. On March 31, 2023, 23 tornadoes touched down in 13 counties in Indiana leaving 5 people dead and 11 with injuries (WISH-TV, 2023). The March 31st outbreak of tornadoes eclipsed the yearly annual average for tornadoes in Indiana, which is 22 (WTHR, 2023) and is the fifth largest tornado outbreak event in Indiana history. The types of infrastructure impacted by future tornado events could include roadways, utility lines, railroads, bridges, and more. Physical impacts may include structural failure, damaging debris (trees or limbs), roofs blown off or windows broken by hail or high winds, impassable bridges and roadways, fires caused by lightning, and lost building functionality. The National Risk Index for tornadoes is very high in Lake and Marion counties and relatively high in Allen, Clark, Hamilton, Johnson, Porter, and Vanderburgh counties.
- Earthquake: Low-medium probability; significant impact. Earthquakes are also capable of producing a wide variety of secondary effects, including landslides and liquefaction (loss of cohesion of unconsolidated soils), fires, large waves or seiches in lakes, and damage or collapse of human structures. Many critical facilities, such as bridges, dams, and power stations, may be particularly sensitive to earthquake shaking. Residents of Indiana could be affected both by moderate-sized earthquakes within the state’s borders, as well as by larger earthquakes with epicenters outside of the state. Due to its proximity to the New Madrid seismic zone and exposure to the neighboring Wabash Valley seismic zone, the southwestern part of the state is considered the most earthquake-vulnerable portion of Indiana. The National Risk Index for earthquakes is relatively moderate in Marion and Vanderburgh counties and relatively low or very low in all other counties.
- Winter Storm: High probability; moderate-significant impact. Severe winter weather consists of various forms of precipitation and strong weather conditions. This may include one or more of the following: freezing rain, sleet, heavy snow, blizzards, icy roadways, extreme low temperatures, and strong winds. These conditions can cause human health risks such as frostbite, hypothermia, and death. The National Risk Index for winter weather is very high in Vanderburgh County and relatively high in Elkhart, Hamilton, Marion, Tippecanoe, Vigo, and Warrick counties.

Describe the vulnerability to these risks of housing occupied by low- and moderate-income households based on an analysis of data, findings, and methods.

As discussed in the 2024 State of Indiana Standard Multi-Hazard Mitigation Plan, certain populations require specific attention in mitigation planning to mitigate the severe impacts of disasters on them. It is crucial to identify these populations and formulate mitigation strategies to enhance their resilience to disasters. Although there are numerous types of vulnerable populations, the six vulnerable populations discussed in the 2024 State of Indiana Standard Multi-Hazard Mitigation Plan include:

- Low-income citizens
 - Disasters disproportionately affect impoverished populations because they are less likely to have the resources to cope with a disaster's impacts, which further entrenches them in the poverty cycle. Poverty in Indiana persists in both urban and rural areas.
- Non-English-speaking people
 - Non-English speakers are those who speak a language other than English at home. Some of the challenges emergency managers face in helping non-English speakers mitigate disasters include lack of multi-language emergency communications, cultural differences in the way information is interpreted, and mistrust of government services.
- People with disabilities
 - People with disabilities have physical, sensory, or mental impairments that limit their day-to-day activities. They may be physically challenged by lack of accessibility to services and community assets or cognitively challenged in understanding instructions following the event. Those with sensory disabilities may have difficulty communicating.
- Older adults
 - Older adults face many of the same challenges as people with disabilities including lack of transportation and physical or mental impairments. Additionally, many older adults may require medication or specialized healthcare.
- People without high school diplomas
 - The relationship between education and disaster vulnerability is not well understood. However, education is often associated with both income and poverty. Those with higher education are more likely to have higher incomes and more resources upon which to rely in the event of a disaster.
- Households without a vehicle
 - Lack of access to a vehicle heightens the vulnerability of individuals during a natural disaster, as transportation becomes a crucial factor in determining survival. Having reliable transportation is imperative for many reasons, encompassing safe evacuation, obtaining essential supplies, seeking shelter, and accessing vital medical services.

Counties with Highest Percentage of Vulnerable Populations, Indiana, 2022

% Non-English Primary Language	% in Poverty	% with Disability	% Aged 65+	% without High School Diploma	% Households Without a Vehicle
LaGrange (49.1%)	Monroe (21.8%)	Scott (24.0%)	Brown (24.5%)	LaGrange (32.7%)	LaGrange (27.2%)
Daviess (22.1%)	Switzerland (20.6%)	Grant (21.0%)	Ohio (21.8%)	Daviess (14.3%)	Daviess (15.7%)
Elkhart (21.4%)	Delaware (20.6%)	Orange (20.7%)	Blackford (21.2%)	Adams (9.6%)	Adams (12.7%)
Adams (17.4%)	Vigo (19.8%)	Switzerland (20.6%)	Tipton (20.9%)	Noble (9.4%)	Blackford (10.2%)
Cass (17.4%)	Crawford (19.2%)	Blackford (20.5%)	Warren (20.7%)	Elkhart (8.4%)	Jay (9.1%)

Source: 2024 State of Indiana Standard Multi-Hazard Mitigation Plan.

Tornadoes provide an example of how vulnerable populations are disproportionately affected by natural disasters. The 15.7% of the population over the age of 65 and 13.8% with a disability are more likely to lack physical ability or have limited mobility which makes getting to safety in a basement or storm cellar strenuous. 53% of dwellings in Indiana do not have basements, which means they need to know where to go for safety. The residents on the 2,208 parcels of manufactured homes may not have access to a safe shelter, which can lead to severe injury and/or loss of life.

Strategic Plan

SP-05 Overview

The SP section of the Consolidated Plan details the State of Indiana’s five-year strategic goals to address housing and community development needs with CDBG, HOME, ESG, HOPWA and NHTF—beginning with program changes for the five-year planning period.

The Office of Community and Rural Affairs recognizes the vital role of home modifications in supporting not only Hoosiers with disabilities but also those who are aging in place. OCRA aims to incorporate these modifications into the owner-occupied program as part of the 2025-2029 Consolidated Plan. Once developed, these updates to our programmatic policies will be communicated to the public. Furthermore, OCRA is actively working on the creation of additional programs to address other urgent needs that are not currently met by the existing program, with plans for their inclusion in the 2025-2029 Consolidated Plan and corresponding Action Plans.

OCRA has partnered with Stats Indiana, an Indiana University entity, a new measure of community resiliency. The Community Resilience Index is designed to be more forward-looking by focusing on a community’s capacity for future economic growth. The resilience index gauges this capacity for future growth along the following dimensions:

- Structure of local economy
- Entrepreneurial activity
- Human capital
- Social networks/ Social connectivity
- Broadband connectivity
- Wealth Gaps
- Homeownership (an indicator of community attachment)

Community Resilience Index scores, which are updated and published annually, can be found at: <https://www.stats.indiana.edu/topic/cdbg.asp>.

Regional bonus points will be substituted for Wastewater Drinking Water (WDW), Storm Improvement Program (SIP), Owner Occupied Rehabilitation Program (OOR), Main Street Revitalization Program (MSRP) and Planning (PL) program. The Community Resilience Index will be employed to revise the existing policy on bonus points related to regional collaboration, ensuring alignment with community resilience objectives. OCRA is dedicated to fostering and improving the resilience of rural communities. To support this initiative, each grant application will receive a maximum of 25 points for the submission of a community resilience improvement plan and their corresponding point awarded value from the Community Resilience Index as provided by Stats Indiana. The points awarded value are provided to grant applications that submit the required community resilience improvement plan as part of the application.

program specific review process.

Program Specific Points will be adjusted for the Wastewater Drinking Water (WDW) program.

- For WDW, OCRA will continue to adjust its dated User Rate Benchmarks to address legislative taskforce recommendations and to better align with other common funding sources. OCRA will explore additional adjustments to these benchmarks in future funding years.
- WDW - Combined utility rates for the ongoing operation and maintenance activities of the wastewater, drinking water, and/or stormwater systems.
 - 0 points – Less than \$55 combined user rates
 - 10 points – \$55-\$100 combined user rates
 - 25 points – More than \$100 combined user rates

Supporting communities' housing development needs through the planning program and facilitating proactive resilience building in communities through the planning program.. Adjustments to the local match percentage required for the Planning (PL) program will be set to at least 8% rather than 10%. Set a \$7,000 flat fee rather than 8% rate for indirect costs associated with administration fees for managing CDBG grants within the planning program.

The criteria for the Blight Clearance National Objective will be revised to facilitate the rehabilitation and restoration of historic buildings through the Public Facilities Program.

Program-specific elements will be adjusted to encourage sustainable practices by integrating green infrastructure into several programs. Planning Grant Program Specific Points will be adjusted to reduce documentation requirements

Program changes made in response to public comment:

The Blight Clearance Program will be expanded to address residential and non-residential buildings that pose significant health and safety concerns in communities and meet the definition of blight.

OCRA recognizes that communities throughout the state impacted by natural disasters frequently experience heightened financial needs and restricted access to resources. To assist these communities, additional bonus points will be granted to those affected by disasters. These bonus points are intended to help address some of the unmet needs within the CDBG program.

OCRA has adjusted the funding cycle for their planning and owner-occupied programs to include three rounds, with the possibility of a fourth round each year, contingent upon available funding. The planning and owner-occupied programs now require that community liaisons must be notified within 15 days of a funding round opening to be eligible to submit an application for that round. This notification must be specific to the funding cycle from which the community is seeking funding assistance.

The ESG Program Manager will make several changes to ESG in the Consolidated Plan.

- 1) Updating the program metrics tracked and reported in ESG to focus on essential outcomes for homeless services programs and ensure all metrics can be collected from HMIS.
- 2) Adding eligible activities in Rapid Rehousing/Homeless Prevention to include providing support for housing navigation for clients served in the Coordinated Entry system.
- 3) Adding expenses related to the HMIS system as an eligible cost. This will allow us flexibility in allocations or reallocations.

IHCDA will also make minor changes to the HOPWA program:

- 1) Removing funding restrictions that are not included in HOPWA regulation.
- 2) Adding the eligible cost of “Resource Identification” which will support HOPWA programs coordination with their Regional Planning Council, Coordinated Entry, healthcare networks and collaborative groups, and other initiatives that support the coordination of multiple resources and funding opportunities to support clients.
- 3) Adjusting language on requiring subrecipients to be IDOH Care Coordination sites. First, the terminology is now “Non-Medical Case Management” Provider (NMCMP). Second, staff also propose we require subrecipients to either operate as a designated NMCMP or have a formal agreement with one.

SP-10 Geographic Priorities – 91.315(a)(1)

General Allocation Priorities. Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA)

For CDBG awards, OCRA allocates funds to the areas of greatest need, based on stakeholder consultation and the needs assessment and market analysis. This information is used to guide the funding priorities for each program year.

IHCDA does not allocate funding based solely on geography but does allocate funding to all areas of the state based on other criteria.

For IHCDA's HOME program, applications for rental and homeownership projects located within non-participating jurisdictions and those Participating Jurisdictions will be considered if the PJ receives an amount of HOME funding which is less than 5% of the amount of HOME funds granted to the State.

Several IHCDA programs are available for projects statewide. This includes IHCDA's HOME Tenant-Based Rental Assistance Program, and projects selected through its Supportive Housing Institute, which utilize HOME and NHTF.

All other NHTF projects for rental development will be allocated statewide. Exact criteria vary by program, yet all programs prioritize assisting low income households. Most of IHCDA's housing programs prioritize 50% AMI households; ESG and HOPWA generally reach to lower income levels due to the nature of the populations they serve.

ESG allocates funds to emergency shelter, rapid re-housing, homeless prevention, and outreach activities statewide. These and the HOPWA funds follow the CoC jurisdiction of every county outside of Marion. In addition, IHCDA would like to allocate a small percentage portion of ESG funds towards HMIS. This funding would cover the technical support and access the HMIS Lead provides to ESG subrecipients, including CAPER preparation. The allocation would also allow the HMIS Lead to expand the system to include night-by-night tracking and more robust data analysis opportunities.

The HOPWA grant does rely on a geographic allocation, determined through the Continuum of Care regions. With the exception of Region 7, IHCDA will allocate HOPWA funding to Project Sponsors that either are a Non-Medical Case Management Provider (NMCMP - as designated by IDOH) or have a formal agreement with a NMCMP. This will remain true for all regions across the borders of the Indiana Balance of State. If a distinct eligible population with specific needs exists in a region, IHCDA will work with the regional Project Sponsor or the City of Indianapolis' HOPWA program to tailor services to meet the needs of the population.

HTF for rental development is allocated statewide to projects that meet the underwriting standards as defined under 24 CFR 93.

SP-25 Priority Needs – 91.315(a)(2)

Priority Needs for the Five-year Consolidated Plan:

CDBG: Wastewater Drinking systems and Stormwater improvements; Revitalization activities for Indiana's smaller communities (economic development, Main Street, public facilities); Owner-occupied rehabilitation; and.

HOME: Rental construction, followed by Affordable homeownership.

ESG: Rapid rehousing, Homelessness prevention, Housing relocation services, Rental assistance, Shelter operations, Street outreach.

HOPWA: Rental assistance, STRMU, Housing information services and permanent housing placement, Facility-based subsidies.

HTF: Supportive housing for extremely low income households.

SP-30 Influence of Market Conditions – 91.315(b)

Influence of Market Conditions

Table 47 – Influence of Market Conditions

Affordable Housing Type	Market Characteristics that will influence the use of funds available for housing type
Tenant Based Rental Assistance (TBRA)	The lack of resources for the population who will re-enter from incarceration and are at risk of homelessness.
TBRA for Non-Homeless Special Needs	TBRA will be prioritized for those experiencing homelessness.
New Unit Production	Affordability Gap in Homebuying The inability of the market to provide affordable homes for purchase and the need for capital for affordable rental to close affordability gap for households.
Rehabilitation	Local availability of housing that requires rehabilitation.
Acquisition, including preservation	Acquisition as stand alone activity is not eligible activity. Acquisition Rehabilitation is included in Rehabilitation above.

SP-35 Anticipated Resources - 91.315(a)(4), 91.320(c)(1,2)

The anticipated annual program year resources and proposed allocation categories are shown in the table below.

On May 13, 2025, HUD announced the allocation for Program Year 2025 to the State. While the funding for PY 2025 has been reduced, it does not represent a decrease of 25% compared to the funding levels for Program Year 2024. The contingency plan for less than 25% reduction that was prepared will be utilized to adjust the program allocations accordingly.

Table 48 - Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	Federal	Admin and Planning Economic Development Housing Public Improvements Public Services	\$30,689,455			\$30,689,455	\$123 million	Annually: \$12.5 million for wastewater; \$4 million Stellar Pathways, \$3.5 million stormwater, \$3 million owner occupied rehabilitation, \$2.5 million public facilities, \$1.95 million Main Street, \$1.5 million blight clearance, \$1 million planning fund, approx. \$700,000 TA and admin
HOME	Federal	Admin Affordable Rental and Homeownership Construction TBRA CHDO Support	\$13,583,551.13			\$13,583,551.13	\$54 million	Annually: \$8.26 million rental, \$2 million homebuyer, \$1.2 million TBRA, \$1.35 million admin, \$770,000 CHDO

NHTF	Federal	Admin Affordable Rental	\$3,296,363			\$3,296,363	\$12 million	Annually: \$2.97 million rental construction, \$329,600 admin
ESG	Federal	Overnight Shelter, RRH, Admin	\$3,947,545			\$3,947,545	\$16 million	Annually: \$2.3 million shelter operations, essential services, outreach, \$1.1 RRH, \$295,000 admin and \$118,000 HMIS
HOPWA	Federal	TBRA, information, STRMU, Permanent housing facilities, Placement, Services,	\$2,237,532			\$2,237,532	\$8 million	Annually: \$900,000 TBRA, \$495,000 housing information and placement, \$385,000 STRMU, \$190,000 facilities

Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied

OCRA match. Matching funds include public funding (federal, state and local funding) or private sector, in-kind services, cash or debt allocated to the CDBG project. The level of local matching funds for CDBG projects is 8, 10 or 20% of the total estimated project costs. This percentage is computed by adding the proposed CDBG grant amount and the local matching funds amount and dividing the local matching funds amount by the total sum of the two amounts. The current definition of match includes a maximum of 5% pre- approved and validated in-kind contributions.. Any in-kind over and above the specified 5% may be designated as local effort.

IHCDA match. Past influxes of program funding from the Federal government, along with several new initiatives that expand IHCDA’s vision and overall mission into more comprehensive developments, sometimes pose an issue with obtaining the required level of match/leveraging funds. IHCDA continues to use the match pool, which is a collection of resources taken from closed HOME-funded projects that documented match in excess of the required 25%. These eligible sources of match are kept on record and may be used as match for future IHCDA-funded projects. The

pool allows applicants that, after exploring all possible avenues of meeting the requirement, are left with a shortfall to still proceed with an award application.

ESG match. ESG subrecipients are required to match 100% of the ESG award, and can include cash, grants, and in-kind donations.

HOPWA Leveraging. The primary sources of funding are from the Ryan White Grants and public funding from the Indiana Department of Health and HIV Care Coordination. In-kind donations and other grants like ESG.

HOME match. The HOME program requires a 25% match, which is the Federal requirement. Please note: Match requirements were suspended for PY 2020-2021. The Match requirement was reinstated in PY 2022. Applicants must demonstrate eligible matching funds equal to 25% of the amount of HOME funds requested. If the applicant is proposing to utilize banked match for the activity:

- 1) To use the applicant's own banked match, the match liability on the previous award during which the match was generated must already have been met and documented with IHCD for the match to be eligible as of the application due date. Only HOME-eligible match generated on IHCD awards made in 1999 or later are eligible to be banked.
- 2) To use another Recipient's match, the applicant must provide an executed agreement with the application verifying that the Recipient is willing to donate the match.

If appropriate, describe publicly owned land or property located within the state that may be used to address the needs identified in the plan

N/A; the State does not have publicly owned land or properties that will be used to address housing and community development needs during the five-year planning period. If publicly owned and donated land is used for match, that will be listed in the CAPER Match section.

Prior year resources. Prior Year funds will be used for eligible HOME projects, including rental construction project and homebuyer construction. Prior Year Admin funds can be used for additional admin (up to the allowable cap, and for training contracts).

SP-40 Institutional Delivery Structure – 91.315(k)

Explain the institutional structure through which the jurisdiction will carry out its consolidated plan including private industry, non-profit organizations, and public institutions.

Table 49 - Institutional Delivery Structure

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
OCRA and local government partners	State	CDBG administration and awards	Non-entitlement areas
IHCDA and nonprofit partners	State	HOME, NHTF, ESG, HOPWA	Non-entitlement areas

Assess of Strengths and Gaps in the Institutional Delivery System

The State has an efficient structure through which programs are delivered. Where gaps exist, these are associated with lack of funding and lack of capacity of nonprofits in rural areas to address the wide variety and growing needs of aging communities in need of economic development.

OCRA's primary partners are units of local government. Institutions like Purdue, IU, and Ball State, which have a strong local presence, are funded by OCRA to provide technical assistance to local governments in this area. During the five year Consolidated Plan period, OCRA will continue current practices of providing planning grants, technical assistance and training, regional workshops, and access to community liaisons and regional representatives to support institutional structure in small communities and rural areas. OCRA also intends to continue the Stellar Communities program to help communities develop a region's institutional structure to facilitate economic development, create jobs, and increase its overall competitiveness.

In addition to the organizations included above, IHCDA partners with national providers, consultants, and trainers to provide technical assistance where needed. IHCDA continually reviews both internal and external processes to determine what gaps may exist and how to address those gaps. Gaps which IHCDA has identified include a dearth of available contractors available for housing construction or repair, a need for training on both development and property management of affordable housing, training for property managers, and a need for more funding for housing projects.

IHCDA has targeted much of its training over the past several years to address these gaps in delivery, including targeted training through the Indiana Builder's Association to increase the number of Risk Assessors and certified Lead Paint contractors; through training provided by national providers on the development process; and through its partnership with the Indiana Civil Rights Commission on Fair-Housing testing and training.

IHCDA also holds by-weekly calls with its HOME Administrators and CHDOs to discern other gaps or needs from these critical partners. IHCDA also created a CHDO working group several years ago to develop a formal committee of Partners to help identify gaps in delivery.

Other activities include:

- IHCDA uses its "RED" notices, which are sent via email to subscribers, to communicate updates about grant application funding rounds and applications and federal policy changes. The RED notices webpage can be found at: <https://www.in.gov/myihcda/rednotices.htm> IHCDA also maintains a resource center on its website. OCRA has a similar email system.
- Webinars are used to help potential grantees build capacity to apply for and access funding.
- IHCDA utilizes part of its HOME administrative budget to provide additional technical assistance.
- For the past three years, IHCDA has also hosted a separate track at its Housing Conference focused on the HOME Program, CHDOs and rural housing development.

IHCDA allocates HOPWA to all ISDH-established care coordination regions except Region 7 and parts of Region 11, it was determined that IHCDA will fund one HOPWA project sponsor per every care coordination region. This will remain true for all care coordination regions. If a distinct eligible population with specific needs exists in a region, IHCDA will work with the regional subrecipient to tailor services to meet the needs of the population.

Availability of services targeted to homeless persons and persons with HIV and mainstream services

Table 50 - Homeless Prevention Services Summary

Homelessness Prevention Services	Available in the Community	Targeted to Homeless	Targeted to People with HIV
Homelessness Prevention Services			
Counseling/Advocacy	X	X	X
Legal Assistance	X	X	X
Mortgage Assistance			X
Rental Assistance	X	X	X
Utilities Assistance	X	X	X
Street Outreach Services			
Law Enforcement	X	X	X
Mobile Clinics			
Other Street Outreach Services	X	X	
Supportive Services			
Alcohol & Drug Abuse	X	X	X
Child Care	X	X	

Supportive Services			
Education	X	X	X
Employment and Employment Training	X	X	
Healthcare	X	X	X
HIV/AIDS	X	X	X
Life Skills	X	X	X
Mental Health Counseling	X	X	X
Transportation	X	X	X
Other			

Describe the extent to which services targeted to homeless person and persons with HIV and mainstream services, such as health, mental health and employment services are made available to and used by homeless persons (particularly chronically homeless individuals and families, families with children, veterans and their families and unaccompanied youth) and persons with HIV within the jurisdiction. Describe the strengths and gaps of the service delivery system for special needs population and persons experiencing homelessness, including, but not limited to, the services listed above.

Gaps in institutional structure were primarily identified through stakeholder outreach. According to stakeholders, the most acute gaps include:

- In rural areas, there is a need for housing providers to better connect and partner with supportive service organizations that can better serve tenants with needs. Stakeholders advocated for a statewide coalition of developers and service organizations to come together to create these partnerships.
- Service providers working with residents with HIV/AIDS compiled a list of activities needed to help these residents attain housing and economic stability. Those included affordable health care, education and job training, GED/trade classes, senior care, transportation to employment, and intentional support and adequate time to build baseline support and independence among those with needs (including skills in nutrition, safety, budgeting, planning for their future).
- Stakeholders emphasized the need for alternative sources of funding (e.g., community foundations) with both state and federal funding levels declining.

Provide a summary of the strategy for overcoming gaps in the institutional structure and service delivery system for carrying out a strategy to address priority needs

IHCDA partners with various organizations to improve service delivery and institutional structures in the housing industry. This includes contracting with leaders in the compliance industry (US Housing Consultants and Costello Compliance) to provide free in-person and online training.

IHCDA offers training and webinars to partner organizations on the application process and administration of its funding. Examples include the seven-part HOME Homebuyer Training Series, HOME Rental Application Training, Environmental Review and Section 106 Training, and HOME Grant Implementation. IHCDA also maintains resources on its website with detailed manuals that instruct its partners on how to develop and administer programs.

IHCDA continues to host the HOME Homebuyer and CHDO Working Groups to build capacity, and support partnerships with its non-profit developer network. IHCDA also supports additional technical assistance through intermediate entities who have specific expertise on managing affordable housing projects and development the pipeline of talent in the affordable housing field. Past examples include the Non-Profit Executive Training Series, EPA Renovation and Repair and Painting Program, and the Certified Aging in Place courses. Lastly, IHCDA continues to host the Supportive Housing Institute to help supportive housing partners navigate the complex process of developing affordable housing with access to supportive services to prevent and end homelessness.

Finally, IHCDA staff members participate on a number of housing and community related boards and councils where key staff meet on a regular basis to train and partner. In June 2024, IHCDA was awarded a 30-month Youth Homelessness Systems Improvement Grant (YHSI) by the US Department of Housing and Urban Development (HUD). The purpose of this grant is to focus on system change to improve response systems for youth and young adults (YYA) at risk or experiencing homelessness. The funding will help IHCDA to establish viable local and state partnerships between youth focused and homelessness-focused organizations, improve capacity, effectiveness and YYA leadership, improve the IN BoS CoC Coordinated Entry System to address youth-specific homelessness, and improve data collection and coordination between organizations working with youth at risk of and experiencing homelessness.

IHCDA regularly meets with the following housing and community related groups:

- National Association of Housing and Redevelopment Officials (NAHRO) Board,
- Indiana Mental Health and Addiction (IMHA) Planning and Advisory Council,
- Indianapolis Housing Trust Fund Advisory Committee,
- Back Home in Indiana Alliance,
- National Association of Homebuilders Housing Credit Professionals Board, -Technical Assistance Group
- Indiana Pregnancy Promise Steering Committee (FSSA),

- CoC network for the Balance of State and Marion County,
- Indiana Commission on Improving the Status of Children,
- Affordable Housing Association of Indiana (AHAIN),
- Marion County Re-entry Coalition,
- Hamilton County Housing Collaborative,
- LISC Indianapolis Local Advisory Board.

SP-45 Goals Summary – 91.315(a)(4)

The anticipated five-year goals are summarized in the following table.

Table 51 – Goals Summary

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding (Annual Estimate)	Goal Outcome Indicator
1	Improve Community Water, Wastewater and Stormwater	2025	2029	Non-Housing Community Development		Water, wastewater and storm water system	CDBG: \$12.5 million for water; \$3.5 million stormwater	Other: 25 Other
2	Support Community Revitalization	2025	2029	Non-Housing Community Development		Support of comprehensive community development	CDBG: \$4 million Stellar Pathways, \$2.5 million public facilities, \$1.95 million Main Street, \$1.5 blight clearance	Other: 3 Brownfield/Clearance projects, 5 Public Facility projects, 3 Main Street Revitalization Community projects, 2 Stellar Pathways Designees
3	Provide Planning Grants to Local Governments	2025	2029	Non-Housing Community Development		Support of comprehensive community development	CDBG: \$1 million	Other: 20 Other
4	Preserve Owner-occupied Homes and Create New Affordable Homes	2025	2029	Affordable Housing Non-Homeless Special Needs		Housing for low and very low income persons Homeownership opportunities low income households	CDBG: \$3 million HOME: \$2 million	Rehabilitated: 150 Households HOME Homebuyer units: 20 Units
5	Create and Preserve Affordable Rental Housing	2025	2029	Affordable Housing		Housing for low and very low income persons	HOME: \$8,263,551.13 HTF: \$2,966,762.68	Rental units constructed: 70 Household Housing Unit Rental units rehabilitated: unknown

6	Build Nonprofit Affordable Housing Developer Capacity	2025	2029	Affordable Housing		Support affordable housing creation	HOME: \$770,000	Other: 10 Other (capacity building)
7	Rapid Re-Housing and TBRA to Prevent Homelessness	2025	2029	Homeless Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOME: \$1.2 million ESG: \$1.1 million	Tenant-based rental assistance / Rapid Rehousing: 500 Households Assisted
8	Provide Operating Support for Shelters	2025	2029	Homeless Non-Homeless Special Needs		Assistance to homeless shelters	ESG: \$2.3 million	Other: 10000 Other
9	Assist Residents Remain in Housing- (STRMU)	2025	2029	Non-Homeless Special Needs HIV/AIDS		Housing for low and very low income persons Tenant based rental and rapid re-housing	HOPWA: \$ 385,000	Housing for People with HIV/AIDS added: 200 Households
10	Assist HIV/AIDS Residents Remain in Housing (TBRA)	2025	2029	Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOPWA: \$900,000	Tenant-based rental assistance / Rapid Rehousing: 150 Households Assisted
11	Provide Housing Information and Placement Services	2025	2029	Non-Homeless Special Needs		Affordable housing access	HOPWA: \$495,000	Other: 250 Other
12	Support Facilities Serving HIV/AIDS Residents	2025	2029	Non-Homeless Special Needs HIV/AIDS		Assistance to facilities	HOPWA: \$190,000	Other: 250 Other

Estimate the number of extremely low-income, low-income, and moderate-income families to whom the jurisdiction will provide affordable housing as defined by HOME 91.315(b)(2)

IHCDA estimates that HOME funds will provide rental housing for 65-70 low or very low income households and homebuyer opportunities for 20 low or very low income households during the program year.

SP-50 Public Housing Accessibility and Involvement – 91.315(c)

This section is N/A; IHCD does not own or operate any public housing units nor is IHCD a troubled authority.

SP-55 Barriers to affordable housing – 91.315(h)

Barriers to addressing affordable housing needs that have been identified in the housing analysis from the Consolidated Plan and supporting studies:

- Poor condition of affordable housing stock according to residents and stakeholders. Inability of residents to make needed improvements due to low incomes. Difficulty obtaining private sector loans to complete needed improvements due to low incomes of those living in units in poor condition.
- Disproportionately high levels of cost burden and lower homeownership rates for certain populations due to historically low incomes, high mortgage denial rates, and lack of affordable/ publicly subsidized housing to meet their needs. Cost burden gaps are greatest for residents earning between 30 and 50% AMI—those just over the poverty level. Homeownership rates are lowest for Black or African American residents.
- High mortgage loan denial rates for non-White residents, even when adjusting for income level.
- Non-White residents and residents with disabilities are most likely to express challenges with home buying associated with saving enough for down payments and meeting mortgage loan qualifications.
- Higher use of publicly-supported housing by African American residents, suggesting challenges obtaining private market housing.
- Housing choice for residents with disabilities restricted by the lack of available, affordable, accessible housing.
- Landlords not accepting service animals and charging higher rents or deposits for persons with disabilities requesting reasonable accommodations.
- Lack of rental housing for families with children: on average 72% of Housing Choice Voucher wait lists are families with children.

Economic Opportunity Issues

- Gaps in educational attainment for Hispanic residents.
- Residents with disabilities face challenges finding employment and those who are employed earn less than those without a disability.
- Economic differences contributing to segregation, mostly in urban areas. In some areas, lack of opportunity and lack of available housing perpetuate similar neighborhoods.
- Limitations (property tax caps) on State and local tax revenue generation.
- Severe lack of services and trained staff to deliver mental health and supportive services.

The factors contributing to these issues are:

- Economic weaknesses in some non-entitlement areas preventing residents from making needed repairs.
- Lack of accessible housing stock.
- Historically lower incomes of non-White and Hispanic residents and, for Hispanic residents, lower rates of educational attainment.
- Residents with disabilities facing lower employment opportunities and discrimination in housing markets.
- Families with children and non-White and Hispanic residents experiencing discrimination in rental market transactions.
- Landlords not complying with and/or not understanding laws, particularly reasonable accommodations.
- Insufficient resources to fund ADA improvements to public buildings and infrastructure, particularly in rural areas.

Strategies to remove or ameliorate barriers to affordable housing

OCRA and IHCD have work closely with the Fair Housing Center of Central Indiana (FHCCI) and the Indiana Civil Rights Division (ICRC) to address the identified barriers.

Land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations and policies affecting the return on residential development and largely determined at the local level and are outside of the State's purview.

SP-60 Homelessness Strategy – 91.315(d)

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

The State relies on its partners to conduct outreach to persons who are homeless, assess their needs and communicate these needs to the State. To that end, the State will:

- Require all HUD McKinney Vento Funded programs to utilize HMIS for all shelter or transitional housing or permanent supportive housing programs serving homeless individuals and families.
- Require all HUD McKinney Vento Funded programs to participate in the annual, statewide homeless Point-in-Time Count in late January and timely submission of this data to IHCD.
- Require all HUD McKinney Vento Funded programs subrecipients actively participate in their Regional Planning Council on the Homeless meetings regularly.
- Require all HUD McKinney Vento Funded programs to participate in the Coordinated Entry in their Region.

In October 2023, IHCD released a report and evaluation of the state's Balance of State CoC Coordinated Entry System (CES) processes. The report was completed in collaboration with C4 Innovations to gather accurate information that evaluates the effectiveness of the client flow through the CES; and to identify racial disparities within the CoC's CES.

Several recommendations were developed from stakeholder interviews, surveys, and HMIS data analysis. Over the next year, IHCD will work with its partners to assess the feasibility of implementing the following action items to increase homeless outreach and improve homeless needs assessments:

- Expand the United Way Grant to cover transportation costs in rural areas and for individuals with disabilities.
- Develop targeted outreach strategies for youth, young adults, families, immigrants, and seniors that address their unique needs.
- Enhance communication and advertising throughout the CES system, especially in rural areas and regions to increase residents' awareness of available resources.
- Maximize the PIT count to engage with individuals experiencing homelessness and connect them with CES resources.

These recommendations are currently being implemented by IHCD.

Addressing the emergency and transitional housing needs of homeless persons

In addition to the allocation of ESG to meet the needs of persons who are homeless (see AP-20), emergency shelter and transitional housing needs are addressed through the shelter and outreach portions of these funds as well as a larger coordination across the CoC. Each ESG recipient is required to

participate in their local Regional Planning Council on Homeless in their Region. This ensures that all organizations/individuals who are serving the homeless come together to discuss and create local strategies to address emergency and transitional housing needs. These needs are then communicated up to IHCD and the CoC board as a whole. Together, IHCD and the board incorporate this input into the board's vision for meeting these needs across the CoC. During the next five years, the board plans to create a strategic plan and blueprint for the CoC. They will use data from the HIC, PIT, and other HUD data points to make strategic decisions on areas of the state that need additional emergency and transitional shelter.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again.

Rapid re-housing activities include housing relocation and stabilization services and financial assistance with rent, utilities, arrears, and deposits. The function of these funds is to provide short-term assistance to individuals and families. The State offers shelters a version of RRH that did not include rental assistance, and instead covers one-time assistance to support a direct connection from shelter to permanent housing including housing relocation and stabilization services, utilities, arrears, and deposits.

Subrecipients that receive RRH funds are required to create a Memorandum of Understanding (MOU) with shelters in their region to further strengthen the connection from emergency housing to permanent options including rentals with short/medium term subsidy.

Help low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families who are likely to become homeless after being discharged from a publicly funded institution or system of care, or who are receiving assistance from public and private agencies that address housing, health, social services, employment, education or youth needs

The Supportive Housing Institute and its partners will provide targeted training, technical assistance, capacity-building resources, and the opportunity to apply for predevelopment financing for both new and experienced development teams. Teams will receive over 80 hours of training including individualized technical assistance and resources to assist in completing their project. In addition, industry experts, including staff from IHCD, will provide insight on property management, financing, and building design. As stated in the Institute's RFP, upon completion, partners will have: individualized supportive housing plans with supportive service and delivery strategies; skills to operate existing supportive housing and develop new projects; strong property management and service teams; and access to capital funding and

rental assistance from IHCD. Institute deliverables include: approved project concept including site selection and minimum development design characteristics; Memorandum of Understanding; a shared mission statement; Community Support Plan; Detailed Supportive Services Plan; Tenant Selection Plan; Tenant Involvement Plan; Property Management Plan; Eviction Prevention Plan; operating policies and protocols; and preliminary project proposals and budgets.

In addition, IHCD provides staff support to the IN BoS CoC, which includes providing training and technical assistance to regional planning councils in order to increase their effectiveness in:

- Supporting and actively engaging in IN BoS CoC strategies to prevent and end homelessness;
- Engaging in local collaborative planning around homeless programming
- Organizing and conducting the local Point-in-time Count process and assisting with updating Housing Inventory Charts (HIC)
- Ensuring the statewide Coordinated Entry System is implemented consistently in each region, including establishing a local prioritization process and maintaining a prioritization list
- Coordinating Winter and Summer Contingency planning
- Representing the IN BoS CoC by interacting with local Entitlement Cities on their Consolidated Plans

SP-65 Lead based paint Hazards – 91.315(i)

Actions to address LBP hazards and increase access to housing without LBP hazards. How are the actions listed above integrated into housing policies and procedures?

Lead-based paint hazards will primary be addressed through CDBG and HOME funded rehabilitation activities. IHCDCA has developed new lead forms, and done multiple trainings on how to address lead based paint through both these programs. IHCDCA also administers multiple HUD programs to address lead paint hazards under its Healthy Homes Resource Program; IHCDCA has also developed a program to allow for reimbursement for contractors to receive their appropriate lead licenses.

IHCDCA maintains a partnership with the Indiana Department of Health – Lead and Healthy Homes Division; the two agencies work to identify children with elevated blood lead levels and enroll those families in IHCDCA’s Healthy Homes Resource Program. IHCDCA maintains a list of rental properties that have received lead hazard control through its programs.

OCRA staff recently collaborated with the Indiana State Department of Health to create a radon and lead policy designed to enhance the Owner-Occupied Rehabilitation Program and Public Facilities Program. This addition to those programs will help carry out the State’s actions to reduce LBP in housing.

How are the actions listed above integrated into housing policies and procedures?

Addressing the problem through existing and new housing rehabilitation programs is fundamental to reach the State and federal goal of eliminating childhood lead poisoning. Each recipient of a HOME award is subject to the HUD requirements of addressing lead-based paint hazards pursuant to 24 CFR Part 35. If a risk assessment is required, then all lead-based paint issues must be addressed. Lead-based paint controls and abatement costs are eligible activities in IHCDCA’s HOME-funded rehabilitation programs.

IHCDCA has updated numerous forms and provide training on the importance of addressing lead-based hazards and the impact lead based paint has on the health of children.

IHCDCA will continue to provide technical assistance on lead-based paint to their recipients, IHCDCA, as the Balance of State Public Housing Authority, also works closely with the IHCDCA Healthy Homes Manager, and the local and state health departments to identify any Housing Choice Voucher units which have a child with an elevated blood lead level.

As mentioned, IHCDCA and the Indiana’s State Department of Health have created a repository for households across the state to learn more about the risk of lead-based paint and link those households to numerous state programs.

Lastly, IHCDCA has developed a reimbursement program for contractors and firms for eligible training costs related to lead abatement courses; this reimbursement includes the costs of registration and the cost of

the testing to be licensed to perform work on lead paint throughout the State. With this program, IHCD hopes to increase the number of licensed lead abatement professionals throughout the State that can perform lead abatement activities and participation in its HUD programs.

SP-70 Anti-Poverty Strategy – 91.315(j)

Jurisdiction Goals, Programs and Policies for reducing the number of Poverty-Level Families.

How are the Jurisdiction poverty reducing goals, programs, and policies coordinated with this affordable housing plan

The State of Indiana does not have a formally adopted statewide anti-poverty strategy. In a holistic sense, the entirety of Indiana's Consolidated Plan Strategy and Action Plan is antipoverty related because a stable living environment is also a service delivery platform. However, many of the strategies developed for the five-year Consolidated Plan directly assist individuals who are living in poverty.

Indiana has a history of aggressively pursuing job creation through economic development efforts at the State and local levels. This emphasis on creating employment opportunities is central to a strategy to reduce poverty by providing households below the poverty level with a means of gaining sustainable employment. OCRA supports employment growth through economic development and main street revitalization to foster more walkability in rural communities commercial corridors.

Education and skill development are an important aspect of reducing poverty. Investment in workforce development programs and facilities is an essential step to break the cycle of poverty. Finally, there continue to be social and cultural barriers that keep people in poverty. Efforts to eliminate discrimination in all settings are important. In some cases, subsidized housing programs are vital to ensure that citizens have a safe and secure place to live.

Many of the strategies outlined in the Consolidated Plan are directed at providing services and shelter for those in need. Once a person has some stability in a housing situation, it becomes easier to address related issues of poverty and provide resources such as childcare, transportation and job training to enable individuals to enter the workforce. Subsidized housing programs are vital to ensure that citizens have a safe and secure place to live.

The State also utilizes the Section 3 requirement (a provision of the Housing and Urban Development Act of 1968). Section 3 applies to employment opportunities generated (jobs created) as a result of projects receiving CDBG or HOME funding through ORCA or IHCD, whether those opportunities are generated by the award recipient, a subrecipient, and/or a contractor. The requirements of Section 3 apply to all projects or activities associated with CDBG or HOME funding, regardless of whether the Section 3 project is fully or partially funded with CDBG/HOME. A detailed description of Section 3 requirements is included in OCRA/IHCD's award applications and manuals. A notice of Section 3 requirements is included in bid solicitations and is covered during the award trainings.

Through IHCD's multitude of programs, the agency provides assistance to impact persons who may be experiencing homelessness and to those who need assistance to purchase their first home. IHCD utilizes its HOME program to provide TBRA to those exiting the prison system, to providing construction subsidies

for supportive housing using the Housing First model, to providing funding to support housing for persons who are disabled, or families in need of stable housing.

SP-80 Monitoring – 91.330

Describe the standards and procedures that the state will use to monitor activities carried out in furtherance of the plan and will use to ensure long-term compliance with requirements of the programs involved, including minority business outreach and the comprehensive planning requirements

OCRA conducts a monitoring of every grant project receiving HUD funds. Two basic types of monitoring are used: “desk” monitoring and on-site monitoring. Desk monitoring is conducted by staff for non-construction projects. Desk monitoring confirms compliance with national objective, eligible activities, procurement and financial management. On-site monitoring is a structured review conducted by OCRA staff at the locations where project activities are being carried out or project records are being maintained. One on-site monitoring visit is normally conducted during a project, unless determined otherwise by OCRA staff. Grants utilizing a subrecipient to carry out eligible activities are monitored on-site annually during the 5-year reporting period to confirm continued compliance with national objective and eligible activity requirements. In addition, if there are findings at the monitoring, the grantee is sent a findings letter within 3 to 5 days of monitoring visit and is given 30 days to resolve it.

IHCDA Monitoring (HOME and NHTF): All HOME and HTF awardees are required to complete an initial training on the closeout process. IHCDA’s Funds Management and Reporting Specialist tracks benchmarks on each award, and IHCDA Healthy Homes Resource Manager oversees the three required inspections for each project.

For those projects determined to need special attention, IHCDA may conduct one (1) or more monitoring visits while award activities are in full progress. There are two possible types of special monitoring:

- Initial monitoring- monitoring early in the award term to ensure contract requirements and procurement procedures have been properly followed.
- Interim monitoring- monitoring halfway through the award term or award amount.
- Note: all projects invoking Davis Bacon will receive an interim monitoring to review labor standards requirements (see more information below).

Some of the more common factors that would signal special attention include: activity appears behind schedule, previous audit or monitoring findings of recipient or administrative firm, high dollar amount of award, inexperience of recipient or administrative firm, and/or complexity of program. These visits will combine onsite technical assistance with compliance review.

If the recipient’s systems are found to be nonexistent or are not functioning properly, actions taken by IHCDA could include suspension of further funding until appropriate corrective actions are taken, or termination of funding altogether. Additionally, all awards subject to Davis Bacon requirements will receive an interim monitoring at sooner of halfway through the award term or at 50% of funds drawn.

The purpose of the interim monitoring is to ensure compliance with labor standards provisions, focusing on review of certified payroll reports. This interim monitoring is required and any issues found during the review must be addressed before additional claims to IHCD will be released for payment.

Expected Resources

AP-15 Expected Resources – 91.320(c)(1,2)

Table 52 - Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	Federal	Admin and Planning Economic Development Housing Public Improvements Public Services	\$30,689,455			\$30,689,455	\$123 million	Annually: \$12.5 million for wastewater; \$4 million Stellar Pathways, \$3.5 million stormwater, \$3 million owner occupied rehabilitation, \$2.5 million public facilities, \$1.95 million Main Street, \$1.5 million blight clearance, \$1 million planning fund, approx. \$700,000 TA and admin

HOME	Federal	Admin Affordable Rental and Homeownership Construction TBRA CHDO Support	\$13,583,551.13			\$13,583,551.13	\$54 million	Annually: \$8.26 million rental, \$2 million homebuyer, \$1.2 million TBRA, \$1.35 million admin, \$770,000 CHDO
NHTF	Federal	Admin Affordable Rental	\$3,296,363			\$3,296,363	\$12 million	Annually: \$2.97 million rental construction, \$329,600 admin
ESG	Federal	Overnight Shelter, RRH, Admin	\$3,947,545			\$3,947,545	\$16 million	Annually: \$2.3 million shelter operations, essential services, outreach, \$1.1 RRH, \$295,000 admin and \$118,000 HMIS
HOPWA	Federal	TBRA, information, STRMU, Permanent housing facilities, Placement, Services,	\$2,237,532			\$2,237,532	\$8 million	Annually: \$900,000 TBRA, \$495,000 housing information and placement, \$385,000 STRMU, \$190,000 facilities

Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied.

OCRA match. Matching funds include public funding (federal, state and local funding) or private sector in-kind services, cash or debt allocated to the CDBG project. The level of local matching funds for CDBG projects is 8, 10 or 20% of the total estimated project costs. This percentage is

computed by adding the proposed CDBG grant amount and the local matching funds amount and dividing the local matching funds amount by the total sum of the two amounts. The current definition of match includes a maximum of 5% pre- approved and validated in-kind contributions.. Any in-kind over and above the specified 5% may be designated as local effort.

IHCDA match. Past influxes of program funding from the Federal government, along with several new initiatives that expand IHCDA’s vision and overall mission into more comprehensive developments, sometimes pose an issue with obtaining the required level of match/leveraging funds. IHCDA continues to use the match pool, which is a collection of resources taken from closed HOME-funded projects that documented match in excess of the required 25%. These eligible sources of match are kept on record and may be used as match for future IHCDA-funded projects. The pool allows applicants that, after exploring all possible avenues of meeting the requirement, are left with a shortfall to still proceed with an award application.

ESG match. ESG subrecipients are required to match 100% of the ESG award, and can include cash, grants, and in-kind donations.

HOPWA Leveraging. The primary sources of funding are from the Ryan White Grants and public funding from the Indiana Department of Health and HIV Care Coordination. In-kind donations and other grants like ESG.

HOME match. The HOME program requires a 25% match, which is the Federal requirement. Please note: Match requirements were suspended for PY 2020-2021. The Match requirement was reinstated in PY 2022. Applicants must demonstrate eligible matching funds equal to 25% of the amount of HOME funds requested. If the applicant is proposing to utilize banked match for the activity:

- 1) To use the applicant’s own banked match, the match liability on the previous award during which the match was generated must already have been met and documented with IHCDA for the match to be eligible as of the application due date. Only HOME-eligible match generated on IHCDA awards made in 1999 or later are eligible to be banked.
- 2) To use another Recipient’s match, the applicant must provide an executed agreement with the application verifying that the Recipient is willing to donate the match.

If appropriate, describe publicly owned land or property located within the jurisdiction that may be used to address the needs identified in the plan.

N/A; the State does not have publicly owned land or properties that will be used to address housing and community development needs during the five-year planning period. If publicly owned and donated land is used for match, that will be listed in the CAPER Match section.

Annual Goals and Objectives

AP-20 Annual Goals and Objectives – 91.320(c)(3)&(e)

Table 53 – Goals Summary

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding (Annual Estimate)	Goal Outcome Indicator
1	Improve Community Water, Wastewater and Stormwater	2025	2029	Non-Housing Community Development		Water, wastewater and storm water system	CDBG: \$12.5 million for water; \$3.5 million stormwater	Other: 25 Other
2	Support Community Revitalization	2025	2029	Non-Housing Community Development		Support of comprehensive community development	CDBG: \$4 million Stellar Pathways, \$2.5 million public facilities, \$1.95 million Main Street, \$1.5 blight clearance	Other: 3 Brownfield/Clearance projects, 5 Public Facility projects, 3 Main Street Revitalization Community projects, 2 Stellar Pathways Designees
3	Provide Planning Grants to Local Governments	2025	2029	Non-Housing Community Development		Support of comprehensive community development	CDBG: \$1 million	Other: 20 Other
4	Preserve Owner-occupied Homes and Create New Affordable Homes	2025	2029	Affordable Housing Non-Homeless Special Needs		Housing for low and very low income persons Homeownership opportunities low income households	CDBG: \$3 million HOME: \$2 million	Rehabilitated: 150 Households HOME Homebuyer units: 20 Units
5	Create and Preserve Affordable Rental Housing	2025	2029	Affordable Housing		Housing for low and very low income persons	HOME: \$8,263,551.13 HTF: \$2,966,762.68	Rental units constructed: 70 Household Housing Unit Rental units rehabilitated: unknown

6	Build Nonprofit Affordable Housing Developer Capacity	2025	2029	Affordable Housing		Support affordable housing creation	HOME: \$770,000	Other: 10 Other (capacity building)
7	Rapid Re-Housing and TBRA to Prevent Homelessness	2025	2029	Homeless Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOME: \$1.2 million ESG: \$1.1 million	Tenant-based rental assistance / Rapid Rehousing: 500 Households Assisted
8	Provide Operating Support for Shelters	2025	2029	Homeless Non-Homeless Special Needs		Assistance to homeless shelters	ESG: \$2.3 million	Other: 10000 Other
9	Assist Residents Remain in Housing- (STRMU)	2025	2029	Non-Homeless Special Needs HIV/AIDS		Housing for low and very low income persons Tenant based rental and rapid re-housing	HOPWA: \$ 385,000	Housing for People with HIV/AIDS added: 200 Households
10	Assist HIV/AIDS Residents Remain in Housing (TBRA)	2025	2029	Non-Homeless Special Needs		Tenant based rental and rapid re-housing	HOPWA: \$900,000	Tenant-based rental assistance / Rapid Rehousing: 150 Households Assisted
11	Provide Housing Information and Placement Services	2025	2029	Non-Homeless Special Needs		Affordable housing access	HOPWA: \$495,000	Other: 250 Other
12	Support Facilities Serving HIV/AIDS Residents	2025	2029	Non-Homeless Special Needs HIV/AIDS		Assistance to facilities	HOPWA: \$190,000	Other: 250 Other

AP-25 Allocation Priorities – 91.320(d)

How will the proposed distribution of funds will address the priority needs and specific objectives described in the Consolidated Plan?

Funding allocation will be guided by the following priorities:

CDBG: Wastewater Drinking systems and Stormwater improvements; Revitalization activities for Indiana’s smaller communities (economic development, Main Street, public facilities); Owner-occupied rehabilitation; and.

HOME: Rental construction, followed by Affordable homeownership.

ESG: Rapid rehousing, Homelessness prevention, Housing relocation services, Rental assistance, Shelter operations, Street outreach.

HOPWA: Rental assistance, STRMU, Housing information services and permanent housing placement, Facility-based subsidies.

HTF: Supportive housing for extremely low income households.

AP-30 Methods of Distribution – 91.320(d)&(k)

Please see the Grantee Unique Appendix for OCRA and IHCD methods of distribution. Of note:

OCRA will make the following changes to the Method of Distribution beginning with Round 2 funding during PY2025:

OCRA has partnered with Stats Indiana, an Indiana University entity, a new measure of community resiliency. The Community Resilience Index is designed to be more forward-looking by focusing on a community's capacity for future economic growth. The resilience index gauges this capacity for future growth along the following dimensions:

- Structure of local economy
- Entrepreneurial activity
- Human capital
- Social networks/ Social connectivity
- Broadband connectivity
- Wealth Gaps
- Homeownership (an indicator of community attachment)

Community Resilience Index scores, which are updated and published annually, can be found at: <https://www.stats.indiana.edu/topic/cdbg.asp>.

Regional bonus points will be substituted for Wastewater Drinking Water (WDW), Storm Improvement Program (SIP), Owner Occupied Rehabilitation Program (OOR), Main Street Revitalization Program (MSRP) and Planning (PL) program. The Community Resilience Index will be employed to revise the existing policy on bonus points related to regional collaboration, ensuring alignment with community resilience objectives. OCRA is dedicated to fostering and improving the resilience of rural communities. To support this initiative, each grant application will receive a maximum of 25 points for the submission of a community resilience improvement plan and their corresponding point awarded value from the Community Resilience Index as provided by Stats Indiana. The points awarded value are provided to grant applications that submit the required community resilience improvement plan as part of the application program specific review process.

Program Specific Points will be adjusted for the Wastewater Drinking Water (WDW) program.

- For WDW, OCRA will continue to adjust its dated User Rate Benchmarks to address legislative taskforce recommendations and to better align with other common funding sources. OCRA will explore additional adjustments to these benchmarks in future funding years.
- WDW - Combined utility rates for the ongoing operation and maintenance activities of the wastewater, drinking water, and/or stormwater systems.

- 0 points – Less than \$55 combined user rates
- 10 points – \$55-\$100 combined user rates
- 25 points – More than \$100 combined user rates

Supporting communities' housing development needs through the planning program and facilitating proactive resilience building in communities through the planning program.. Adjustments to the local match percentage required for the Planning (PL) program will be set to at least 8% rather than 10%. Set a \$7,000 flat fee rather than 8% rate for indirect costs associated with administration fees for managing CDBG grants within the planning program.

The criteria for the Blight Clearance National Objective will be revised to facilitate the rehabilitation and restoration of historic buildings through the Public Facilities Program.

Program-specific elements will be adjusted to encourage sustainable practices by integrating green infrastructure into several programs. Planning Grant Program Specific Points will be adjusted to reduce documentation requirements.

Program changes made in response to public comment:

The Blight Clearance Program will be expanded to address residential and non-residential buildings that pose significant health and safety concerns in communities and meet the definition of blight.

OCRA recognizes that communities throughout the state impacted by natural disasters frequently experience heightened financial needs and restricted access to resources. To assist these communities, additional bonus points will be granted to those affected by disasters. These bonus points are intended to help address some of the unmet needs within the CDBG program.

OCRA has adjusted the funding cycle for their planning and owner-occupied programs to include three rounds, with the possibility of a fourth round each year, contingent upon available funding. The planning and owner-occupied programs now require that community liaisons must be notified within 15 days of a funding round opening to be eligible to submit an application for that round.

The Program Manager will make several changes to ESG in the Consolidated Plan.

- 1) Updating the program metrics tracked and reported in ESG to focus on essential outcomes for homeless services programs and ensure all metrics can be collected from HMIS.
- 2) Adding eligible activities in Rapid Rehousing/Homeless Prevention to include providing support for housing navigation for clients served in the Coordinated Entry system.
- 3) Adding expenses related to the HMIS system as an eligible cost. This will allow us flexibility in allocations or reallocations.

IHCDA will make minor changes to the HOPWA program:

- 4) Removing funding restrictions that are not included in HOPWA regulation.

- 5) Adding the eligible cost of “Resource Identification” which will support HOPWA programs coordination with their Regional Planning Council, Coordinated Entry, healthcare networks and collaborative groups, and other initiatives that support the coordination of multiple resources and funding opportunities to support clients.
- 6) Adjusting language on requiring subrecipients to be IDOH Care Coordination sites. First, the terminology is now “Non-Medical Case Management” Provider (NMCMP). Second, staff also propose we require subrecipients to either operate as a designated NMCMP or have a formal agreement with one.

AP-38 Project Summary

FY 2025 FUND DISTRIBUTION

CDBG Uses of Funds:

1. Owner Occupied Rehabilitation	\$ 3,000,000
2. Stellar Pathways Program	\$ 4,000,000
3. Blight Clearance Program	\$ 1,500,000
4. Main Street Revitalization Program	\$ 1,952,389
5. Public Facilities Program	\$ 2,500,000
6. Wastewater Drinking Water	\$12,500,000
7. Stormwater Improvements Program	\$ 3,500,000
8. PreservINg MainStreet	\$ 0
9. Needs Responsive Fund	\$ 0
10. Urgent Need Fund	\$ 0
11. Planning Grant Program	\$ 1,000,000
12. Technical Assistance	\$ 200,000
13. Administration	\$ 537,066
Total:	\$30,689,455.00

Allocation—HOME

HOME rental = \$8,263,551

HOME homebuyer = \$2,000,000

TBRA = \$1,200,000

CHDO operating = \$650,000

CHDO pre-development = \$120,000

HOME admin = \$1,350,000

Allocation—NHTF

HTF Rental = \$2,966,763

HTF admin = \$329,600

Allocation—ESG

Shelter operations = \$2,368,527.00

Rapid rehousing = \$1,164,525.78

HMIS = \$118,426.35

ESG admin = \$296,065.88

Allocation—HOPWA

TBRA = \$917,270.97

Housing information/placement = \$506,080.54

STRUM = \$395,375.42

Support facilities = \$195,051.87

Grantee admin = \$67,125.96

Project sponsor admin = \$156,627.24

AP-40 Section 108 Loan Guarantee – 91.320(k)(1)(ii)

Will the state help non-entitlement units of general local government to apply for Section 108 loan funds?

No

Available Grant Amounts

N/A

Acceptance process of applications

N/A

AP-45 Community Revitalization Strategies – 91.320(k)(1)(ii)

Will the state allow units of general local government to carry out community revitalization strategies?

No.

State's Process and Criteria for approving local government revitalization strategies

N/A

AP-50 Geographic Distribution – 91.320(f)

Description of the geographic areas of the state (including areas of low-income and minority concentration) where assistance will be directed

For CDBG awards, OCRA allocates funds to the areas of greatest need, based on stakeholder consultation and the needs assessment and market analysis. This information is used to guide the funding priorities for each program year.

IHCDA does not allocate funding based solely on geography but does allocate funding to all areas of the state based on other criteria.

For IHCDA's HOME program, applications for rental and homeownership projects located within non-participating jurisdictions and those Participating Jurisdictions will be considered if the PJ receives an amount of HOME funding which is less than 5% of the amount of HOME funds granted to the State.

Several IHCDA programs are available for projects statewide. This includes IHCDA's HOME Tenant-Based Rental Assistance Program, and projects selected through its Supportive Housing Institute, which utilize HOME and NHTF.

All other NHTF projects for rental development will be allocated statewide. Exact criteria vary by program, yet all programs prioritize assisting low income households. Most of IHCDA's housing programs prioritize 50% AMI households; ESG and HOPWA generally reach to lower income levels due to the nature of the populations they serve.

ESG allocates funds to emergency shelter, rapid re-housing, homeless prevention, and outreach activities statewide. These and the HOPWA funds follow the CoC jurisdiction of every county outside of Marion. In addition, IHCDA would like to allocate a small percentage portion of ESG funds towards HMIS. This funding would cover the technical support and access the HMIS Lead provides to ESG subrecipients, including CAPER preparation. The allocation would also allow the HMIS Lead to expand the system to include night-by-night tracking and more robust data analysis opportunities.

The HOPWA grant does rely on a geographic allocation, determined through the Continuum of Care regions. With the exception of Region 7, IHCDA will allocate HOPWA funding to Project Sponsors that either are a Non-Medical Case Management Provider (NMCMP - as designated by IDOH) or have a formal agreement with a NMCMP. This will remain true for all regions across the borders of the Indiana Balance of State. If a distinct eligible population with specific needs exists in a region, IHCDA will work with the regional Project Sponsor or the City of Indianapolis' HOPWA program to tailor services to meet the needs of the population.

HTF for rental development is allocated statewide to projects that meet the underwriting standards as defined under 24 CFR 93.

Affordable Housing

AP-55 Affordable Housing – 24 CFR 91.320(g)

Introduction:

Table 53 - One Year Goals for Affordable Housing by Support Requirement

One Year Goals for the Number of Households to be Supported	
Homeless	400
Non-Homeless	235
Special-Needs	50
Total	685

Table 54 - One Year Goals for Affordable Housing by Support Type

One Year Goals for the Number of Households Supported Through	
Rental Assistance	450
The Production of New Units	85
Rehab of Existing Units	150
Acquisition of Existing Units	unknown
Total	685

Discussion:

The precise number of households to be supported through production of new units, rehab of existing units and acquisition of existing units is not yet known. It will be based upon the number of applications received.

AP-60 Public Housing - 24 CFR 91.320(j)

Introduction:

Actions planned during the next year to address the needs to public housing

Since January of 2019, IHCD has approved eight Rental Assistance Demonstration projects, preserving 1,081 units across the State of Indiana.

IHCD will set aside 12.25% of available annual Rental Housing Tax Credits for Developments involving the substantial rehabilitation of existing federally-assisted affordable housing and/or the demolition and reconstruction of federally- assisted affordable housing units utilizing the same site (over 50% of the units must be replaced in the Development/Application).

This includes:

- 1) Developments that propose the preservation of HUD or USDA affordable housing; or RHTC Developments with Compliance Periods that have expired or are expiring in the current year and the extended use agreement is still in place; or
- 2) Federally assisted developments which entail demolition and decentralization of units with replacement of units on the same site as described above.

To be eligible for the set-aside, a Development must meet the following requirements:

- If a Development contains multiple building and construction types, at least 50% of the units must qualify as preservation units; and
- Rehabilitation hard costs must be in excess of \$30,000 per unit excluding the costs of furniture, construction of community buildings and common area amenities. However, USDA Rural Development Section 515 properties may include the cost of construction for community buildings and common area amenities in the minimum per unit amount. Note: for Developments competing in all other set-asides, rehabilitation hard costs must be in excess of \$20,000 per unit.

In addition, IHCD also offers points to Rental Housing Tax Credit Applications who propose the preservation of HUD or USDA affordable housing (including, but not limited to Project Based Section 8, Public Housing or RD 515 Properties).

Actions to encourage public housing residents to become more involved in management and participate in homeownership

IHCD has taken a leadership role among Indiana Public Housing Authorities to promote the development of Permanent Supportive Housing and increase utilization of the VASH program. IHCD has utilized its

housing choice voucher program to provide rental assistance in PSH developments around the state. In the VASH program, IHCD has developed relationships with PHAs around the state to allow veterans to utilize the VASH program where they would like regardless of if the local PHA has a VASH program.

The Indiana Supportive Housing Institute is an important element of the Indiana Permanent Supportive Housing Initiative (IPSHI), which was launched by IHCD and the Corporation for Supportive Housing (CSH) in 2008 to further the strategy to end long-term and recurring homelessness.

The 2025 Institute developments will be eligible for only 100% permanent supportive housing developments. Developments are eligible for a set-aside of funding through the HOME Investment Partnerships Program. Development teams are eligible to request additional capital funds in the form of low-interest loans from IHCD through the Indiana Affordable Housing and Community Development Fund program. Teams will also have access to project-based rental assistance from IHCD in the form of project-based vouchers if local project-based vouchers are not available.

The Institute and its partners will provide targeted training, technical assistance, capacity-building resources, and the opportunity to apply for predevelopment financing for both new and experienced development teams. Teams will receive over 80 hours of training including individualized technical assistance and resources to assist in completing their project. In addition, industry experts, including staff from IHCD, will provide insight on property management, financing, and building design. As stated in the Institute's RFP, upon completion, partners will have: individualized supportive housing plans with supportive service and delivery strategies; skills to operate existing supportive housing and develop new projects; strong property management and service teams; and access to capital funding and rental assistance from IHCD. Institute deliverables include: approved project concept including site selection and minimum development design characteristics; Memorandum of Understanding; a shared mission statement; Community Support Plan; Detailed Supportive Services Plan; Tenant Selection Plan; Tenant Involvement Plan; Property Management Plan; Eviction Prevention Plan; operating policies and protocols; and preliminary project proposals and budgets.

If the PHA is designated as troubled, describe the manner in which financial assistance will be provided or other assistance

N/A

AP-65 Homeless and Other Special Needs Activities – 91.320(h)

Describe the jurisdictions one-year goals and actions for reducing and ending homelessness including

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

The State relies on its partners to conduct outreach to persons who are homeless, assess their needs and communicate these needs to the State. To that end, the State will:

- Require all HUD McKinney Vento Funded programs to utilize HMIS for all shelter or transitional housing or permanent supportive housing programs serving homeless individuals and families.
- Require all HUD McKinney Vento Funded programs to participate in the annual, statewide homeless Point-in-Time Count in late January and timely submission of this data to IHCD.
- Require all HUD McKinney Vento Funded programs subrecipients actively participate in their Regional Planning Council on the Homeless meetings regularly.
- Require all HUD McKinney Vento Funded programs to participate in the Coordinated Entry in their Region.

In October 2023, IHCD released a report and evaluation of the state's Balance of State CoC Coordinated Entry System (CES) processes. The report was completed in collaboration with C4 Innovations to gather accurate information that evaluates the effectiveness of the client flow through the CES; and to identify racial disparities within the CoC's CES.

Several recommendations were developed from stakeholder interviews, surveys, and HMIS data analysis. Over the next year, IHCD will work with its partners to assess the feasibility of implementing the following action items to increase homeless outreach and improve homeless needs assessments:

- Expand the United Way Grant to cover transportation costs in rural areas and for individuals with disabilities.
- Develop targeted outreach strategies for youth, young adults, families, immigrants, and seniors that address their unique needs.
- Enhance communication and advertising throughout the CES system, especially in rural areas and regions to increase residents' awareness of available resources.
- Maximize the PIT count to engage with individuals experiencing homelessness and connect them with CES resources.

These recommendations are currently being implemented by IHCD.

Addressing the emergency shelter and transitional housing needs of homeless persons

In addition to the allocation of ESG to meet the needs of persons who are homeless (see AP-20), emergency shelter and transitional housing needs are addressed through the shelter and outreach portions of these funds as well as a larger coordination across the CoC. Each ESG recipient is required to participate in their local Regional Planning Council on Homeless in their Region. This ensures that all organizations/individuals who are serving the homeless come together to discuss and create local strategies to address emergency and transitional housing needs. These needs are then communicated up to IHCD and the CoC board as a whole. Together, IHCD and the board incorporate this input into the board's vision for meeting these needs across the CoC. During the next five years, the board plans to create a strategic plan and blueprint for the CoC. They will use data from the HIC, PIT, and other HUD data points to make strategic decisions on areas of the state that need additional emergency and transitional shelter.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again

Rapid re-housing activities include housing relocation and stabilization services and financial assistance with rent, utilities, arrears, and deposits. The function of these funds is to provide short-term assistance to individuals and families. The State offers shelters a version of RRH that did not include rental assistance, and instead covers one-time assistance to support a direct connection from shelter to permanent housing including housing relocation and stabilization services, utilities, arrears, and deposits.

Subrecipients that receive RRH funds are required to create a Memorandum of Understanding (MOU) with shelters in their region to further strengthen the connection from emergency housing to permanent options including rentals with short/medium term subsidy.

Help low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families who are likely to become homeless after being discharged from a publicly funded institution or system of care, or who are receiving assistance from public and private agencies that address housing, health, social services, employment, education or youth needs

IHCD has taken a leadership role among Indiana Public Housing Authorities to promote the development of Permanent Supportive Housing and increase utilization of the VASH program. IHCD has utilized its housing choice voucher program to provide rental assistance in PSH developments around the state. In

the VASH program, IHCD has developed relationships with PHAs around the state to allow veterans to utilize the VASH program where they would like regardless of if the local PHA has a VASH program.

The Indiana Supportive Housing Institute is an important element of the Indiana Permanent Supportive Housing Initiative (IPSHI), which was launched by IHCD and the Corporation for Supportive Housing (CSH) in 2008 to further the strategy to end long-term and recurring homelessness. The focus is on funding lasting solutions instead of stop-gap programs.

The Institute and its partners will provide targeted training, technical assistance, capacity-building resources, and the opportunity to apply for predevelopment financing for both new and experienced development teams. Teams will receive over 80 hours of training including individualized technical assistance and resources to assist in completing their project. In addition, industry experts, including staff from IHCD, will provide insight on property management, financing, and building design. As stated in the Institute's RFPs, upon completion, partners will have: individualized supportive housing plans with supportive service and delivery strategies; skills to operate existing supportive housing and develop new projects; strong property management and service teams; and access to capital funding and rental assistance from IHCD. Institute deliverables include: approved project concept including site selection and minimum development design characteristics; Memorandum of Understanding; a shared mission statement; Community Support Plan; Detailed Supportive Services Plan; Tenant Selection Plan; Tenant Involvement Plan; Property Management Plan; Eviction Prevention Plan; operating policies and protocols; and preliminary project proposals and budgets.

In addition, IHCD provides staff support to the IN BoS CoC, which includes providing training and technical assistance to regional planning councils in order to increase their effectiveness in:

- Supporting and actively engaging in IN BoS CoC strategies to prevent and end homelessness;
- Engaging in local collaborative planning around homeless programming
- Organizing and conducting the local Point-in-time Count process and assisting with updating Housing Inventory Charts (HIC)
- Ensuring the statewide Coordinated Entry System is implemented consistently in each region, including establishing a local prioritization process and maintaining a prioritization list
- Coordinating Winter and Summer Contingency planning
- Representing the IN BoS CoC by interacting with local Entitlement Cities on their Consolidated Plans.

AP-70 HOPWA Goals – 91.320(k)(4)

One year goals for the number of households to be provided housing through the use of HOPWA for:	
Short-term rent, mortgage, and utility assistance to prevent homelessness of the individual or family	225
Tenant-based rental assistance	125
Units provided in permanent housing facilities developed, leased, or operated with HOPWA funds	25
Units provided in transitional short-term housing facilities developed, leased, or operated with HOPWA funds	0
Total	375

AP-75 Barriers to affordable housing – 91.320(i)

Barriers to addressing affordable housing needs that have been identified in the housing analysis from the Consolidated Plan and supporting studies:

- Poor condition of affordable housing stock according to residents and stakeholders. Inability of residents to make needed improvements due to low incomes. Difficulty obtaining private sector loans to complete needed improvements due to low incomes of those living in units in poor condition.
- Disproportionately high levels of cost burden and lower homeownership rates for certain populations due to historically low incomes, high mortgage denial rates, and lack of affordable/ publicly subsidized housing to meet their needs. Cost burden gaps are greatest for residents earning between 30 and 50% AMI—those just over the poverty level. Homeownership rates are lowest for Black or African American residents.
- High mortgage loan denial rates for non-White residents, even when adjusting for income level.
- Non-White residents and residents with disabilities are most likely to express challenges with home buying associated with saving enough for down payments and meeting mortgage loan qualifications.
- Higher use of publicly-supported housing by African American residents, suggesting challenges obtaining private market housing.
- Housing choice for residents with disabilities restricted by the lack of available, affordable, accessible housing.
- Landlords not accepting service animals and charging higher rents or deposits for persons with disabilities requesting reasonable accommodations.
- Lack of rental housing for families with children: on average 72% of Housing Choice Voucher wait lists are families with children.

Economic Opportunity Issues

- Gaps in educational attainment for Hispanic residents.
- Residents with disabilities face challenges finding employment and those who are employed earn less than those without a disability.
- Economic differences contributing to segregation, mostly in urban areas. In some areas, lack of opportunity and lack of available housing perpetuate similar neighborhoods.
- Limitations (property tax caps) on State and local tax revenue generation.
- Severe lack of services and trained staff to deliver mental health and supportive services.

The factors contributing to these issues are:

- Economic weaknesses in some non-entitlement areas preventing residents from making needed repairs.
- Lack of accessible housing stock.
- Historically lower incomes of non-White and Hispanic residents and, for Hispanic residents, lower rates of educational attainment.
- Residents with disabilities facing lower employment opportunities and discrimination in housing markets.
- Families with children and non-White and Hispanic residents experiencing discrimination in rental market transactions.
- Landlords not complying with and/or not understanding laws, particularly reasonable accommodations.
- Insufficient resources to fund ADA improvements to public buildings and infrastructure, particularly in rural areas.

Actions it planned to remove or ameliorate the negative effects of public policies that serve as barriers to affordable housing such as land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations, and policies affecting the return on residential investment

OCRA and IHCD have work closely with the Fair Housing Center of Central Indiana (FHCCI) and the Indiana Civil Rights Division (ICRC) to address the identified barriers.

Land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations and policies affecting the return on residential development and largely determined at the local level and are outside of the State's purview.

AP-85 Other Actions – 91.320(j)

Introduction:

This section describes a variety of other efforts the state will continue during the program year to help address housing and community development needs.

Actions planned to address obstacles to meeting underserved needs

The state will continue to provide training for the application process associated with the HUD grants to ensure equal access to applying for funds, and continually review and update its proposed allocation with current housing and community development needs, gathered through the citizen participation plan and demographic, housing market and community development research.

As an example, the IHCD HOME Rental Policy contains an Opportunity Index scoring section. The purpose of this category is to incentivize developments in areas of opportunity. The Opportunity Index awards points for locating projects in areas close to public transportation and fresh produce as well as in areas with low unemployment rates, high job growth, and high median household incomes. Together, these categories enable IHCD to ensure projects are being funded in areas of opportunity and in areas where there is a high need for assistance.

The state will continue the Neighborhood Assistance Program which provides tax credits for nonprofit organizations to leverage contributions for neighborhood programs and projects that benefit economically disadvantaged areas and persons. Projects eligible for tax credits under the program include: affordable housing; counseling services; child care; education assistance; emergency assistance; job training; medical care; recreational facilities; downtown rehabilitation activities; and neighborhood revitalization activities. Tax credits are awarded in the amount of \$40,000 per organization.

In early 2023, IHCD hosted a technical assistance webinar to answer general questions about HOME Rental Construction application forms for developers. The webinar also aims to educate applicants about IHCD's goal of funding housing for low-income people that are accessible, energy-efficient, and include MBE, WBE, Federal Disadvantaged Business Enterprise (DBE), VOSB, and/ or SDVOSB contractors and team members. IHCD will also allow for CHDOs to apply for HOME funding if their project is located within a PJ who receives less than \$500,000 of HOME if the PJ also commits HOME funding to the project; this policy can assist with financing HOME projects which otherwise may have significant financial gaps in markets in which a larger LIHTC project may not be feasible, or in which there is not a market.

IHCD has also worked on providing and supporting capacity building of non-profits and CHDOs, offering a myriad of trainings including, but not limited to: National Development Council Rental Housing Development Certification, CHDO and Non-Profit Executive Course, HOME Fundamentals Training, Project Development Training, Green Building Certification, Lead and RRP Training and Certification, Aging in Place Certification, Universal Design Certification, Fair Housing Training, and training on Environmental

Reviews and Section 106. Through this training, IHCDCA hopes to continue to provide quality training on how to use its federal funding and to ensure the highest quality of affordable housing.

In early 2023, IHCDCA's compliance team offered a free webinar training for owner and management agents that need to complete the 2022 Annual Owner Certification of Compliance. The training focused on how payments can be completed in the IHCDCA online payment portal, adding units and utility allowances, recertification, and other related topics. In 2023, IHCDCA, in partnership with TDA consulting and HUD's CHDO Technical Assistance Provider, provided a 17-week training series on Community Housing Development Organization (CHDO) regulations and non-profit management best practices. The training includes presentations and assignments for participants aimed to improve project management.

IHCDCA maintains its level of funding for Tenant Based Rental Assistance. IHCDCA designed its TBRA program to improve the range of housing options for income qualified formerly incarcerated individuals. Under IHCDCA's TBRA Program, IHCDCA may provide security deposits, utility deposit assistance, or rental assistance. Waivers and extensions which were granted and subsequently extended by HUD in response to the COVID-19 pandemic expired on September 30, 2021. Therefore, all original program requirements have been reinstated.

A separate and distinct program offered by IHCDCA is the RampUp Program. RampUp provides grants to nonprofits to install exterior ramps to homes (up to \$5,000 per home) to improve accessibility for those Hoosiers with mobility and movement challenges. This program can assist any household with a member who is under six years of age, who is over 62 years of age, or who has a disability. Other limited repairs and modifications can be done to improve access, including the widening of doorways and the minimization of thresholds.

In 2023, IHCDCA and the Indiana Balance of State Continuum of Care engaged a contractor to create a new Coordinated Entry System (CES) assessment process to produce more equitable outcomes and ensure households are served in a more trauma-informed manner, stably housed quickly, and matched with the appropriate housing placement. In addition, IHCDCA has also identified an additional contractor to provide an annual evaluation of the CES, which is required by HUD.

Actions planned to foster and maintain affordable housing

The primary activities to foster and maintain affordable housing are the state's CDBG, HOME and HTF funded activities that include the production of new units, homeownership opportunities, home rehabilitation and capacity support for affordable housing developers. IHCDCA uses each of its programs to target a variety of needs and populations including, though not limited to: seniors, persons who are homeless, persons with physical or developmental disabilities, persons with mental impairments, persons with chemical addictions, single parents, victims of domestic violence, abused children families with children six and under veterans, and the re-entry population. IHCDCA has supported numerous trainings on different facets on developing and maintaining affordable housing, and supporting safe, quality

housing across the state.

IHCDA's HOME program is focused on the following goals:

1. Demonstrate they are meeting the needs of their specific community;
2. Reach low and very low-income levels of income;
3. Link the project to the revitalization of existing neighborhoods, preferably through a comprehensive approach (i.e. as part of a published and approved community revitalization plan);
4. Advance projects that promote aging-in-place strategies for seniors, persons with disabilities, and families with seniors or persons with disabilities;
5. Propose projects that are energy-efficient and are of the highest quality attainable within a reasonable cost structure.

Applicants of IHCDA's programs and funds are encouraged to engage in an array of activities necessary to attain the solutions desired by a community, such as:

- Pre-development and seed financing – limited to eligible nonprofits
- Permanent Supportive Housing – Applicants must participate in the Indiana Supportive Housing Institute to be considered for an IHCDA investment.
- Rental assistance
- Acquisition, rehabilitation, guarantees, refinance, or (re)construction of rental housing
- Homeownership counseling and down payment assistance (not available using HOME funding)
- Acquisition, rehabilitation, guarantees, refinance, or (re)construction of homebuyer housing

Additionally, the State utilizes other programs (summarized earlier in this section) to help foster and maintain affordable housing and include:

- Affordable Housing and Community Development Fund;
- Indiana Foreclosure Prevention Network;
- Low Income Housing Tax Credits (LIHTC); and
- Section 8 voucher program.

IHCDA has also updated its housing counseling requirements for its HOME Homebuyer applicants.

The HOME regulations at 92.254(a)(3) require all homebuyers who receive HOME assistance or purchase units developed with HOME funds must receive housing counseling. In a final rule published by HUD's Office of Housing Counseling, HUD established housing counseling certification requirements provided in connection with a HUD program. All adult household members who will hold title and be a party to the senior loan are required to complete homebuyer counseling.

Under the rule, all homebuyers assisted under the HOME program must receiving housing counseling that is performed by a certified housing counselor who has passed the HUD certification examination and is employed by a HUD-approved housing counseling agency.

The Housing Counseling must be independent, expert advice customized to the need of the consumer to address the consumer's housing barriers and to help achieve their housing goals and must, at a minimum include the following process:

- Intake
- Financial and housing affordability analysis
- An Action Plan
- Reasonable effort to have following up communication with the client when possible.

The content and process of housing counseling must meet the standards outlined in 24 CFR part 214. The counseling **must be individualized** to the specific potential homebuyer. The counseling must address all homeownership topics relevant to the client, including:

- The decision to purchase a home;
- The selection and purchase of a home;
- Issues arising during and affecting the period of ownership of a home (including refinancing, default, and foreclosure and other financial decisions);
- The sale or other disposition of a home.

In addition, the counselor must communicate on the importance of obtaining an independent home inspection using the materials available. All homebuyers must be given the two HUD brochures referenced below about the importance of home inspections. The recipient must ensure that each homebuyer signs a receipt acknowledging they were given these items. Both items may be accessed here: <https://www.hudexchange.info/resource/4747/for-your-protection-get-a-home-inspection/>

Eligible housing counseling is not services that provide only housing information, placement or referral services, routine administrative activities (such as intake), case management that provides housing series as incidental to a larger case management and does not fund housing counseling, fair housing advice and advocacy (such as filing claims), or group education without individualized services.

IHCDA offers pre-purchase and post-purchase counseling as eligible under this policy. The delivery method may be flexible (in-person, by phone or via the internet), but the counseling must be specific to the homebuyer. Counselors at a minimum must provide eight hours of training; at least six hours must be pre-purchase. Certificates are valid for one year after completion of the training. The applicant, prior to entering into the sales contract, must submit documentation of the training to IHCDA for approval. If the pre-purchase training was not conducted or approved by IHCDA at time of the signed sales contract, the grantee will be required to repay HOME funds to IHCDA.

The recipient may not charge servicing, origination, processing, inspection, or other fees for the costs of providing homeownership program assistance.

Actions planned to reduce lead-based paint hazards

Lead-based paint hazards will primarily be addressed through CDBG and HOME funded rehabilitation activities. IHCD has developed new lead forms, and done multiple trainings on how to address lead based paint through both these programs. IHCD also administers multiple HUD programs to address lead paint hazards under its Healthy Homes Resource Program; IHCD has also developed a program to allow for reimbursement for contractors to receive their appropriate lead licenses.

IHCD maintains a partnership with the Indiana Department of Health – Lead and Healthy Homes Division; the two agencies work to identify children with elevated blood lead levels and enroll those families in IHCD's Healthy Homes Resource Program. IHCD maintains a list of rental properties that have received lead hazard control through its programs.

IHCD will continue to offer workshops on the Lead Safe Housing Rule and the HUD Lead regulations to administrators and contractors. IHCD will also be addressing the dearth of eligible risk assessors, inspectors and licensed contractors by working with the Indiana Builders Association to advertise trainings. IHCD has also developed a program to allow for reimbursement for contractors to receive their appropriate lead licenses.

As part of the Healthy Homes Resource Program, and in cooperation with the Department of Health, IHCD keeps a website of all state-lead programming, a Lead Paint Safety guide, applications in both English and Spanish for interested families on this website: <https://www.in.gov/ihcd/homeowners-and-renters/lead-protection-program/>.

IHCD developed a flowchart that guides tenant-based rental assistance (TBRA) subrecipients through any of the LBP scenarios they may encounter. The flowchart instructs subrecipients on in what circumstances when to use each of the LBP forms and, for each scenario, provides a clear and detailed list of what documentation must be present in the client file.

IHCD updated LBP language in its CoC PSH award agreements and is gearing up to have uniform TBRA LBP guidance appearing in its program manuals for CoC, ESG, and HOPWA.

Actions planned to reduce the number of poverty-level families

Indiana has a history of aggressively pursuing job creation through economic development efforts at the state and local levels. This emphasis on creating employment opportunities is central to a strategy to reduce poverty by providing households below the poverty level with a means of gaining sustainable employment.

The Governor's 2020 Next Level plan focuses on expanding educational and skill development opportunities in rural areas; attracting Defense Department-related jobs and investing in broadband statewide.

In 2023, the State of Indiana established several education and workforce development programs

including the career scholarship account program and fund; career scholarship account administration and donation fund; connecting students with careers fund; teacher higher education and industry collaboration grant program and fund; career coaching grant fund; and the intermediary capacity building fund. As part of this effort, the Commission for Higher Education will develop and implement a comprehensive career navigation and coaching system for Indiana and award grants to eligible entities to establish navigation and coaching systems. Schools will be required to provide instruction to students on career awareness including skill competencies, career fairs, and opportunities to meet with employers or labor organizations.

The state also created the Northeast Indiana Strategic Development Fund and the Strategic Development Commission in 2023 to develop and implement plans and policies that will increase the per capita personal income relative to the national average; increase the population in development areas; increase postsecondary education and credential attainment; increase number of business startups and programs to support entrepreneurs; incentivize collaboration between K-12 school systems, higher education institutions, and industries; expand access to and the availability of infrastructure needed to facilitate development and population density; and perform strategic planning involving regional efforts for economic development.

In recent years, IHEDA has made several program adjustments to more directly target funds to benefit poverty-level families. IHEDA has added an Opportunity Index to incentivize the construction of HOME projects in areas with public transit, low unemployment, high job growth, proximity to employers, low poverty rate, and higher household income at the county and census tract level. IHEDA also added a new scoring category on Health and Quality of Life Factors to incentive HOME developments near primary care physicians, fresh produce, and proximity to positive land uses.

The State also utilizes the Section 3 requirement (a provision of the Housing and Urban Development Act of 1968). Section 3 applies to employment opportunities generated (jobs created) as a result of projects receiving CDBG or HOME funding through OCRA or IHEDA, whether those opportunities are generated by the award recipient, a subrecipient, and/or a contractor. The requirements of Section 3 apply to all projects or activities associated with CDBG or HOME funding, regardless of whether the Section 3 project is fully or partially funded with CDBG/HOME. A detailed description of Section 3 requirements is included in OCRA/IHEDA's award manual. A notice of Section 3 requirements is included in bid solicitations and is covered during the award trainings.

Actions planned to develop institutional structure

OCRA and IHEDA will continue to build capacity, leadership, and institutional structure in rural areas through:

- Regional Capacity Building workshops;
- Webinars and regional meetings to discuss funding opportunities and answer questions from

grantees;

- Participation in state conferences to market programs;
- The Indiana Permanent Supportive Housing Institute;
- CHDO working group – a group of eight to ten CHDO across the State of Indiana to discuss successes and challenges with the HOME Program, and to provide peer-to-peer support on non-profit capacity building.
- Trainings on Reasonable Accommodations, Lead Based Paint, Certified Green Professional Certification, Certified Aging in Place Training and Universal Design; and
- Affordable housing development training.

IHCDA continues to offer its trainings at no cost to partners and in an online format for those from around the state who wish to participate without the burden of additional expenses related to travel.

Actions planned to enhance coordination between public and private housing and social service agencies

The State has an active network of community development corporations, many of which have become increasingly focused on housing and community development issues. These organizations are engaged in a variety of projects to meet their communities' needs, from small-scale rehabilitation programs to main street revitalization. Public housing authorities exist in the major metropolitan areas and in small to medium-sized communities throughout the State.

The State also has several organizations that advocate for State policies and organize housing and community development activities at the State level. Prosperity Indiana provides policy coordination, as well as training and technical assistance, to support nonprofit housing and community development activities. The Back Home in Indiana Alliance is composed of Indiana leaders in several affordable-housing and disability-related organizations and help people with disabilities become homeowners in several Indiana communities.

OCRA holds regular "listening sessions" in non-entitlement areas throughout the state to gather information on economic development and housing challenges. Those sessions provide an opportunity for various housing, service, and community development interests to explore solutions to their needs and foster working relationships.

OCRA's community liaisons (OCRA's can be found at <https://www.in.gov/ocra/2330.htm>) partner with local units of government, the private sector, and nonprofits to locate and proactively work to locate funding and other resources for community and economic development projects, as well as facilitate the meeting of local officials, state, and federal agencies. They also provide technical assistance on all OCRA programs.

IHCDA's two Real Estate Production Analysts each cover a region of the state (North and South) and

provide frequent outreach and technical assistance. Outreach is provided by email, over the phone, and in-person when requested. Production Analysts also traditionally attend ribbon cutting, groundbreakings, and other promotional events.

IHCDA conducts regional outreach meetings every year. These meetings are held three to five times a year and are each located in a different area of the state in order to ensure that partners in all areas of the state are able to easily attend. The information provided at these meetings is also tailored to address the specific needs of the region in which the meetings is being held. Local projects are highlighted as well. Production Analysts and other IHCDA staff utilize their existing contacts to invite current and potential partners to these meetings. Outreach meetings provide an opportunity for partners to meet their analysts as well as ask questions and provide input on IHCDA policy. Due to COVID precautions, these meetings have been held virtually and can continue to be conducted as webinars if necessary.

IHCDA also sponsors, in partnership with the Indiana Affordable Housing Council, the Indiana Housing Conference. The Indiana Housing Conference is an annual conference for affordable housing professionals in which industry news and best practices are discussed. The conference also provides an opportunity for networking between affordable housing professionals from across the state and country.

IHCDA continues to partner with the Indiana Department of Health on its Healthy Homes Resource Program. IHCDA has started the Indiana Healthy Homes Roundtable which meets monthly to discuss lead-based paint issues throughout the state. The group consists of IHCDA and ISDH. IHCDA has established a strong relationship with the Family and Social Services Administration (FSSA) to assess affordable assisted living supply, along with production of housing for persons with intellectual or developmental disabilities, or persons who have a chemical addiction.

IHCDA will continue to foster partnerships with organizations providing eviction and legal services to residents across the state.

Program Specific Requirements

AP-90 Program Specific Requirements – 91.320(k)(1,2,3)

Introduction:

Community Development Block Grant Program (CDBG)

Reference 24 CFR 91.320(k)(1)

Projects planned with all CDBG funds expected to be available during the year are identified in the Projects Table. The following identifies program income that is available for use that is included in projects to be carried out.

1. The total amount of program income that will have been received before the start of the next program year and that has not yet been reprogrammed	0
2. The amount of proceeds from section 108 loan guarantees that will be used during the year to address the priority needs and specific objectives identified in the grantee's strategic plan.	0
3. The amount of surplus funds from urban renewal settlements	0
4. The amount of any grant funds returned to the line of credit for which the planned use has not been included in a prior statement or plan	0
5. The amount of income from float-funded activities	0
Total Program Income:	0

Other CDBG Requirements

1. The amount of urgent need activities	0
2. The estimated percentage of CDBG funds that will be used for activities that benefit persons of low and moderate income. Overall Benefit - A consecutive period of one, two or three years may be used to determine that a minimum overall benefit of 70% of CDBG funds is used to benefit persons of low and moderate income. Specify the years covered that include this Annual Action Plan.	80.00%

HOME Investment Partnership Program (HOME)

Reference 24 CFR 91.320(k)(2)

1. A description of other forms of investment being used beyond those identified in Section 92.205 is as follows:

N/A

2. A description of the guidelines that will be used for resale or recapture of HOME funds when used for homebuyer activities as required in 92.254, is as follows:

The recipient must implement recapture restrictions for any homebuyer property purchased, in whole or in part, by a homebuyer that received a direct buyer subsidy from the recipient in an amount greater than or equal to One Thousand and 01/100 Dollars (\$1,000.01) from HOME funds. A homebuyer subsidy consists of any financial assistance that reduces the purchase price from fair market value to an affordable price, or otherwise directly subsidizes the purchase (e.g., down-payment or closing cost assistance, subordinate financing). Developers, other than CHDOs, are not allowed to provide down-payment or closing cost assistance.; However, a developer may provide a direct subsidy by reducing the purchase price from fair market value to an affordable price.

There are two different consequences that may be associated with a recapture provision: (1) the recapture provision can be triggered (as described just below) or (2) an event of non-compliance can occur (as described further below). The recapture provisions are triggered if any of the following occur during the Affordability Period:

1. The homebuyer transfers or conveys the property by deed, land contract, or otherwise;
2. Foreclosure proceedings are commenced against the property;
3. The property is transferred by an instrument in lieu of foreclosure; or,
4. The title to the property is transferred from the homebuyer through any other involuntary means.

The amount of the homebuyer subsidy shall be reduced by multiplying the homebuyer subsidy by the Forgiven Ratio (defined below) in order to determine the amount that will be forgiven. The amount to be recaptured and shall be limited to the Net Proceeds of the sale. Net Proceeds is defined as the sales price minus superior loan repayment (other than HOME funds) and closing costs. If there are no Net Proceeds, the amount to be recaptured will be zero and the HOME loan is considered satisfied. In the event there is significant market appreciation, once the HOME obligation is recaptured, the homebuyer can retain any appreciation. The amount recaptured cannot exceed the Net Proceeds, if any. Forgiven Ratio means a ratio that calculates the amount of the Direct Subsidy that is forgiven. This ratio shall be calculated by dividing the number of full months that owner occupies the property as its principal residence by the total of number of months in the Affordability Period.

The recipient will be required to ensure that a lien and restrictive covenant agreement , drafted by IHCD

has been executed and recorded on any HOME-assisted property.

In accordance with CPD Notice 12-003, the recipient must also execute a HOME written agreement with the homebuyer before or at the time of sale. The purpose of the agreement is to ensure that all parties are aware of the provisions related to the lien and restrictive covenant agreement and HOME requirements applicable to the HOME assisted unit (i.e., period or affordability, principal residency requirement, etc.). The recipient will be required to use IHCD's form of Homebuyer Recapture Agreement.

If there is both a development subsidy and a direct homebuyer subsidy or just a direct homebuyer subsidy, a recapture provision must be implemented. In cases where a direct homebuyer subsidy was not provided and there is only a development subsidy, resale restrictions must be executed on the property. Under recapture guidelines the Affordability Period is based upon the total amount of the direct homebuyer subsidy that the homebuyer received in HOME funds. A direct homebuyer subsidy consists of any financial assistance that reduces the purchase price from fair market value to an affordable price, or otherwise directly subsidizes the purchase (e.g., down-payment or closing cost assistance, subordinate financing).

3. A description of the guidelines for resale or recapture that ensures the affordability of units acquired with HOME funds? See 24 CFR 92.254(a)(4) are as follows:

Please see the Grantee Unique Appendices for the guidelines (HOME Homebuyer policy on pages 31-32). IHCD does use the home affordable homeownership limits published by HUD.

Recipients will be required to provide an "after rehab" or "construction value" appraisal; whichever is appropriate, from a licensed appraiser for all property assisted with the award with the first draw that includes hard costs. If the applicant is acquiring property, an "as-is" appraisal is required with the first draw request for acquisition reimbursement.

According to 24 CFR 92.254(a)(2) in the case of acquisition of newly constructed housing or standard housing, the property must have a purchase price that does not exceed the Homeownership Values as determined by HUD. For newly constructed housing, the value limits are 95% of the median purchase price for the area based on the Federal Housing Administration (FHA) single family mortgage program data for newly constructed housing. HUD has established a minimum limit, or floor, based on the 95% of the U.S. median purchase price for new construction.

For existing housing, the value limits are 95% of the median purchase price for the area based on Federal FHA single family mortgage program data for existing housing and other appropriate data that is available. HUD has established a minimum limit, or floor based on 95% of the state-wide nonmetropolitan area median purchase price for existing housing.

The limits can be accessed from HUD here: <https://www.hudexchange.info/resource/2312/home-maximum-purchase-price-after-rehab-value/>

It is important to note that while these are the maximum limits, the amount may not be affordable to a potential HOME-buyer. IHCD, through its underwriting as defined in the earlier section, may deny the final sales contract if the purchase price (the mortgaged amount), even reduced, is determined to be

higher than the homebuyer may safely afford. The HOME-assisted housing unit must be occupied as the homebuyer's principal residence throughout the affordability period.

4. Plans for using HOME funds to refinance existing debt secured by multifamily housing that is rehabilitated with HOME funds along with a description of the refinancing guidelines required that will be used under 24 CFR 92.206(b), are as follows:

N/A

Emergency Solutions Grant (ESG)

Reference 91.320(k)(3)

1. Include written standards for providing ESG assistance (may include as attachment)

Please see the Grantee Unique Appendices for the guidelines.

2. If the Continuum of Care has established centralized or coordinated assessment system that meets HUD requirements, describe that centralized or coordinated assessment system.

In 2024, the IN BoS CoC launched the Collaborative Housing Assessment Tool (CHAT) as its new CE process. Unifying this process across all regions has helped to standardize the process across the various regions and with all stakeholders who use the Coordinated Entry System (CES). The CHAT process was designed with intentional language choices informed by PLE, DV Survivors, both COC and ESG service providers, and other special population stakeholders. The process was designed to be conversational and phased, collecting only necessary information at each stage. The process was also created with intentional break points to allow the participants to pause the assessment at each phase if they would prefer. In 2025, the CHAT Evaluation Task Force will be reviewing the tool to gauge outcomes and identify any updates, edits, or corrections needed. The Service Provision Committee (SPC) of the IN BoS CoC Board includes regional representation from each Region across the CoC and offers opportunities for ESG and CoC services providers to provide input on policy changes being considered. The SPC reviews the CE Policies and Procedures annually.

3. Identify the process for making sub-awards and describe how the ESG allocation available to private nonprofit organizations (including community and faith-based organizations).

IHCDA plans to allocate funding to approximately 15 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Activities of the ESG program for line items such as: housing relocation and services (financial and services), rental assistance and administration. There will be approximately 60 agencies that will apply for emergency shelter component that includes operations, essentials, and financial assistance and approximately two - six agencies that may apply for the Annual Action Plan street outreach activity. No more than 60% of ESG funds will be allocated to operations, essentials and street outreach. A request for proposals will be distributed to all the Regional Planning Councils on the Homeless throughout the Balance of State, to the current subrecipients of the ESG program, current permanent supportive housing rental assistance programs (mental health centers, housing agencies, community action agencies, nonprofits) who have had experience with rental assistance. Each proposal will be reviewed by at least one IHCDA Community Services staff person and by a member of a Committee under the CoC Board. Each reviewer will complete a scoring tool, assigning points based on the following program design components: outreach system, commitment to the coordinated access intake point, systems coordination, organizational capacity, permanent housing placement strategy, history of administering the rental assistance programs, amount of match provided and coordination with ESG Entitlement City funds (as applicable). Each subrecipient will be awarded based upon the average of their proposal score and the amount of funding that will be available. The amount of each award could be between \$60,000 (for shelters) and \$250,000 (for Rapid Re-housing) each.

4. If the jurisdiction is unable to meet the homeless participation requirement in 24 CFR 576.405(a), the jurisdiction must specify its plan for reaching out to and consulting with homeless or formerly homeless individuals in considering policies and funding decisions regarding facilities and services funded under ESG.

The State ESG recipient – IHCD - has a member of the Resource & Funding Committee and the Balance of State CoC Board who has been formerly homeless and currently lives in a permanent home after recently leaving permanent supportive housing. The committee provides guidance to our CoC Programs and their policies and procedures. The State of Indiana recognizes the invaluable perspective of individuals who are currently homeless and formerly homeless in developing an effective person-centered program and system. The State program strongly encourages subrecipients of the ESG program to incorporate this participation, to the maximum extent practicable, in a policy-making function of both the Consolidated Plan INDIANA 193 OMB Control No: 2506-0117 (exp. 06/30/2018) organization and the respective regional Planning Council on the Homeless. The State ESG program application requires subrecipients to demonstrate how participation and input of people experiencing homelessness is utilized at both an organizational level and within their regional Planning Councils on Homelessness. This will be a threshold item and will require the subrecipient to provide documentation around their policies for verification. This issue is also reviewed during program monitoring visits.

5. Describe performance standards for evaluating ESG.

The performance standards were developed in collaboration with the governing body for the Balance of State CoC Board and the Resource & Funding Committee and approved by the Balance of State CoC Board by using the national standards outlined in Section 427 of the McKinney-Vento Act, as amended by the HEARTH Act. Baseline performance measurements will be reports generated by the HMIS system and mainly from the ESG CAPER reports for the current grant prior year. These include impact measures (average length of project participation, percent of leavers who exit to permanent housing, increases in exits to permanent housing and increases in the number of chronically homeless served) and cost efficiency measures (average cost per exit to permanent housing).

Housing Trust Fund (HTF)
Reference 24 CFR 91.320(k)(5)

1. How will the grantee distribute its HTF funds? Select all that apply:

Applications submitted by eligible recipients

2. If distributing HTF funds through grants to subgrantees, describe the method for distributing HTF funds through grants to subgrantees and how those funds will be made available to state agencies and/or units of general local government. If not distributing funds through grants to subgrantees, enter "N/A".

N/A

3. If distributing HTF funds by selecting applications submitted by eligible recipients,

a. Describe the eligibility requirements for recipients of HTF funds (as defined in 24 CFR § 93.2). If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Eligible applicants include CHDOs, non- and for-profit affordable housing developers, and joint venture partnerships. Awards will be allocated based on the following criteria:

1. Whether the development demonstrates a need for HTF in order to make a greater number of units affordable to extremely low and very low households;
2. Whether the development meets State and Federal requirements of all programs for which the applicant is applying, including the threshold requirements;
3. Successful completion of the Permanent Supportive Housing Institute;
4. If the development ranking is sufficient for it to be awarded RHTC pursuant to the RHTC process as outlined in the current QAP; and,
5. The availability of HTF funds.

b. Describe the grantee's application requirements for eligible recipients to apply for HTF funds. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Application requirements are described in detail in Part I of the 2021 HTF Draft Policy which is part of Appendix A (Methods of Distribution) in the Grantee Unique Appendices. Appendix A MOD also includes HOME Rental Application Policy, HOME Homebuyer Policy, and HOME Innovation Round RFP, and Institute RFP.

Eligibility will be determined based on:

1. Whether the development demonstrates a need for HTF in order to make a greater number of units affordable to extremely low and very low households;
2. Whether the development meets State and Federal requirements of all programs for which the applicant is applying, including the threshold requirements;
3. Successful completion of the Permanent Supportive Housing Institute;

4. If the development ranking is sufficient for it to be awarded RHTC pursuant to the RHTC process as outlined in the current QAP; and,
5. The availability of HTF funds.

c. Describe the selection criteria that the grantee will use to select applications submitted by eligible recipients. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Selection criteria are described in detail in Part I of the HTF Draft Policy which is part of Appendix A (Methods of Distribution) in the Grantee Unique Appendices. Applicants will be evaluated with the following criteria: 1) Eligible activities, 2) Needs of community, 3) Target populations to be served by the activities (<30% AMI and experiencing homelessness), 4) Support geographic diversity and link to comprehensive revitalization of existing neighborhoods, 5) Organizational capacity, 6) Energy efficiency of project, 7) Use of M/WBE contractors.

d. Describe the grantee's required priority for funding based on geographic diversity (as defined by the grantee in the consolidated plan). If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Eligible developments can be located in any city, town or county located in Indiana. There is no geographic preference for the use of the HTF.

e. Describe the grantee's required priority for funding based on the applicant's ability to obligate HTF funds and undertake eligible activities in a timely manner. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Timely Undertaking- moderate priority: As stated under the Threshold Items Section 6.3 (d) of the HTF Policy, the applicant is required to demonstrate their ability to undertake the activities set forth in its application upon receipt of the HTF award, to begin construction within 12 months of receipt of the award, and to complete the development within a 24 month period.

6.3(d): The applicant must demonstrate experience and capacity to conduct an eligible HTF activity as evidenced by its ability to:

Own, construct, or rehabilitate, and manage and operate an affordable multifamily rental housing development; or

Design, construct, or rehabilitate, and market affordable housing for homeownership.

Describe the grantee's required priority for funding based on the extent to which the rental project has Federal, State, or local project-based rental assistance so that rents are affordable to extremely low-income families. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Project-Based Rental Assistance- high priority: As stated under Threshold Items Section 6.3(c) and 6.3 (e), in order to be eligible for the permanent supportive housing set-aside of the QAP and for HTF funding, the applicant must demonstrate how units will be made affordable to the targeted population of persons

experiencing homelessness. All developments are required to identify a source of project-based rental assistance for the supportive housing units, generally through Project-Based Section 8 vouchers or CoC funding. Developments that have not identified an operating subsidy source do not meet threshold and will not be considered for funding. As stated under Section 7.1 Rents Charged, Applicants may be eligible for 16 points for rent targeting.

6.3(c): The Applicant must identify all subsidy sources. Funding commitments must be provided with the RHTC application. If the funding has not yet been committed, application must provide proof of application, a narrative describing the selection process, and a narrative plan on how the development will move forward if the application is denied. HTF cannot be committed until all other sources have been committed.

6.3 (e): The Development must serve populations that are extremely low income and experiencing homelessness. The target population served by the development must be the target population that was identified based on community need and relevant data through the Supportive Housing Institute process and align with the goals of the Consolidated Plan.

g. Describe the grantee's required priority for funding based on the financial feasibility of the project beyond the required 30-year period. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Affordability Period- low priority: As stated under the Threshold Criteria Section 6.3 (a), applicants must meet the minimum 30-year period of affordability to be eligible for funding.

h. Describe the grantee's required priority for funding based on the merits of the application in meeting the priority housing needs of the grantee (such as housing that is accessible to transit or employment centers, housing that includes green building and sustainable development features, or housing that serves special needs populations). If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Priority Housing Needs of Indiana- high priority: Through the Consolidated Plan, the State of Indiana includes extremely low-income households and permanent supportive housing/integrated supporting housing as housing priority needs.

To be eligible for the supportive housing set-aside in the QAP and for HTF, the applicant must further the creation of community-based housing that targets the extremely low income (less than 30% AMI) with intensive service programs that have a direct impact on reducing homelessness through the Housing First model, to meet the State's priority housing needs of serving extremely low income households. Applicants who have not successfully completed the Supportive Housing Institute and/or who do not meet the set-aside criteria as identified in both the QAP and in Sections 2.1 and 6.3 (e) of this Allocation Plan will not be eligible for funding.

In addition, IHCD may award additional scoring of 93 points under Sections 7.1 Rents Charged;

7.2 Development Characteristics; and 7.3 Sustainable Development to prioritize projects which best serve.

i. Describe the grantee's required priority for funding based on the extent to which the application makes use of non-federal funding sources. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Extent of Non-Federal Funding- moderate priority: As stated under the Threshold Items Section 6.3 (c), the applicant must demonstrate all subsidy sources. IHCD may also award up to 11 points for projects that meet the criteria as outlined in Sections 7.2 (l) Tax Credit Per Unit; 7.2 (m) Tax Credit per Bedroom; 7.4 (a) Leveraging Capital Resources; and 7.4 (c) Previous Funding in a Local Government.

4. Does the grantee's application require the applicant to include a description of the eligible activities to be conducted with HTF funds? If not distributing funds by selecting applications submitted by eligible recipients, select "N/A".

Yes

5. Does the grantee's application require that each eligible recipient certify that housing units assisted with HTF funds will comply with HTF requirements? If not distributing funds by selecting applications submitted by eligible recipients, select "N/A".

Yes

6. Performance Goals and Benchmarks. The grantee has met the requirement to provide for performance goals and benchmarks against which the grantee will measure its progress, consistent with the grantee's goals established under 24 CFR 91.315(b)(2), by including HTF in its housing goals in the housing table on the SP-45 Goals and AP-20 Annual Goals and Objectives screens.

Yes

7. Maximum Per-unit Development Subsidy Amount for Housing Assisted with HTF Funds. Enter or attach the grantee's maximum per-unit development subsidy limits for housing assisted with HTF funds.

The limits must be adjusted for the number of bedrooms and the geographic location of the project. The limits must also be reasonable and based on actual costs of developing non-luxury housing in the area.

If the grantee will use existing limits developed for other federal programs such as the Low Income Housing Tax Credit (LIHTC) per unit cost limits, HOME's maximum per-unit subsidy amounts, and/or Public Housing Development Cost Limits (TDCs), it must include a description of how the HTF maximum per-unit development subsidy limits were established or a description of how existing limits developed for another program and being adopted for HTF meet the HTF requirements specified above.

See Part 4.1 Subsidy and Budget Limitations of the HTF Policy (pp. 16-17) for the per unit subsidy limits. A description of how the limits were determined by be found in the same section.

8. Rehabilitation Standards. The grantee must establish rehabilitation standards for all HTF-assisted housing rehabilitation activities that set forth the requirements that the housing must meet upon project

completion. The grantee's description of its standards must be in sufficient detail to determine the required rehabilitation work including methods and materials. The standards may refer to applicable codes or they may establish requirements that exceed the minimum requirements of the codes. The grantee must attach its rehabilitation standards below.

In addition, the rehabilitation standards must address each of the following: health and safety; major systems; lead-based paint; accessibility; disaster mitigation (where relevant); state and local codes, ordinances, and zoning requirements; Uniform Physical Condition Standards; and Capital Needs Assessments (if applicable).

All HTF funded projects must meet the property standards outlined in 93.301. The rehabilitation standards are set in a separate appendix.

- Developments must use Uniform Physical Condition Standards (UPCS). A listing of those standards can be found in the Multi-Family Checklist. Beyond the UPCS standards, projects must also comply with IHCD Rehabilitation Standards (see Exhibit A); and the stricter of the local rehabilitation standards or the Indiana State Building Code.
- The development must meet the accessibility requirements at 24 CFR Part I, which implements Section 504 of the Rehabilitation Act of 1973.
- Covered multi-family units, as defined at 24 CFR 100.201, must meet the design and construction requirements at 24 CFR 100.205, which implements the Federal Fair Housing Act Amendments of 1988.
- Any units utilizing gas appliances must provide carbon monoxide detectors in addition to standard smoke detectors.
- Newly constructed units must meet additional energy efficiency standards for new construction pursuant to section 109 of the Cranston-Gonzalez National Affordable Housing Act.
- Where relevant, the housing must be constructed to mitigate the impacts of potential disaster, in accordance with State and local codes, ordinances, or other State and local requirements, or such other requirements as HUD may establish.

9. Resale or Recapture Guidelines. Below, the grantee must enter (or attach) a description of the guidelines that will be used for resale or recapture of HTF funds when used to assist first-time homebuyers. If the grantee will not use HTF funds to assist first-time homebuyers, enter "N/A".

N/A

10. HTF Affordable Homeownership Limits. If the grantee intends to use HTF funds for homebuyer assistance and does not use the HTF affordable homeownership limits for the area provided by HUD, it must determine 95% of the median area purchase price and set forth the information in accordance with §93.305. If the grantee will not use HTF funds to assist first-time homebuyers, enter "N/A".

N/A

11. Grantee Limited Beneficiaries or Preferences. Describe how the grantee will limit the beneficiaries or give preferences to a particular segment of the extremely low- or very low-income population to serve unmet needs identified in its consolidated plan or annual action plan. If the grantee will not limit the

beneficiaries or give preferences to a particular segment of the extremely low- or very low-income population, enter "N/A."

Any limitation or preference must not violate nondiscrimination requirements in § 93.350, and the grantee must not limit or give preferences to students. The grantee may permit rental housing owners to limit tenants or give a preference in accordance with § 93.303(d)(3) only if such limitation or preference is described in the action plan.

The purpose of this Housing Trust Fund (HTF) application is to provide subsidies in the form of grants to selected applicants for the acquisition, rehabilitation and/or new construction of supportive housing for persons with extremely low income (at or below 30% of area median income) and experiencing homelessness. For this funding cycle, HTF funds will be offered exclusively to Rental Housing Tax Credit developments that (1) apply for funding under the Qualified Allocation Plan (QAP) for the Rental Housing Tax Credit Program (RHTC) and (2) successfully completed the Indiana Supportive Housing Institute and/or HOME Rental Applications.

Eligible applicants for tax credits and HTF funds must have successfully fulfilled all requirements and demonstrated meaningful and successful participation in the Indiana Supportive Housing Institute for the specific development for which they are applying. The Indiana Supportive Housing Institute provides training and support to organizations that plan to create supportive housing. Tenant outreach, selection, property management and service plans must be approved as part of the Institute process and prior to submission of a RHTC application. Participation in the Institute is based on a competitive RFP selection process.

12. Refinancing of Existing Debt. Enter or attach the grantee's refinancing guidelines below. The guidelines describe the conditions under which the grantee will refinance existing debt. The grantee's refinancing guidelines must, at minimum, demonstrate that rehabilitation is the primary eligible activity and ensure that this requirement is met by establishing a minimum level of rehabilitation per unit or a required ratio between rehabilitation and refinancing. If the grantee will not refinance existing debt, enter "N/A."

N/A; refinancing of existing permanent debt is not eligible under IHCD's HTF program.

Discussion:

For HOPWA: IHCD will facilitate a request for qualifications (RFQ), advertised through the CoC network, posted online, and provided to current HIV/AIDS service providers. The RFQ is available to all agencies who meet the threshold requirements. Many of the programs that apply through the RFQ started off as grassroots agencies years ago by starting a non-profit program based upon the growing HIV/AIDS epidemic and the need in their community. There was a growing need of resources that were not readily available for this population. The non-profits utilized their partners in the community to build their board membership and collaborated with local hospitals, clinics, and housing agencies to assist in providing education, testing, supportive services, financial assistance, and housing. Nonprofit community organizations that apply are usually mental health centers, HIV/AIDS programs specifically, or local hospital.

The RFQ will gather information on the number of persons/households they plan to serve, housing plans, housing services, organizational capacity, performance goals, supportive services, and their proposed budget. The RFQ applicants need to meet the following thresholds:

- Required to be a non-profit organization
- Required to be or have a relationship with a current Indiana Department of State Health Care Coordination Site.
- Previous experience providing HOPWA assistance.
- Actively attending the local Regional Planning Council/Committees/Leadership roles within their Region.
- No current outstanding findings with HUD or IHCD.

By having the threshold that all applicants must be or have a relationship with a current Indiana State Department of Health Care Coordination Site, we are providing a one stop shop for persons to access level of care that is needed. Persons will be able to receive testing, diagnosis, medical information, supportive services and housing if needed. Care Coordination is a specialized form of HIV case management. Its mission is to assist those living with HIV disease with the coordination of a wide variety of health and social services. Case Management services are available statewide. It provides an individualized plan of care that includes medical, psychosocial, financial, and other supportive services as needed. It is offered free of charge to the person. The primary goals of the program are to ensure the continuity of care, to promote self-sufficiency, and to enhance the quality of life for individuals living with HIV. The trained professionals provide assistance such as: access to health insurance, housing programs, emergency funds, medications, utility assistance, mental health and substance abuse programs, and HIV testing and prevention programs.

The RFQ will be evaluated through a tool that will verify that each applicant meets the threshold requirements and have financial capacity by meeting accounting and financial standards. It will be verified that each subrecipient are certified to be a care coordination site by requiring they attach the certificate or agreement showing they meet the standard.

GRANTEE UNIQUE APPENDIX.

METHODS OF DISTRIBUTION AND FUNDING
APPLICATIONS

CDBG.

METHOD OF DISTRIBUTION

STATE OF INDIANA

STATE COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM (CFDA: 14-228)

INDIANA OFFICE OF COMMUNITY AND RURAL AFFAIRS FY 2025 PROGRAM DESIGN AND METHOD OF DISTRIBUTION

GENERAL BACKGROUND INFORMATION AND NATIONAL CDBG OBJECTIVES

The State of Indiana, through the Indiana Office of Community and Rural Affairs (OCRA), assumed administrative responsibility for Indiana's Small Cities Community Development Block Grant (CDBG) Program in 1982, under the auspices of the U.S. Department of Housing and Urban Development (HUD). Per 570.485(a) and 24 CFR Part 91, the State must submit a Consolidated Plan to HUD by May 15th of each year following an appropriate citizen participation process according to 24 CFR Part 91.325, which prescribes the State's Consolidated Plan process as well as the proposed method of distribution of CDBG funds for 2024. **The State of Indiana's anticipated allocation of federal Community Development Block Grant (CDBG) funds for FY 2025 is \$30,689,455.00.**

This document applies to all federal Small Cities CDBG funds allocated by HUD to the State of Indiana, through OCRA.

The primary objective of Indiana's Small Cities CDBG Program is to assist in the development and re-development of viable Indiana communities by using CDBG funds to provide a suitable living environment and expand economic opportunities, principally for low- and moderate-income persons.

Indiana's program emphasizes making Indiana communities a better place in which to reside, work, and recreate. Primary attention is given to activities that promote long term community development and create an environment conducive to new or expanded employment opportunities for low- and moderate-income persons.

OCRA pursues the goal of investing CDBG funds wisely and aligns with all applicable strategic priorities by distributing CDBG funds in a manner that promotes the exploration of all alternative resources (financial and personnel) when making funding decisions regarding applications for CDBG funding.

PROGRAM AMENDMENT POLICY

OCRA reserves the right to transfer up to twenty-five percent (25%) of each fiscal year's available allocation of CDBG funds between the programs described herein to optimize the use and timeliness of distribution and expenditure of CDBG funds, without formal amendment of this Annual Action Plan.

OCRA will provide citizens and general units of local government with reasonable notice and opportunity to comment on any substantial change to be made in the use of CDBG funds for any open grant year. "Substantial Change" refers to the transfer of more than twenty-five percent (25%) of the total allocation between programs for each fiscal year's CDBG allocation. The twenty-five percent (25%) threshold does not account for the reallocation of reverted funds. OCRA, in consultation with the Indianapolis office of HUD, determines which actions may be considered a "substantial change." OCRA will submit any Consolidated Plan, Annual Action Plan, or other related documents to HUD prior to implementing any changes outlined in the document and before making the final version available to the public.

OCRA will submit any Consolidated Plan, Annual Action Plan, or other related documents to HUD before it implements any changes embodied in the given document and before posting the final version publicly.

ELIGIBLE ACTIVITIES/FUNDABILITY

All activities, which are eligible for federal CDBG funding under Section 105 of the Federal Housing and Community Development Act of 1974, as amended, (Federal Act), are eligible for funding under the OCRA's CDBG program. However, OCRA maintains the right to prioritize funding for eligible activities. In determining these funding priorities, OCRA will allocate federal CDBG funds to activities and projects that yield tangible benefits for low- and moderate-income individuals in Indiana. OCRA will adopt a competitive approach for all programs to distribute funds to proposed projects that effectively align with the objectives of this Action Plan and HUD's overarching goals. Funding decisions will be made using criteria and rating systems, which are used for the State's programs and are subject to the availability of funds. It shall be the policy under the state program to give priority to using CDBG funds to pay for actual project costs and not to local administrative costs. **The State of Indiana certifies that not less than seventy-percent (70%) of each fiscal year's CDBG funds will be expended for activities principally benefiting low- and moderate-income persons, as prescribed by 24 CFR 570.484, et. seq.**

ELIGIBLE APPLICANTS

1. All Indiana counties, cities, and incorporated towns which do not receive CDBG entitlement funding directly from HUD or are not located in an "urban county" or other areas eligible for "entitlement" funding from HUD.
2. All Indian tribes meeting the criteria outlined in Section 102 (a)(17) of the Federal Act.

To be eligible for CDBG funding, applicants must not be under suspension from any CDBG-funded programs or from OCRA due to issues or irregularities with prior CDBG grants, such as overdue reports, late responses to monitoring inquiries, overdue closeout documents for current grants, or

any other factors that may cast doubt on their capacity to comply with all requirements of the State's CDBG program. Applicants may be suspended from participating in state CDBG-funded projects that are administered by the Indiana Housing & Community Development Authority (IHCDA).

All applicants must fully expend all CDBG Program Income as defined in 24 CFR 570.489(e) before, or as a part of the proposed CDBG-assisted grant, to be eligible for further CDBG funding from the State.

Other specific eligibility criteria is outlined in the **General Selection Criteria** provided herein.

FY 2025 FUND DISTRIBUTION

Wastewater Drinking Water Program (WDW)	\$12,500,000.00
Stellar Pathways Program	\$ 4,000,000.00
Stormwater Improvements Program (SIP)	\$ 3,500,000.00
Owner Occupied Rehabilitation Program (OOR)	\$ 3,000,000.00
Public Facilities Program (PFP)	\$ 2,500,000.00
Blight Clearance Programs (BCP)	\$ 1,500,000.00
Main Street Revitalization Program (MSRP)	\$ 1,952,389.00
Preserving Mainstreet Program	\$ -
Needs Responsive Fund	\$ -
Urgent Needs Funds	\$ -
Planning Grant Program	\$ 1,000,000.00
Technical Assistance	\$ 200,000.00
Administration Costs	\$ 537,066.00
Total Amount	\$30,689,455.00

PROGRAM INCOME POLICY

The State of Indiana via the Office of Community and Rural Affairs (OCRA) does not project receipt of CDBG program income for the period covered by this Annual Action Plan. In the event the Office of Community and Rural Affairs (OCRA) receives CDBG Program Income, such funds will be placed in an existing program based on current needs, as determined by OCRA, to make additional grants under that program. Reversions of other years' funding will also be allocated based on current needs as determined by OCRA. OCRA will allocate and expend all CDBG Program Income funds received before drawing additional CDBG funds from the US Treasury. However, the following exceptions shall apply:

1. This policy shall not apply to housing-related grants made to applicants by the Indiana Housing & Community Development Authority (IHCDA), a separate agency, using CDBG funds allocated to IHCDA by OCRA.

2. In accordance with 24 CFR 570.489(e)(2), program income does not cover funds generated by grantees and/or subrecipients from CDBG grants awarded by OCRA that are \$35,000 or less during a calendar year. In such cases, OCRA may allow local governments to keep the funding that doesn't exceed the \$35,000 threshold established by this policy.
3. This policy shall not apply to program income generated by locally administered revolving loan funds to carry out specific activities. Grantees are not required to use the program income generated before drawing down grant funds awarded by OCRA for a different CDBG funded activity. However, program income in the revolving loan fund must be used before drawing down additional grant funds for other revolving fund activities in accordance with 24 CFR 570.489(f).
4. Any interest earned, above the threshold in accordance 24 CFR 570.489(e)(2)(iv)(C), on a deposit of CDBG grant funds before disbursement of those funds for an eligible CDBG activity will be considered CDBG program income by OCRA. Interest earned should subsequently be used as a credit toward additional claims submitted, reducing the payment of a future claim by the amount of interest earned.

Program Income Generated by a Units of General Local Government

In accordance with 24 CFR 570.489(e)(2), program income does not cover funds that are \$35,000 or less during a program year. In such cases, OCRA may allow local governments to keep the funding that doesn't exceed \$35,000.

Program income generated by grantees and/or subrecipients from CDBG grants awarded by OCRA must be returned to OCRA if such amounts are equal to or greater than \$35,000 per calendar year according to 24 CFR 570.489. If a local government or its subrecipients receive program income, it must be reported to OCRA annually. This income retains its CDBG federal identity in accordance with 24 CFR 570.489.

All obligations of CDBG program income by grantee require prior approval by the OCRA. This includes the use of program income as matching funds for CDBG-funded grants from IHCD. Applicable parties should contact the CDBG Program staff for guidance on the use of program income before the obligation of such funds.

Local governments that have been inactive in using their program income are required to return their program income to OCRA. Local governments that have been approved to use their program income to fund at least one project in the previous twelve (12) months will be considered active.

Furthermore, US Department of Treasury regulations require that CDBG program income cash on hand balances be expended on any active CDBG grant being administered by a grantee before additional federal CDBG funds can be requested from OCRA. These US Treasury regulations apply to projects funded both by IHCD and OCRA. Eligible applicants with CDBG program income should strive to close out all active grant projects presently being administered before seeking additional CDBG assistance from the OCRA or IHCD.

Revolving Loan Fund (RLF) Program Income by a Units of General Local Government

If OCRA permits Units of General Local Government to establish locally administered revolving loan funds to carry out specific activities in accordance with 24 CFR 570.489 (f), program income generated by the RLF shall refer to the repayment of CDBG funds received by borrowers including principal and any interest earned without regard to the amount collected.

Local revolving fund balances must be held in an interest-bearing account in accordance with 24 CFR 570.500(b).

Program income collected by Grantees should only be maintained in a local revolving loan fund account for a short period of time before they are awarded back out to new local applicants. Units of General Local Government must ensure any RLF funds held are revolved in order for the account to be considered active by OCRA in accordance with 24 CFR 570.489(f).

It is OCRA's policy that grantees with local revolving loan funds must report on any program income earned and the RLF's activity on a quarterly basis. This report should be governed by guidelines provided by OCRA to its grantees in order to ensure the timely and proper reporting of any RLF program income generated.

Local governments who do not forgive loans issued as part of a CDBG funded RLF program will continue to generate program income and must continue to report on in perpetuity on each loan made until all payments have been paid in-full, forgiven, or written off.

At closeout of a HUD funded award including, but not limited to, CDBG, CDBG Disaster Recovery (CDBG-DR), CDBG Cares Act (CDBG CV), and the Neighborhood Stabilization Program (NSP), program income on hand or subsequently received by a grantee or subrecipient generated by that award may become program income of OCRA's CDBG formula grant program. Grantees may transfer any amount of program income collected to OCRA. Program income generated by a grantee or its subrecipients that is transferred to OCRA continues to be subject to all CDBG requirements as outlined in 24 CFR 570.504(b)(3), even after closeout is achieved, until all program income is fully expended.

The transfer of program income generated by other HUD funded awards must comply with CPD 14-02: Closeout Instructions for Community Development Block Grant (CDBG) Programs Grant. OCRA will assess the best use of any program income transferred to CDBG based current needs and any applicable HUD guidance. Grantees must maintain an inventory of acquired real property and equipment and must properly report any new program income generated as instructed by HUD.

METHOD OF DISTRIBUTION

The choice of activities on which the State's CDBG funds are expended has been determined through a robust review that engaged a variety of stakeholders and considered comments from the public. The eligible activities enumerated in the following Method of Distribution are eligible activities as provided for under Section 105(a) of the Federal Act, as amended.

All projects/activities funded by the OCRA will be made on a basis which addresses one (1) of the three (3) national objectives of the Small Cities CDBG Program as prescribed under Section 104(b)(3) of the Federal Act and 24 CFR 570.483 of implementing regulations promulgated by HUD. CDBG funds will be distributed according to the following Method of Distribution (program descriptions):

A. Wastewater Drinking Water Program

Allocation: OCRA will allocate \$12,500,000 of its FY 2025 CDBG funds for the Wastewater Drinking Water (WDW) Program.

Eligible Activities: Assistance provided under this program will meet the national objectives of Benefits Low and Moderate-Income (LMI) 24 CFR 570.483(b). CDBG funds may be used for eligible activities. CDBG funds may be used to support wastewater and drinking improvements.

Funding Cycle: Applications will be accepted in rounds and awards will be made on a competitive basis.

Other Requirements: The specific threshold criteria and basis for scoring are provided in Attachment C and D hereto.

Maximum Award per Beneficiary: WDW shall have a maximum grant amount based on present combined user rates (water, wastewater, and stormwater) as shown in the matrix below. The amount of CDBG funds granted will be limited to \$5,000 cost per project beneficiary.

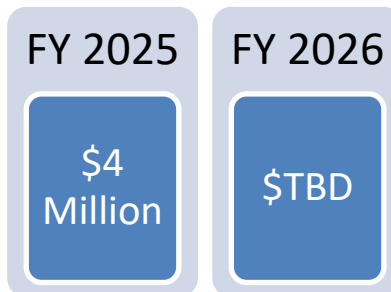
Maximum Grant Amounts	Rates for 4,000 gallons		
	User Rates (Over \$50)	User Rates (\$30 to \$50)	User Rates (Under \$30)
Projects over \$1 million in total project cost	\$750,000	\$700,000	\$650,000
Projects under \$1 million in total project cost	\$700,000	\$650,000	\$600,000

Matching Funds: Matching funds of at least 20% of the total project cost are required for this program.

Local Administrative Costs: 8% of the CDBG grant amount is eligible for local administrative expenses

B. Stellar Pathways Program

Allocation: OCRA will allocate \$4,000,000 of its FY 2025 CDBG funds for Stellar Pathways. Funds will be allocated in the Action Plan on the fiscal year an applicant is selected. Here is a breakdown of the Stellar allocation for FY 2025, and projected allocation for FY 2026:



Eligible Activities: Assistance provided under this program will meet the national objectives of Benefits Low and Moderate-Income (LMI) 24 CFR 570.483(b), Slum and Blight 24 CFR 570.483(c) CDBG funds may be used for eligible activities under 24 CFR 570.201, 24 CFR 570.202(a), 24 CFR 570.202(d), 24 CFR 570.202(e) including acquisition, disposition, public facilities and improvements, clearance and remediation activities, privately owned utilities, rehabilitation and preservation activities, historical preservation, renovation of closed buildings. OCRA reserves the right to evaluate the eligibility of additional proposed activities that are not listed in this section for consideration under this program.

All projects funded by IHCDA with HOME, ESG and/or HOPWA funds will meet the specific requirements set forth by those programs.

Other Requirements: Indiana's Stellar Pathways Program is a collaborative effort of the Office of Community and Rural Affairs (OCRA), the Indiana Housing and Community Development Authority (IHCDA), Indiana State Department of Agriculture (ISDA), Indiana Destination Development Corporation (IDDC), Indiana Department of Health (IDOH), Indiana Department of Natural Resources (DNR), and the Indiana Department of Transportation (INDOT).

The Stellar Pathways Program seeks to engage four (4) regions to achieve a holistic, three-year revitalization strategy that will leverage unified state investment and other available funding from the partnering agencies to complete transformational projects. In the revitalization strategy, selected finalists will identify areas of interest and types of projects along four pathways (Advancing e-Connectivity, Enhancing Quality of Place, Promoting Community Wellness, and Strengthening Local Economies) following robust community outreach and engagement and through facilitated, pathway-specific focus groups. The resultant Strategic Investment Plan (SIP) will produce a schedule to complete projects, cost estimates, identify local match amounts and additional funding resources needed, indicate the level of community impact, and describe the significance each project will have on the overall comprehensive revitalization of the region. Each partnering agency will choose catalyst projects to fund from each SIP, setting communities along a path to become Stellar upon completion of all selected projects.

Evaluation and selection of the final regions to the Stellar Pathways Program will be based on:

- Letter of Intent submitted
- Completion of all outlined requirements of the Stellar Pathway Finalist designation.
- Document the level of need and significance of each project in overall community revitalization efforts.
- Capacity of the applicant to complete all activities and to administer the funds;

Maximum Award: No more than two (2) designees will be selected to participate in the program. The Stellar Pathway Program will set aside \$4,000,000 each selected designees for eligible projects that meet the CDBG program requirements. OCRA reserves the right to select the projects that will be funded with CDBG funds.

Local Administrative Costs: 8% of the CDBG grant amount is eligible for local administrative expenses for each submitted application.

C. Stormwater Improvements Program (SIP)

Allocation: OCRA will allocate \$3,500,000 of its FY 2024 CDBG funds for the Stormwater Improvements Program (SIP).

Eligible Activities: Assistance provided under this program will meet the national objectives of Benefits Low and Moderate-Income (LMI) 24 CFR 570.483(b) for activities that improve stormwater systems

Other Requirements: The specific threshold criteria and basis for scoring are provided in Attachment C and D hereto.

Funding Cycles: Applications will be accepted in rounds and awards will be made on a competitive basis.

Maximum Award Per Beneficiary: The Stormwater Improvement Program shall have a maximum grant amount of \$750,000. The amount of CDBG funds granted will be limited to \$5,000 cost per project beneficiary.

Matching Funds: Matching funds of at least 10% of the total project cost are required for this program.

Local Administrative Costs: 8% of the CDBG grant amount is eligible for local administrative expenses.

D . Owner Occupied Rehabilitation Program (OOR)

Allocation: OCRA will allocate \$3,000,000 of its FY 2025 funds for OOR.

Eligible Activities: Assistance provided under this program will meet the national objectives of Benefits Low and Moderate-Income Households (LMH) 24 CFR 570.483(b)(3). CDBG funds may be used for eligible housing activities under section 105(a) of the HCDA. The following list of housing activities may be considered under the program. Rehabilitation of Owner-Occupied Housing Units.

Other Requirements: OCRA will award such grants that meet the minimum scoring criteria outlined in Attachments C and D.

Funding Cycles: The OOR program will have a funding cycle that includes up to three rounds each year, with the possibility of a fourth round depending on funding availability.

Maximum Award Per Beneficiary: The OOR program shall have a maximum grant of \$350,000 for cities or towns, and \$500,000 for counties to establish or support a local Owner-Occupied Rehabilitation Program. Individual grants to homeowners will be capped at \$25,000.

Matching Funds: Matching funds of at least 10% of the total project cost is required for participation in this program.

Local Administrative Costs: 8% of the CDBG grant amount is eligible for local administrative expenses.

E. Public Facilities Program (PFP)

Allocation: OCRA will allocate \$2,500,000 of its FY 2025 CDBG funds for the Public Facilities Program (PFP).

Eligible Activities: Assistance provided under this program will meet the national objectives of Benefits Low and Moderate-Income (LMI) 24 CFR 570.483(b) or Slum and Blight 24 CFR 570.483(c). CDBG funds may be used for eligible activities under 24 CFR 570.201 (a), 24 CFR 570.201 (b), 24 CFR 570.201 (c), 24 CFR 570.201 (d), 24 CFR 570.202, 24 CFR 570.202(d), 24 CFR 570.202(e) including acquisition, disposition, public facilities and improvements, clearance and remediation activities, rehabilitation and preservation activities, historical preservation, renovation of closed buildings. OCRA reserves the right to evaluate the eligibility of additional proposed activities that are not listed in this section for consideration under this program.

Funding Cycles: Applications will be accepted in rounds and awards will be made on a competitive basis.

Other Requirements: The specific threshold criteria and basis for scoring are provided in Attachment C and D hereto.

Maximum Award Per Beneficiary: The Public Facilities Program shall have a maximum grant amount of \$750,000. The amount of CDBG funds granted will be limited to \$5,000 cost per project beneficiary.

Matching Funds: Matching funds of at least 10% of the total project cost are required for this program.

Local Administrative Costs: 8% of the CDBG grant amount is eligible for local administrative expenses.

F. Blight Clearance Program (BCP)

Allocation: OCRA will allocate \$1,500,000 of its FY 2025 CDBG funds for the Blight Clearance Program (BCP).

Eligible Activities: Assistance provided under this program will meet the national objectives of Slum and Blight 24 CFR 570.483(c), CDBG funds may be used for eligible activities under 570.201(d)) and 24 CFR 570.201(a) including acquisition, clearance and remediation activities of non-residential and residential structures.

Other Requirements: OCRA will award applications that meet the minimum scoring criteria outlined in Attachment D on a competitive basis.

Maximum Award Per Beneficiary: The Blight Clearance Program shall have a maximum grant amount of \$500,000. The amount of CDBG funds granted will be limited to \$5,000 cost per project beneficiary.

Matching Funds: Matching funds of at least 10% of the total project cost are required for this program.

Local Administrative Costs: 8% of the CDBG grant amount is eligible for local administrative expenses.

G. Main Street Revitalization Program

Allocation: OCRA will allocate \$1,952,389 of its FY 2025 CDBG funds for the Main Street Revitalization Program (MSRP).

Eligible Activities: Activities that support Indiana communities with streetscape and alley activation intended to revitalize their downtown area will be funded under this program.

Other Requirements: Each applicant must meet the following prerequisites:

- 1) Have a designated Indiana Main Street Organization that:
 - a. is Nationally accredited, or
 - b. is an Indiana Accredited Main Street that is at least three (3) years old;
- 2) The Main Street Organization is in good standing and has met all the reporting requirements;
- 3) The Main Street Organization has met their education requirement with the Indiana Main Street Program during past calendar year;
- 4) The Main Street organization is functioning within the Main Street 4 Point Approach of Organization, Design, Economic Vitality, and Promotion and Nationally Accredited Main Streets are using a Transformation Strategy.

- 5) The Main Street organization has current Work Plans for each of its Committees that have been submitted to Indiana Main Street;
- 6) The Community has completed a downtown revitalization plan within the past five (5) years that meets OCRA's Minimum Plan Requirements. If a community has an alternative plan that meets OCRA's Minimum Plan Requirements for a downtown revitalization plan, they can use that alternative plan with approval from the CDBG Program Director.
- 7) The local Indiana Main Street Organization has been involved in the project development process for the application and there is a plan for their continued involvement if awarded.

Funding cycle: Applications will be accepted in rounds and awards will be made on a competitive basis. The specific threshold criteria and basis for scoring are provided in Attachment C and D hereto.

Maximum Award per Beneficiary: The MSRP shall have a maximum grant amount based on the total project cost as shown in the table below. The amount of CDBG funds granted will be limited to \$5,000 cost per project beneficiary.

Project Amount	Award Maximum
Projects over \$2 million in total project cost	\$600,000
Projects under \$2 million in total project cost	\$500,000

Grantees must ensure that local Indiana Main Street Organization remains in good standing with OCRA until the completion of the project. If the local Indiana Main Street Organization falls out of good standing then de-obligation or repayment of CDBG funds is possible.

Matching funds: Matching funds of at least 20% of the total project cost are required for all streetscape projects in this program.

Local Administrative Costs: 8% of the CDBG grant amount is eligible for local administrative expenses.

H. PreservINg Main Street

Allocation: OCRA will allocate \$0 of its FY2025 CDBG funds for PreservINg Main Street

Eligible Activities: All projects funded must meet a national objective of the Federal Act under 24 CFR 570.208 and 24 CFR 570.483 of applicable HUD regulations.

Funding Cycles: PreservINg Main Street will support one or up to two Nationally Accredited Main Street (NAMS) or Indiana Accredited Main Street (IAMS) communities in their historic preservation and economic revitalization efforts over a period of two years.

Applications from NAMS and IAMS communities with registered downtown historic districts will be accepted in a single round every other program year and awards will be made on a

competitive basis. The selected community will be eligible to set aside funds to implement downtown preservation projects based on a two-year preservation and revitalization strategy for their downtown historic district.

Other Requirements: The Main Street organization, along with the community foundation and LUG, will be responsible for raising a 10% match (\$200,000) for the project, which could include a mix of private and local funds. The total match must be raised before the end of the 2-year pilot.

Of that 10%:

- 50% will be put in a permanent endowment/revolving loan fund for downtown projects
- 50% will be supplied to the Main Street organization for long-term sustainability.

For example, this could be used for two years of funding a staff position and thus elevating an IAMS community to a NAMS within those two years

Additionally, Indiana Landmarks will work with the Main Street organization and local building owners to provide training and conditions assessments for preservation projects downtown. The

LUG will develop and adopt a local preservation ordinance, lead the formation of a local preservation commission, and pursue designation of a downtown local historic district within the first 18 months.

The Main Street organization will also implement two humanities-based programs and activities focused on historic preservation using Indiana Humanities funding distributed in two tranches. The selected Main Street organization will also attend training provided by Indiana Humanities.

I. Urgent Need Fund

Allocation: OCRA will allocate \$0 of its FY2025 CDBG funds for the Urgent Need Fund.

Eligible Activities: These activities must be eligible for funding under the “urgent need” national objective of the Federal Act and requirements of 24 CFR 570.208 and 24 CFR 570.483 of applicable HUD regulations. The eligibility of any project is at the full discretion of the Office of Community and Rural Affairs.

Funding Cycles: The Urgent Need Fund will be available to eligible applicants on a continuing basis.

Other Requirements: The Urgent Need Fund will be available to eligible applicants to meet an imminent threat to the health and safety of local populations. The grants may be funded as made available through the Public Facilities Program or reversions when not budgeted from the annual allocation. Special selection factors include need, proof of recent threat of a catastrophic nature, statement of declared emergency and inability to fund through other means. Projects will be developed with the assistance of the Office of Community and Rural Affairs as a particular need arises.

To be eligible, these projects and their activities must meet the “urgent need” national objective of Section 104(b)(3) of the Federal Act. Generally, projects funded are those which need immediate attention and are, therefore, inappropriate for consideration under OCRA’s regular

programs. The types of projects, which typically receive funding, are municipal water systems (where the supply of potable water has been threatened by severe weather conditions) and assistance with demolition or cleanup after a major fire, flood, or other natural disaster. Although all projects will be required to meet the "urgent need" national objective, the Office of Community and Rural Affairs may choose to actually fund the project under one of the other two national objectives, if it deems it expedient to do so. Applicants must adequately document that other financial resources are not available to meet such needs pursuant to Section 104(b)(3) of the Federal Act and 24 CFR 570.483 of HUD regulations.

Only that portion of a project, which addresses an immediate need, should be addressed. This is particularly true of municipal water or sewer system projects, which tend to need major reinvestment in existing plants or facilities, in addition to the correction of the immediate need.

Maximum Award per Beneficiary: The amount of grant award is determined by the individual circumstances surrounding the request for emergency funds.

Matching Funds: A community may be required to provide a match through cash, debt or provision of employee labor.

J. Needs Responsive Fund

Allocation: OCRA will allocate \$0 of its FY 2024 CDBG Funds to the Needs Responsive Fund.

Eligible Activities: The purpose of this fund is to allow OCRA flexibility to respond to the needs of eligible communities. Specifically, this program will allow OCRA to fund projects that are eligible activities under CDBG but are not covered by other programs.

Other Requirements: OCRA will award such grants that meet the minimum scoring criteria outlined in Attachment D throughout the program year.

Maximum Award per Beneficiary: The Needs Responsive Fund shall have a maximum grant amount of \$1,000,000. The amount of CDBG funds granted will be limited to \$5,000 per project beneficiary.

Matching Funds: Matching funds of at least 10% of the total project cost are required for this program.

Local Administrative Costs: 8% of the CDBG grant amount is eligible for local administrative expenses.

K. Planning Grant Program

Allocation: OCRA will allocate \$1,000,000 of its FY2025 CDBG funds for planning-only activities.

Eligible Activities: OCRA will make planning-only grants to units of local government to carry out planning activities eligible for eligible planning activities under 24 CFR 570.205. A list of

eligible plans and their specific maximum grant amounts is available on OCRA's CDBG policies website. The Office reserves the right to prefer one type of plan over other types of plans when making awards.

Funding Cycles: The Planning program will have a funding cycle that includes up to three rounds each year, with the possibility of a fourth round depending on funding availability

Other Requirements: The specific threshold criteria and basis for scoring Planning Grant are provided in Attachment C and D hereto. OCRA will award applications that meet the minimum scoring criteria outlined in Attachments C and D. CDBG-funded planning costs will exclude final engineering and design costs related to specific activities which are eligible activities/costs under 24 CFR 570.201-204.

Maximum Award per Beneficiary: The Planning Grant program shall have a maximum grant amount of \$90,000. The amount of CDBG funds granted will be limited to \$5,000 per project beneficiary.

Matching Funds: Matching funds of at least 8% of the total project cost are required for this program.

Local Administrative Costs: A flat fee for local administrative expenses is established at a maximum of \$7,000.

L. Technical Assistance: \$200,000

Pursuant to the federal Housing and Community Development Act (Federal Act), specifically Section 106(d)(5), the State is authorized to set aside up to one percent (1%) of its total allocation for technical assistance activities. The amount set aside for Technical Assistance in the State's FY 2025 Action Plan is \$200,000, which constitutes less than one-percent (1%) of the State's FY 2025 CDBG allocation. The State of Indiana reserves the right to set aside up to one percent (1%) of open prior-year funding amounts for the costs of providing technical assistance on an as-needed basis.

The amount set aside for the Technical Assistance Program will not be considered a planning cost as defined under Section 105(a)(12) of the Federal Act or an administrative cost as defined under Section 105(a)(13) of the Federal Act. Accordingly, such amounts set aside for Technical Assistance will not require matching funds by the State of Indiana. OCRA reserves the right to transfer a portion or all of the funding set aside for Technical Assistance to another program herein as deemed appropriate by the Office of Community and Rural Affairs, in accordance with the "Program Amendment Policy."

The Technical Assistance Program is designed to provide, through direct Office of Community and Rural Affairs staff resources or by contract, training and technical assistance to units of general local government, nonprofit and for-profit entities relative to community and economic development initiatives, activities and associated project management requirements. The Technical Assistance Program will also be used by the Office to conduct pilots of new programs or adjustments to current programs.

1. Distribution of the Technical Assistance Program Set-aside: Pursuant to HUD regulations and

policy memoranda, the Office of Community and Rural Affairs may use alternative methodologies for delivering technical assistance to units of local government and nonprofits to carry out eligible activities, to include:

- a. Provide the technical assistance directly with Office of Community and Rural Affairs or other State staff;
- b. Hire a contractor to provide assistance;
- c. Use sub-recipients such as Regional Planning Organizations as providers or securers of the assistance;
- d. Directly allocate the funds to non-profits and units of general local governments to secure/contract for technical assistance.
- e. Pay for tuition, training, and/or travel fees for specific trainees from units of general local governments and nonprofits;
- f. Transfer funds to another state agency for the provision of technical assistance; and,
- g. Contracts with state-funded institutions of higher education to provide the assistance.

2. Ineligible Uses of the Technical Assistance Program Set-aside: The 1% set-aside may not be used by the Office of Community and Rural Affairs for the following activities:

- a. Local administrative expenses not related to community development;
- b. Any activity that cannot be documented as meeting a technical assistance need;
- c. General administrative activities of the State not relating to technical assistance, such as monitoring state grantees, rating and ranking State applications for CDBG assistance, and drawing funds from the Office of Community and Rural Affairs; or,
- d. Activities that are meant to train State staff to perform state administrative functions, rather than to train units of general local governments and non-profits.

M. Administrative Cost: \$537,066.00

The State (Office of Community and Rural Affairs) will set aside up to \$537,066.00 of its FY 2025 CDBG funds for payment of costs associated with administering its State Community Development Block Grant (CDBG) Program (CFDA Number 14.228). This amount constitutes less than two (2%) percent of the State's CDBG allocation.

The administrative cost is subject to the \$1-for-\$1 matching requirement of HUD regulations, \$100,000 is not subject to state match per HUD regulations. These funds will be used by the Office of Community and Rural Affairs for expenses associated with administering its State CDBG Program, including direct personal services and fringe benefits of applicable Office of Community and Rural Affairs staff, as well as direct and indirect expenses incurred in the proper administration of the state's program and monitoring activities respective to CDBG grants awarded to units of local government (i.e. telephone, travel, services contractual, etc.). These administrative funds will also be used to pay for contractors hired to assist the Office of Community and Rural Affairs in its consolidated planning activities.

PRIOR YEARS' METHODS OF DISTRIBUTION

This Annual Action Plan and statement of Method of Distribution is intended to amend all prior Consolidated and Action Plans for grant years where funds are still available to reflect the new

program designs. The Methods of Distribution described in this document will be in effect commencing with 2025 Round 2, unless subsequently amended, for all FY 2025 CDBG funds as well as remaining residual balances of previous years' funding allocations, as may be amended from time to time subject to the provisions governing "Program Amendment Policy" herein.

In the case that prior years' funds should become available, they will be placed in any of the currently open programs and become subject to the requirements and allowances set forth in this plan. Non-expended funds, which revert from the financial settlement of projects funded from other programs, will be placed in any open program for use in that ongoing program.

APPLICATION PROCESSES

Planning Grant applications and Owner-Occupied Rehabilitation (OOR) applications will have a funding cycle that includes up to three rounds each year, with the possibility of a fourth round depending on funding availability. Eligible local governments must contact their regional Community Liaison to express their interest in the program. Notification must be done within 15 days after the opening of the application in order to be eligible to submit an application for that round. This notification must be specific to the funding cycle from which the community is seeking funding assistance. Then, an application can be submitted for scoring. This is a single stage competitive application process.

Stellar Pathways Program is a single competitive application process. Interested applicants submit a Letter of Intent from which up to four (4) finalists are selected by the partner organizations. Finalists take part in numerous capacity-building, teamwork, and planning activities throughout the year as they build their Strategic Investment Plan (SIP). Each finalist must complete an SIP. The Stellar Teams will review completed plans for Catalyst Projects. Each agency then allocates funding to projects within the SIP based on alignment with the requirements of each funding source and will work collaboratively to have fundable projects for each community identified as a finalist.

PreservINg Main Street is a single competitive application process held every other year. Interested applicants submit a Letter of Intent from which up to one (1) will be selected to participate by OCRA the partnering organizations.

The application process for the Blight Clearance Program (BCP), Public Facilities Program (PFP), Stormwater Improvements Program (SIP), the Main Street Revitalization Program (MSRP), and the Wastewater Drinking Water (WDW) will be a two-stage competitive application process held twice each calendar year with a third-round possible.

For grant programs with a two-stage process, Eligible local government must contact their regional Community Liaison to express their interest in the program. Notification must be made within 15 business days from round opening to be eligible to submit a proposal for that round. This notification must be specific to the funding cycle from which the community is seeking funding assistance. Applicants must submit an initial proposal that must demonstrate a completion rate of 95%. After submitting a proposal, proposed projects will be evaluated for threshold issues and initial project design factors. Eligible projects that comply with the Federal Act and have minimum threshold and project design factors issues will be invited to submit a final application. For each program, the full application will be reviewed and evaluated for fundability. OCRA, as applicable, will provide technical assistance to the communities in the development of full

applications and require an in-person site visit with the applicant prior to the submission of a final application.

An eligible applicant may submit only one application at a time. OCRA reserves the right to deny applications lacking credible readiness to proceed.

OTHER REQUIREMENTS

While administrative responsibility for the Small Cities CDBG program has been assumed by the State of Indiana, the State is still bound by the statutory requirements of the applicable legislation passed by Congress, as well as federal regulations promulgated by the U. S. Department of Housing and Urban Development (HUD) respective to the State's CDBG program as codified under Title 24 of the Code of the Federal Register, and with consideration to non-regulatory guidance from HUD. HUD has passed on these responsibilities and requirements to the State and the State is required to provide adequate evidence to HUD that it is carrying out its legal responsibilities under these statutes.

As a result of the Federal Act, applicants who receive funds through OCRA's selection process will be required to maintain a plan for minimizing displacement of persons as a result of activities assisted with CDBG funds and to assist persons actually displaced as a result of such activities. Applicants are required to provide reasonable benefits to any person involuntarily and permanently displaced as a result of the use of assistance under this program to acquire or substantially rehabilitate property. The State has adopted standards for determining reasonable relocation benefits in accordance with HUD regulations.

CDBG Program Income may be generated as a result of grant implementation. The State of Indiana may enter into an agreement with the grantee in which program income is retained by the grantee for eligible activities. Federal guidelines require that program income be spent prior to requesting additional draw downs. Expenditure of such funds requires prior approval from the Office of Community and Rural Affairs (OCRA). The State (Office of Community and Rural Affairs) will follow HUD regulations set forth under 24 CFR 570.489(e) respective to the definition and expenditure of CDBG Program Income.

All statutory requirements will become the responsibility of the recipient as part of the terms and conditions of grant award. Assurances relative to specific statutory requirements will be required as part of the application package and funding agreement. Grant recipients will be required to secure and retain certain information, provide reports and document actions as a condition to receiving funds from the program. Grant management techniques and program requirements are explained in the OCRA's CDBG Handbook, which is posted on the Office's website.

Revisions to the Federal Act have mandated additional citizen participation requirements for the State and its grantees. The State has adopted a written Citizen Participation Plan, which is available for interested citizens to review. Applicants must certify to the State that they are following a detailed Citizen Participation Plan which meets Title I requirements. Technical assistance will be provided by the Office of Community and Rural Affairs to assist program applicants in meeting citizen participation requirements.

The State has required each applicant for CDBG funds to certify that it has identified its housing and

community development needs, including those of low and moderate income persons and the activities to be undertaken to meet those needs.

INDIANA OFFICE OF COMMUNITY AND RURAL AFFAIRS (OCRA)

The Indiana Office of Community and Rural Affairs intends to provide the maximum technical assistance possible for all of the programs to be funded from the CDBG program. Lieutenant Governor heads OCRA. Principal responsibility for the CDBG program is vested in the Executive Director of OCRA. OCRA also has the responsibility of administering compliance activities respective to CDBG grants awarded to units of local government through a partnership with the Grant Services Division of the Lieutenant Governor's business office.

Primary responsibility for providing "outreach" and technical assistance for the Stellar Regions Program, Main Street Revitalization Fund, Stormwater Improvement Program, Wastewater Drinking Water Program, Public Facilities Program, Owner Occupied Rehabilitation Program and Planning Grants process resides with OCRA.

The LG's Business Office will provide internal fiscal support services for program activities. The OCRA has the responsibility for the development of the Consolidated Plan and the CAPER, CDBG program management, compliance and financial monitoring of all CDBG programs. The Indiana State Board of Accounts pursuant to 2 CFR 200 will conduct audits. Potential applicants should contact the OCRA with any questions or inquiries they may have concerning these or any other programs.

Information regarding the past use of CDBG funds is available at the:

**Indiana Office of Community and Rural Affairs
CDBG Program Director
One North Capitol, Suite 600
Indianapolis, Indiana 46204-2288
Telephone: 1-800-824-2476
FAX: (317) 233-6503**

DEFINITIONS

Low- and Moderate-Income - is defined as 80% of the median family income (adjusted by size) for each county. For a county applicant, this is defined as 80% of the median income for the state. The income limits shall be as defined by the U. S. Department of Housing and Urban Development Section 8 Income Guidelines for “low-income families.” Certain persons are considered to be “presumptively” low and moderate-income persons as set forth under 24 CFR 570.208(a)(2); inquiries as to such presumptive categories should be directed to the CDBG Program Director.

Matching funds - is defined as public funds (federal, state or local) or private sector in-kind services, or debt allocated to the CDBG project. The required level of local matching funds for CDBG projects varies by program. This percentage is calculated by adding the proposed grant amount to the local matching amount, then divide the local matching funds amount by the total of these two sums. The definition of match includes a maximum of 5% in pre-approved and validated in-kind contributions. Any in-kind contributions exceeding the specified 5% can be counted as local effort. Other funds provided to applicants by OCRA are not eligible as matching funds.

Proposal – is defined as a document submitted by a non-entitlement unit of local government which outlines the proposed project, includes the principal parties involved, details the project budget, and explains how the proposed project aligns with the goals of the Federal Act. The proposal represents a 95% completion of the required documentation and information intended for the final application submission.

Reversions – is defined as funds placed under contract with a non-entitlement unit of local government but not expended for the granted purpose because expenses were less than anticipated and/or the project was amended or canceled, and such funds were returned to OCRA upon financial settlement of the project.

Slums or Blight - an area/parcel which: (1) meets a definition of a slum, blighted, deteriorated, or deteriorating area under Indiana Code 36-7-1-3 or local law and (2) meets the requirements for “area basis” slum or blighted conditions pursuant to 24 CFR 570.208(b)(1) and 24 CFR 570.483(c)(1), or “spot basis” blighted conditions pursuant to 24 CFR 570.208(b)(2) and 24 CFR 570.483(c)(2). More specifically, OCRA defines blight as:

An area possessing a substantial amount of buildings (public or privately owned), and or public improvements which demonstrate:

1. General deterioration, seen through:
 - a. Neglect or lack of maintenance on the property; or
 - b. Facilities of plumbing, heating, sewage, and/or others that have been disconnected, destroyed, removed, or rendered inadequate; or
 - c. Impaired structural condition, making the building(s) unsafe to a person or property (IC 36-7-9-4); or
 - d. Any combination of these factors
2. Significant noncompliance with current building code, safety code, health code, fire code, state statute, or local ordinance, as seen by:
 - a. Excessive vacancy and/or abandonment of properties; or

- b. Environmental hazards; or
 - c. Fire hazards; or
 - d. Lack of ventilation, light, or sanitary facilities; or
 - e. any combination of these factors
3. Building(s) are conducive to ill health, transmission of disease, infant mortality, juvenile delinquency, increased criminal activity compared to other areas, and detrimental to public health, safety, , or welfare through any of the following conditions:
- a. Age; or
 - b. Dilapidation; or
 - c. Overcrowding of structures and/or high density population; or
 - d. Excessive land coverage; or
 - e. Impairment of overall economic vitality of community through declines in property value, substantially lower property value than surrounding community areas; or
 - f. any combination of these factors

Urgent Need - is defined as a serious and immediate threat to health and welfare of the community. The Chief Elected Official must certify that an emergency condition exists and requires immediate resolution and that alternative sources of financing are not available. An application for CDBG funding under the “urgent need” CDBG national objective must adhere to all requirements for same set forth under 24 CFR 570.208(c) and 24 CFR 570.483(d).

DISPLACEMENT PLAN

1. The State shall fund only those applications, which present projects and activities, which will result in the displacement of as few persons or businesses as necessary to meet the goals and objectives of the state and local CDBG-assisted program.
2. The State will use this criterion as one of the guidelines for project selection and funding.
3. The State will require all funded communities to certify that the funded project is minimizing displacement.
4. The State will require all funded communities to maintain a local plan for minimizing displacement of persons or businesses as a result of CDBG funded activities, pursuant to the federal Uniform Relocation and Acquisitions Policies Act of 1970, as amended.
5. The State will require that all CDBG funded communities provide assistance to all persons displaced as a result of CDBG funded activities.
6. The State will require each funded community to provide reasonable benefits to any person involuntarily and permanently displaced as a result of the CDBG funded program.

GENERAL SELECTION CRITERIA

The Office of Community and Rural Affairs (OCRA) will assess applications based on the criteria outlined below. While projects will be evaluated against these criteria during the proposal stage, not meeting them at this point does not automatically disqualify a project. Instead, applicants will be notified of any issues identified during the threshold review at their required site visits. Applicants must resolve these deficiencies before submitting a final application for funding consideration. OCRA reserves the right to invite or exclude an applicant from submitting a final application.

The proposal stage and site visit are applicable only to programs with a two-stage application process. Programs that involve a single-stage application must submit a complete application for consideration. Communities must address and rectify any identified deficiencies prior to submitting a final application for the project to be considered for funding. The proposal review stage applies only to programs that have a two-stage application process. All proposals and applications will be evaluated for threshold criteria, ensuring each submission demonstrates a sufficient level of readiness to proceed upon grant approval.

A. General Criteria (all programs - see exception for program income):

1. The applicant must be a legally recognized non-entitlement local unit of government.
2. The applicant must have the legal capacity to implement the proposed program.
3. If the applicant partners with a non-profit to conduct eligible project activities, that organization must be able to provide documentation of its non-profit status from the U.S. Internal Revenue Service, the Indiana Department of Revenue, and the Indiana Secretary of State.
4. At the time of the application submission, the applicant must not have any overdue or outstanding semi-annual reports, closeout reports, State Board of Accounts audit findings, or unresolved monitoring issues from OCRA/IHCDA. The determination of what constitutes “overdue” is entirely at the discretion of the Indiana Office of Community and Rural Affairs.
5. The applicant must clearly demonstrate how the proposed project will fulfill one of the three national CDBG objectives and meet the criteria outlined in 24 CFR 570.483.
6. The applicant must show that the proposed project is an eligible activity under Title 1 of the Housing and Community Development Act of 1974.
7. The applicant must first encumber/expend all CDBG program income receipts before applying for additional grant funds from the Office of Community and Rural Affairs.
8. The applicant may only submit one proposal or application per round per program. Counties may submit either for their own project or an “on-behalf-of” application for projects of other eligible applicants within the county. However, no application will be

invited from an applicant where the purpose is clearly to circumvent the “one application per round” requirement for other eligible applicants.

9. At the time of application submission, an applicant must not have more than three (3) open CDBG grants or pending awards (for cities and incorporated towns) or four (4) open CDBG grants or pending awards (for counties)
 - a. For applicants with an open Preserving, Stellar or any other capacity building program as stipulated by OCRA must have closeout the grant successfully before the deadline set by OCRA for receiving funding applications.
 - b. For applicants with an open MSRP, WDW, PFP, SIP, or BCP, a “Notice of Release of Funds and Authorization to Incur Costs” must have been issued for the construction activities under the open MSRP, WDW, PFP, SIP or BCP contract, and a contract for construction of the principal (largest funding amount) construction line item (activity) must have been executed prior to the deadline established by OCRA for receipt of applications for funding.
10. To be eligible to apply at the time of application submission, an applicant must not have any unresolved complaints filed against the applying party with the Indiana Civil Rights Commission or any other local human relations commission with jurisdiction (collectively “Commissions”).
11. The cost/beneficiary ratio for all CDBG funds will be maintained at \$5,000.
12. Required leveraging based on program must be proposed. The Indiana Office of Community and Rural Affairs may rule on the suitability and eligibility of such leveraging.
13. The application must be complete and submitted by the announced deadline.

**GRANT EVALUATION CRITERIA
700 POINTS TOTAL**

The following evaluation criteria apply only to two-stage and one stage application programs. To be eligible for an award, applications must attain a minimum score of 450 points out of a total of 700 points.

The scoring framework includes

- National Objective Score (100 points),
- Community Distress factors (175 points),
- Local Match Contribution (75 points),
- Project Design Factors (300 points), and
- Program Specific Points (50 points).

Applications that complete the Bonus Point section can receive up to an additional 40 points towards their application total.

If the point reduction policy applies, 50 points will be deducted out of the total score achieved.

NATIONAL OBJECTIVE SCORE (100 POINTS):

Each proposed project submitted for funding must meet one of the three National Objectives including:

National Objective = Benefit to Low- and Moderate-Income Persons: 100 points maximum awarded according to the percentage of low- and moderate-income individuals to be served by the project. The total points given are computed as follows: National Objective Score = % Low/Mod Beneficiaries X 1

National Objective = Benefit to Low- and Moderate -Limited Clientele: 51 points minimum awarded according to the percentage of low- and moderate- income individuals to be served by the project.

National Objective = Benefit to Low- and Moderate- Housing: 100 points maximum. Documentation of the income verification form to be used is required to qualify for these points.

National Objective = Prevention or Elimination of Slums or Blight: 100 points maximum awarded based on the characteristics listed below. The total points given are computed as follows:

¹

For Historical Preservation: National Objective Score = (Total of the points received in each category below)ⁱ

¹ The criteria for the Blight Clearance National Objective will be revised to facilitate the rehabilitation and restoration of historic buildings through the Public Facilities Program

- Applicant has a Slum/Blight Resolution for the project area that is no more than 10 years old. (50 pts.)
- The building is a historical building (10 pts.)
- The project site is a brownfield* (10 pts.)
- The building or district is listed on or is eligible for listing on the Indiana or National Register of Historic Places (10 pts.)
- The building is on the Historic Landmarks Foundation of Indiana's "10 Most Endangered List" (20 pts.)

* The State of Indiana defines a brownfield as an industrial or commercial property that is abandoned, inactive, or underutilized, on which expansion or redevelopment is complicated due to actual or perceived environmental contamination. Points are awarded for sites listed on the IFA Brownfield registry which indicates prior involvement of the Indiana Brownfield Program or a letter is provided from the IFA Brownfield program that states the site is a brownfield.

For Demolition or Clearance: National Objective Score = (Total of the points received in each category below)

- Applicant has a Slum/Blight Resolution for the project area that is no more than 10 years old. (50 pts.)
- The project site is a brownfield* (25 pts.)
- The building or site has completed a Phase I ESA (15 pts.)
- The building received a condemnation order that its at least 3 years old (10 pts.)

* The State of Indiana defines a brownfield as an industrial or commercial property that is abandoned, inactive, or underutilized, on which expansion or redevelopment is complicated due to actual or perceived environmental contamination. Points are awarded for sites listed on the IFA Brownfield registry which indicates prior involvement of the Indiana Brownfield Program or a letter is provided from the IFA Brownfield program that states the site is a brownfield.

Project may either be listed on **or eligible for listing on the Indiana or National Register of Historic Places. Both cannot be checked.

COMMUNITY DISTRESS FACTORS (175 POINTS):

Various factors are used to determine the distress of a community. OCRA has partnered with Stats Indiana, an Indiana University entity, to analyze and calculate the distress of Indiana's small cities, towns, counties and townships. Factors used to calculate the Community Distress points used for CDBG scoring include:

Poverty Rate
Median Household Income
Unemployment Rate
Non-seasonal Housing Vacancy Rate
Housing Cost Burden
Population Change (10-year % Change)

Local government scores, which are updated and published annually, can be found at: www.stats.indiana.edu.

LOCAL MATCH CONTRIBUTION (75 POINTS):

A maximum of 75 points based on the percentage of local funds devoted to the project. This total is determined as follows: Total Match Points = % Eligible Local Match X 1

The points total is capped at 75 points or 75% match, i.e., a project with 75% match or greater will receive 75 points. Below 75% match, the formula calculation will apply.

Eligible local match can be local cash, debt or in-kind sources. Federal, state, and local government grants are considered eligible match. In-kind sources may provide eligible local match for the project, but the amount that can be counted as local match is limited to 5% of the total project budget or a maximum of \$25,000. Use of in-kind donations as eligible match requires approval from the CDBG Program Staff by the deadline. Date of deadline will be announced each round.

PROJECT DESIGN FACTORS (300 POINTS):

A maximum of 300 points awarded according to the evaluation in three areas:

Project Description – Is the project clearly defined as to determine eligibility? – 50 points

Project Need - Is the community need for this project documented and compelling? – 125 points

Financial Impact - Why is grant assistance necessary to complete this project? – 125 points

The points in these categories are awarded by the OCRA Scoring Committee when evaluating the projects. Scoring questions for these categories are defined for each round and are provided as part of the round opening. The questions are subject to change each round. **Applicants should refer to the application instruction, scoring guide and other resources to address all questions present.** Applicants are required to work with their OCRA Community Liaison to identify ways to increase their project's competitiveness in these areas and of the application as a whole.

PROGRAM SPECIFIC POINTS (50 POINTS):

- **Blight Clearance Program (BCP) IFA Registry** - A maximum of 25 points awarded for sites registered with the IFA Brownfield program which indicates prior involvement of the Indiana Brownfield Program or a letter is provided from the IFA Brownfield program that states the site is a brownfield.
- **Site Development Plan** - A maximum of 25 points will be awarded for projects that have a site development plan for the future use of the Brownfield site.

Owner Occupied Rehabilitation (OOR)

- **Targeted Populations:** A maximum of 25 points will be awarded to applicants whose program design parameters prioritize funding assistance to households that belong to at least one of the targeted population groups listed below.
 - Individuals with Disabilities Households with at least one individual living in the home with a disability using the Fair Housing definition of disabled as defined by HUD.
 - Aging in Place Households with at least one elderly individual, as defined by HUD Glossary, living in the home. Repairs made to the home must address accessibility and/or livability.
 - Veterans Households with at least one veteran individual, as defined in HUD, living in the home.
 - Single Parent Head of Household Households with a single parent, grandparent, or guardian head of household.

Household(s) must be the primary residence for qualifying individual(s). Individuals or households that meet the criteria for two or more categories (i.e. a veteran with a disability or a single parent household with a child with a disability) may only be counted for one of the categories in which they qualify.

- **New Administrator Experience:** A maximum of 15 points will be awarded to applicants who are working with administering entities who can demonstrate prior experience in construction management, rehabilitation of built structures, and/or prior CDBG OOR experience through a different funding agency. Applicants must provide a written narrative explaining previous relevant experience and a third-party reference of experience in the above-mentioned fields to receive these points.
 - Less than 3 years – 10 Points
 - Between 3 to 5 years – 15 points
 - Greater than 5 years – 25 Points
- **Green Infrastructure:** A maximum of 10 points for the inclusion of green infrastructure elements in the project.

Planning Grant Program (PL)

- **Supplemental Input and Community Engagement** – A maximum of 25 points will be awarded to communities that exceed the basic requirements of submitting letters of support, surveys, and holding two public hearings to document public engagement and input. These additional points recognize those that demonstrate meaningful public engagement and collaboration, indicating they took additional steps to solicit feedback from the community. This can involve activities such as community workshops, promotion, meetings with key stakeholders, citizens participation in committees and other methods to ensure broad participation towards the community's application process.
 - 0 points- no additional engagement methods
 - 10 points- 1 to 2 additional engagement methods
 - 25 points- 3 or more additional engagement methods
- **Connection to Previous Planning Efforts and Implementation** – A maximum of 25 will be awarded to communities that effectively demonstrates their engagement with previous planning initiatives. This includes providing documentation indicating how the current plan relates to a previous planning effort of the community applying or documenting the successful execution of a previous planning grant.
 - 0 points- no previous planning efforts or documentation of execution of previous planning grant
 - 25 points- previous planning efforts or documentation of execution of previous planning grant

Public Facilities Program (PFP)

- **Philanthropic Contributions** - Points are assigned based on philanthropic contribution to the project (match) as a percentage of total project costs.
 - Less than 1% - 0 points
 - 1-1.99% - 5 points
 - 2-2.99% - 10 points
 - 3-3.99% - 15 points
 - 4%+ - 20 points

- **Project Sustainability** - A maximum of 20 points for the establishment of a (or documentation of existing) permanent Community Facility Fund, to be used for ongoing operation and maintenance activities of the project.
0 points – Less than \$3,000
10 points - \$3,000-\$5,000
20 points – More than \$5,000
- **Green Infrastructure** – A maximum of 10 points for the inclusion of green infrastructure elements in the project.

Public Facilities Program (PFP) for Historical Preservation Projects

- **Local Government Incentives** – A maximum of 25 points will be awarded for local government that have establish and documented their own incentives, such as property tax abatements or reductions for historic properties, to encourage homeowners and businesses to maintain and restore historic structures.
- **Local Grant Funding Program**- A maximum of 25 points will be awarded for local historical preservation grants programs that are made available to support local restoration and preservation projects.

Main Street Revitalization Program (MSRP)

- Community is designated as a Nationally Accredited Main Street Organization (10 points)
- Documentation of active and continued involvement in the application and project by the Main Street organization (10 points)
- The Main Street Organization has provided proof of philanthropic match for the project (Maximum of 10 pts)
- The project has unique design elements or is part of a community branding effort. (Maximum of 10 points)
- The project design includes green infrastructure elements (Maximum of 10 points)

Wastewater Drinking Water (WDW)

- **Financial Gap** – A maximum of 10 points per each \$1 in financial gap. The result of the OCRA Gap Calculation Worksheet is the amount that your community would have to increase the monthly utility rate charged to each customer without grant assistance. This is the “gap,” which is the amount by which grant funds will reduce or “buy down” your utility rates. This amount added to the actual rates anticipated with OCRA grant funds will give you the rates needed “without OCRA grant funds”. (Maximum 10 points)
- **Green Infrastructure** – A maximum of 15 points for the inclusion of green infrastructure elements in the project. (Maximum of 15 points)
- **Project Sustainability** - A maximum of 25 points for the establishment of, or documentation of existing combined utility rate for the ongoing operation and maintenance activities of the wastewater and drinking water systems.
0 points – Less than \$55 combined user rates
10 points – \$55-\$100 combined user rates
25 points – More than \$100 combined user rates

Stormwater Improvement Program (SIP)

- **Financial Gap** – A maximum of 10 points per each \$1 in financial gap. The result of the OCRA Gap Calculation Worksheet is the amount that your community would have to increase the monthly utility rate charged to each customer without grant assistance. This is the “gap,” which is the amount by which grant funds will reduce or “buy down” your utility rates. This amount added to the actual rates anticipated with OCRA grant funds will give you the rates needed “without OCRA grant funds”. (Maximum 10 points)

- **Green Infrastructure** – A maximum of 15 points for the inclusion of green infrastructure elements in the project. (Maximum of 15 points)
- **Project Sustainability** - A maximum of 25 points for the establishment of, or documentation of an existing stormwater utility rate for the ongoing operation and maintenance activities of the storm system.
 - 0 points – under \$3 monthly Stormwater utility user rate
 - 10 points – \$3-\$5 monthly stormwater utility user rate
 - 25 points – \$5 or higher monthly stormwater utility user rate

BONUS POINTS POLICY:

OCRA's policy is to promote and enhance the resilience of rural communities while assisting those with limited financial resources in addressing unmet needs. As a result, the Community Resilience Index and designated disaster areas will be utilized to evaluate bonus points. Applicants may submit requests for bonus points under both options outlined below to receive up to 40 additional points towards their application. Applicants must submit the required documentation to the CDBG Program Manager by the deadline, which will be announced each round.

- 1) **Community Resilience Index:** Grant application will receive a maximum of 25 points for the submission of a community resilience improvement plan and their corresponding point awarded value from the Community Resilience improvement plan Index as provided by Stats Indiana.

Community Resilience Improvement Plan & Community Resilience Index Points: The Chief Elected Official must schedule a meeting with the Community Liaison to discuss how the proposed CDBG project or plan will increase the community's resilience score. The Chief Elected Official must submit a community resilience improvement plan clearly describing how the project benefits the community short term and increases the community resilience in the long term. The community resilience improvement plan must explain how the project will increase the community's resilience score in the next five years in the following metrics:

- **Structure of the local economy / Industry diversity**
- **Entrepreneurship**
- **Human capital (Education attainment and Labor force participation)**
- **Labor force participation**
- **Social Network/Social Connectivity**
- **Broadband**
- **Wealth Gap**
- **Homeownership (an indicator of community attachment)**

The community resilience improvement plan specified above must be submitted to the CDBG Program Manager approximately by the deadline, which will be announced each round or quarterly

A formula will be used to convert the Community Resilience Score Index into a straightforward point awarded system. This system will assign a point value based on the Community Resilience Index calculated by Stats Indiana. Community Resilience Index scores below 110, the points awarded will be determined using the formula: $\text{Slope} * \text{Community Resilience Score} - \text{Intercept}$.

The points awarded value are provided to grant applications that submit the required community resilience improvement plan as part of the application program specific review process.

Community Resilience Index scores, which are updated and published annually, can be found at: <https://www.stats.indiana.edu/topic/cdbg.asp>.

- 2) Designated Disaster Areas:** Communities designated as disaster areas with a Presidential Disaster within the last three years from round opening, which have been approved for individual assistance and public assistance categories A-G, are eligible to receive an additional 15 points if documentation is provided.

POINTS REDUCTION POLICY:

It is the policy of OCRA not to fund more than one phase or component of the same project or planning in different funding rounds. This applies to all project and planning types, *except OOR*, although it is particularly relevant to utility projects and utility study plans. If a community needs to phase a project in order to complete it, they should consider which phase would be most appropriate for CDBG assistance. Even if a community does not intend to phase its project, OCRA will consider previous awards for the same project or planning type. A Community that has previously been awarded a grant for the same project or planning type will likely not be competitive and will be subject to the follow point reduction. This applies to all project and planning types, but it is especially significant for utility-related initiatives.

0 – 5 years since previous funding – -50 points

1st Example: Community submits and is awarded a Wastewater Drinking Water (WDW) grant in 2020. When applying for a WDW grant in 2025, they would be subject to a point reduction of 50 pts. In 2026 they would have no point reduction.

2nd Example: A community submits and is awarded a utility study grant in 2020 for a single utility study. When applying for another planning grant for a single, two, or master utility study in 2025, they would be subject to a point reduction of 50 pts. In 2026, they would have no point reduction for a single, two, or master system utility.

***For OCRA funded OOR projects, eligible communities may reapply to receive additional OOR funding after all prior OOR grants awarded to them by OCRA have achieved closeout.**

CITIZEN PARTICIPATION PLAN

INDIANA OFFICE OF COMMUNITY AND RURAL AFFAIRS (STATE) The Citizen Participation Plan (CPP) herein is the CPP established for the State of Indiana's Five Year Consolidated Plan for Housing and Community Development, covering program years 2020-2024. The CPP was developed around a central concept that acknowledges residents as stakeholders and their input as key to any improvements in the quality of life for the residents who live in a community.

Each program year affords Indiana residents an opportunity to be involved in the process. Citizens have a role in the development of the Consolidated Plan, annual Action Plans, and Consolidated Annual Performance and Evaluation Reports regardless of age, gender/sex, race, ethnicity, national origin, disability, familial status, religion, and economic level.

Purpose of the Citizen Participation Plan

The Citizen Participation Plan (CPP) describes the process the state uses to collect public input and involve the public in development of the Five Year Consolidated Plan. The CPP also addresses how the state obtains public comment on its Annual Action Plan and Consolidated Annual Performance and Evaluation Report (CAPER). This CPP was developed in accordance with Sections 91.110 and 91.115 of HUD's Consolidated Plan regulations.

The purpose of the CPP is to provide citizens of the State of Indiana residents residing in communities eligible to receive housing and community development funds from the state maximum involvement in identifying and prioritizing housing and community development needs in the state, and responding to how the state intends to address such needs through allocation of the following federal grants:

- Community Development Block Grant (CDBG);
- HOME Investment Partnerships Program funding (HOME);
- Emergency Solutions Grant (ESG);
- Housing Opportunity for Persons with AIDS (HOPWA) funding; and
- National Housing Trust Fund (NHTF) funding.

This Consolidated Plan typically covers a five-year timeframe. The state's Consolidated Plan is a comprehensive strategic plan for housing and community development activities. The purpose of programs and activities covered by this Consolidated Plan is to facilitate provision of decent housing, a suitable living environment, and growing economic opportunities, especially for low to moderate income residents.

Subrecipient requirements. Applicants must certify to the State that they are following a detailed Citizen Participation Plan which meets Title I requirements. Technical assistance will be provided by the Office of Community and Rural Affairs to assist program applicants in meeting citizen participation requirements. The State has required each applicant for CDBG funds to certify that it has identified its housing and community development needs, including those of low and moderate income persons and the activities to be undertaken to meet those needs.

Encouraging citizen participation. The state recognizes the importance of public participation in both defining and understanding current housing and community development needs and prioritizing resources to address those needs. The state's CPP is designed to encourage citizens of Indiana equal access to become involved each year.

Development of the Plans and Performance Reports

This document outlines how residents and stakeholders of the State of Indiana may participate in the development and review of the state's Five Year Consolidated Plan, each annual Action Plan, each CAPER, and any substantial amendments to a Consolidated Plan and/or Action Plan. The State of Indiana's program year begins July 1 and ends June 30.

The Indiana Office of Community and Rural Affairs (OCRA) and the Indiana Housing and Community Development Authority (IHCDA) are responsible for implementing and reporting on all aspects of the Consolidated Plan process. The following schedule provides an approximate timeline for the Consolidated Plan, annual Action Plan, and the CAPER.

Annual schedule. Annually, the preparation of the Action Plan, stakeholder consultation, and citizen engagement approximates the following. This schedule can change based on the timing of funding allocations from HUD, HUD guidance or directives, and/or states of emergency that affect report submissions.

July:

Begin Consolidated Annual Performance and Evaluation Report (CAPER) process

September:

15th: Begin 15-day Public Comment period for CAPER

30th: CAPER submitted to HUD

November through February:

Develop narrative of Annual Action Plan or Five Year Consolidated Plan

Plan community meetings and public hearings

Create and launch surveys

Conduct stakeholder consultation

January—February—March:

Conduct public participation process for Consolidated Plan including options discussed below

Draft Consolidated Plan or Action Plan, funding allocation plans/method of distribution (MOD), and policies for public comment

Update funding allocation plan and policies based on stakeholder consultation

March – April:

Hold public hearings

April:

Finalize plan based on stakeholder consultation and public comment

May:

15th: Consolidated Plan and Action Plan submitted to HUD

June:

End of annual Action Plan year

Citizen participation and stakeholder consultation. Annually, the state will choose from the following options for citizen participation and stakeholder consultation into the Plans. These techniques incorporate alternative methods of public process that encourage a broad spectrum of participation and a review of program performance.

Resident survey. A survey of Indiana residents could be conducted during the research phase of the Five Year Consolidated Plan in order to gather additional information on housing and community development needs and priorities for the Consolidated Plan. The survey would be available online using software that is Section 508 compliant. A variety of sampling and distribution methods may be used including a “snowball” sampling technique in which the survey is distributed to housing and community development partners who then circulate the survey to their clients/members. The survey would also be available on agency websites, as part of social media, and in email notifications (e-notifications). The survey would be available in the languages required of the state’s LAP. Special accommodations for persons with disabilities would be made upon request.

Stakeholder survey and elected official survey. An online stakeholder survey may be administered to community development organizations, economic development officials, local government leaders and staff, housing developers, housing providers, social service providers, and advocacy organizations, among others. During some Consolidated Plan and Action Plan years, the survey may be conducted in the form of key informant interviews from a voluntary sample of stakeholders from throughout the state.

Focus groups. Focus groups may be held with local government leaders and staff, Regional Planning Commissions, advocates for persons with disabilities, Continuum of Care funding recipients, Community Action Agencies and Human Rights Councils, and residents, to gather in-depth information on the challenges Indiana residents face in accessing housing and services in their communities, community and economic development needs, and policy and program changes to address needs.

Stakeholder interviews. A series of interviews may be conducted with key persons or groups who are knowledgeable about housing and community development needs in the state.

Public hearings. A public hearing will always be conducted during the 30 to 45-day public comment period in virtual formats in five to six locations across Indiana. This meeting will occur at least one month prior to submission of the Plan, generally during the months of March or April. Alternatively, the State may choose to conduct in-person hearings in three to four locations throughout the state. These will occur on different days to encourage maximum participation.

Written comments. Written comments will always be accepted at any time during the Consolidated Plan and Action Plan processes in email or in hard copy. Instructions on how to provide comments will be part of public notices and described during the public hearings.

Consolidated Plan

The draft will provide information that includes the amount of assistance the state expects to receive and the range of activities that may be undertaken, including the estimated amount that will benefit persons of low- and moderate-income, if available, and the plans to minimize displacement of persons and to assist any persons displaced.

A reasonable notice—generally two calendar weeks—is given to announce to the public the availability of the draft Consolidated Plan. Availability of the draft Plan is advertised through e-notifications that reach community development organizations, economic development officials, local government leaders and staff, housing developers, housing providers, social service providers, and advocacy organizations, among others, and is posted on OCRA and IHCD websites. The state’s current Language Access Plan (LAP) determines the languages in which notice is provided.

A 30 to 45-day public comment period is provided to receive written comments on the draft Plan. The 30 to 45-day comment period usually begins in March or April and ends in April or early May. The draft Plan can

be reviewed at OCRA and IHCD websites; emailed or hard copies can be provided upon request. All written comments provided during the Consolidated Plan process will be considered in preparing the final Consolidated Plan. A summary of the comments received and a summary of the state's reasons for not accepting any comments will be included in the final Consolidated Plan. The state considers these comments before taking final action on the Consolidated Plan.

The final Consolidated Plan is submitted to HUD no later than May 15 each year, unless extensions are granted (e.g., for federal budget allocation delays, in the case of emergency response needs, etc).

Annual Action Plan

Each year the state must submit an annual Action Plan to HUD, reporting on how that year's funding allocation for the CDBG, HOME, ESG, HOPWA, and NHTF grants will be used to achieve the goals outlined in the Five Year Consolidated Plan. The CPP for preparation of the Action Plan is as follows:

The draft Action Plan will be available for 30 to 45 days to gather public comment on the proposed spending allocation. The state will hold at least one public hearing to describe the state's proposed allocation of the program year's funding allocation during the 30 to 45-day public comment period. The availability of the draft Plan and public hearings will be publicized on OCRA and IHCD websites and circulated through e-notifications to housing and community development partners. In addition, OCRA and IHCD will collaborate with stakeholder associations to further distribute the notice of the draft plan to their memberships and networks.

The public hearing will be conducted virtually and broadcast to several locations across the state. Alternatively, the state may choose to conduct in-person hearings in three to four locations throughout the state. These will occur on different days to encourage maximum participation.

During the hearing a facilitator will describe the proposed funding allocation, discuss funding priorities and how they were derived, and instruct attendees on how to submit comments on the draft Plan. In addition, participants will be given an opportunity to provide feedback or comment on the draft Plan. A summary of the public hearing comments will be included in the final Action Plan.

The state will review and consider all written public comments. The final Action Plan that is submitted to HUD will include a section that summarizes all comments or views in addition to explanations of why any comments were not accepted.

Consolidated Annual Performance and Evaluation Reports

Before the state submits a Consolidated Annual Performance and Evaluation Report (CAPER) to HUD, the state will make the proposed CAPER available to those interested for a comment period of no less than 15 days. The availability of the draft Plan and public hearings will be publicized on OCRA and IHCD websites and circulated through e-notifications to housing and community development partners. In addition, OCRA and IHCD will collaborate with stakeholder associations to further distribute the notice of the draft plan to their memberships and networks.

The state will consider any comments from individuals or groups received verbally or in writing. A summary of the comments, and of the state's responses, will be included in the final CAPER.

Substantial Amendments

Occasionally, public comments warrant an amendment to the Consolidated Plan. The conditions for

whether to amend are referred to by HUD as “Substantial Amendment Criteria.” The following conditions are considered to be Substantial Amendment Criteria:

1. A substantial change in the described method of distributing funds to local governments or nonprofit organizations to carry out activities. “Substantial change” shall mean a reallocation of funds among program categories of programs of more than 25 percent of the total allocation for a given program year’s block-grant allocation.

Elements of a “method of distribution” are:

- Application process for local governments or nonprofits;
 - Allocation among funding categories;
 - Grant size limits; and
 - Criteria selection.
2. An administrative decision to reallocate all the funds allocated to an activity in the Action Plan to other activities of equal or lesser priority need level, unless the decision is a result of the following:
 - There is a federal government recession of appropriated funds, or appropriations are so much less than anticipated that the state makes an administrative decision not to fund one or more activities;
 - The governor declares a state of emergency and reallocates federal funds to address the emergency; or
 - A unique economic development opportunity arises wherein the state administration asks that federal grants be used to take advantage of the opportunity.

Citizen participation in the event of a substantial amendment. In the event of a substantial amendment to the Consolidated Plan, the state will conduct at least one additional public hearing. This hearing will fall during a comment period of no less than 30 days, during which the proposed Plan amendment will be made available to interested parties. Either IHCD or OCRA will post information regarding the hearing on their website(s) and send out a notice via their distribution list.

In the event of substantial amendments to the Consolidated Plan, the state will openly consider all comments from individuals or groups submitted at public hearings or received in writing. A summary of the written and public comments on the amendments and the state’s acceptance or rejection of each comment will be included in the final Consolidated Plan.

Changes in Federal Funding levels

Any changes in federal funding level after the Consolidated Plan’s draft comment period has expired, and the resulting effect on the distribution of funds, will not be considered an amendment or a substantial amendment.

Availability and Access to Records

The state provides reasonable and timely access for citizens, public agencies, and other organizations to access information and records relating to the state’s Consolidated Plan, annual Action Plan, CAPERs, substantial amendment(s), the Citizen Participation Plan, and the state’s use of assistance under the programs covered by the plan during the preceding five years.

The Indiana Office of Community and Rural Affairs webpage is www.in.gov/ocra and the Indiana Housing and Community Development Authority webpage is <https://www.in.gov/ihcda/4048.htm> for citizens interested in obtaining more information about state services and programs or to review the plans and

CAPERs. A reasonable number of free copies will be available to citizens that request it. Upon request, these documents will be provided in a reasonable form accessible to persons with disabilities.

Citizen complaints

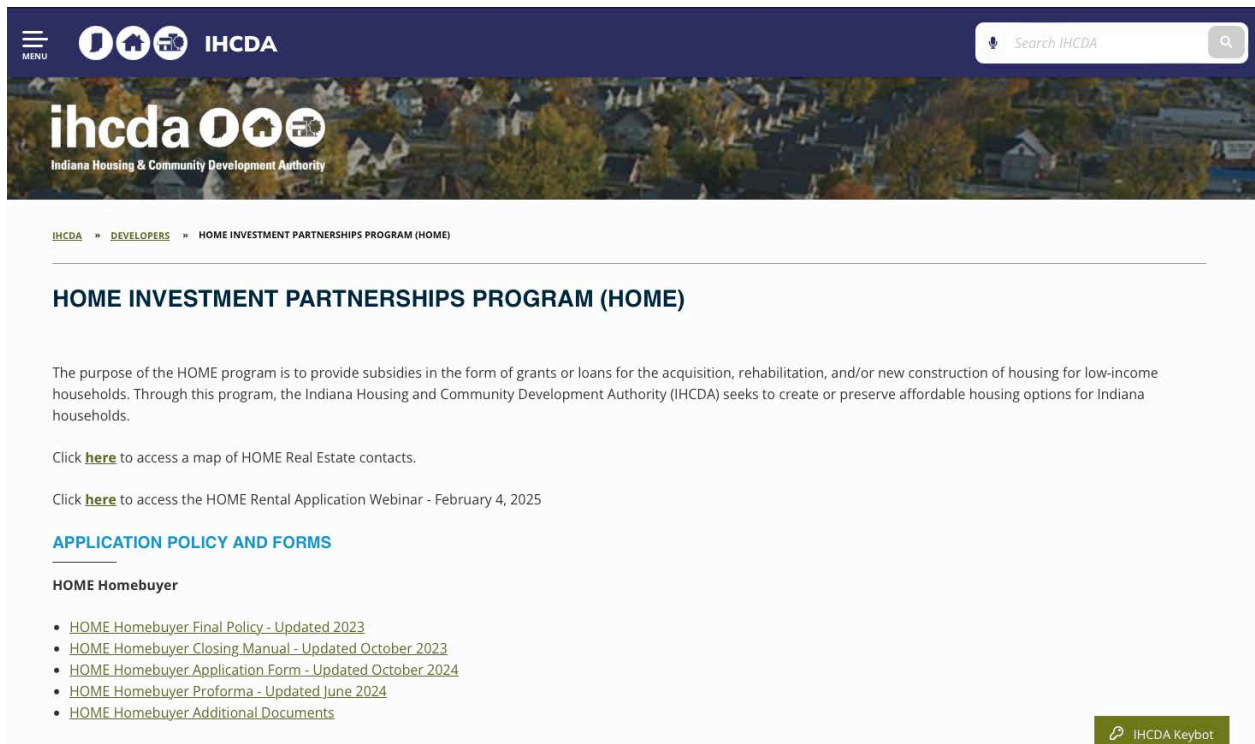
The state will provide a substantive written response to all written citizen complaints related to the Consolidated Plan, Action Plan amendments and the CAPER within 15 working days of receiving the complaint. Copies of the complaints, along with the state's response, will be sent to HUD if the complaint occurs outside of the Consolidated Planning or Action Plan process and, as such, does not appear in the Consolidated Plan.

HOME.

HOMEBUYER PROGRAM POLICY

Due to the length of the policy, a URL link is provided. The most current policy can be found here:

https://www.in.gov/ihcda/files/HOME-Homebuyer-Final-Policy_eff.-2023.pdf



The screenshot shows the IHEDA website with a dark blue header. The header contains a menu icon, three circular icons (a house, a person, and a gear), the text "IHEDA", and a search bar with the text "Search IHEDA". Below the header is a banner image of a residential neighborhood with the text "ihcda" and "Indiana Housing & Community Development Authority". The main content area has a breadcrumb trail: "IHEDA » DEVELOPERS » HOME INVESTMENT PARTNERSHIPS PROGRAM (HOME)". The title "HOME INVESTMENT PARTNERSHIPS PROGRAM (HOME)" is followed by a paragraph: "The purpose of the HOME program is to provide subsidies in the form of grants or loans for the acquisition, rehabilitation, and/or new construction of housing for low-income households. Through this program, the Indiana Housing and Community Development Authority (IHEDA) seeks to create or preserve affordable housing options for Indiana households." Below this are two links: "Click [here](#) to access a map of HOME Real Estate contacts." and "Click [here](#) to access the HOME Rental Application Webinar - February 4, 2025". A section titled "APPLICATION POLICY AND FORMS" is followed by a sub-section "HOME Homebuyer" which lists five links: "HOME Homebuyer Final Policy - Updated 2023", "HOME Homebuyer Closing Manual - Updated October 2023", "HOME Homebuyer Application Form - Updated October 2024", "HOME Homebuyer Proforma - Updated June 2024", and "HOME Homebuyer Additional Documents". A green button labeled "IHEDA Keybot" is in the bottom right corner.

[IHEDA](#) » [DEVELOPERS](#) » [HOME INVESTMENT PARTNERSHIPS PROGRAM \(HOME\)](#)

HOME INVESTMENT PARTNERSHIPS PROGRAM (HOME)

The purpose of the HOME program is to provide subsidies in the form of grants or loans for the acquisition, rehabilitation, and/or new construction of housing for low-income households. Through this program, the Indiana Housing and Community Development Authority (IHEDA) seeks to create or preserve affordable housing options for Indiana households.

Click [here](#) to access a map of HOME Real Estate contacts.

Click [here](#) to access the HOME Rental Application Webinar - February 4, 2025

APPLICATION POLICY AND FORMS

HOME Homebuyer

- [HOME Homebuyer Final Policy - Updated 2023](#)
- [HOME Homebuyer Closing Manual - Updated October 2023](#)
- [HOME Homebuyer Application Form - Updated October 2024](#)
- [HOME Homebuyer Proforma - Updated June 2024](#)
- [HOME Homebuyer Additional Documents](#)

[IHEDA Keybot](#)

HOME.

RENTAL CONSTRUCTION POLICY

Due to the length of the policy, a URL link is provided. The most current policy can be found here:

<https://www.in.gov/ihcda/files/PY24-25-HOME-Rental-Application-Policy-FINALv2.pdf>

HOME Rental

- [PY24-25 HOME Rental Application Policy](#)
 - [PY24-25 HOME Rental Application Form](#)
 - [PY24-25 HOME Rental Additional Documents](#)
 - [HOME Match Spreadsheet](#)
- [PY24-25 HOME Rental Schedule 1 - Census Tracts with Low Poverty](#)
- [PY24-25 HOME Rental Schedule 2 - Census Tracts with High Median Income](#)
- [PY24-25 HOME Rental Schedule 3 - Procedure for accessing data for Housing Need Index](#)
- [PY24-25 HOME Rental Schedule 4 - Serving Rural Counties](#)

HOME Rental - Previous Policies

- [PY23-24 HOME Rental Policy](#)
- [PY22-23 HOME Rental Policy](#)
- [PY21-22 HOME Rental Policy](#)
- [PY20-21 HOME Rental Policy](#)

COMPLIANCE MANUAL AND FORMS

- [HOME Manual and Forms](#)
- [IHCDA Online Compliance Reporting](#)
- [Utility Allowances](#)

RENTAL APPLICATIONS AND AWARDS

- [2023 HOME Rental Award Recipients](#)
- [2022 HOME Rental Award Recipients](#)
- [2021 HOME Rental Award Recipients](#)
- [2020 HOME Rental Award Recipients](#)
- [2019 HOME Rental Award Recipients](#)
- [2018 HOME Rental Award Recipients](#)
- [2017 HOME Rental Award Recipients](#)

NHTF.

APPLICATION POLICY

Due to the length of the policy, a URL link is provided. The most current policy can be found here:

<https://www.in.gov/ihcda/files/2023-Action-Plan-HTF-Policy-Final.pdf>

[IHCDA](#) » [DEVELOPERS](#) » [HOUSING TRUST FUND](#)

HOUSING TRUST FUND

The [Housing Trust Fund](#) (HTF) may be used for the production or preservation of affordable housing through acquisition, new construction, and/or rehabilitation. The HTF program is required to serve extremely low-income households (households below 30% of the Area Median Income). As such, IHCDA utilizes its HTF program to fund permanent supportive housing for persons experiencing homelessness.

APPLICATION POLICY AND FORMS

- [2023 Housing Trust Fund Policy](#)
- [2021 Housing Trust Fund Policy](#)
- [2020 Housing Trust Fund Policy](#)
- [2019 Housing Trust Fund and HOME Policy](#)

RESOURCES

- [HTF Rehab Standards](#)
- [Appendix A - HTF UPCS](#)

ESG AND HOPWA.

MODS AND WRITTEN GUIDELINES



REQUEST FOR APPLICATIONS

for

Emergency Solutions Grant (ESG)

INDIANA HOUSING AND COMMUNITY DEVELOPMENT AUTHORITY

30 South Meridian Street, Suite 1000

Indianapolis, IN 46204

<http://www.in.gov/ihcda/>

317-232-7777

ISSUE DATE: July 7, 2025

RESPONSE DEADLINE: August 1, 2025, 5:00 PM EST

1. PURPOSE OF THIS REQUEST FOR APPLICATIONS (“RFA”)

The Indiana Housing and Community Development Authority (referred to as “IHCD” or “Grantee” throughout this document) seeks to contract with community-based 501(c)(3) nonprofit organizations (referred to as “Subrecipients” or “Respondents”) to directly administer housing assistance and supportive services under the Emergency Solutions Grant (“ESG”) program.

2. ABOUT THE INDIANA HOUSING AND COMMUNITY DEVELOPMENT AUTHORITY**MISSION STATEMENT**

To provide housing opportunities, promote self-sufficiency, and strengthen communities.

VISION

An Indiana with a sustainable quality of life for all Hoosiers in the community of their choice.

OVERVIEW (for more information visit <http://www.in.gov/ihcd/>)

IHCD was created in 1978 by the Indiana General Assembly and is a quasi-public financially self-sufficient statewide government agency. IHCD's programs are successful in large part because of the growing network of partnerships IHCD has established with local, state, and federal governments, for-profit businesses and not-for-profit organizations. For-profit partners include investment banks, mortgage lenders, commercial banks, corporate investment managers and syndicators, apartment developers, investors, homebuilders, and realtors. Not-for-profit partners include community development corporations, community action agencies, and not-for-profit developers.

3. ABOUT THE ESG PROGRAM & FUNDING SOURCE

The Emergency Solutions Grant (ESG) provides funding for essential services, operations, and homeless prevention activities to emergency homeless shelters, transitional housing for the homeless, and day/night homeless shelters. These programs provide basic needs of shelter, food, clothing, and other necessities, and many also provide case management, referrals, rental assistance, and other services to individuals and/or families who are in need of assistance.

IHCD is the Indiana agency designated to receive the state’s “Balance of State” funding for the Emergency Solutions Program (ESG), as administered by the U.S. Department of Housing and Urban Development (HUD).

ESG funds may be used for four Program Types: Emergency Shelter, Street Outreach, Rapid Re-Housing assistance, and Homelessness Prevention.

ELIGIBLE EXPENSES BY PROJECT TYPE***Emergency Shelter***

Essential Services: case management, child care, education services, employment assistance and job training, outpatient health services, legal services, life skills training, mental health services, substance abuse treatment services, and transportation.

Shelter Operations, including maintenance, rent, repair, security, fuel, equipment, insurance, utilities, food, furnishings, and supplies necessary for the operation of the emergency shelter.

Where no appropriate emergency shelter is available for a homeless family or individual, eligible costs may also include a hotel or motel voucher for that family or individual.

Clients must meet Category 1 or 4 of HUD's Homeless Definition to be eligible for Emergency Shelter assistance.

See [24 CFR 576.102](#).

Street Outreach

Essential Services related to reaching out to unsheltered homeless individuals and families, connecting them with emergency shelter, housing, or critical services, and providing them with urgent, non-facility-based care. Eligible costs include engagement, case management, emergency health and mental health services, and transportation.

Clients must meet Category 1 or 4 of HUD's Homeless Definition to be eligible for Street Outreach assistance.

See [24 CFR 576.101](#).

Rapid Re-Housing

Housing relocation and stabilization services and/or short-and/or medium-term rental assistance as necessary to help individuals or families living in shelters or in places not meant for human habitation move as quickly as possible into permanent housing and achieve stability in that housing.

Eligible costs:

- Rental Assistance: rental assistance and rental arrears
- Financial Assistance: rental application fees, security and utility deposit, utility payments, first month's rent, last month's rent, and moving costs
- Services: housing search and placement, housing stability case management, landlord-tenant mediation, tenant legal services, and credit repair.

Clients must meet Category 1 or 4 of HUD's Homeless Definition to be eligible for Rapid Re-Housing assistance. ESG RRH clients must have household income of less than or equal to 30% Area Median Income (AMI). This does not apply for the initial intake but is enforced when income is reassessed during interim-evaluations. Clients must be referred to RRH from the Coordinated Entry system.

See [24 CFR 576.104](#).

Homelessness Prevention

Housing relocation and stabilization services and short-and/or medium-term rental assistance as necessary to prevent the individual or family from moving to an emergency shelter, a place not meant for human habitation, or another place described in paragraph (1) of the homeless definition.

The costs of homelessness prevention are only eligible to the extent that the assistance is necessary to help the program participant regain stability in their current housing or move into other permanent housing and achieve stability in that housing.

Eligible costs:

- Rental Assistance: rental assistance and rental arrears
- Financial Assistance: rental application fees, security and utility deposit, utility payments, first month's rent, last month's rent, and moving costs
- Services: housing search and placement, housing stability case management, landlord-tenant mediation, tenant legal services, and credit repair.

Clients must meet Category 2 or 4 of HUD's Homeless Definition and have income at 30% or below AMI at intake and 90-day interim-evaluations to be eligible for Homeless Prevention assistance. If at any time during assistance, the service provider is made aware of a change in status, an evaluation must be conducted to determine continued eligibility

See [24 CFR 576.103](#).

HUD HOMELESS DEFINITION

Category 1: Literally Homeless

- Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - Has a primary nighttime residence that is a public or private place not meant for human habitation;
 - Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
 - (iii) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

Category 2: Imminent Risk of Homelessness

- Individual or family who will imminently lose their primary nighttime residence, provided that:
 - Residence will be lost within 14 days of the date of application for homeless assistance;
 - No subsequent residence has been identified; and
 - The individual or family lacks the resources or support networks needed to obtain other permanent housing

Category 3: Homeless under other Federal Statutes

- *NOT APPLICABLE UNDER ESG*

Category 4: Fleeing/Attempting to Flee DV

- Any individual or family who:
 - Is fleeing, or is attempting to flee, domestic violence;
 - Has no other residence; and
 - Lacks the resources or support networks to obtain other permanent housing

MATCH

Each subrecipient must match dollar-for-dollar the ESG funding provided by HUD with funds from other public or private sources. A subrecipient may meet this requirement through matching funds or volunteer time (in-kind).

Matching funds must be provided after the date of the grant award to the subrecipient. Funds used to match a previous ESG grant may not be used to match a subsequent grant award.

Type of Match	Documentation required
Cash/Grant	Award letter
Value or fair rental value of any donated material or building	Documentation of value of donated material or building. Documentation of previous year's match.
Value of any lease on a building	Documentation of value of lease on a building
Any salary paid to staff to carry out the program of the subrecipient	Timecards of staff member. Proof of salary payment (cancelled checks / bank statements). Summary list of all salaries counted as match. List should contain staff name, hours worked and total monetary value of time worked.
Value of the time and services contributed by volunteers to carry out the program of the subrecipient. (Note: Volunteers providing professional services such as medical or legal services are valued at the reasonable and customary rate in the local community.)	List containing all volunteer names, number of hours worked and total value of time contributed.

4. REQUIRED SCOPE OF SERVICES

Subrecipients who successfully obtain ESG FY 2025 funding have responsibilities to ensure sound program management and service delivery and successful grants administration. They also are required to be mindful in complying with all federal, state, and local regulations, policies, standards, and guidelines. Once the contract commences, Subrecipients are expected to complete the following activities:

Program Management and Service Delivery	Grants Administration
<p>Ensure efficiency and effectiveness of ESG program:</p> <ol style="list-style-type: none"> 1. Enter client-level data on HMIS, or in the case of clients who are survivors of domestic violence, DV ClientTrack. 2. Comply with annual FMR and rent reasonableness requirements, property inspection requirements, and lead-based paint requirements. 3. Utilize and participate in Coordinated Entry (coordinated assessment) process established by Balance of State CoC. 4. Ensure that new and existing staff members are adequately trained in all aspects of ESG service delivery. 	<p>Ensure successful grant utilization throughout the contracted term of the FY 2025 award.</p> <ol style="list-style-type: none"> 1. Have consistent internet access with regular e-mail availability and use a financial software system for accounting purposes that functions and operates according to generally accepted accounting principles or has designated an entity that will maintain such an accounting system. 2. Ensure that claim submission deadlines are met in a timely manner, or that approval to submit a claim beyond its original deadline has been obtained from a CS Staff Member.

Execute Rental Assistance Payment Contracts (drafted by IHCD) with the tenants and landlords and ensure HP Lease Addendum (drafted by IHCD that contains HUD-prohibited lease provisions and VAWA language) is executed by the tenants and landlords.	Attend relevant webinars or in-person events hosted by IHCD; such as the IHCD Community Services Grants Team Kickoff Webinars, CS Team Office Hours; and other IHCD-hosted events that pertain to the ESG program.
<p>Ensure the existence of and compliance with internal policies regarding the following:</p> <ul style="list-style-type: none"> a. Confidentiality of client-level personal and health status information b. Preventing the duplication of benefits for clients c. ESG services are administered without discrimination against members of protected classes as defined by Federal and State law and any published HUD rules and notices – includes but is not limited to: Fair Housing Act, Violence Against Women Act and its subsequent updates or amendments, Equal Access to Housing Final Rule, etc. d. Termination of assistance is only done as a last resort and must follow subrecipient's agency policy. 	<p>Timely communication with IHCD:</p> <ul style="list-style-type: none"> 1. Respond to award inquiries or documentation requests from IHCD Community Services staff in a timely manner. 2. Alert IHCD grants analyst of any issues affecting grant utilization. 3. Obtain IHCD approval for specific purchases or to determine if expenses are eligible
Participate in annual Point in Time Count held in late January.	<p>Complete a bi-annual Program Progress and Match Report due on January 31, 2026, and July 31, 2026.</p> <p>Complete CAPER (Consolidated Annual Performance and Evaluation Report) by July 31, 2026.</p>

5. RFA TIMELINE

July 7, 2025	RFA released to the general public.
August 1, 2025	RFA responses are due to IHCD by 5:00 p.m. EST
August 28, 2025	Funding recommendations presented to IHCD Board of Directors
August 29, 2025	Awards announced and pre-contracting documents emailed

FY2025 award agreements will be effective on July 1, 2025, regardless of the agreement execution date. Subrecipients will have approval to submit back claims to July 1.

PART 2

RFA PROCESS

1. FUNDING ELIGIBILITY CRITERIA

The following list of requirements renders an agency eligible to apply for IHCD's ESG funding:

- 1) Applicants must be a private nonprofit organization (defined as tax-exempt secular or religious organization described in section 501(c) of the Internal Revenue Code). Documentation confirming the Applicant's status must be submitted with its application.
- 2) The applicant must certify that neither its principals nor any of its subcontractors are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from doing business or receiving funds from any federal agency or by any department, agency or political subdivision of the State. The applicant will be asked to submit their Entity Registration from SAM.gov with the application
- 3) Applicants must not have any unresolved IHCD or HUD findings or must not have had any state or federal funds recaptured due to non-compliance.
- 4) Applicants must provide services in the Balance of State Continuum of Care region (IN-502), which currently includes every county in the State of Indiana except Marion County.
- 5) An organization that has standards of financial accountability that conform to 2 CFR 200.302, Financial Management' and 2 CFR 200.303, Internal Controls,' which includes systems and software that allow for effective control over, and accountability for, all funds, property, and other assets.
- 6) 100% of ESG program clients must meet HUD's definition of homelessness (see definition under "About the ESG Program & Funding Source" section of this RFA)

If the applicant fails to demonstrate that each requirement listed above has been met, its proposal will not be reviewed.

2. EVALUATION CRITERIA OF RFA RESPONSE

Evaluation of all applications will be completed by IHCD's Community Services Team based on the criteria listed below:

- A. Capacity to meet request (dependent on amount IHCD receives from HUD)
- B. Meeting the requirements highlighted in Part 2, Section 1 titled "Funding Eligibility Criteria"
- C. Spending progress in previous fiscal years
- D. Service Provision according to the results of prior CAPER reports
- E. Quality of Application submission as defined below:
 1. All questions are completed as accurately as possible; none are left blank unless the question allows.

2. Essay responses provide a clear context.
3. All required attachments and documentation are attached or sent to IHCD Community Services.

3. RESPONDENT PROPOSAL

Respondents must provide the following information to be deemed responsive to this RFA:

Submitted ESG FY 2025 Funding Application via JotForm:

Respondent must complete their application through the [JotForm platform at this link](#).

Required Supplemental Attachments:

The following supporting documents must be provided in the application you submit via JotForm:

1. Proof of 501(c)(3) non-profit organization (defined as tax exempt secular or religious organization described in Section 501© of the Internal Revenue Code) status
2. Entity Report with UEI Number from SAM.gov
3. List of agency's current Board of Directors: including names, affiliating organization(s), email address, and phone number.
4. Letter of Match commitment for total amount requested for ESG across all program types.
5. General Liability Insurance documentation to evidence policy (Summary page showing coverage is all that is needed).
6. Fidelity Bond Insurance documentation to evidence policy or bond (amount should be equal to ½ of the total annual funding provided by the state and should cover all employees/board members handling funds).
7. Proof of Worker's Compensation Coverage
8. Proof of Auto Insurance (only required if using ESG funds for Transportation in agency vehicle)
9. Fire Inspection Report—dated within last 6 months (Shelter Requests Only)
10. Health Department Inspection—dated within last 6 months (if shelter serves food)

PART 3 RELEVANT LAWS & REGULATIONS

Respondents must comply with applicable state and federal laws and regulations, including but not limited to the provisions of 2 CFR Part 200, 24 CFR Part 576, and 24 CFR 5.105 in its implementation of the program.

PART 4

RFA TERMS AND CONDITIONS

This RFA is issued subject to the following terms and conditions:

- A. This RFA is a request for the submission of qualifications but is not itself an offer and shall under no circumstances be construed as an offer.
- B. IHCD A expressly reserves the right to modify or withdraw this request at any time, whether before or after any qualifications have been submitted or received.
- C. IHCD A reserves the right to reject and not consider any or all respondents that do not meet the requirements of this RFA, including but not limited to: incomplete qualifications and/or qualifications offering alternate or non-requested services.
- D. IHCD A reserves the right to reject any or all companies, to waive any informality in the RFA process, or to terminate the RFA process at any time, if deemed to be in its best interest.
- E. In the event the party selected does not enter into the required agreement to carry out the purposes described in this request, IHCD A may, in addition to any other rights or remedies available at law or in equity, commence negotiations with another person or entity.
- F. In no event shall any obligations of any kind be enforceable against IHCD A unless and until a written agreement is entered into.
- G. The Applicant agrees to bear all costs and expenses of its response and there shall be no reimbursement for any costs and expenses relating to the preparation of responses of qualifications submitted hereunder or for any costs or expenses incurred during negotiations.
- H. By submitting a response to this request, the Applicant waives all rights to protest or seek any remedies whatsoever regarding any aspect of this request, the selection of another respondent or respondents with whom to negotiate, the rejection of any or all offers to negotiate, or a decision to terminate negotiations.
- I. IHCD A reserves the right not to award a contract pursuant to the RFA.
- J. All items become the property of IHCD A upon submission and will not be returned to the Applicant.
- K. IHCD A reserves the right to split the award between multiple applicants and make the award on a category-by-category basis and/or remove categories from the award.
- L. The Applicant certifies that neither it nor its principals, contractors, or agents are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from utilizing federal funds by any federal or state department or agency.
- M. By submitting a response to this RFA, respondent acknowledges the acceptance of IHCD A's Award Agreement Boilerplate and the understanding that such Boilerplate is non-negotiable.

PART 6 FORMAT FOR SUBMISSION, MAILING INSTRUCTIONS, AND DUE DATE

Respondents will submit their RFA Application via [JotForm at this link](#).

Applications exclusively received via email, fax, and mail will NOT be accepted or reviewed. Additionally, unless previous approval has been granted, applications received after the deadline written below will NOT be accepted. If approval for an extension is needed, please contact communityservices@ihcda.in.gov.

The deadline for submission is August 1, 2025, at 5:00 PM EST.

Applications that do not contain all the required forms/documents as listed in this RFA may be determined ineligible for further consideration.

ESG Method of Distribution Summary

Please see the ESG Written Standards for providing ESG assistance.

AP-30 and AP-90 of the Annual Action Plan outline the MOD as follows:

IHCDA plans to allocate funding to approximately up to 15 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Components of the ESG program for line items: Housing Relocation & Services (financial and services), Rental assistance and administration.

There will be approximately 60 agencies that will apply for emergency shelter component that includes operations, essentials, and financial assistance and approximately one-two agencies that may apply for an outreach component. No more than the maximum allowed 60 percent of ESG funds will be allocated to operations, essentials and street outreach. A request for proposals will be distributed to all the Regional Planning Councils on the Homeless throughout the State, to the current subrecipients of the ESG program, current permanent supportive housing rental assistance programs (mental health centers, housing agencies, community action agencies, non-profits) who have had experience with rental assistance.

Each proposal will be reviewed by at least one IHCDA Community Services staff person. . The reviewer will complete a built in scoring tool in the application, assigning points based on the following program design components: outreach system, commitment to the coordinated access intake point, systems coordination, organizational capacity, permanent housing placement strategy, history of administering the rental assistance programs, amount of match provided and coordination with ESG Entitlement City funds (as applicable). Each subrecipient will be awarded based upon the average of their proposal score and the amount of funding that will be available.

The goal of ESG is to prevent homelessness and assist families and individuals experiencing homelessness to find housing as quickly as possible. Please see the ESG MOD for the performance standards expected of ESG subrecipients.

Performance Standards:

The performance standards were developed in collaboration with the governing body for the Balance of State CoC Board and the Resource & Funding Committee and approved by the Balance of State CoC Board by using the national standards outlined in Section 427 of the McKinney-Vento Act, as amended by the HEARTH Act.

Baseline performance measurements will be reports generated by the HMIS system and mainly from the ESG CAPER reports for the current grant prior year. Two of the standards are specific to the subrecipients program performance and the remaining two are specific to system outcomes.

ESG subrecipients will be able to set their own goals for the next years on areas such as: discharging persons to permanent housing, increasing employment income and increasing overall income by persons who exit the emergency housing.

Below are goals that IHCDCA would like to reach on an annual basis:

- ESG RR -rental assistance program subrecipients: At discharge from program, 82 percent of persons assisted will still be permanently housed, and 65 percent will increase their income.
- ESG program subrecipients that are Emergency shelters that have activities such as operations, essential services and financial assistance: 50 percent of persons will discharge to permanent housing, and 25 percent will increase their income.
- ESG program subrecipients that have outreach component: 50 percent of identified caseload will be permanently housed.
- ESG program subrecipients that have outreach component: 50 percent identified caseload will increase their income.
- The average length of stay of participants in ESG funded and other CoC programs should decrease by at least 10 percent.

Emergency Solutions Grant (ESG)
Reference 24 CFR 91.320(k)(3)

1. Include written standards for providing ESG assistance (may include as attachment)

Written Standards for Provision of ESG Assistance

This section includes written standards for providing the proposed assistance and describes the requirements for subrecipients to establish and implement written standards.

- 1) *Describe the standard policies and procedures for evaluating individuals' and families' eligibility for assistance under ESG.***

ESG subrecipients serving households experiencing literal homelessness as defined under paragraph (1) of the "homeless" definition in 24 CFR § Part 576.2 or who meet the criteria under paragraph (4) of the "homeless" definition and live in an emergency shelter or other place described in paragraph (1) of the "homeless" definition are encouraged to utilize the Arizona Matrix Tool that is embedded in HMIS as well as completion of a Housing Plan to provide a guide for case management and evaluation of a person or family's needs.

- 2) *Describe the policies and procedures for coordination among emergency shelter providers, essential service providers, homelessness prevention and rapid re-housing assistance providers, other homeless assistance providers, and mainstream service and housing providers.***

ESG subrecipients are expected to create MOU's with all shelter providers, housing agencies, community action agencies, township trustees, mental health centers, health clinics and homeless service providers in their proposed service area. Once available in their area, each ESG subrecipient will be required to partner with the Coordinated Access point by providing immediate housing to those persons who are unsheltered, if space is available. Additionally, as part of the proposal process, subrecipients are required to develop a program design that is inclusive not only of other targeted homeless services, but also of other mainstream resources such as public housing programs, programs receiving project-based or tenant-based Section 8, Supportive Housing for persons with disabilities (Section 811), HOME Investment Partnerships Program, Temporary Assistance for Needy Families (TANF), State Children's Health Insurance Program, Head Start, Mental Health and Substance Abuse Block Grants and services funded under the Workforce Investment Act. IHCD encourages programs to be strategic and comprehensive in their program design by requiring applicants to include all available resources to the maximum extent practicable.

- 3) *Describe the policies and procedures for determining and prioritizing which eligible families and individuals for homelessness prevention assistance and for rapid re-housing assistance.***

Persons who are utilizing Rapid Rehousing Funds must meet the criteria under paragraph (1) of the "homeless" definition in 24 CFR § Part 576.2 or meet the criteria under paragraph (4) of the "homeless" definition and live in an emergency shelter or other place described

in paragraph (1) of the “homeless” definition to be eligible to receive rapid re-housing assistance.

Those persons who will be utilizing homeless prevention funds must meet the criterion under the interim rule that clarifies the definition of “at risk of homelessness” under section 401(1) of the McKinney-Vento Act. The definition includes three categories under which an individual or family may qualify as “at risk of homelessness.” For an individual or family to qualify as “at risk of homelessness” under the first category of the definition, the individual or family must meet two threshold criteria and must exhibit one or more specified risk factors. The two threshold criteria, as provided in the statute, are:

1. The individual or family has income below 30 percent of median income for the geographic area; and (2) the individual or family has insufficient resources immediately available to attain housing stability. Under the interim rule, the first criterion refers specifically to annual income and to median family income for the area, as determined by HUD.
2. The second criterion is interpreted as, “the individual or family does not have sufficient resources or support networks, e.g., family, friends, faith based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the homeless definition in 24 CFR § Part 576.2.

For homeless prevention, the risk categories to further ensure consistency of interpretation, the interim rule also clarifies several of the risk factors that pertain to the first category of individuals and families who qualify as “at risk of homelessness.” As provided under the statute, the pertinent risk factors are as follows:

1. Has moved frequently because of economic reasons;
2. Is living in the home of another because of economic hardship;
3. Has been notified that their right to occupy their current housing or living situation will be terminated;
4. Lives in a hotel or motel;
5. Lives in severely overcrowded housing;
6. Is exiting an institution; or
7. Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness.

- 4) Describe the standards for determining the share, if any, of rent and utilities costs that each program participant must pay, if any, while receiving homeless prevention or rapid re-housing assistance.**

Participants who receive rental assistance through rapid rehousing or homeless prevention are expected to pay 30 percent of their income for rent and utilities if they have income. IHCD provides an Excel based worksheet which automatically calculates the tenant rent and utility portion allowable when household income is entered. Subrecipients will be responsible for ensuring that assisted rental units meet reasonable rent standards, are at or below fair market rent and meet habitability standards before any rental payments are approved. The tenant's portion and ESG subsidy will be calculated based upon acceptance into the program and determination of need for rental assistance.

The tenant portion of rent is calculated on the basis of allowable household income. Tenant rents are paid directly to the landlord and are subject to the same timeliness requirements as the overall rent. Any late fees incurred while receiving ESG will be the responsibility of the tenant to pay.

- 5) Describe the standards for determining the duration of rental assistance and whether and how the amount of assistance will be adjusted over time.**

Participants can receive up to 12 months of rental assistance per award year, and up to a maximum of 24 months of rental assistance in a three year period. The award term to subrecipients is 12-18 months. All funds associated with that award year must be expended upon completion of the award term. Program participants receiving rental assistance must pay 30 percent of their household income each month towards rent and utilities throughout the duration of their participation with ESG. Tenant payments will not be adjusted if income has increased. Payment of rental arrears consisting of a one-time payment for up to six months of rental arrears, including any late fees on those arrears is also an eligible expense. All persons assisted with program will qualify for up to 12 months of rental assistance and up to 18 months of services. Case managers will utilize the Arizona Self Sufficiency Matrix tool, which is built into the HMIS, to ensure participants receive the appropriate level of assistance. The Housing Plan is available for case managers to utilize for each household.

- 6) Describe the standards for determining the type, amount, and duration of housing stabilization or relocation services to provide a program participant, including the limits, if any, on the homelessness prevention or rapid re-housing assistance that each program participant may receive. Limits should include the maximum amount of assistance, maximum number of months the program participant is eligible to receive assistance; and the maximum number of times the program participants may apply for assistance.**

Participants can receive up to 12 months of housing relocation and stabilization services during the award term. Participants cannot receive more than 24 months of these services within a three (3) year period. Housing relocation and stabilization services includes financial assistance activities such as moving costs, rental application fees, security deposits, last month's rent, utility deposits and utility payments; and services such as

housing search and placement, housing stability case management, mediation, legal services and credit repair. No limit will be placed on the amount or type of services provided per participant as subrecipients are encouraged to spend the funds as needed by the tenant through active engagement with the participant. The amount and type of services will be determined largely at the time of intake when the housing case manager completes a housing assessment on the participant. The assessment consists primarily of using the Arizona Self-Sufficiency Matrix tool, which uses a vulnerability index to determine the most urgent needs as it relates to housing. This tool is also built into the HMIS. Participants can be assisted with housing stability case management for up to 30 days during the period the program participant is seeking permanent housing and cannot exceed 18 months total during the period the program participant is living in permanent housing.

Training through ESG program Analyst and other formats provided by the CoC Board (CoC Development Day) have been provided to ESG subrecipients and other McKinney Vento funded programs. These trainings have covered areas such as: housing first best practices, motivational interviewing, rule reductions, how to assist in employment, mainstream resources, bed bug prevention, fair housing, best practices for ESG RRH and case management best practice.

Subrecipients will be expected to attend ESG Rapid Rehousing training offered during the grant cycle and participate in peer learning opportunities/trainings offered during the year.

1. If the Continuum of Care has established centralized or coordinated assessment system that meets HUD requirements, describe that centralized or coordinated assessment system.

The Coordinated Assessment Committee of the Balance of State Continuum of Care Board is working with the State ESG program to develop and coordinate regional centralized intake and triage centers to ensure access to assistance is driven by the needs of persons experiencing homelessness. IHCD is the collaborative applicant within the CoC and IHCD was awarded the Coordinated Access Grant. With the assistance of the CoC Board, IHCD has ~~will~~ developed and improves upon the coordinated access system. **Access:** The Coordinated Assessment will be in the HMIS system and utilized by the Coordinated Access agency within the Region within the Balance of State CoC whether they are an ESG subrecipient or other programs funded by McKinney Vento. Each Region will determine if their Coordinated Access will be a centralized or decentralized system. **Assessment:** Each homeless person will be assessed and triaged based on their needs in order to prioritize the most vulnerable and those with the highest barriers for first assistance. This first priority would include the chronic homeless population. **Assign:** Once assessed the person/family then will be assigned to the right type of housing that best suits their needs whether it is permanent supportive housing, rapid rehousing or VASH voucher and whether it is available in that area or Region.

2. Identify the process for making sub-awards and describe how the ESG allocation available to private nonprofit organizations (including community and faith-based organizations).

IHCDA plans to allocate funding to a maximum of 15 agencies to administer the ESG Rapid Rehousing and Homeless Prevention Activities of the ESG program for line items such as: housing relocation and services (financial and services), rental assistance and administration.

There will be approximately 60 agencies that will apply for emergency shelter component that includes operations, essentials, and financial assistance and approximately two - six agencies that may apply for the street outreach activity. No more than 60% of ESG funds will be allocated to operations, essentials and street outreach. A request for proposals will be distributed to all the Regional Planning Councils on the Homeless throughout the Balance of State, to the current subrecipients of the ESG program, current permanent supportive housing rental assistance programs (mental health centers, housing agencies, community action agencies, non-profits) who have had experience with rental assistance. Each proposal will be reviewed by at least one IHCDA Community Services staff person and verified by an independent person or committee as appropriate, which could include members of the CoC Board. The reviewer will complete a scoring tool, assigning points based on the following program design components: outreach system, commitment to the coordinated access intake point, systems coordination, organizational capacity, permanent housing placement strategy, history of administering the rental assistance programs, amount of match provided and coordination with ESG Entitlement City funds (as applicable). Each subrecipient will be awarded based upon the average of their proposal score and the amount of funding that will be available. The amount of each award could be between \$60,000 and \$250,000 each.

3. If the jurisdiction is unable to meet the homeless participation requirement in 24 CFR 576.405(a), the jurisdiction must specify its plan for reaching out to and consulting with homeless or formerly homeless individuals in considering policies and funding decisions regarding facilities and services funded under ESG.

The State ESG recipient – IHCDA - consults with the Indiana Balance of State Continuum of Care Board, which is also administered by IHCDA. The CoC Board must have at least one member who is or has been formerly homeless. Currently, the CoC board has two members who meet this criterion and serve as members of critical committees, including the Resource & Funding Committee. This committee provides guidance to our CoC Programs and their policies and procedures. The State of Indiana recognizes the invaluable perspective of individuals who are currently homeless and formerly homeless in developing an effective person-centered program and system.

The State program strongly encourages subrecipients of the ESG program to incorporate this participation, to the maximum extent practicable, in a policy-making function of both the organization and the respective regional Planning Council on the Homeless. The State ESG program application requires subrecipients to demonstrate how participation and input of people experiencing homelessness is utilized at both an organizational level and within their regional Planning Councils on Homelessness. For 2018-19 applications, this will be a threshold item and will require the subrecipient to provide documentation around their policies for verification. This issue is also reviewed during program monitoring visits.

4. Describe performance standards for evaluating ESG.

The performance standards were developed in conjunction with the governing body for the Balance of State CoC Board and the Resource & Funding Committee and approved by the Balance of State CoC Board by using the national standards outlined in Section 427 of the McKinney-Vento Act, as amended by the HEARTH Act.

Baseline performance measurements will be reports generated by the HMIS system and mainly from ~~the Annual Progress Reports and~~ the ESG CAPER reports for the current grant ~~prior~~ year. Two of the standards are specific to the subrecipient's program performance and the remaining two are specific to system outcomes.

ESG subrecipients will be able to set their own goals for the next years on areas such as: discharging persons to permanent housing, increasing employment income and increasing overall income by persons who exit the emergency housing.

Below are goals that IHCD would like to reach on an annual basis:

ESG RR -rental assistance program subrecipients: At discharge from program, 82 percent of persons assisted will still be permanently housed, and 65 percent will increase their income.

ESG program subrecipients that are Emergency shelters that have activities such as operations, essential services and financial assistance: 50 percent of persons will discharge to permanent housing, and 25 percent will increase their income.

ESG program subrecipients that have outreach component: 50 percent of identified caseload will be permanently housed.

ESG program subrecipients that have outreach component: 50 percent identified caseload will increase their income.

The average length of stay of participants in ESG funded and other CoC programs should decrease by at least 10 percent.



REQUEST FOR APPLICATIONS

for

Housing Opportunities for People with HIV/AIDS (HOPWA)

INDIANA HOUSING AND COMMUNITY DEVELOPMENT AUTHORITY

30 South Meridian Street, Suite 1000

Indianapolis, IN 46204

<http://www.in.gov/ihcda/>

317-232-7777

ISSUE DATE: June 27, 2025

RESPONSE DEADLINE: July 28, 2025, 5:00 PM EST

1. PURPOSE OF THIS REQUEST FOR APPLICATIONS (“RFA”)

The Indiana Housing and Community Development Authority (referred to as “IHCD” or “Grantee” throughout this document) seeks to contract with community-based 501(c)(3) nonprofit organizations (referred to as “Project Sponsors” or “Respondents”) to directly administer housing assistance and supportive services under the Housing Opportunities for Persons with HIV/AIDS (“HOPWA”) program.

2. ABOUT THE INDIANA HOUSING AND COMMUNITY DEVELOPMENT AUTHORITY**MISSION STATEMENT**

To provide housing opportunities, promote self-sufficiency, and strengthen communities.

VISION

An Indiana with a sustainable quality of life for all Hoosiers in the community of their choice.

OVERVIEW (for more information visit <http://www.in.gov/ihcda/>)

IHCDA was created in 1978 by the Indiana General Assembly and is a quasi-public financially self-sufficient statewide government agency. IHCDA's programs are successful in large part because of the growing network of partnerships IHCDA has established with local, state, and federal governments, for-profit businesses and not-for-profit organizations. For-profit partners include investment banks, mortgage lenders, commercial banks, corporate investment managers and syndicators, apartment developers, investors, homebuilders, and realtors. Not-for-profit partners include community development corporations, community action agencies, and not-for-profit developers.

3. ABOUT THE HOPWA PROGRAM & FUNDING SOURCE

The purpose of the HOPWA Program is to ensure that affordable housing options and services are available to low-income persons with HIV/AIDS and their families and to assist such persons in achieving and maintaining housing stability. It follows that access to stable and affordable housing would thereby decrease homelessness and improve access to and engagement in HIV/AIDS treatment and care. HOPWA has been administered across the U.S. since 1992.

IHCDA is the Indiana agency designated to receive the state's funding for the Housing for Persons with HIV/AIDS Program (HOPWA), as administered by the U.S. Department of Housing and Urban Development (HUD). As a HOPWA Grantee, IHCDA's goal is to fund Project Sponsors that can directly support those living with HIV and their loved ones, successfully ensure that Project Sponsors can consistently spend all HOPWA funding and maintain compliance with relevant federal regulations on spending and program operations and development.

As listed below, funds from IHCDA's HOPWA program may pay for the following activities:

Tenant Based Rental Assistance (TBRA)

HOPWA's TBRA program offers ongoing, monthly rent and utility subsidies to HOPWA-eligible clients. Its purpose is to subsidize long-term, safe, and affordable occupancy for those who need longer-term assistance. TBRA is not linked to a specific unit – meaning, if a client moves out of one qualifying unit and into another, the TBRA they receive will continue to be administered.

Clients receiving assistance under HOPWA-TBRA must meet HOPWA-eligibility requirements and annually verify their income to continue receiving assistance. TBRA payments must meet both fair market rent ("FMR") and Rent Reasonableness as defined in 24 CFR 888.111, 24 CFR 888.113, and 24 CFR 574.320(a)(3).

To successfully administer, a housing and service needs assessment should be offered.

Short Term Rent, Mortgage and Utilities (STRMU)

STRMU is a line of funding that provides mortgage, rent and utility assistance for up to 21 weeks in a 52-week period. This short-term funding helps provide a short-term stabilizing intervention for HOPWA-eligible homeowners and renters who are already housed. STRMU payments must meet both FMR and Rent Reasonableness as defined in 24 CFR 888.111, 24 CFR 888.113, and 24 CFR 574.320(a)(3).

To successfully administer, housing and service needs assessment should be offered. Please note that STRMU is meant to prevent homelessness. It cannot be used as an intervention for those who already receive TBRA or are currently homeless.

Supportive Services

As outlined in 24 CFR 574.300(b)(7), this funding stream improves a client's access to care/services related to the following:

- A. Health/Mental Health
- B. Assessment
- C. Drug and alcohol abuse treatment and counseling
- D. Daycare
- E. Personal assistance
- F. Nutritional services
- G. Intensive care when required
- H. Assistance in accessing local, State, and Federal government benefits and services (i.e. Medicare/Medicaid, Social Security, etc.)

Permanent Housing Placement (PHP)

Project Sponsors may help clients establish a new residence where ongoing occupancy is expected to continue. Permanent Housing Placement may pay for the following: application fees, credit check expenses, first month's rent and security deposit (which may not exceed two months' rent), and one-time utility connection fees and processing costs.

Housing Information Services

Project Sponsors may provide housing counseling/referral services and information materials that educate clients on housing resources and assist with locating, acquiring, financing, and maintaining

housing. This may include a variety of supportive actions, like fair housing counseling or assisting clients with certain applications.

Facility Based Operations

Project Sponsors may spend money on housing that is connected with a specific facility or project. Project Sponsors may use funds to administer facility-based rental assistance, including master-leased units and project-based rental assistance – and cover operating costs for facilities - such as maintenance, security, operation, insurance, utilities, furnishings, equipment, supplies, and other incidental costs – so long as the expense is reasonable and necessary.

In cases where contractors are needed to fix or maintain facility, Project Sponsors need to provide IHCD documentation of the bid finding process, quotes received, and the decision that will be taken.

Resource Identification

Starting in FY2025, Project Sponsors may utilize their funds for systems-wide initiatives that support the project sponsor's capacity to advance the housing needs of those living with HIV and their loved ones. Project Sponsors may develop new and enhanced community housing resources for persons living with HIV/AIDS.

For project sponsors interested in utilizing resource identification, the list presented below provides a sample list of eligible activities:

- Developing Housing Assistance Resources:
 - Identifying and tracking housing resources for current/future clients
 - Strengthening relationships with local landlords, public housing authorities, and other local and state affordable housing partnerships
- Systems Analysis and Coordination:
 - Attending housing-related meetings such as Regional Council Meetings on your agency's behalf
 - Coordinating housing case management efforts across HOPWA- and Ryan White- provider networks
- Research and Needs Assessments:
 - Collecting and analyzing local HIV housing data
 - Conducting focus groups for collecting qualitative data
 - Hiring consultants/contractors to perform HIV housing needs assessments

Expenses directly associated with serving clients are ineligible under this line-item. Questions on how to utilize resource identification may be sent to IHCD Community Services ("CS").

Administration

Typically, administration funds can be used to purchase office supplies and pay for rent/utilities of office space, and staff time spent creating reports, compiling claims, etc. Administration funding may not be used for costs directly associated with other eligible HOPWA activities.

In certain circumstances, HUD may approve use of administration funding for HOPWA-specific trainings. HOPWA Administrative funds can only be used on trainings if explicit approval has been granted from HUD. Please note that per federal requirements, project sponsors may spend no more than 7% of their funds towards administration.

4. REQUIRED SCOPE OF SERVICES

Project Sponsors who successfully obtain HOPWA FY 2025 funding have responsibilities to ensure sound program management and service delivery and successful grants administration. They also are required to be mindful in complying with all federal, state, and local regulations, policies, standards, and guidelines. Once the contract commences, Project Sponsors are expected to complete the following activities:

Program Management and Service Delivery	Grants Administration
<p>Ensure efficiency and effectiveness of HOPWA program:</p> <ol style="list-style-type: none"> 1. Enter client-level data on HMIS, or in the case of clients who are survivors of domestic violence, DV ClientTrack. 2. Comply with annual FMR and rent reasonableness requirements, property inspection requirements, and lead-based paint requirements. 3. Ensure that new and existing staff members are adequately trained in all aspects of HOPWA service delivery. 	<p>Ensure successful grant utilization throughout the contracted term of the FY 2025 award.</p> <ol style="list-style-type: none"> 1. Have consistent internet access with regular e-mail availability and use a financial software system for accounting purposes that functions and operates according to generally accepted accounting principles or has designated an entity that will maintain such an accounting system. 2. Track and maintain a spending plan for FY 2025 funding that accounts for claim submission deadlines and the budget outlined in the award. 3. Ensure that claim submission deadlines are met in a timely manner, or that approval to submit a claim beyond its original deadline has been obtained from a CS Staff Member. 4. Complete HOPWA Financial Management Training prior to claiming down funds, which can be accessed through your HUD Exchange account: HUD Exchange Learn - HUD Exchange
<p>Execute Rental Assistance Payment Contracts (drafted by IHCD) with the tenants and landlords and ensure HP Lease Addendum (drafted by IHCD that contains HUD-prohibited lease provisions and VAWA language) is executed by the tenants and landlords.</p>	<p>Attend relevant webinars or in-person events hosted by IHCD; such as the IHCD Community Services Grants Team Kickoff Webinars, CS Team Quarterly Office Hours; and other IHCD-hosted events that pertain to the HOPWA program.</p>
<p>Ensure the existence of and compliance with internal policies regarding the following:</p> <ol style="list-style-type: none"> a. Confidentiality of client-level personal and health status information 	<p>Timely communication with IHCD:</p> <ol style="list-style-type: none"> 1. Respond to award inquiries or documentation requests from IHCD Community Services staff in a timely manner. 2. Alert IHCD grants analyst of any issues affecting grant utilization.

<ul style="list-style-type: none"> b. Preventing the duplication of benefits for clients c. HOPWA services are administered without discrimination against members of protected classes as defined by Federal and State law and any published HUD rules and notices – includes but is not limited to: Fair Housing Act, Violence Against Women Act and its subsequent updates or amendments, Equal Access to Housing Final Rule, etc. d. Termination of assistance is only done as a last resort 	<ul style="list-style-type: none"> 3. Obtain IHCD A approval for specific purchases or to determine if expenses are eligible
	Complete a bi-annual Program Income and Admin Spending Report due on December 31, 2025, and June 28, 2026.
	Complete closeout paperwork in a timely manner – which will include the IHCD A Closeout Form and HUD’s annual CAPER (Consolidated Annual Performance and Evaluation Report) – which will be distributed sometime in the middle to end of the contract year.

5. RFA TIMELINE

June 27, 2025	RFA released to the general public.
July 28, 2025	RFA responses are due to IHCD A by 5:00 p.m. EST
August 15, 2025	Funding Decisions will be sent by 5:00 p.m. EST
August 25, 2025	Agreement details finalized

FY2025 award agreements will be effective on July 1, 2025, regardless of the agreement execution date.

PART 2

RFA PROCESS

1. FUNDING ELIGIBILITY CRITERIA

The following list of requirements renders an agency eligible to apply for IHCD's HOPWA funding:

- A. A private nonprofit organization (defined as tax-exempt secular or religious organization described in section 501(c)(3) of the Internal Revenue Code).
- B. An organization that does not have any unresolved findings from IHCD or HUD.
- C. An organization that has staff or Board members affiliated with the organization that have attended Regional Planning Council on the Homeless meetings in the 2024 calendar year.
- D. An organization that either is designated by Indiana Department of Health as a "Non-Medical Case Management Provider" (NMCMP) or has a formal agreement with such a provider.
- E. An organization that will have a Certificate of Consistency with the State of Indiana Consolidation Plan for the areas that its program will cover.
- F. An organization that has standards of financial accountability that conform to 2 CFR 200.302, 'Financial Management' and 2 CFR 200.303, 'Internal Controls,' which includes systems and software that allow for effective control over, and accountability for, all funds, property, and other assets.

If the applicant fails to demonstrate that each requirement listed above has been met, its proposal will not be reviewed.

2. EVALUATION CRITERIA OF RFA RESPONSE

Evaluation of all applications will be completed by IHCD's Community Services Team based on the criteria listed below:

- A. Capacity to meet request (dependent on amount IHCD receives from HUD)
- B. Meeting the requirements highlighted in Part 2, Section 1 titled "Funding Eligibility Criteria"
- C. Spending progress in previous fiscal years
- D. Service Provision according to the results of prior CAPER reports
- E. Quality of Application submission as defined below:
 - 1. All questions are completed as accurately as possible; none are left blank unless the question allows.
 - 2. Essay responses provide a clear context.
 - 3. All required attachments and documentation are attached and sent to IHCD Community Services.

3. RESPONDENT PROPOSAL

Respondents must provide the following information to be deemed responsive to this RFA:

Submitted HOPWA FY 2025 Funding Application via JotForm:

Respondent must complete their application through the JotForm platform. The link to the application is here: [IHCD: Housing Opportunities for Persons with AIDS \(HOPWA\)](#).

Required Supplemental Attachments:

The following supporting documents must be provided in the application you submit via JotForm:

1. Proof of 501(c)(3) non-profit organization (defined as tax exempt secular or religious organization described in Section 501© of the Internal Revenue Code) status
2. Updated UEI Number from SAM.gov
3. Proof of being a Non-Medical Case Management Provider (NMCMP) OR having a formal agreement with an NMCMP.
4. Signed Certificate of Attendance at Regional Planning Council on Homelessness within the last 12 months. Link to IHCD Form can be accessed [here](#).
5. Financial management policies and procedures, including claims submission process.
6. Confidentiality policy and procedures
7. Updated Certificate of completion from HUD Exchange's 2 CFR 200 Financial Management Module: [Financial Management 201: 2 CFR 200 Online Module](#)
8. Updated Certificate of completion from HUD Exchange's HOPWA Financial Management Module: [Financial Management 201: HOPWA Online Module](#)
9. List of agency's current Board of Directors: including names, affiliating organization(s), email address, and phone number.
10. Staffing/organization chart of HOPWA staff, including FTE employees
11. Current Policy by which HOPWA clients are selected and approved, without documentation for current HOPWA clients or client households.
12. Blank Housing Plan or Outline
13. Tracking Sheet of 75% served at or below 50% AMI
14. One MOU with a Permanent Supportive Housing ("PSH") provider in each Region that your organization covers (if PSH is available in the area)
15. Grievance/dispute policy
16. Termination of HOPWA Assistance Policy

PART 3 RELEVANT LAWS & REGULATIONS

Respondents must comply with applicable state and federal laws and regulations, including but not limited to the provisions of 2 CFR Part 200, 24 CFR Part 574, and 24 CFR 5.105 in its implementation of the program.

PART 4

RFA TERMS AND CONDITIONS

This RFA is issued subject to the following terms and conditions:

- A. This RFA is a request for the submission of qualifications but is not itself an offer and shall under no circumstances be construed as an offer.
- B. IHCD A expressly reserves the right to modify or withdraw this request at any time, whether before or after any qualifications have been submitted or received.
- C. IHCD A reserves the right to reject and not consider any or all respondents that do not meet the requirements of this RFA, including but not limited to: incomplete qualifications and/or qualifications offering alternate or non-requested services.
- D. IHCD A reserves the right to reject any or all companies, to waive any informality in the RFA process, or to terminate the RFA process at any time, if deemed to be in its best interest.
- E. In the event the party selected does not enter into the required agreement to carry out the purposes described in this request, IHCD A may, in addition to any other rights or remedies available at law or in equity, commence negotiations with another person or entity.
- F. In no event shall any obligations of any kind be enforceable against IHCD A unless and until a written agreement is entered into.
- G. The Applicant agrees to bear all costs and expenses of its response and there shall be no reimbursement for any costs and expenses relating to the preparation of responses of qualifications submitted hereunder or for any costs or expenses incurred during negotiations.
- H. By submitting a response to this request, the Applicant waives all rights to protest or seek any remedies whatsoever regarding any aspect of this request, the selection of another respondent or respondents with whom to negotiate, the rejection of any or all offers to negotiate, or a decision to terminate negotiations.
- I. IHCD A reserves the right not to award a contract pursuant to the RFA.
- J. All items become the property of IHCD A upon submission and will not be returned to the Applicant.
- K. IHCD A reserves the right to split the award between multiple applicants and make the award on a category-by-category basis and/or remove categories from the award.
- L. The Applicant certifies that neither it nor its principals, contractors, or agents are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from utilizing federal funds by any federal or state department or agency.
- M. By submitting a response to this RFA, respondent acknowledges the acceptance of IHCD A's Award Agreement Boilerplate and the understanding that such Boilerplate is non-negotiable.

PART 6 FORMAT FOR SUBMISSION, MAILING INSTRUCTIONS, AND DUE DATE

Respondents will submit their RFA Application via [JotForm](#).

Applications exclusively received via email, fax, and mail will NOT be accepted or reviewed. Additionally, unless previous approval has been granted, applications received after the deadline written below will NOT be accepted. If approval for an extension is needed, please contact communityservices@ihcda.in.gov.

The deadline for submission is July 28, 2025, at 5:00 PM EST.

Applications that do not contain all the required forms/documents as listed in this RFA may be determined ineligible for further consideration.

HOPWA Method of Distribution

Please see attached for the HOPWA RFQ Instructions.

AP-30 of the Annual Action Plan outlines the MOD as follows:

IHCDA will facilitate a request for qualifications (RFQ), advertised through the CoC network and posted online, for HIV/AIDS service providers. The RFQ will gather information on the number of persons/households they plan to serve, housing plans, housing services, organizational capacity, performance goals, supportive services, and their proposed budget. The RFQ applicants need to meet the following thresholds:

- Required to be a non-profit organization
- Required to be or have a relationship with a current Indiana Department of State Health Care Coordination Site.
- Previous experience providing HOPWA assistance.

Actively attending the local Regional Planning Council/Committees/Leadership roles within their Region. By having all subrecipients to be or have a relationship with a current Indiana State Department of Health - Care Coordination Site, we are providing a one stop shop for persons to access level of care that is needed. Persons will be able to receive testing, diagnosis, medical information, supportive services and housing if needed.

Funds will be made available in the following percentages of the total awards made to project sponsors:

- At least 60 percent to direct housing assistance: long-term rental assistance, short term rental assistance, and facility based operations;
- No more than 7 percent to subrecipient administration and 3 percent to grantee/recipient administration;
- No more than 35 percent to housing information and permanent housing placement activities;
- No more than 35 percent to supportive services that positively affect recipients' housing stability.

Once the Federal budget is determined, IHCDA will make adjustments proportionally to increase or decrease the above HOPWA allocation MOD.

NHTF.

APPLICATION POLICY

Due to the length of the policy, a URL link is provided. The most current policy can be found here:

<https://www.in.gov/ihcda/files/2023-Action-Plan-HTF-Policy-Final.pdf>

[IHCDA](#) » [DEVELOPERS](#) » [HOUSING TRUST FUND](#)

HOUSING TRUST FUND

The [Housing Trust Fund](#) (HTF) may be used for the production or preservation of affordable housing through acquisition, new construction, and/or rehabilitation. The HTF program is required to serve extremely low-income households (households below 30% of the Area Median Income). As such, IHCDA utilizes its HTF program to fund permanent supportive housing for persons experiencing homelessness.

APPLICATION POLICY AND FORMS

- [2023 Housing Trust Fund Policy](#)
- [2021 Housing Trust Fund Policy](#)
- [2020 Housing Trust Fund Policy](#)
- [2019 Housing Trust Fund and HOME Policy](#)

RESOURCES

- [HTF Rehab Standards](#)
- [Appendix A - HTF UPCS](#)

NHTF.

REHABILITATION STANDARDS

IHCDA National Housing Trust Fund Rehabilitation Standards

IHCDA has established rehabilitation standards of which all HTF-assisted housing undergoing rehabilitation must meet at the time of project completion, pursuant to the regulations at 24 CFR 93. These standards are designed to outline the requirements for building rehabilitation for all IHCDA national Housing Trust Fund funded multi-family housing projects.

All IHCDA National Housing Trust Fund (HTF) projects constructed or rehabilitated must meet the stricter of the Indiana State Building Code, local building codes, or manufacturer's instructions. The General Administrative Rules at 675 IAC 12 provides State of Indiana codes and standards for rehabilitation. The Rules can be accessed at the following address: <http://www.in.gov/dhs/2490.htm>

At the time of publication and adoption of the HTF Standards, the adopted codes referenced are believed to be those in force. As standard and codes change and put into effect by the governing authorities having jurisdiction, the new standards and codes will apply in lieu of those referenced.

Please note this Guide is to be used only as a supplement to compliance with all applicable State and Federal codes, laws, regulations, statutes, and rules. This Guide should not be considered a complete guide to physical inspection compliance. The responsibility for compliance with Federal program regulations lies with the HTF grantee and/or property owner. IHCDA's obligation to monitor for compliance with the requirements of the Code does not make IHCDA or its subcontractors liable for any non-compliance issues.

I. Health and Safety

If the housing is occupied at time of rehabilitation, any life-threatening deficiencies must be identified and addressed immediately. Appendix A defines the list of Inspectable Items and Observable Deficiencies, including the identification of life-threatening deficiencies for the property site, building exterior, building systems, common areas and units. Critical Violation code deficiencies (CVC) are identified in both the following Rehabilitation Standards, as well as Appendix A. Critical violations must be repaired within 24 hours of the inspection and IHCDA must be provided with written notification of the action taken to complete the correction(s). The following would be considered a Critical Violation Code:

- Exposed Energized Electrical
- Water Leak by Electrical equipment
- Gas/Methane Leaks
- Fire Exit Blocked
- Unusable Fire Escapes
- Flue Gas Vents with CO leakage
- Missing/inoperable smoke detector
- Expired/Discharged Fire Extinguisher/Inspector Tag
- Inoperable Emergency Escape/Rescue Windows
- Inoperable Emergency Lightening
- Inoperable EXIT sign
- Improper Fuel Storage
- Missing or Loose Guard Rail
- Ground Fault Protection Inoperable
- Fire Alarm Inoperable
- Other with Explanation

II. Major Systems

The remaining useful life of the major systems must be determined for rental housing and a Capital Needs Assessment will be required for projects of 26 units or more. For more information on the CNA the certificate and affidavit, please see Schedule F.

- All developments are required to have replacement reserves. Replacement reserves must be included in the operating budget but are not included as part of the operating reserves. Contributions must be made to the reserve account starting at or before the conversion date of the construction loan to permanent loan and must be funded for the term of the loan. Replacement reserve funds must only be used for capital improvements (substantial improvements to the real estate such as re-roofing, structural repairs, or major projects to replace or upgrade existing furnishings, but not including replacement of individual appliances or minor repairs) and must not be used for general maintenance expenses. Less restrictive provisions required by lenders must be approved by IHCD.
- Replacement reserves must escalate at a rate of 3% per year.
 - IHCD will, at its discretion, adjust the replacement reserve to reflect reasonable and customary capital and replacement expenditures.
 - See 5.6: Underwriting Guidelines for Rental Projects in the HTF Policy for more information.
- An independent, experienced third party must perform the CNA and this party can have no financial interest in ownership of the development. It is required that an Indiana licensed professional, an engineer/architect, perform the assessment and supply IHCD with their professional opinion of a property's current overall physical condition. This includes the identification of significant deferred maintenance, existing deficiencies, and material building code violations that effect the property's use and its structural or mechanical integrity.
- The assessment should include a site visit and physical inspection of the interior and exterior of units and structures, as well as an interview with available on-site property management and maintenance personnel to inquire about past repairs/improvements, pending repairs and existing or chronic physical deficiencies. The assessment should include an opinion as to the proposed budget for recommended improvements and should identify critical building systems or components that have reached or exceeded their expected useful lives. The assessment should also include recurring probable expenditures for significant systems and components impacting use and tenancy, which are not considered operation or maintenance expenses, in order to determine the appropriate replacement reserve deposits on a per unit per year basis. The following components should be examined and analyzed for a CNA:
 - Site, including topography, drainage, pavement, curbing, sidewalks, parking, landscaping, amenities, water, sewer, storm drainage, gas and electric utilities and lines;
 - Structural systems, both substructure and superstructure, including exterior walls and balconies, exterior doors and windows, roofing system and drainage.
 - Interiors, including unit and common area finishes and appliances, unit bathroom finishes and fixtures, and common area lobbies and corridors;
 - Mechanical systems, including plumbing and domestic hot water, HVAC, electrical, and fire protection; and
 - Elevators (if applicable).
- The CNA must provide the following information in the order and format below:
 - Company certification;

- Executive summary – including a general building description, evaluation definitions, process used to create the Capital Needs Assessment (including interviews with the current owner and/or management company);
 - Existing Building Systems and Conditions Summary;
 - Critical Repair Items Cost Summary – including all health and safety deficiencies violation of state or local building codes that require immediate correction:
 - Site and grounds
 - Building exteriors
 - Common areas
 - Building interiors
 - Rehab and Renovations Cost Summary – An estimate of the repairs, replacements and renovations that will be completed before the final placed in service date:
 - Site and grounds
 - Building exteriors
 - Common areas
 - Building interiors
 - Market improvements
 - Contingency (not to exceed 15%)
 - Long Term Physical Needs Cost Summary – an estimate of the repairs and replacements, during and beyond the final placed in service date, that will be required to maintain the properties physical integrity over the next 15 years.
 - Remaining useful life schedule
 - Physical condition Inspection Report
 - Site, building and floor plans
 - Capital Needs Assessment Certification
 - Photo Log
- IHCD will, after receiving the application and the CNA, schedule a physical inspection of the development in order to verify the accuracy of the CNA submitted with the application. Additionally, IHCA may make a report, which identifies deficiencies and/or inaccurate statements concerning the identification of repairs in the CNA submitted with the application.

III. Lead Based Paint:

HUD's Lead Safe Housing Rule 24 CFR Part 35 must be addressed in all projects receiving IHCD HTF funding. The Rule may be accessed here:

http://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes/enforcement/lshr

IV. Accessibility

The Uniform Federal Accessibility Standards sets standards for facility accessibility by physically handicapped persons for Federal and federally-funded facilities. These standards are to be applied during the design, construction, and alteration of buildings and facilities to the extent required by the Architectural Barriers Act of 1968, as amended. Guidelines and standards may be found at:

<https://www.access-board.gov/guidelines-and-standards/buildings-and-sites/about-the-aba-standards/ufas>

Section 504 of the Rehabilitation Act of 1973- provides accessibility requirements for New Construction, Substantial Rehabilitation, and Rehabilitation. Please see [Chapter 3 - Accessibility Requirements](#) of the IHCD CDBG & HOME Program Manual for an outline of Section 504 requirements.

V. Disaster Mitigation

These standards require housing to be improved to mitigate any potential impacts from potential disasters, such as earthquakes, hurricanes, floods, and wildfires. Improved housing must comply with State or local codes, ordinances, and any other HUD requirements. Currently new projects located in a flood hazard

area will not be funded, and any other rehabilitation of existing units must comply with any federal, State and local flood mitigation plans. Any other potential disaster issues will be mitigated as necessary.

VI: Uniform Physical Condition Standards

The property conditions must also be in accordance with the Uniform Physical Conditions Standards. These are the standards to which projects requiring on-going compliance will be inspected by during the affordability period.

Table of Contents

<u>Site Conditions</u>	7
1. Site Drainage	7
2. Concrete and Masonry	7
3. Accessory Buildings	7
4. Trees and Shrubs	7
5. Refrigerators and Stoves	7
6. Fences and Gates	7
7. Air Quality	7
8. Garbage, Debris, Chutes	8
9. Hazards	8
10. Infestation	8
11. Mail boxes/Signs	8
12. Parking Lots, Driveways, and Roads	8
13. Play Areas, Equipment, Surface	8
14. Graffiti	8
 <u>Exterior Wall Assembly</u>	 9
1. Exterior Surface Characteristics	9
 <u>Floor Standards</u>	
1. Wood Floor Standards	9
2. Floor Sheathing	9
3. Floor Finishes	9
4. Toilet, Bath, Shower, and Kitchen Spaces	9
 <u>Windows and Doors</u>	 9
1. Windows	9
2. Interior and Exterior Doors	9
 <u>Partitions</u>	 10
1. Wall Coverings	10
2. Bathrooms and Kitchens	10
 <u>Stair Standards</u>	 10
1. Stairs	10
2. Illumination	10
3. Handrails and Guardrails	10
 <u>Ceilings Standards</u>	 11
1. Ceiling performance	11
2. Attic Access	11
3. Insulation Clearance	11
4. Exhaust Ducts and Plumbing Stack Terminations	11
 <u>Roofs</u>	 11
1. Re-roofing	11
2. Sheathing	11
3. Underlayment	12
4. Shingles	12
5. Flat Roofs	12
6. Flashing	12
7. Gutters, Downspouts, Soffit and Fascia	12

<u>Chimney</u>	12
1. General Performance	12
2. Flue Lining	13
3. Chimney Hood	13
<u>Electrical</u>	12
1. General	13
2. Wiring	13
3. Receptacles	14
4. Lighting	14
<u>Plumbing</u>	14
1. Water Distribution System	14
2. Drain, Waste, and Vent System	14
3. Hot Water Supply System	15
4. Fixtures and Faucets	15
<u>HVAC Standards</u>	15
1. Controls	15
2. Fuel Supply	15
3. Combustion Heat	15
4. Electric Heat	16
5. Cooling	17
6. Distribution Systems	17
<u>Ventilation</u>	17
1. Minimum Ventilation Standards	17
2. Clothes Dryers Exhaust	17
3. Range Hoods	18
4. Overhead Exhaust Hoods	18
<u>Fire Safety</u>	19
1. Emergency Escape and Rescue Openings	19
2. Exits	19
3. Smoke Alarms	19
4. Flammable Materials	19
5. Fire Protection	19
<u>Hazardous Materials</u>	19
1. Asbestos	19
2. Lead-Based Paint	19
<u>Energy Efficiency</u>	19
1. Exterior Walls	19
2. Attics/Ceilings	20
3. Ductwork	20
4. Piping	20
5. Air-Sealing	20
<u>Accessible Features</u>	20
1. Elevators	20
2. Call for Aid	20

Site Conditions**1. Site Drainage**

- a. There shall be positive surface water drainage away from all dwellings.
- b. The storm water drainage system shall be free of obstructions, structurally sound, free of hazards, and properly drain.

2. Concrete and Masonry

- a. Cracks in concrete, and/or masonry porches, steps or landings more than ¼ inch wide and change in elevation more than ½ inch tall shall be corrected.
- b. Walkways/Steps: cracking, spalling, exposed reinforcing material creating health/safety issues shall be repaired.
- c. Foundations: Cracking, spalling, excessive bowing (bulges vertically), sweeping (bulges horizontally), leaning, and mortar deterioration shall be corrected. Cracks 1/8 inch and larger shall be corrected.

3. Accessory Buildings

- a. Health and/or Safety issues shall be corrected.

4. Trees and Shrubs

- a. Landscaping shall not pose any health or safety hazard.
- b. Trees near the foundation shall not cause an immediate or potential drainage and/or structural problem.
- c. Excessive bushes and trees shall not cause health or safety hazards (overgrown areas).
- d. Dead branches and/or trees, which pose a hazard of falling and/or causing personal harm or property damage, shall be removed.

5. Refrigerator/Stoves

- a. It is recommended that the appliance(s) be replaced if any of the following conditions exist:
 - o Broken or missing shelving.
 - o Deteriorated seals.
 - o Health and safety hazards.
 - o Coolant leaks from the refrigerator.
 - o Missing hardware (handles, controls knobs).
 - o Inefficient or inoperable.

6. Fencing and Gates

- a. Shall be fully functional, securely installed, and free of health and safety issues.
- b. Any missing sections, holes, and/or components shall be repaired.

7. Air Quality

- a. Indoor and outdoor spaces must be free from high levels of sewer gas, fuel gas, mold, mildew, or other harmful pollutants.

8. Garbage, Debris, Chutes

- a. Garbage and debris shall not exceed the capacity of the designated container within each unit and/or exterior collection points.
- b. Exterior garbage containers shall be adequately sized for the number of units within the development.
- c. Walls and gates surrounding exterior trash collection points shall remain in good repair and free of leaning, broken, and collapsing components or sections.
- d. Garbage chutes shall be in proper working condition

9. Hazards

- a. All sharp edges or cutting hazards which could cause bodily harm shall be properly repaired.
- b. Trip and fall hazards shall be identified and repaired.

10. Infestation

- a. Insect and/or rodent infestation shall be treated by a professional within 48 hours to prevent infestation of other units and areas.

11. Mailboxes/Signs

- a. Mailboxes shall be present and in good repair.
- b. All signage shall be present, legible, and in good repair.

12. Parking Lots, Driveways, and Roads

- a. Cracks greater than $\frac{3}{4}$ inch, hinging/tilting, or missing section(s) that affect traffic's ability On the property's parking lots/driveways/roads shall be repaired.
- b. Water ponding affecting the use of the parking lot and/or driveway shall be properly remediated.
- c. Cracks, settling, heaving, and/or potholes creating unsafe or unusable surfaces for walking or driving shall be properly repaired.

13. Play Areas, Equipment, Surface

- a. Damaged or inoperable equipment creating a safety issue shall be repaired.
- b. Deteriorated play surface creating a tripping hazard or not providing adequate protection from falls shall be remediated.

14. Graffiti

- a. Inappropriate inscriptions or drawings scratched, painted, or sprayed on a building surface shall be removed.

Exterior Wall Assembly Standards

- a. All exterior walls shall be reasonably weather tight as to prevent moisture from entering the building and preventing heat from leaving the building.
- b. All siding and exterior wall coverings shall be free of loose, cracked, broken and/or missing sections.
- c. Painted surfaces shall be free of deteriorated paint.
- d. Crawl space access panels and vents shall be in good repair.
- e. Basement/Cellar doors and access panels shall be in good repair.
- f. Retaining walls deteriorated, damaged, falling, or leaning creating a health/safety issue shall be properly repaired.

Floor Standards

1. Wood Floor Standards

- a. Floors shall not excessively sag or become springy when live or dead loads are applied.

2. Floor Sheathing

- a. Sheathing shall be in good repair and free from structural defects and tripping hazards.

3. Floor Finishes

- a. Floor finishes shall be in good repair, securely fastened, and free of any tripping hazards.
- b. Sub-flooring and cement floors, in living spaces, shall be covered with carpeting or other approved floor finishes.

4. Toilet, Bath, Shower, and Kitchen Spaces

- a. When a new floor finish is installed in the kitchen, it shall extend under moveable appliances, including stoves and refrigerators.

Windows and Doors

1. Windows

- a. Window panes that are cracked or broken shall be repaired or replaced.
- b. Any deteriorated components of window units shall be corrected.
- c. All windows shall have properly operating locks and hardware.
- d. Damaged storm windows or screens creating a possible safety hazard shall be repaired or removed.

2. Interior/Exterior Doors

- a. All doors and hardware shall be present and in good working condition.
- b. Interior and exterior doors shall be in good condition free of damage which may cause a hazard.
- c. Doors leading to the outside of the unit shall be weather-stripped to prevent air infiltration.
- d. Doors shall be located in the following areas: attic areas where there is a staircase, bathrooms, shower rooms, restrooms, bedrooms, basement entrances, and storage rooms.

- e. Storm doors, components, and screens shall be in good repair.
- f. Door frames, thresholds, and components shall be in good repair.

Partition Standards

1. Wall Coverings

- a. All wall coverings shall be securely fastened to the wall assembly.
- b. Wall coverings shall be free from excessively loose material, large gouges, holes, and cracks.
- c. Excessive amounts of loose or torn wallpaper shall be corrected.

2. Bathrooms and Kitchens

- a. Bathtubs with showerheads and shower compartments shall be finished with a nonabsorbent surface. Such wall surfaces shall extend to a height of not less than six feet above the floor.
- b. If mildew is present, measures shall be taken to prevent future mildew as well as removing the current mildew.

3. Cabinets and Countertops

- a. Cabinets shall be in good repair, all components operational, and be free of safety hazards.
- b. Countertop surfaces shall be in good repair, in kitchens provide a sanitary surface to prepare food, and be free of safety hazards.

Stair Standards

1. Stairs

- a. Staircases and stairwells shall be in good repair.
- b. Stairs shall not pose a tripping hazard.
- c. Deteriorated, missing or otherwise defective tread, risers, stringers or the supporting structure shall be corrected.

2. Illumination

- a. All exterior and interior stairways shall be provided with illumination of the stairs, landings, and treads.
- b. Exterior stairways shall have an artificial light source located in the immediate vicinity of the top landing of the stairway.
- c. Exterior stairways providing access to a basement from the outside grade level shall have an artificial light source in the immediate vicinity of the bottom landing of the stairway.
- d. The control for the illumination of interior stairways shall be accessible in habitable areas without traversing any step of the stairway. The control for the illumination of exterior stairways shall be located inside the dwelling unit. Lights that are continuously illuminated or automatically activated are exempt from the control standards.

Handrails and Guardrails

1. Handrails

- a. All interior and exterior stairways having four or more risers must have at least one handrail. Spiral and winding stairways shall have a handrail on the outside perimeter.

- b. Handrails shall have a height of no less than 34 inches and no more than 38 inches, and shall be in good repair. Handrails shall be securely fastened to the floor and/or wall to support loads applied by people using the rails.

2. Guardrails

- a. All unenclosed floor and roof openings, open sides of stairways, landings and ramps, balconies, decks or porches that are more than 30 inches above grade or floor below, and roofs used for other than service of the building shall be protected by a guardrail in accordance with the Indiana State Building Code.

Ceiling Standards

1. Ceiling Performance

- a. Ceiling framing shall be in good repair and free from structural defects.
- b. Acoustical tile and suspended ceilings shall be in good repair.
- c. Ceilings that excessively sag shall be corrected.
- d. Any bulging, holes, or loose plaster shall be corrected.

2. Attic Access

- a. Existing access panels shall be weatherized and provide a weather-tight seal between the conditioned and unconditioned space.

3. Insulation Clearance

- a. Combustible insulation shall be at least three inches from recessed lighting fixtures, fan motors, and other heating devices. However, when heat producing devices are listed for lesser clearances, combustible insulation complying with the listing requirements may be located at the distance specified by the heat producing device.

4. Exhaust Ducts and Plumbing Stack Terminations

- a. All plumbing stacks shall continue through the roof, wall, or gable and not terminate in the attic. Plumbing stacks shall be in good repair.
- b. Exhaust ducts shall be in good repair and continue through the roof, wall, or gable and not terminate in the attic.

Roofs

1. Re-roofing

- a. Roof repairs to existing roofs and roof coverings shall comply with the provisions of the Indiana State Building Code.
- b. Standing-Seam metal roof systems, that are designed to transmit the roof loads directly to the buildings structure system and that do not rely on existing roofs and roof coverings for support, and comply with all provisions of the Indiana State Building Code, are permitted.

2. Sheathing

- a. Sheathing that is sagging, buckling, rotted, or not structurally sound shall be repaired and/or replaced.

3. Underlayment and Moisture Barriers

- a. Where shingles or sheathing need to be repaired or replaced, the underlayment and moisture barrier must also be replaced.
- b. For roof slopes from 2 units vertical in 12 units horizontal (17% slope) up to four units vertical in 12 units horizontal (33% slope) underlayment shall be two layers cemented together. For roof slopes 4 units vertical in 12 units horizontal (33% slope) or greater, underlayment shall be one layer. The felt paper must be rolled and fastened according to manufacturer's directions. Successive courses shall be overlapped 2 inches, and fastened properly.

4. Shingles

- a. Shingles must be replaced if one of the following exists: missing, excessive curling, cupping, or deterioration.
- b. Shingles installed on a roof slope below State Building Code requirements for shingles shall be removed and an approved covering installed.
- c. Standing water causing potential or visible damage shall be repaired.

5. Flat Roofs

- a. Punctured, cracked, blistered, wrinkled, or otherwise distressed areas shall be corrected.
- b. Drains shall be in good repair and free of obstructions.

6. Flashing and Vents

- a. Flashing shall be in good repair and used wherever the roof abuts a wall or vent, around other extensions through the roof, and around masonry chimneys.
- b. Properly sized attic venting shall be installed on all new construction and re-roofs and shall be free of damage or obstructions.

7. Gutters, Downspouts, Soffit, and Fascia

- a. Missing, sagging, or deteriorated gutters must be repaired or replaced.
- b. Wood is only acceptable if required by Department of Natural Resources – Division of Historic Preservation & Archeology.
- c. Downspouts shall be color coordinated with gutters and shall be proportional in size to the drainage needs of the roof.
- d. Gutters shall be supported as per the manufacturer's specifications with spikes and ferrules, wrap-around straphangers, or with hidden hangers.
- e. Downspouts shall be securely attached to the house and connected to an exterior drainage system if one exists or installed in such a manner that storm water will drain away from the house and not result in washing, erosion, or damage to the foundation of the house. If there is no drainage system present, splash blocks or leaders shall be present.
- f. Damage and missing soffit and/or fascia shall be repaired or replaced.

Chimney Standards

1. General Performance

- a. Any operable chimney must meet all applicable chimney requirements.

- b. When an existing chimney is found not fit for its intended application it shall be repaired, rebuilt, lined, relined, or replaced with a vent or chimney to conform to the applicable code.
- c. Inoperable and/or deteriorated chimneys, which pose a health/safety risk, shall be corrected or removed.
- d. All empty or cracked mortar joints, including those in interior areas, such as basements and attics shall be tuck-pointed.
- e. Solid fuel burning chimneys, for burning of wood or coal, shall be provided with spark arrestors (screens).

2. Flue Lining

- a. All operable chimneys shall have flue liners in good condition.

3. Chimney Hood

- a. The chimney hood shall have a height above the vent of at least 25 percent of the narrowest dimension of the vent. Hoods shall also be free from spalling or rust.
- b. Minor spalling shall be repaired. If more than small portions are spalling, the hood shall be replaced. If a metal chimney hood has excessive rust, it shall be replaced.

Electrical – Hazards

1. General

- a. There shall be a minimum service of 100-amperes per dwelling unit.
- b. Fused service panels shall be replaced by a panel with circuit breakers.
- c. Open ports within a panel box shall be properly concealed.
- d. Service-drop conductors shall meet the applicable code requirements.
- e. All circuits within the panel-box shall be identified and labeled.
- f. All wiring in basements, attics and/or garages shall be properly secured.
- g. Whereas a bathroom does not have a receptacle, one shall be installed in accordance with the Indiana State Building Code. Half-bathrooms are exempt from this requirement.
- h. All counter-top receptacles, in the kitchen, shall be GFCI protected.
- i. Bathroom and exterior receptacles shall be GFCI protected.
- j. All 240-volt appliances or equipment except baseboard heating units shall be on separate circuits.
- k. Wall or ceiling light fixtures and/or ceiling fans shall be securely installed.
- l. Moisture leaks, puddling, or ponding on or near energized electrical components shall be investigated and remediated.
- m. Electrical panel access and working clearance shall not be obstructed.
- n. Breakers with evidence of melting, arcing, or carbon residue shall be investigated and properly repaired.
- o. Electrical enclosures/equipment shall be free of moisture stains, water leaks in close proximity, rust, and other signs of corrosion, or safety issues.

2. Wiring

- a. Existing wiring and equipment shall be in proper operating condition, free of fraying, nicks, and abrasions, and pose no health or safety risk.
- b. All wiring in areas other than the basement, unused attic areas, and garages shall be run in walls, wire mold or in conduit.
- c. A new or old service shall be grounded to a ground rod.

- d. Circuit extensions made with flexible cord wiring in lieu of permanent wiring shall be eliminated.
- e. Copper wiring shall have proper connections to aluminum wiring. It is recommended that aluminum wiring be replaced with copper wiring when possible.

3. Receptacles

- a. All damaged or inoperable receptacles shall be replaced. Broken cover plates shall be replaced.
- b. Replacement of an existing non-utility or non-appliance two-prong receptacle may be with a 15-ampere non-grounding type receptacle.
- c. New or existing grounding type receptacles must be grounded or meet the current requirements of the Indiana State Building Code.
- d. Existing baseboard receptacles properly set are acceptable.
- e. Any equipment or appliances with grounded plugs shall have immediate access to a proper size grounded receptacle.

4. Lighting

- a. A permanently installed light fixture controlled by a wall switch is required in the kitchen, bathroom, basement, stairwells, and hallways.
- b. Light fixtures shall be installed properly and have a shield/globe installed.

Plumbing

1. Water Distribution System

- a. Please ensure that anyone performing plumbing work meets the proper licensing requirements as required by the State of Indiana or local jurisdictions.
- b. Dwelling units shall be served by an approved sanitary sewage disposal system.
- c. Leaking drain or supply lines, the presence of lead piping, failed polybutylene joints or pipes, low water pressure, or corroded or broken pipes shall be repaired or replaced. Any cross connections or siphonage between fixtures shall be corrected.
- d. There shall be a properly operating main shut-off valve on the house side of the meter.
- e. Replacement sill-cocks shall be freeze-proof and/or have a shut-off valve located and in accordance with the Indiana State Building Code.

2. Drain, Waste, and Vent System

- a. Leaks; clogged, slow, or non-working drains; or odors and any cross connections or siphonage between fixtures shall be corrected. Supplies that are located below the overflow drain must be corrected.
- b. Horizontal drainage piping shall be installed in uniform alignment at uniform slopes.
- c. The size of drainage pipe shall not be reduced in the direction of flow. A 4-inch by 3-inch water closet connection shall not be considered a reduction in size.

3. Hot Water Supply System

- a. Each dwelling unit shall have a water heater located, equipped, and installed in accordance to the Indiana State Building Code.
- b. A discharge pipe, extending from the TPR (temperature relief valve) and no less than the diameter of the TPR inlet, shall be installed not less than six inches from the floor. The end of the discharge pipe shall not be threaded.

4. Fixtures and Faucets

- a. Kitchen Sink. Any sink rusted, severely chipped or with badly worn enamel or not in good repair shall be corrected.
- b. Lavatory Sink and Cabinet. A rusted, severely chipped or badly worn enamel or not in good repair shall be corrected. The lavatory sink may be located in the same room as the flush water closet, or, if located in another room, it shall be in close proximity to the water closet compartment. Damaged or missing cabinet components shall be repaired/replaced.
- c. Bathtub/Shower. A rusted bathtub and/or shower unit or one that is chipped or has badly worn enamel, or not in good repair shall be corrected.
- d. Flush Water Closet. The water closet shall be in good repair and securely installed. All water closets, existing or newly installed, shall have a functioning shut-off valve.

HVAC Standards

1. Controls and Operation

- a. Each thermostat shall be functional and user friendly.
- b. Each gas and oil combustion system shall have a master switch that serves as an emergency shutoff for the HVAC burner. The switch shall be easily accessible by the client in case an emergency shutoff is necessary. The switch shall also be in the line of sight of the appliances it controls.
- c. Abnormal vibrations, noise, or leaks shall be investigated and repaired if needed.

2. Fuel Supply

Piping

- a. Piping shall be properly supported, but not supported by other piping. A sediment trap shall be located as close as practical to the inlet of each combustion appliance (illuminating appliances, ranges, dryers, and outdoor grills need not be equipped). Shutoff valves shall be installed where required by the Indiana State Building Code and have easy access, be user friendly, and be protected from damage.
- b. Piping shall be supported with appropriate hangers for the size of pipe. Supports shall be at such an interval and strength to prevent or dampen excessive vibration. Pipe supports shall be installed so movement of the pipe being supported will not detach them.
- c. Any leaks from a fuel tank or line shall be reported and immediately repaired.

3. Combustion Heat (Forced Air Systems only)

Basic Conditions

- c. The unit must have the minimum manufacturer's requirements in front of the unit for maintenance. The unit shall also be free from rust or other physical damage. The heat

- exchanger must be free from cracks or other openings. Barometric draft regulators shall be located above the unit or on the vent or vent connector in oil burning appliances.
- d. The heating system must be capable of heating all habitable rooms, bathrooms, and water closets to a temperature of at least 70° F for a local design temperature at a distance of 36 inches above floor level.
 - c. Combustion air requirements shall be in accordance with the Indiana State Building Code.

Vents

General Conditions

- a. Vents shall be sized to properly exhaust all combustion products outdoors. Vents shall also consist of the appropriate vent type for the combustion appliance(s) being vented. Vents shall be free from damage or rust and be tightly connected.
- b. Vents shall be properly supported so that they are generally vertical and comply with the listed clearance to combustible materials of the vent.
- c. Direct vent sealed combustion; power venting, and other approved methods of venting are permitted if they are installed according to manufacturer's instructions.

Vent Termination

- a. Gas vents 12 inches or smaller must terminate at least 8 feet from a vertical wall or other similar obstruction and have a minimum height (from highest roof penetration to lowest discharge opening) according to the Indiana State Building Code. All other gas vents must terminate at least 2 feet from the highest point where the vent passes through the roof and at least 2 feet higher than any portion of a building within 10 feet.
- b. Type B or L vents shall terminate at least 5 feet above the highest connected draft hood or flue collar. Vents must terminate vertically unless direct vent sealed combustion, power venting, or other approved methods of horizontal venting are used and installed according to manufacturer's instructions.

Vent Connectors

- a. Vent connectors shall be sized to properly vent combustion products. Vents shall also consist of the appropriate vent type for the combustion appliance(s) being vented. Vents shall be free from damage or rust and be tightly connected. All segments of vent connectors shall be accessible at all times.
- b. Vent connectors shall be properly supported and have a minimum slope of 1/4 inch per foot and comply with the listed clearance to combustible materials of the vent.

4. Electric Heat

Observable heat source

- a. All heating elements shall be functional. Heating units shall also be in good condition. The heating system must be capable of heating all habitable rooms, bathrooms, and water closets to a temperature of at least 70° F for local design temperatures at a distance of 36 inches above floor level. Heating elements shall have good connections and no damaged or charred wires. Aluminum shall not be used as wiring unless specified by the manufacturer.
- b. Any heating element that does not adequately heat shall be checked to make sure the connections to the element are satisfactory and that the relay is not malfunctioning.

5. Cooling

- a. Central air conditioners shall be in good, working condition.
- b. Unit/Window and Packaged terminal air conditioners shall have a tight seal around the unit and be properly supported. Unit/Window air conditioners shall also be properly grounded.
- c. If a heat pump is equipped with a reversing valve, it shall function properly.
- d. Bent fins on air conditioners should be combed to straighten them. The condensate shall be properly drained so that moisture problems are not created. Fiberglass shall not be used as an air sealant around window/unit air conditioners. Both indoor and outdoor coils should be clean. Suction lines should also be insulated to prevent possible moisture problems.
- e. A disconnecting means shall be installed in accordance with the Indiana State Building Code.

6. Distribution Systems

- a. Duct systems shall be intact, supported properly, and well-sealed.
- b. Air shall be allowed to flow freely from supply registers into return registers.
- c. When furnaces are converted from a gravity fed heating system to a forced air system the duct system should be reconfigured and properly sized so that the heating system functions properly.
- d. Duck tape shall not be used to seal or connect ducts.
- e. When possible, supply and return registers shall be located in the same room, except for bathrooms or kitchens. No returns should be located in bathrooms and kitchens. If supplies and returns cannot be in the same room, measures must be taken to allow for air to flow from supplies to a return even if doors are closed separating the rooms. Grills and louvers are two methods of allowing air to flow from room to room.
- f. Boiler/Pump water or steam leaks creating a safety hazard shall be properly repaired.

Ventilation

1. Minimum Ventilation Standards

- a. All habitable rooms shall be provided with natural or mechanical ventilation.
- b. Louvers, windows and doors shall be able to let air pass freely between the room and the outdoors.
- c. Exhaust fans must terminate outdoors and not in the attic. Excessive amounts of exhaust ductwork shall be avoided.

Bathrooms

- a. Bathrooms that have a tub or shower shall be ventilated.
- b. Windows must have at least 1.5 square feet of area that air can pass through if mechanical ventilation is not available.
- c. Ventilated air shall be exhausted directly outside and not terminate in any other part of the building.
- d. Any ductwork passing through attics shall be insulated.

2. Clothes Dryer Exhaust

General

- a. Dryer exhaust systems shall be independent of all other systems; shall convey the moisture to the outdoors and shall terminate on the outside of the building. Screens shall not be installed at the duct termination. Transition ducts shall not be concealed within construction.
- b. Exhaust ducts shall not be connected with sheet-metal screws or fastening means which extend into the duct.
- c. Exhaust ducts shall be equipped with a backdraft damper.
- d. Exhaust ducts shall be constructed of minimum 0.016-inch thick rigid metal ducts, having smooth interior surfaces with joints running in the direction of the airflow.
- e. Flexible transition ducts used to connect the dryer to the exhaust duct system shall be limited to single lengths, not to exceed eight feet in length, and shall be listed and labeled in accordance with UL 2158A.
- f. Exhaust duct terminations shall be in accordance with the dryer manufacturer's installation instructions.

Lint collector

- a. All ducts expelling lint shall be provided with a lint collector unless the dryer is already equipped with one.
- b. Lint collectors shall be installed according to manufacturer's instructions.

Exhaust duct size

- a. The minimum diameter of the exhaust duct shall be as recommended by the manufacturer and shall be at least the diameter of the appliance outlet.

Exhaust clearance

- a. Exhaust ducts for clothes dryers shall have a clearance of at least one inch from combustible materials.

Length limitation

- a. The maximum length of a clothes dryer exhaust duct shall not exceed 25 feet from the dryer location to the wall or roof termination. The maximum length of the duct shall be reduced by 2.5 feet for each 45-degree turn and 5 feet for each 90-degree turn. The maximum length of the exhaust duct does not include the transition duct.

3. Range Hoods

- a. Range hoods for gas stoves that discharge to the outdoors must be through a single wall duct. The duct serving the hood shall be airtight and shall be equipped with a backdraft damper. Ducts serving range hoods shall be constructed of galvanized steel or stainless steel and not terminate in an attic or crawl space or areas inside the building.
- b. Variations can be made where installed in accordance with the manufacturer's installation instructions, and where mechanical or natural ventilation is otherwise provided

4. Overhead exhaust hoods

- a. Overhead exhaust hoods shall discharge to the outdoors and shall be equipped with a backdraft damper. Broiler units incorporating an integral exhaust system, and listed and labeled for use without an exhaust hood, need not be provided with an exhaust hood.
- b. Domestic open-top broiler units shall be provided with a metal exhaust hood, not less than 28 gauge, with a clearance of not less than 0.25 inch between the hood and the underside of

combustible material or cabinets. A clearance of at least 24 inches shall be maintained between the cooking surface and the combustible material or cabinet. The hood shall be at least as wide as the broiler unit and shall extend over the entire unit and be centered over the unit

Fire Safety

1. Emergency Escape and Rescue Openings

- a. Emergency escape and rescue opening shall comply with the Indiana State Building Code.
- b. Fire escapes, including ladders, shall not be blocked by stored items or barriers.
- c. All components of a fire escape such as a ladder, shall be present and in proper working order.

2. Exits

- a. Exits shall comply with the Indiana State Building Code.
- b. Emergency lighting that provides illumination during power outages shall be in proper working order at all times.

3. Smoke Alarms

- a. Individual dwelling units shall be provided with smoke alarms as required by the Indiana State Building Code.

4. Flammable Materials

- a. All flammable materials shall be properly stored in accordance with the manufacturer's specifications, state, and/or local codes.

5. Fire Protection

- a. All components of a sprinkler system shall be present and in proper working order.
- b. Required fire extinguishers shall be present, accessible, and the inspection tag up to date.

Hazardous Materials

1. Asbestos

- a. The Local or State Health Department should be contacted regarding any questions concerning the proper treatment and/or disposal of any material possibly containing asbestos.

2. Lead-Based Paint – Reference HUDs Lead Safe Housing Rule at 24 CFR Part 35

Energy Efficiency

1. Exterior Walls

- a. Walls should be insulated in accordance with the Indiana State Building Code when any of the following activities occur:
 - o New walls,
 - o Walls that have become exposed during rehabilitation, and

- If the exterior covering is removed.

2. Attics/Ceilings

- a. Attic areas are recommended to have a minimum of R-38 insulation.
- b. Any attic walls that connect to an interior space are recommended to be insulated at a minimum of R-18.
- c. Insulation should be installed in accordance to manufacturer's specifications. All insulation in the attic should meet the appropriate fire safety codes. Thorough air sealing of the attic floor must be accomplished prior to addition of insulation.

3. Ductwork

- a. All supply and return air ducts and plenums shall be insulated with a minimum of R-5 insulation when located outside the thermal boundary and with a minimum of R-8 insulation when located outside the building envelope.

4. Piping

- a. All piping serving as part of a heating or cooling system shall be thermally insulated in accordance with the Indiana State Building Code.

5. Air Sealing

- a. Exterior joints, seams or penetrations in the building envelope, that are sources of air leakage, shall be sealed.

Accessible Features

1. Elevators

- a. Elevators shall be operational with an up to date inspection certificate present, and properly aligned and leveled with each floor to prevent trip hazards.

2. Call for aid

- a. Systems shall be fully operational as designed.

CITIZEN PARTICIPATION APPENDIX.

PUBLIC NOTICES, PUBLIC COMMENTS, UPDATED
CITIZEN PARTICIPATION PLAN, ENGAGEMENT
SUMMARY

PUBLIC NOTICES



NOTICE OF PUBLIC HEARING 2025 Consolidated Plan for Housing and Community Development

Notice is hereby given that the Indiana Office of Community & Rural Affairs (OCRA) and the Indiana Housing and Community Development Authority (IHCDA) will hold a public hearing to collect information about housing and community development needs in the State of Indiana, focusing on rural areas. This hearing will also present citizen engagement opportunities for the five-year update to the State's Consolidated Plan to be filed with the U.S. Department of Housing & Urban Development (HUD) on May 15, 2025, contingent on federal funding decisions. In the event that federal funding is delayed, the plan may be submitted to HUD after this date.

The hearing will collect input to inform programs that are funded through the U.S. Department of Housing & Urban Development under Title I of the Housing & Community Development Act of 1974 as amended—including the Community Development Block Grant Program (CDBG), the Home Investment Partnership Program (HOME), the National Housing Trust Fund (NHTF), the Emergency Solutions Grant Program (ESG), and the Housing Opportunities for Persons With AIDS Program (HOPWA). Annually, the state receives about \$65 million from HUD for housing and community development funds. The Consolidated Plan will set priorities for allocation of those funds among housing and community development activities (e.g., economic development initiatives, infrastructure improvements, and homeownership and rental programs).

The public hearing will be held on February 10 from 4-5 p.m. through Zoom and in person at the One North Capitol building located at 1 N Capitol Ave, Indianapolis, IN 46204, First Floor Conference Room

Please email hello@rootpolicy.com or call 970-880-1415 for the Zoom meeting link or call-in number to attend the public hearing virtually. You can access the virtual public hearing by phone or computer.

You can also provide public comments via email to: hello@rootpolicy.com via mail to: Office of Community and Rural Affairs, c/o 2025 Consolidated Plan, 1 North Capitol Avenue, Suite 600, Indianapolis, Indiana 46204-2027. If you prefer to provide comments verbally or need assistance, please call 970-880-1415.



AVISO DE AUDIENCIA PÚBLICA PLAN CONSOLIDADO DE VIVIENDA Y DESARROLLO COMUNITARIO 2025

Por la presente se notifica que la Oficina de Asuntos Comunitarios y Rurales de Indiana (OCRA) y la Autoridad de Vivienda y Desarrollo Comunitario de Indiana (IHCDA) llevarán a cabo una audiencia pública para compilar información sobre las necesidades de vivienda y desarrollo comunitario en el estado de Indiana, concentrándose en las áreas rurales. Esta audiencia también presentará oportunidades de participación del público para la actualización del Plan Consolidado del Estado que se presentará ante el Departamento de Vivienda y Desarrollo Urbano de los EE. UU. (HUD) el 15 de mayo de 2025, sujeto a las decisiones de financiación federal. En caso de que se retrase la financiación federal, el plan puede presentarse al HUD después de esta fecha.

La audiencia reunirá información para informar a los programas que se financian a través del Departamento de Vivienda y Desarrollo Urbano de los EE. UU. en virtud del Título I de la Ley de Vivienda y Desarrollo Comunitario de 1974, con sus modificaciones, incluidos el Programa de Subvenciones en Bloque para el Desarrollo Comunitario (CDBG), el Programa de Asociación para la Inversión en Vivienda (HOME), el Fondo Fiduciario Nacional para la Vivienda (NHTF), el Programa de Subvenciones para Soluciones de Emergencia (ESG) y el Programa de Oportunidades de Vivienda para Personas con SIDA (HOPWA). Anualmente, el estado recibe alrededor de \$65 millones del HUD para fondos de vivienda y desarrollo comunitario. El Plan Consolidado establecerá prioridades para la distribución de esos fondos entre las actividades de vivienda y desarrollo comunitario (por ejemplo, iniciativas de desarrollo económico, mejoras de infraestructura y programas de compra y renta de viviendas).

La audiencia pública se llevará a cabo el 10 de Febrero de 4 a 5 p. m. a través de Zoom y en persona en el One North Capitol edificio ubicado en 1 N Capitol Ave, Indianapolis, IN 46204, First Floor Conference Room

Envíe un correo electrónico a hello@rootpolicy.com o llame al 970-880-1415x105 para obtener el enlace de la reunión de Zoom o el número de teléfono para asistir a la audiencia pública virtualmente. Puede acceder a la audiencia pública virtual por teléfono o computadora.

También puede enviar comentarios públicos por correo electrónico a: hello@rootpolicy.com o por correo postal a: Office of Community and Rural Affairs, re Plan Consolidado 2025, 1 North Capitol Avenue, Suite 600, Indianapolis, Indiana 46204-2027. Si prefiere enviar comentarios verbalmente o necesita ayuda, llame al 970-880-1415x105.



To: IHCD A Partners
From: IHCD A
Date: March 25, 2025
Re: **Notice of Public Hearing – 2025 Consolidated Plan for Housing and Community Development and 2024 Action Plan Amendment**

Notice: PN-25-12

**NOTICE OF PUBLIC HEARING
2025 Consolidated Plan for Housing and Community Development and 2024 Action Plan Amendment**

Notice is hereby given that the Indiana Office of Community & Rural Affairs (OCRA) and the Indiana Housing and Community Development Authority (IHCD A) will hold a public hearing to discuss State's Draft 2025-2029 Consolidated Plan to be filed with the U.S. Department of Housing & Urban Development (HUD) on May 15, 2025, contingent on federal funding decisions. In the event that federal funding is delayed, the plan may be submitted to HUD after this date. The public hearing will also discuss a proposed CDBG Method of Distribution in the 2024 Action Plan, including the scoring and criteria for selecting projects eligible for CDBG funding.

The hearing will present five-year goals and priorities for programs that are funded through the U.S. Department of Housing & Urban Development under Title I of the Housing & Community Development Act of 1974 as amended—including the Community Development Block Grant Program (CDBG), the Home Investment Partnership Program (HOME), the National Housing Trust Fund (NHTF), the Emergency Solutions Grant Program (ESG), and the Housing Opportunities for Persons With AIDS Program (HOPWA). Annually, the state receives about \$55 million from HUD for housing and community development funds. The Consolidated Plan will set priorities for allocation of those funds among housing and community development activities (e.g., economic development initiatives, infrastructure improvements, and homeownership and rental programs).

The public hearing will be held on April 7 from 4:00 to 5:00 p.m. through Zoom and in person at 1 North Capitol, Indianapolis, First Floor Conference Room.

Please email hello@rootpolicy.com or call 970-880-1415 for the Zoom meeting link or call-in number to attend the public hearing virtually. You can access the virtual public hearing by phone or computer.

You can also provide public comments via email to: hello@rootpolicy.com via mail to: Office of Community and Rural Affairs, c/o 2025 Consolidated Plan, 1 North Capitol Avenue, Suite 600,



ADDRESS 30 South Meridian Street, Suite 900, Indianapolis, IN 46204
PHONE 317 232 7777 **TOLL FREE** 800 872 0371 **WEB** www.ihcda.IN.gov

EQUAL OPPORTUNITY EMPLOYER AND HOUSING AGENCY



Indianapolis, Indiana 46204-2027. If you prefer to provide comments verbally or need assistance, please call 970-880-1415.

AVISO DE AUDIENCIA PÚBLICA PLAN CONSOLIDADO DE VIVIENDA Y DESARROLLO COMUNITARIO 2025

Por la presente se notifica que la Oficina de Asuntos Comunitarios y Rurales de Indiana (OCRA) y la Autoridad de Vivienda y Desarrollo Comunitario de Indiana (IHCD) llevarán a cabo una audiencia pública para presentar el propuesto Plan Consolidado para 2025 al 2029. Adicionalmente se recopilará información sobre las necesidades de vivienda y desarrollo comunitario en el estado de Indiana, concentrándose en las áreas rurales. Esta audiencia también presentará oportunidades de participación del público para la actualización del Plan Consolidado del Estado que se presentará ante el Departamento de Vivienda y Desarrollo Urbano de los EE. UU. (HUD) el 15 de mayo de 2025, sujeto a las decisiones de financiación federal. En caso de que se retrase la financiación federal, el plan puede presentarse al HUD después de esta fecha. Durante la audiencia el propuesto plan de cambios al Plan de Acción del 2024 y su Método de Distribución de CDBG también serán presentados, estos cambios incluyen la selección y criterio de proyectos seleccionados para financiamiento.

La audiencia presentará las metas y prioridades para los siguientes cinco años para los programas que se financian a través del Departamento de Vivienda y Desarrollo Urbano de los EE. UU. en virtud del Título I de la Ley de Vivienda y Desarrollo Comunitario de 1974, con sus modificaciones, incluidos el Programa de Subvenciones en Bloque para el Desarrollo Comunitario (CDBG), el Programa de Asociación para la Inversión en Vivienda (HOME), el Fondo Fiduciario Nacional para la Vivienda (NHTF), el Programa de Subvenciones para Soluciones de Emergencia (ESG) y el Programa de Oportunidades de Vivienda para Personas con SIDA (HOPWA). Anualmente, el estado recibe alrededor de \$55 millones del HUD para fondos de vivienda y desarrollo comunitario. El Plan Consolidado establecerá prioridades para la distribución de esos fondos entre las actividades de vivienda y desarrollo comunitario (por ejemplo, iniciativas de desarrollo económico, mejoras de infraestructura y programas de compra y renta de viviendas).

La audiencia pública se llevará a cabo el 7 de Abril de 4 a 5 p. m. a través de Zoom y en persona en el One North Capitol edificio ubicado en 1 N Capitol Ave, Indianapolis, IN 46204, First Floor Conference Room

Envíe un correo electrónico a hello@rootpolicy.com o llame al 970-880-1415x105 para obtener el enlace de la reunión de Zoom o el número de teléfono para asistir a la audiencia pública virtualmente. Puede acceder a la audiencia pública virtual por teléfono o computadora.

También puede enviar comentarios públicos por correo electrónico a: hello@rootpolicy.com o por correo postal a: Office of Community and Rural Affairs, re Plan Consolidado 2025, 1 North Capitol Avenue, Suite 600, Indianapolis, Indiana 46204-2027. Si prefiere enviar comentarios verbalmente o necesita ayuda, llame al 970-880-1415x105.

Subject: NOTICE OF PUBLIC HEARING 2025: Consolidated Plan for Housing and Community Development and 2024 Action Plan Amendment

Date: Monday, March 24, 2025 at 12:43:42 PM Mountain Daylight Time

From: Heidi Aggeler

To: Heidi Aggeler



March 20, 2025

NOTICE OF PUBLIC HEARING 2025 Consolidated Plan for Housing and Community Development and 2024 Action Plan Amendment

Notice is hereby given that the [Indiana Office of Community & Rural Affairs](#) and the [Indiana Housing and Community Development Authority](#) will hold a public hearing to discuss the State's Draft 2025-2029 Consolidated Plan to be filed with the [U.S. Department of Housing & Urban Development](#) on May 15, 2025, contingent on federal funding decisions. In the event federal funding is delayed, the plan may be submitted to HUD after this date. The public hearing will also discuss a proposed change to the Method of Distribution in the 2024 Action Plan, including the scoring and criteria for selecting projects eligible for CDBG funding.

The hearing will present five-year goals and priorities for programs that are funded through HUD under Title I of the Housing & Community Development Act of 1974 as amended — including the Community Development Block Grant Program, the Home Investment Partnership Program, the National Housing Trust Fund, the Emergency Solutions Grant Program and the Housing Opportunities for Persons With AIDS Program. Annually, the state receives about \$55 million from HUD for housing and community development funds. The Consolidated Plan will set priorities for allocation of those funds among housing and community development activities (e.g., economic development initiatives, infrastructure improvements, and homeownership and

(e.g., economic development initiatives, infrastructure improvements, and homeownership and rental programs).

The public hearing will be held Monday, April 7, from 4 to 5 p.m. ET virtually through Zoom and in person at 1 N Capitol Ave., Indianapolis, IN 46202, First Floor Conference Room.

Those interested in attending the public hearing virtually should email hello@rootpolicy.com or call 970-880-1415 for the Zoom meeting link or call-in number. The virtual public hearing can be accessed by phone or computer.

Public comments can also be submitted via email to: hello@rootpolicy.com or via mail to:

Office of Community and Rural Affairs, c/o 2025 Consolidated Plan,
1 N Capitol Ave., Suite 600,
Indianapolis, Indiana
46204-2027.

For those who prefer to provide comments verbally or need assistance, please call 970-880-1415.

AVISO DE AUDIENCIA PÚBLICA PLAN CONSOLIDADO DE VIVIENDA Y DESARROLLO COMUNITARIO 2025

Por la presente se notifica que la Oficina de Asuntos Comunitarios y Rurales de Indiana (OCRA) y la Autoridad de Vivienda y Desarrollo Comunitario de Indiana (IHCDA) llevarán a cabo una audiencia pública para presentar el propuesto Plan Consolidado para 2025 al 2029.

Adicionalmente se recopilara información sobre las necesidades de vivienda y desarrollo comunitario en el estado de Indiana, concentrándose en las áreas rurales. Esta audiencia también presentará oportunidades de participación del público para la actualización del Plan Consolidado del Estado que se presentará ante el Departamento de Vivienda y Desarrollo Urbano de los EE. UU. (HUD) el 15 de mayo de 2025, sujeto a las decisiones de financiación federal. En caso de que se retrase la financiación federal, el plan puede presentarse al HUD después de esta fecha. Durante la audiencia el propuesto plan de cambios al Plan de Acción del 2024 y su Método de Distribución de CDBG también serán presentados, estos cambios incluyen la selección y criterio de proyectos seleccionados para financiamiento.

La audiencia presentara las metas y prioridades para los siguientes cinco años para los programas que se financian a través del Departamento de Vivienda y Desarrollo Urbano de los EE. UU. en virtud del Título I de la Ley de Vivienda y Desarrollo Comunitario de 1974, con sus modificaciones, incluidos el Programa de Subvenciones en Bloque para el Desarrollo Comunitario (CDBG), el Programa de Asociación para la Inversión en Vivienda (HOME), el Fondo Fiduciario Nacional para la Vivienda (NHTF), el Programa de Subvenciones para Soluciones de Emergencia (ESG) y el Programa de Oportunidades de Vivienda para Personas con SIDA (HOPWA). Anualmente, el estado recibe alrededor de \$55 millones del HUD para fondos de vivienda y desarrollo comunitario. El Plan Consolidado establecerá prioridades para la distribución de esos fondos entre las actividades de vivienda y desarrollo comunitario (por ejemplo, iniciativas de desarrollo económico, mejoras de infraestructura y programas de compra y renta de viviendas).

La audiencia pública se llevará a cabo el 7 de Abril de 4 a 5 p. m. a través de Zoom y en persona en el One North Capitol edificio ubicado en 1 N Capitol Ave, Indianapolis, IN 46204, First Floor Conference Room

Envíe un correo electrónico a hello@rootpolicy.com o llame al 970-880-1415x105 para obtener el enlace de la reunión de Zoom o el número de teléfono para asistir a la audiencia pública virtualmente. Puede acceder a la audiencia pública virtual por teléfono o computadora.

También puede enviar comentarios públicos por correo electrónico a: hello@rootpolicy.com o por correo postal a:

Office of Community and Rural Affairs, re Plan Consolidado 2025,
1 N Capitol Ave., Suite 600,
Indianapolis, Indiana 46204-2027.

Si prefiere enviar comentarios verbalmente o necesita ayuda, llame al 970-880-1415x105.

-30-

Under the leadership of [Lieutenant Governor Micah Beckwith](#), who also serves as the Secretary of Agriculture and Rural Development, the Indiana Office of Community and Rural Affairs' (OCRA) mission is to work with local, state and national partners to provide resources and technical assistance to assist communities in shaping and achieving their vision for community and economic development. For more information, visit ocra.in.gov.

Media Contact:

Lydia Kirschner
Communications Director
lkirschner@ocra.in.gov
(317) 727-7682

Ryan Kommes
Communications Manager
rkommies@ocra.in.gov
(463) 279-1245

Follow us: [Facebook](#), [X \(Twitter\)](#) & [Instagram](#)

This email was sent by: Office of Community and Rural Affairs
1 N Capitol Ave #600, Indianapolis, IN, 46204 US

[Privacy Notice](#)

[Manage Preferences](#)

[Unsubscribe](#)

PUBLIC COMMENTS

Public Comments

This section contains summaries of the verbal and written comments received for the State of Indiana 2025-2029 Consolidated Plan during the two public hearings (February 10 and April 7, 2025) and the 60-day Draft Plan public comment period (April 3 through June 1, 2025).

Public Hearings

Greatest housing and community development need comments:

- Preservation of existing affordable housing
- Affordable housing among low income households; wages are not keeping up with housing costs
- More workers: It is difficult to attract contractors, ensure they are paid a living wage, and achieve affordable housing
- Infrastructure improvements in rural communities, especially continued funding for wastewater plants
- More flexibility in the CDBG match: Rural communities have trouble coming up with match resources, this can be a real barrier

Program scoring and Fund allocation comments:

- There is considerable support for the owner-occupied rehab program to be re-established and expanded. The previous allocation did not permit for interior modifications; funding applied only to ramps and interior modifications. This is a very serious concern for people living in rural communities with accessibility needs.
- Nonprofit training that IHCD has offered is valued.
- There is a need for the state to increase the capacity to collect data and make it available at sub-geographies, and assist small communities in understanding and using the data. We don't have individuals who can utilize the state data to create effective policies.
- One attendee questions the priority of funding of Stellar Communities when it serves so few communities.
- There is some concern about the community resilience index that is used for CDBG scoring. On the surface, it seems to benefit more affluent communities instead of small, rural communities because small communities have fewer resources to allow for economic resiliency. Also, OCRA mentions a resiliency plan that needs to be submitted before the application. If this is a full-blown plan, I do not feel that is ideal for a community to create a plan to apply for grant funding for a plan in some

situations. If this is just a matter of creating and sending a vision statement with the resilience score, this is more feasible.

- In CDBG scoring, one attendee feels that eliminating points for regional plans is problematic; These plans play a critical role in documenting needs and prioritizing projects. Removing the incentive to develop and maintain such plans could have a negative impact on communities that rely on them for strategic planning and coordination.
- One attendee recommended that, in lieu of the change from 8% allowable admin to \$7,000 flat fee eligible amount for planning grants, there should be consideration given to increase OOR Admin or allow for program delivery fees under professional services for the Grant Administrator. For OOR projects, grant administrators play a significant role in the day-to-day management and oversight of these efforts. Under previous pilot programs with OCRA and in past years with IHCD, these fees were permitted and budgets were structured accordingly.
- One attendee felt it was a great idea to incorporate residences in Blight Clearance eligibility. It would be great if this included all types of residential structures from single family to abandoned/blighted apartments.
- For IHCD allocations, one attendee felt it is critical to consider allocating funds specifically for transitional housing projects. The need for this type of housing is both urgent and growing, particularly for vulnerable populations facing housing instability. Transitional housing has previously been recognized as a funding priority, and restoring this focus would address a significant gap in current support systems and have a meaningful impact in communities across the state.

Written Comments

Comment 1: I want to make sure my request to use more funding for preventative measures were captured. I.e. housing and supportive services for youth attempting to change their public health outcomes indiscriminate of the family and community they were born in. I also want to insist that community level capacity building occurs that can support community level data collection/ evaluation and measures in place to ensure data driven decision making at the community level.

Comment 2: Thank you for the opportunity to comment on the draft Action Plan and 5-year Consolidated Plan draft.

Throughout the 2025-2029 draft, the ConPlan references the needs of households with a member with a disability and low to very low incomes. The need for accessible housing is one of the primary concerns identified.

With this in mind, it is very good to see the restoration of the Owner-Occupied Rehab (OOR) program at the historic rate of 10% of the Community Development Block Grant. Since OCRA originally elected to take in-house the OOR program (vs. partner with IHCD to

implement the program), millions of CDBG funds were no longer directed for home repairs and accessibility modifications for rural homeowners. Homeowners previously served were often elders, persons with disabilities and single parents.

As noted in OOR descriptions, the program aims to help low-income homeowners "age in place, have greater mobility and make necessary repairs for their comfort and safety." It supports communities to improve their existing housing stock.

The limiting of covered accessibility features to "ADA accessibility modifications up to the threshold of the home" is insufficient at best. It reflects the need for greater understanding of the common interior modifications requested for people to have a functional and safe home. For example, the modification of bathrooms is one of the most frequent requests. It is also important to acknowledge that the IHCD Ramp UP program is available to communities to fund the construction of exterior ramps and related installation features (transfer pad, entry door hardware and threshold changes). In addition, there are multiple nonprofit organizations across the state that focus on the construction of ramps for household.

Historically, IHCD developed a priority list of health and safety repairs and accessibility modifications that were covered by OOR. This worked well for families in need of accessible modifications. Please revisit.

Additionally, the Federal Home Loan Bank of Indianapolis, with the input of advocates within the disability community, has developed a list of interior modifications that may be covered through the Neighborhood Improvement Program (NIP), along with exterior repairs. The listing of types of modifications is included on the FHLBI website.

Finally, the City of Ft. Wayne has developed a CDBG home modification program that specifies the type of accessibility modifications that are covered. This program is now in its 3rd year and can be considered an example of best practice. The City of Ft. Wayne, Department of Neighborhood Services staff, worked closely with The League, a Center for Independent Living and other community disability advocates and with HUD consultants.

I recommend that OCRA and IHCD collaborate to more fully develop the OOR program to respond to the needs of rural homeowners to have interior accessibility modifications made to improve the health, safety and full use of the home.

Comment 3: What regulations are in place for owner owned properties with multiple "rented lots" for mobile homes in Orange county? There is nothing in place to protect renters in these areas when water access is shut off. County police defer to APS, and State police defer to county police. Eventually every agency just states that it's a civil matter, and in the meantime people are still paying rent, but living without water.

Comment 4: Re: OOR, How do you define "homeowner" in an example where an elderly person lives in the same home they have owned for many decades but the home is now "owned" by a trust fund? The elderly person is usually well below 80% AMI, but some of these programs cannot assist with costly repairs due to the home being owned by a trust.

Comment 5: I am recommending that interior accessibility modifications are included in the CDBG home repair program.

This is important because I am an individual with a disability where I am affected by my mobility and muscle strength in my lower extremities. When my husband and I moved into our home, our bathroom was set up the traditional way with a shower/tub combination. To help with transferring in and out of the tub/shower combo I used what we could afford at the time, and that was suction cup grab bars. Now, you can only imagine what came next when one day I was transferring into the shower and having to hike my leg over the tub

utilizing the grab bar for stability and then in mid transfer(one leg hiked up on the edge of the tub and one getting ready to move into the tub, the suction bar came completely loose and I fell straight back onto the lament floor with my elbow going through the plastered wall. This was by far the scariest fall I have had inside our home and led to 3 different visits to medical doctors where ultimately, I was told by everyone, I was very lucky and did not break anything. Only a few days later to find out I had ended up with a slight concussion from this fall and a badly bruised hip. If only my husband and I could have afforded modifications to our bathroom before this, I wouldn't have had such a terrible and scary fall. I share this very personal story, to reflect the importance of including funding in the CDBG home repair program for homeowners like me and my husband who want to keep living independently in a safe living environment and having access to funding assistance.

Individuals with disabilities such as me and my husband strive for autonomy and independence. By having funding increased to the CDBG home repair program going towards home modifications beyond heating and cooling units, CDBG would be helping to support an individual's desire for autonomy and independence while remaining living in their home safely with the needed increased funding for home interior modifications. Thank you for taking the time to read my thoughts and concerns about the need for funding to be increased for interior home modifications as well as putting this back into the Consolidated Plan.

Comment 6: I'm writing in regard to the CDBG Consolidated Plan and how it should include interior modifications for people with a disability. With me being in a wheelchair and trying to live independently, accessibility inside the house is a necessity. Areas that require modifications include widening of doorways to move freely around the house. Modifying the bathroom for wheelchair access to the toilet and shower. The kitchen and appliances need to be accessible from my wheelchair. The washer and dryer need to be in an open space for access. Also having smart controls for heating, cooling, lighting, and doors is a need as well to live independently.

As a person with a disability for 38 adult years working and living safely in my own house has been a main goal. Over the years I have experienced several hurdles with housing such as being isolated in one specific area because the hallways or doors were too narrow. I've lived in older houses where the bathroom wasn't accessible, so I did bed baths for 2 years and found other ways for toileting. I've had kitchens that were too tight, and the controls of the appliances weren't reachable. As a single father I asked my young son to help and almost caused a fire. Having clothes get mildew on them because I couldn't put them in the dryer after my morning caretaker washed them. Difficulties turning the temperature up or down, turning lights on or off, and opening and closing an exterior door was nearly impossible.

These hurdles need to be modified so it allows an individual like me to remain safely in my home. These will help me be a more productive citizen who works and contributes to the community. Accessibility doesn't stop at the front door.

Comment 7: I am recommending that interior accessibility modifications included in the CDBG home repair program.

When people envision a home, they desire a place that is safe, joyful, and of pride where people can connect with others and build relationships.

Hoosiers with disabilities being able to use and enjoy the interior of a home is what makes it a home, far greater than a physical structure. Social isolation impacts the health and well-being,

ability to engage in our community, and find employment for our neighbors with disabilities.

The inclusion of interior accessibility modifications would ensure Hoosiers could stay in their homes regardless of change in personal circumstance and benefit all Hoosiers. Without the availability of these modifications' institutionalization becomes increasingly likely, which is harmful to the individual for reasons mentioned above. Hoosiers save over \$100,000 for every person that rejoins the community from an institution.

For these reasons accessible interior modifications are needed for our fellow Hoosiers with disabilities.

Thank you for your consideration!

Comment 8: In the past, we (PathStone Corporation) have had funding from the Dept. of Labor to assist farmers with major repairs and/or development of new farmworker housing. As of last year, the Dept. of Labor removed Indiana from their plan and we have not had funding to provide grants and technical assistance to farms for repairs and development of new farmworker housing. Since we have not had funding, I have had several farms reach out to me asking for assistance with major repairs to their housing. I

encourage IHCD and OCRA to entertain making investments into farmworker housing to better serve our migrant and seasonal farmworkers during the 2025 program year.

Comment 9: I am a disabled person with very low vision and my husband recently had open heart surgery. We are older homeowners in our 70's and are hoping to have some modifications inside our to be safer and to be able to live comfortably in our home. I am recommending that interior accessibility modifications included in the CDBG home repair program.

The following interior modifications are some things we need to be safe and prevent accidents.

- Bathroom. We need a walk-in shower. Currently we have a tub and use a grab bar to get in and out of the tub. It will sometimes loosen up and it is not stable. We are scared of tripping and slipping getting in and out of the tub.
- Smart lighting; it helps me to find my way around the house. Currently I run into walls, furniture.
- Smart thermostat. I need to be able to adjust the heating & cooling.
- I need a new stove for safety It is hard to know if it is on. It gets on accidentally if someone bumps into it.

I would appreciate the help to make our life safer and more comfortable to live in our home.

Comment 10: Thank you for preparing this report. I recommend keeping Owner-Occupied Rehabilitation (OOR). This home repair program for low-income homeowners can make the difference in enabling families to stay in their homes.

In addition to eligible repairs listed in the Consolidated Plan, such as roof replacement, heating and cooling system upgrades, water heater replacement, lighting and electrical upgrades, and Americans with Disabilities Act (ADA) accessibility modifications, I believe structural integrity and window replacements should also be included. This program allows homeowners to age in place while ensuring their homes are safe and comfortable

I recommend including window replacements and addressing the maintenance of the home's structural integrity, such as foundation or basement repairs, in the plan.

Owning a home is a significant milestone for many Americans. Maintaining the daily costs of such an achievement can be challenging, especially when unexpected home repairs arise that could cost thousands of dollars. These expenses can jeopardize a family's ability to sustain their home if they are unable to afford the replacement windows or the necessary structural maintenance.

Thank you for taking time out of your busy schedule to read this letter and thank you for considering my recommendation.

Comment II: My name is Lanette, and I am caregiver who has a child that is a true quadriplegia, unable to move her arms or legs and I am writing as someone who deeply understands the daily challenges faced by people with disabilities living in inaccessible homes.

While much progress has been made around accessible infrastructure, what often gets overlooked are the interior modifications that make a home truly livable and safe. These are things like smooth, non-slip flooring that prevents falls; accessible bathrooms that support hygiene and wound care; dishwashers for those with low dexterity; and safe exits in case of disaster or fire.

These changes are not luxuries. They are essential for health, dignity, and independent living.

Investing in interior accessibility modifications:

- Prevents injuries, saving on emergency care and insurance costs
- Supports caregivers and allows individuals to age in place
- Reduces the need for institutionalization or crisis intervention
- Improves mental health and quality of life

Interior Accessibility Is Missing

Homes often lack:

- Non-slip flooring that prevents falls and supports environmental hygiene
- Accessible bathrooms that prevent pressure sores and assist with speedy wound care recovery.
- Dishwashers that support those with low dexterity and provide sanitation
- Safe exits in case of emergencies – crucial for disaster preparedness
- Air systems and duct cleaning that prevent allergies and asthma flares
- Accessible windows for emergency escape or elopement prevention
- Solar options that reduce dependence on energy assistance programs

Example of the Savings: Healthcare & Insurance Win Too.

Interior modifications aren't just for personal comfort – they're economically smart:

- Falls are the #1 cause of injury for people with mobility challenges – costing billions in ER visits
- Pressure wounds cost the healthcare system billions annually
- Asthma-related ER visits drop significantly with improved air quality
- Safer kitchens reduce injuries, infections, and foodborne illness
- Investing supports independence reduces in-home care and emergency interventions

I urge you to prioritize funding for interior accessibility modifications in the Consolidated Plan.

Thank you for listening and for considering this important issue.

Comment 12: I am recommending that interior accessibility modifications are included in the CDBG home repair program.

This is important because I have a daughter who has a physical disability, Cerebral Palsy, and uses a walker for mobility. One afternoon my daughter and husband came to visit me. During our visit, she had to use the restroom and due to using a walker she must take the walker with her into the bathroom for stability and mobility reasons. Due to the doorways not being built with wide enough clearance, my daughter became stuck in the bathroom with her walker not being able to clear the doorway. My daughter is a very independent woman who wants to be able to go to the bathroom without anyone else needing to help her and staying autonomous. Due to my own visual disability, I am not able to help her when she is stuck in the bathroom in my house. Due to this, my daughter does not feel safe coming over to visit me often due to this safety hazard and when she does come over, due to her previous experience of being trapped in my bathroom, she no longer feels safe using the bathroom in my home. This barrier should not be continued in building new homes, and in already existing homes, funding needs to be not only included for interior modifications in the Con Plan, but also to increase the amount of funding available to be used to make a home accessible to everyone.

Concerning my own visual disability, the lighting conditions are poor in my house that causes me to not have a well-lit living environment for my own safety. For example, one time I was walking inside my house and walked through the doorway, and I could not see that the door was partly closed due to low lighting, and I ran into the corner of the door that it hit me on my temple right by my eye. I have also slammed my head multiple times on my kitchen cabinets not due to me being clumsy but not having accessibly lighting in my kitchen. I have tried to seek out aid through local agencies to help with this issue and their response is always, "just get more lights put up." In a kitchen area where I need the most lighting to prepare meals safely, this is not a solution due to space availability. It has been

my personal experience that individuals such as myself with vision loss are not taken seriously when requesting assistance with home modifications because I am also met with the answer, "Well, just take care of the problem yourself." This is not a solution, but this is only creating a larger problem and barriers for not only myself, but for anyone needing a safe home environment.

Thank you for taking the time to read my thoughts and concerns for the need for funding to be increased for interior home modifications as well as putting this back into the Consolidated Plan.

Subject: Fw: 5-year Consolidated Plan for OCRA-IHCDA
Date: Tuesday, May 6, 2025 at 3:53:15 PM Mountain Daylight Time
From: Root Policy Research
To: Heidi Aggeler
Attachments: Outlook-tkkwjdnj.png

From: Tara Hagan <tara.hagan@sicpdc.org>
Sent: Tuesday, May 6, 2025 2:57 PM
To: Root Policy Research <hello@rootpolicy.com>
Subject: 5-year Consolidated Plan for OCRA-IHCDA

Dear Root Policy,

Please find these comments below in regard to the 5-year consolidated plan for OCRA-IHCDA. I give approval to use my email address along with these comments. Thank you!

CDBG/HOME Program Recommendations:

While recognizing the importance of honoring currently awarded Stellar projects, we recommend that, upon completion of the existing commitments, the Stellar program be removed from the Consolidated Plan. The funding currently allocated to Stellar should instead be reallocated to essential infrastructure through CDBG Water Projects and toward HOME and HOMEBuyer assistance programs. The rationale is that the funding level designated for Stellar is insufficient to create a substantial, community-wide impact. Redirecting these funds to competitive programs ensures greater equity and access for a wider range of applicants, allowing more communities to benefit from available resources.

Additionally, funding support for **transitional housing**—particularly for homeless shelters and youth housing—is critical. In light of legislation such as **SB197**, which criminalizes homelessness without including provisions for transitional housing solutions, prioritizing these services is essential to promote stability for individuals in vulnerable life transitions.

CDBG Program-Specific Recommendations:

- **Administrative Funding:**

We recommend increasing the allowable percentage for grant administration from **8% to 10%**. As program requirements grow in complexity, the administrative burden on local grant administrators increases. A higher cap will better support the staff time, training, and technical resources needed for effective grant implementation.

Given that OCRA allocates substantial funding for its own staffing, training, and resource development, similar considerations should be extended to local grant administrators.

- **CDBG-OOR (Owner-Occupied Rehabilitation):**

We propose a **policy revision** to allow window and bathroom renovations in homes built after 1978. This would expand the impact of the program by improving living conditions for a broader set of eligible households.

- **CDBG – Community Resilience Bonus Points:**

While well-intentioned, the current structure of Community Resilience bonus points appears to pose a disadvantage for **rural communities**. Small towns often lack the staffing and financial capacity to develop formal resilience plans or to conduct prior planning studies. Since CDBG falls under the **Indiana Office of Community and Rural Affairs**, we must ensure that rural applicants are not inadvertently penalized by criteria that favor larger, more resourced municipalities.

CDBG – Blight Elimination:

We strongly support continued or increased funding for **residential blight elimination**. Removing dilapidated structures and clearing properties enables communities to pursue new, safe, affordable housing developments and improve neighborhood quality and safety.



Tara Hagan
Executive Director
tara.hagan@sicpdc.org

405 W US 50, PO Box 765
Versailles, IN 47042

www.sicpdc.org

P: 812.750.8036 F: 812.689.3526

Subject: FW: ComPlan Draft Remarks 2025-2029
Date: Tuesday, June 17, 2025 at 1:02:03 PM Mountain Daylight Time
From: Heidi Aggeler
To: Heidi Aggeler
Attachments: image001.png, image002.png, image003.png, image004.png, image005.jpg

Good morning,

The Office of Community and Rural Affairs acknowledges the importance of including home modifications to support not only Hoosiers with disabilities but also those aging in place. It is our goal to integrate these modifications into the owner-occupied program within the 2025-2029 Consolidated Plan. OCRA will implement these changes into our programmatic policies, which will be shared with the public once they are developed.

Thank you for taking the time to provide your valuable feedback.

Best regards,

[Pamela Guerrero \(She/her/ella\)](#) ● Senior CDBG Program and Policy Analyst
Office of Community and Rural Affairs
(317) 409-0754 ● pguerrero@ocra.in.gov
<http://www.in.gov/ocra>



UPDATED CITIZEN PARTICIPATION PLAN

State of Indiana Citizen Participation Plan, Program Years 2025-2029

This Citizen Participation Plan (CPP) will guide stakeholder engagement and resident participation for the State of Indiana’s Five-Year Consolidated Plan for Housing and Community Development (“Consolidated Plan”), Annual Action Plans, and the Consolidated Annual Performance and Evaluation Report (CAPER). It covers five program years (PY) from PY2025 through PY2029. The CPP was developed around a central concept that acknowledges residents as stakeholders and their input as key to any improvements in the quality of life for the residents who live in a community.

Residents and stakeholders have a role in the development of the Consolidated Plan, annual Action Plans, and Consolidated Annual Performance and Evaluation Reports regardless of age, gender/sex, race, ethnicity, national origin, disability, familial status, religion, and economic level.

This CPP was developed in accordance with Sections 91.110 and 91.115 of the U.S. Department of Housing and Urban Development (HUD)’s Consolidated Plan regulations and in accordance with best practices to maximize input from low to moderate income residents and residents living in predominantly low to moderate income areas.¹ This plan is also designed to facilitate input from residents of Indiana for whom traditional avenues of engagement can be difficult—because they live in remote areas, may not have reliable access to transportation or cannot drive, have family caregiver responsibilities or language barriers, and/or because they may be unaccustomed to attending public meetings. To facilitate participation, this plan offers a variety of ways to participate, including holding meetings in hybrid (virtual plus in-person) settings and offering recordings of meetings.

Purpose of the Citizen Participation Plan

The purpose of the CPP is to provide residents residing in, and stakeholders serving, nonentitlement areas covered by the state’s block grants² the opportunity to identify and prioritize housing and community development needs. The HUD block grants covered by this CPP include:

- Community Development Block Grant (CDBG);
- HOME Investment Partnerships Program (HOME);

¹ <https://www.ecfr.gov/current/title-24/subtitle-A/part-91/subpart-B?toc=1>

² “Nonentitlement” is a HUD term that means geographic areas that do not receive HUD block grants directly and instead apply for funding from states. These are usually small cities and towns with populations of less than 50,000.

- Emergency Solutions Grant (ESG);
- Housing Opportunity for Persons with AIDS (HOPWA); and
- National Housing Trust Fund (NHTF).

The purpose of these programs is to facilitate provision of decent housing, create suitable living environments, and grow economic opportunities, especially for low to moderate income residents living in nonentitlement communities.

Subrecipient requirements. Subrecipients of state block grant funds are held to all citizen participation requirements in their grant agreements. OCRA grantees certify that they will comply with the citizen participation requirements in this plan by providing for and encouraging citizen participation in the planning, implementation, and assessment of their CDBG project. In addition, grantees must hold two public hearings as part of the application submission and the grant close out. OCRA also requires each applicant for CDBG funds to certify that it has identified its housing and community development needs, including those of low to moderate income persons, and the activities to be undertaken to meet those needs. Technical assistance is provided by OCRA to assist program applicants in meeting citizen participation requirements.

Development of the Plans and Performance Reports

This document outlines how residents and stakeholders of the State of Indiana may participate in the development and review of the state's Five-Year Consolidated Plan, each annual Action Plan, each CAPER, and any substantial amendments to a Consolidated Plan and/or Action Plan. The State of Indiana's program year begins July 1 and ends June 30.

The Indiana Office of Community and Rural Affairs (OCRA) and the Indiana Housing and Community Development Authority (IHCDA) are responsible for implementing and reporting on all aspects of the Consolidated Plan process. The following schedule provides an approximate timeline for the Consolidated Plan, annual Action Plan, and the CAPER.

Annual schedule. Annually, the preparation of the Action Plan, stakeholder consultation, and resident participation approximates the following. This schedule can change based on the timing of funding allocations from HUD, HUD guidance or directives, and/or states of emergency that affect report submissions.

July:

- Begin CAPER reporting process

September:

- 15th: Begin 15-day Public Comment period for CAPER
- 30th: Submit CAPER to HUD

November through February:

- Develop narrative of Annual Action Plan or Five-Year Consolidated Plan
- Plan community meetings and public hearings
- Create and launch surveys
- Conduct stakeholder consultation

January—February—March:

- Conduct public participation process for Consolidated Plan including first public hearing, held before the draft plan(s) is released. The public hearing will be noticed at least 14 days prior to its occurrence.
- Draft/write/update the Consolidated Plan or Action Plan
- Update funding allocation, as needed, based on notice of HUD funding amounts

March – April:

- Draft plan(s) is available for public comment; availability is posted at least 14 days prior to the plan becoming available
- Hold public hearings during the 30-day comment period on the draft plan(s) with at least one in-person meeting location and a virtual option. The public hearing notice will be posted at least 14 days prior to its occurrence.

April:

- Finalize plan based on stakeholder consultation and public comment

May:

- 15th: Submit Consolidated Plan and first year Annual Action Plan to HUD

June:

- End of annual Action Plan year

Resident participation and stakeholder consultation. Annually, the state will choose from the following options for resident participation and stakeholder consultation into the Plans. These techniques incorporate various methods of public process that encourage a broad spectrum of participation and a review of program performance.

- **Resident survey.** A survey of Indiana residents could be conducted during the research phase of the Five-Year Consolidated Plan in order to gather additional information on housing and community development needs and priorities for the Consolidated Plan. The survey would be available online using software that is Section 508 compliant. A variety of sampling and distribution methods may be used including a “snowball” sampling technique in which the survey is distributed to housing and community development partners who then circulate the survey to their clients/members. The survey would also be available on agency websites, as part of

social media, and in email notifications (e-notifications). The survey would be available in the languages required of the state's Language Access Plan (LAP). Special accommodations for persons with disabilities would be made upon request.

- **Stakeholder survey and elected official survey.** An online stakeholder survey may be administered to community development organizations, economic development officials, local government leaders and staff, housing developers, housing providers, social service providers, and advocacy organizations, among others. The survey would be available online using software that is Section 508 compliant.
- **A combined survey that contains questions appropriate for both residents and stakeholders.**
- **Focus groups.** Focus groups may be held with local government leaders and staff, planning entities, housing developers and housing providers (especially those specializing in affordable housing), advocates for persons with disabilities, Continuum of Care funding recipients, Community Action Agencies and Human Rights Councils, and residents, to gather in-depth information on the challenges Indiana residents face in accessing housing and services in their communities, community and economic development needs, and policy and program changes to address needs.
- **Stakeholder interviews.** A series of interviews may be conducted with key persons or groups who are knowledgeable about housing and community development needs in the state.

Consultation will involve:

- Affordable/assisted housing providers, including the state housing agency (IHCD);
- Providers of health care (including mental health, foster care, youth facilities, and institutional care) to low to moderate income residents and persons experiencing homelessness;
- Providers of supportive services to low to moderate income residents, including those who serve elderly/frail elderly, low income youth, person with disabilities, survivors of domestic violence, and other persons with special needs;
- Fair housing organizations;
- Organizations who work with persons experiencing homelessness, including chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) and persons at risk of homelessness, as well as the State Continuum of Care (especially in determining ESG allocations);

- Business and civic leaders, organizations providing employment and skill development services, and broadband/internet service providers engaged in narrowing the digital divide;
- Agencies whose primary responsibilities include the management of flood prone areas, public land or water resources, and emergency management;
- State or local health and child welfare agencies to explore analysis of existing data related to lead-based paint hazards and poisonings and housing units in which children have been identified as lead-poisoned; and
- Local governments in nonentitlement areas of the state.

Draft Plan(s). For at least 30 days, a Draft Consolidated Plan and/or Annual Action Plan will be available for public review. A copy can be downloaded or viewed on OCRA's and IHCD's websites; hard copies can be requested by writing or emailing to: Office of Community and Rural Affairs (OCRA), **c/o HUD Consolidated Plan or Action Plan**, One North Capitol, Suite 600, Indianapolis, Indiana 46204-2027. Email comments can be sent to: cdbg@ocra.in.gov

Notices of availability of the draft plan(s) are sent through e-notifications that reach community development organizations, economic development officials, local government leaders and staff, housing developers, housing providers, social service providers, and advocacy organizations, among others, and posted on OCRA's and IHCD's websites. Upon reasonable request, these documents will be provided in a format that is accessible to persons with disabilities and in translated languages. The state's current Language Access Plan (LAP) determines the languages in which notice is provided.

Public hearings. A public hearing will always be conducted during the draft plan(s) comment period. The hearing will be hybrid, with one in-person meeting location and a virtual meeting option. The in-person location will be accessible to persons with disabilities, and the virtual meetings will be conducted on a platform that can accommodate interpretation, as requested, and content will be narrated to accommodate people who have visual disabilities. The notice announcing the public hearings will contain language on how and when to request accommodations and interpretation (email contact, number of days notice, etc).

During the hearing, a facilitator will describe the proposed funding allocation, discuss funding priorities and how they were derived, and instruct attendees on how to submit comments on the draft plan(s). In addition, participants will be given an opportunity to provide feedback or comment on the draft plan(s). A summary of the public hearing comments will be included in the final Consolidated Plan and/or Action Plans submitted to HUD.

Written comments. All written comments provided during the Consolidated Plan and Action Plan processes will be considered in finalizing the Plans. A summary of the comments received and a summary of the state's reasons for not accepting any comments will be included in the final Plans submitted to HUD.

Written comments will be accepted at any time during the Consolidated Plan and Action Plan processes in email or in hard copy. Comments can be submitted in hard copy to: Office of Community and Rural Affairs (OCRA), **c/o HUD Consolidated Plan or Action Plan**, One North Capitol, Suite 600, Indianapolis, Indiana 46204-2027. Email comments can be sent to: cdbg@ocra.in.gov with subject line: **HUD Consolidated Plan or Action Plan comments**.

Complaints. The state will provide a substantive written response to all written complaints related to the Consolidated Plan, Action Plan amendments and the CAPER within 15 working days of receiving the complaint. Residents and stakeholders may submit written complaints to: Office of Community and Rural Affairs (OCRA), **c/o HUD Consolidated Plan or Action Plan complaint**, One North Capitol, Suite 600, Indianapolis, Indiana 46204-2027. Email comments can be sent to: cdbg@ocra.in.gov with subject line: **HUD Consolidated Plan or Action Plan complaint**. Copies of the complaints, along with the state's response, will be sent to HUD if the complaint occurs outside of the Consolidated Planning or Action Plan process and, as such, does not appear in the Consolidated Plan.

Notices for public hearings and Draft Plan(s). OCRA and IHCD will post notices in English and Spanish on their websites at least 14 days in advance of public hearings and publication of the draft plan(s). Notices will also be circulated 14 days in advance of public hearings and the draft plan(s) publication in press releases and/or e-notification distribution lists that OCRA and IHCD typically utilize for information sharing.

Summaries of Plans

The draft **Consolidated Plan** provides information that includes the amount of assistance the state expects to receive and the range of activities that may be undertaken, including the estimated amount that will benefit persons with low to moderate income, if available, and the plans to minimize displacement of persons and to assist any persons displaced.

The **Annual Action Plan** specifies how that year's funding allocation for HUD block grants will be used to achieve the goals outlined in the Five-Year Consolidated Plan.

The **Consolidated Annual Performance and Evaluation Report (CAPER)** details how the prior program year funds were allocated and the outcomes associated with program investments.

Substantial Amendments

Occasionally, public comments warrant an amendment to the Consolidated Plan. The conditions for whether to amend are referred to by HUD as “Substantial Amendment Criteria.” The following conditions are considered to be Substantial Amendment Criteria:

1. A substantial change in the allocation of funds among program categories (e.g., water and sewer infrastructure improvements v. public facilities). “Substantial change” shall mean a reallocation of funds among program categories of more than 25 percent of the total allocation for a given program year’s block-grant allocation.
2. A change in how applicants are evaluated and scored including grant size limits and criteria selection that could significantly change how an applicant is considered for funding. This applies to CDBG only.
3. An administrative decision to reallocate all the funds allocated to an activity in the Action Plan to other activities of equal or lesser priority need level, unless the decision is a result of the following:
 - There is a federal government recission of appropriated funds, or appropriations are so much less than anticipated that the state makes an administrative decision not to fund one or more activities;
 - The governor declares a state of emergency and reallocates federal funds to address the emergency; or
 - A unique economic development opportunity arises wherein the state administration asks that federal grants be used to take advantage of the opportunity.

Any changes in federal funding level after the Consolidated Plan’s draft comment period has expired, and the resulting effect on the distribution of funds, will not be considered an amendment or a substantial amendment.

Citizen participation in the event of a substantial amendment. In the event of a substantial amendment to the Consolidated Plan, the state will conduct at least one additional public hearing. This hearing will fall during a comment period of no less than 30 days, unless HUD allows a shorter period to expedite the amendment, during which the proposed Plan amendment will be made available to interested parties. Either IHCD or OCRA will post information regarding the hearing on their website(s) and send out a notice via their distribution list.

In the event of substantial amendments to the Consolidated Plan, the state will openly consider all comments from individuals or groups submitted at public hearings or received in writing. A summary of the written and public comments on the amendments and the state’s acceptance or rejection of each comment will be included in the amended Consolidated Plan or Action Plan.

Availability and Access to Records

The state provides reasonable and timely access for residents, public agencies, and other organizations to access information and records relating to the state's Consolidated Plan, annual Action Plan, CAPERs, substantial amendment(s), the CPP, and the state's use of assistance under the programs covered by the plan during the preceding five years.

The Indiana Office of Community and Rural Affairs webpage is <http://www.in.gov/ocra> and the Indiana Housing and Community Development Authority webpage is <https://www.in.gov/ihcda/>. These are available for residents interested in obtaining more information about state services and programs or to review the plans and CAPERs. A reasonable number of free copies will be available to residents upon request. Hard copies can be requested by writing or emailing: Office of Community and Rural Affairs (OCRA), **c/o HUD Consolidated Plan or Action Plan**, One North Capitol, Suite 600, Indianapolis, Indiana 46204-2027. Email requests can be sent to: cdbg@ocra.in.gov

Upon reasonable request, these documents will be provided in a format that is accessible to persons with disabilities and in translated languages.

Anti-Displacement

The State of Indiana will take all reasonable steps to minimize displacement and to assist any persons displaced as a result of a federally funded project or activity. Should displacement become necessary, the state will follow the regulations and procedures outlined under Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended, and the government-wide implementing regulations found at 49 CFR part 24, as they apply to the acquisition of real property and the displacement of persons resulting from Federal or federally-assisted programs or projects. The level of assistance to persons displaced and the actions the state take will be consistent with statutory and regulatory requirements, and HUD policy.

ENGAGEMENT SUMMARY

APPENDIX A.

Indiana Survey Analysis

A statewide stakeholder and resident survey gathered input on housing, community, and economic development needs in Indiana. The majority of the respondents were “stakeholders”—those who work in service provision, community and economic development, and local government. As such, this analysis focuses on the perspectives of those who deliver these services and their perceptions of needs, as well as State programs.

Primary Findings

Unmet housing needs.

- One-third (33%) of survey respondents selected rental housing for *extremely* low-income households (generally less than \$20,000) as an unmet housing need. This was followed by 31% who selected rental housing for *very* low-income households (generally less than \$35,000); 29% who selected housing for homeless families; 27% who chose rental housing for low-income households (generally less than \$55,000); and 26% who chose homeownership opportunities for low-income households;
- Rental housing for extremely low-income households is a growing concern for stakeholders. The item has moved from the seventh most selected item by stakeholders in 2021 to second most selected in 2022, to top item selected in 2023;
- Housing for homeless families was the top unmet need in Northwest and West Central regions. Items related to homeownership opportunities and emergency shelters were selected at the highest proportions in Northeast Indiana; and
- There were some differences in responses by industry: The need for rental housing for extremely low-income households was the top need identified by service providers, government stakeholders, and residents. Economic and community development stakeholders selected workforce housing at the highest proportion.

Homeless services delivery challenges.

- Half (50%) of all stakeholders identified finding permanent housing options as the primary challenge faced by persons and families experiencing homelessness in Indiana. This item was followed by finding temporary shelter (31%), accessing rental assistance (26%), remaining housed (20%), and accessing needed services (18%). These items suggest that there are not enough adequate housing options and services to facilitate housing stability for families exiting homelessness; and

- These primary challenges were consistent in all regions of Indiana. Transportation was also identified as a challenge in Northwest, Southeast, and West Central regions. Accessing needed services was also identified as a challenge in the East Central and Southeast regions.

Disability services delivery challenges.

- The top challenges faced by persons with disabilities were identified as acquiring housing and remaining housed (31%), finding housing or services that support independent living (23%), getting needed services (18%), affordable in-home care (17%), availability of public transportation (17%), and not enough facilities to avoid institutionalization (14%); and
- Acquiring housing and remaining housed was a challenge for persons with disabilities across regions. Affordable in-home care was a challenge in the Northeast and Southeast regions. Public transportation was identified as a challenge in the Northeast, East Central, Southeast, and West Central regions. Stakeholders in the East Central and Southeast regions identified lack of facilities to avoid institutionalization as a challenge.

Community and economic development needs.

- The top community and economic development needs identified by respondents were affordable childcare (37%), services for persons who are currently unhoused (25%), supportive services for vulnerable populations (25%), public transportation (20%), funding for homeowner repair assistance (20%), blighted residential properties (13%), and sidewalk and streetlight improvements (11%);
- Affordable childcare was identified as a top need across regions. Services for unhoused were prioritized in the Northwest, East Central, and West Central regions. Childcare has been a consistent need identified by stakeholders in the past. In 2022 and 2023, higher quality and affordable childcare centers were identified as the top community development need; and
- Economic and community development stakeholders prioritized funding for homeowner repair and transportation while service providers prioritized services for unhoused and supportive services for vulnerable populations.

Public facility access.

- Respondents were asked to rate public facilities from 1, does not exist, to 10, easy to access and available. Libraries in good condition received the highest rating, indicating sufficient access to quality library facilities, while affordable childcare and center for abused children received the lowest rating, indicating that these facilities do not exist in several areas of the state; and

- Economic and community development stakeholders generally rated facility access lower than other stakeholder types. Service providers gave the lowest ratings to affordable childcare, homeless shelters, and centers for abused children.

Availability of services.

- Respondents rated services from 1, does not exist, to 10, easy to access and available. Overall, respondents rated advocacy and counseling for veterans and survivors of domestic violence the highest while childcare, education, and transportation services for homeless received the lowest average ratings; and
- Counseling services for survivors of domestic violence were rated lowest in East Central Indiana and highest in the Southeast region. Homeless advocacy and advocacy for homeless youth were rated highest in West Central Indiana and lowest in Northeast Indiana.

Effectiveness of State programs.

- In this section, stakeholders provided open-ended feedback on programs delivered through OCRA and the State and ideas they would like to see implemented to address housing needs;
- Feedback on OCRA programs included the need to expand participation in the Beat the Heat Program and Owner-Occupied Rehabilitation Program by incorporating educational campaigns, simplifying application processes for nonprofits, seniors and low-income households, and engaging with local nonprofit partners. Stakeholders emphasized the continued need to support small businesses and downtown revitalization through initiatives like PreservINg Main Street. One stakeholder suggested that public facility grants incorporate resilience measures for climate and emergency preparedness to ensure long-term sustainability and community stability;
- When asked to provide advice for the State of Indiana to increase effectiveness of community development and housing programs in general, stakeholders pointed to revitalization of existing housing, supporting seniors with home modifications and home health, aligning job training with affordable housing initiatives, and prioritizing local homeownership over out-of-state investment. Respondents would also like to see improvements to the grant administration process, including applications that are tailored to the needs and demographic realities of rural communities; and
- Stakeholders provided input on the types of policies and programs they wish to see the state implement to address unmet housing needs. Suggestions included strengthening emergency rental assistance and short-term housing options to prevent homelessness, offering low-interest loans and grants to landlords to maintain affordable rentals, increasing housing vouchers, and supporting inclusionary zoning or housing trust fund models to bolster the number of new affordable units. They would also like the state to play a larger role in educating the public about the economic

benefits of affordable housing, such as attracting businesses, improving local infrastructure, and expanding community amenities.

Methodology and Sample

The survey was available online in English and promoted through stakeholder networks and email lists. 153 respondents completed the survey. Stakeholders represented counties from across the state and 21% delivered services statewide. The map below shows the geographic distribution of stakeholders, with the most in respondents residing in Marion County (Indianapolis). Note that although Marion County and Indianapolis are entitlement communities, yet stakeholders who reside and work in those areas offer service and policy advocacy statewide and, as such, were included in the responses.

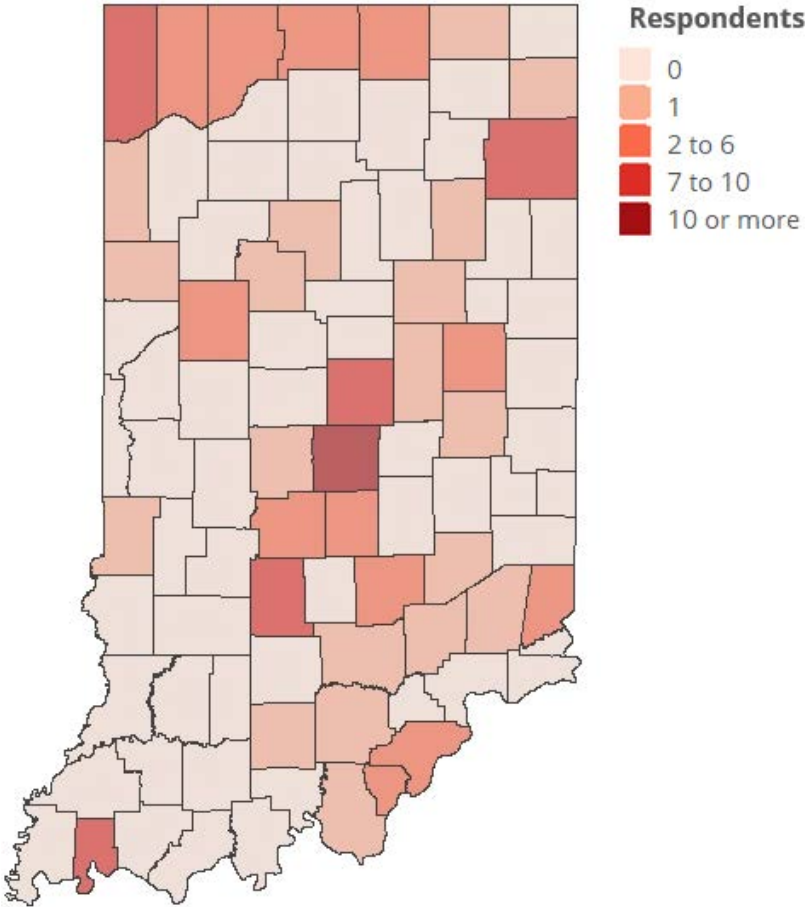
Sampling note. The survey respondents do not represent a random sample of the Indiana's population. A true random sample is a sample in which each individual in the population has an equal chance of being selected for the survey. The self-selected nature and distribution of the survey through stakeholder networks prevents the collection of a true random sample.

Given the smaller sample size of this survey, we describe the findings as representative of those who responded to the survey, but the magnitude of the estimate may vary significantly in the overall population (i.e., large margin of error). Survey data from small samples are suggestive of an experience or preference, rather than conclusive.

Figure A-1.
Survey Respondents
by County

Note:
n = 153.

Source:
Root Policy Research from the 2025
Indiana Housing and Community
Development Resident and
Stakeholder Survey.



Explanation of terms.

- Respondents are distinguished by OCRA regions throughout this analysis based on where they reside and deliver services:
- **Northwest** includes Benton, Cass, Carroll, Clinton, Fulton, Jasper, Lake, Porter, La Porte, Marshall, Newton, Pulaski, Starke, St. Joseph, Tippecanoe, White, and Warren Counties;
- **Northeast** includes Adams, Allen, Blackford, DeKalb, Elkhart, Huntington, Jay, Kosciusko, Lagrange, Miami, Noble, Steuben, Wabash, Wells, and Whitley Counties;
- **East Central** includes Delaware, Fayette, Franklin, Grant, Hamilton, Hancock, Henry, Howard, Madison, Marion, Randolph, Rush, Shelby, Tipton, Union, and Wayne Counties;
- **West Central** includes Boone, Clay, Fountain, Hendricks, Johnson, Marion, Monroe, Montgomery, Morgan, Orange, Owen, Parke, Putnam, Sullivan, Vermillion, Vigo Counties;
- There were no responses from counties in the Southwest region except for Orange County that was included in the West Central region.
- **Service Providers** are stakeholders within the following industries:
 - Advocacy and/or legal services
 - Criminal Justice
 - Disaster Recovery
 - Education
 - Environmental Services
 - Fair Housing
 - Food Pantry/ Provision
 - Homeless Services
 - Homeownership Counseling or Services
 - Landlord/Tenant Services
 - Language Access
 - Public Housing Authority
 - Supportive Housing for Vulnerable Populations
 - Services - People with Disabilities
 - Services - Survivors of Domestic Violence
 - Services - Substance and Alcohol Abuse
 - Services - Farmworkers
 - Services - Mental Illness
 - Services - HIV/AIDS
 - Services - Refugees
 - Services - Rural Communities
 - Services - Unhoused persons or Families
 - Services - Youth
 - Services - Seniors
 - Services - Veterans

- **Government** stakeholders self-identified as working in the following industries:
 - Government (Local, State, Federal)
 - Land Use Planning
 - Grant Administrator
 - Transit Provider
- **Economic and Community Development** stakeholders work in the following industries:
 - Affordable Multifamily Development
 - Economic Development
 - Affordable Single Family Development
 - Lending
 - Business Owner or Manager
 - Market-Rate Housing Development
 - Property Management
 - Residential Sales
- **Resident only** respondents selected that they did not work for any of the listed stakeholder categories and were taking the survey as a resident.

Survey Responses

The figure below breaks down respondents by region, cities, and stakeholder type. East Central Indiana had the highest proportion of respondents at 27% followed by Northwest Indiana (16%). Service provider stakeholders represented almost half (48%) of all respondents.

Of all service provider respondents, stakeholders who worked in industries that serve unhoused families and individuals and supportive housing for vulnerable populations were the most common.

Affordable multifamily development representatives were the most common of community and economic development stakeholders.

Figure A-2.
Respondents by
Region, City, and
Stakeholder Type

Note:
n = 153.

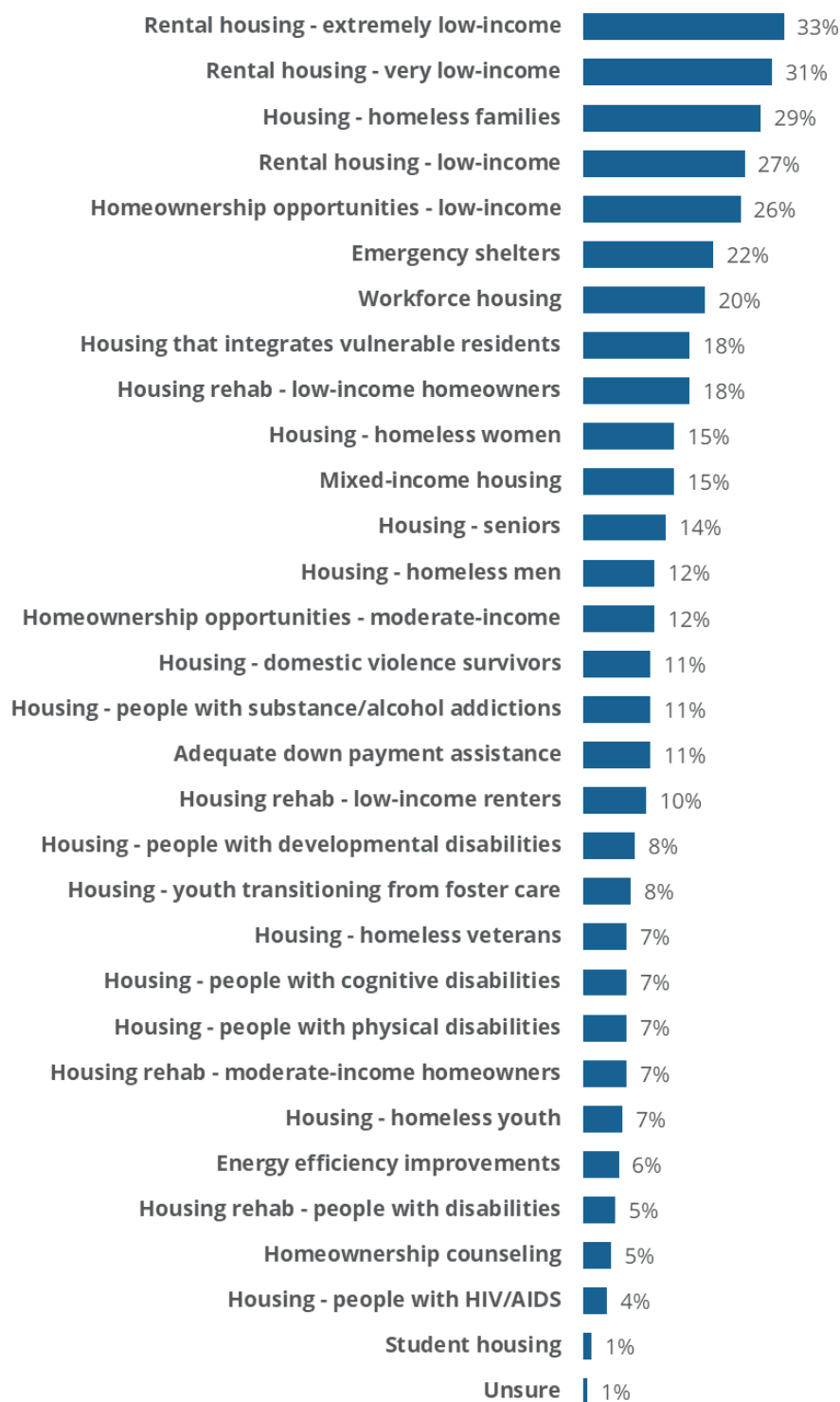
Source:
Root Policy Research from the 2025
Indiana Housing and Community
Development Resident and
Stakeholder Survey.

	n	%
All Respondents	153	100%
Region		
Northwest	25	16%
Northeast	11	7%
East Central	42	27%
Southeast	16	10%
West Central	15	10%
Cities		
Evansville	10	7%
Fort Wayne	11	7%
Indianapolis	27	18%
Muncie	10	7%
Stakeholders		
Service Providers	74	48%
Government	34	22%
Community and Economic Development	44	29%
Resident Only	10	7%

Unmet Housing Needs

The figure on the next page breaks down the most selected unmet housing needs. One-third (33%) of respondents selected rental housing for extremely low-income households (generally less than \$20,000), followed by 31% who selected rental housing for very low-income households (generally less than \$35,000), 29% who selected housing for homeless families, 27% who chose rental housing for low-income households (generally less than \$55,000), and 26% who chose homeownership opportunities for low-income households.

Figure A-3.
Unmet Housing Needs in Indiana



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Figures A-4 and A-5 show top housing needs by region and stakeholder type:

- Housing for homeless families was the top unmet need in Northwest and West Central regions. Items related to homeownership opportunities and emergency shelters were selected at the highest proportions in Northeast Indiana; and
- Need for rental housing for extremely low-income households was the top need identified by service providers, government stakeholders, and residents. Economic and community development stakeholders selected workforce housing at the highest proportion.

In open responses, stakeholders said unmet housing needs were mostly statewide, impacting both inner city and rural areas. Others specified interior Dearborn, Ripley, Switzerland, and Ohio Counties, Lake County, southern Marion County, northern Indiana, and downtown Bloomington.

Figure A-4.
Unmet Housing Needs, Region

REGION		
Indiana		
1	Rental housing - extremely low-income	33%
2	Rental housing - very low-income	31%
3	Housing - homeless families	29%
4	Rental housing for low-income	27%
5	Homeownership for low-income	26%
Northwest		
1	Housing - homeless families	56%
2	Rental housing - very low-income	56%
3	Rental housing - extremely low-income	52%
4	Rental housing for low-income	48%
5	Housing - homeless women	36%
Northeast		
1	Rental housing for low-income	64%
2	Workforce housing	45%
3	Homeownership for low-income	45%
4	Homeownership - moderate-income	45%
5	Emergency shelters	36%
East Central		
1	Rental housing - extremely low-income	45%
2	Homeownership for low-income	33%
3	Rental housing - very low-income	31%
4	Emergency shelters	29%
5	Housing - homeless families	29%
Southeast		
1	Rental housing for low-income	44%
2	Housing rehab - low-income homeowners	44%
3	Mixed-income housing	38%
4	Rental housing - extremely low-income	31%
5	Rental housing - very low-income	31%
West Central		
1	Housing - homeless families	47%
2	Rental housing - extremely low-income	47%
3	Rental housing - very low-income	47%
4	Workforce housing	40%
5	Housing that integrates vulnerable residents	33%

Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Figure A-5.
Unmet Housing Needs,
Stakeholder Type

Note:
n = 153.

Source:
Root Policy Research from the 2025 Indiana
Housing and Community Development
Resident and Stakeholder Survey.

STAKEHOLDER TYPE

Service Provider			Government		
1	Rental housing - extremely low-income	49%	1	Rental housing - extremely low-income	38%
2	Rental housing - very low-income	49%	2	Workforce housing	32%
3	Housing - homeless families	46%	3	Rental housing - very low-income	32%
4	Rental housing for low-income	41%	4	Emergency shelters	29%
5	Emergency shelters	34%	5	Housing - homeless families	29%
Econ. and Community Dev.			Resident Only		
1	Workforce housing	45%	1	Rental housing - extremely low-income	60%
2	Rental housing for low-income	43%	2	Homeownership for low-income	50%
3	Homeownership for low-income	41%	3	Mixed-income housing	40%
4	Rental housing - very low-income	34%	4	Housing - homeless men	30%
5	Housing - homeless families	32%	5	Housing - develop. disability	30%

Prioritizing housing needs. Stakeholders were asked to prioritize three areas of spending to address housing needs. The top three areas were:

- Rental housing for extremely low-income households with income \$20,000 or less;
- Rental housing for very low-income households with income \$35,000 or less; and
- Emergency shelters.

Stakeholders were asked to identify the **single most important issue contributing to resident challenges accessing affordable and quality housing** in their service area. Main barriers were lacking housing in general, preservation of affordable housing as quality of some affordable units deteriorate or are sold to investors who increase the price, and the high cost of housing due to new development in the area and rising taxes. Open-ended responses to the single most important issue contributing to challenges included:

- *“Gentrification - prices far exceed the average income, forcing locals to relocate and rent.”*
- *“Unsustainable funding for affordable housing.”*
- *“Under-utilization of ~50% of historic downtowns from lack of mixed-use properties.”*

- *“Housing being sold to hedge funds, who increase rents and put mom and pop companies out of business. Mom and Pop companies keep rents low and work with tenants. It’s personal with them unlike hedge funds where it is just a business.”*
- *“The single biggest problem in Decatur County is the local leadership of the county seemingly not wanting houses in the rural areas. They want to push everyone to Greensburg, which makes the costs for the other rural residents more and the quality of things like infrastructure less. Additionally, there are many unincorporated residential districts that could be rebuilt with some assistance/program to repopulate without taking valuable farm ground, but nobody on the local level seems to want to address the issue.”*

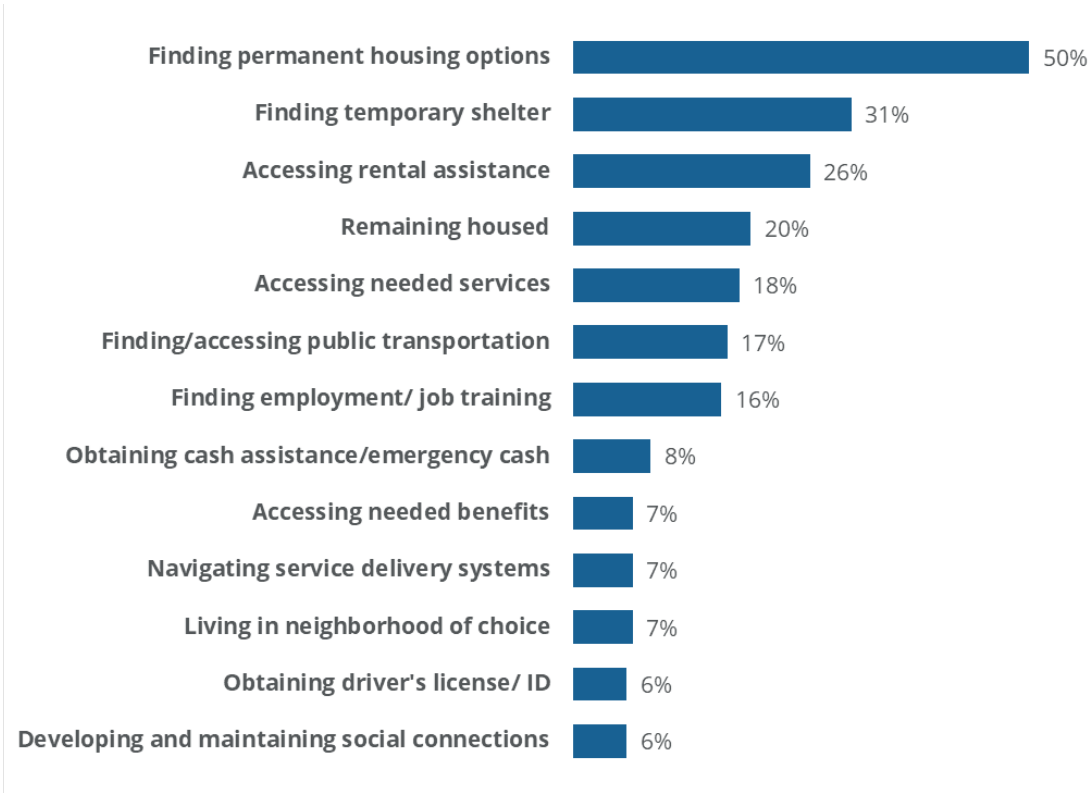
Improving housing access. Stakeholders were asked to identify the types of resource guides or marketing that are needed to help people find housing. A quarter (25%) of respondents said that marketing materials directed to low- to moderate-income people by landlords and single family developers would be helpful, followed by 24% who selected community meetings or housing fairs, 20% who selected internet search engine or app for available affordable rentals and coordinated entry points for persons experiencing homelessness, and another 20% who selected regular events with state housing and service providers.

Homeless Services Delivery Challenges

Half (50%) of stakeholders identified finding permanent housing options as the primary challenge faced by persons and families experiencing homelessness in Indiana. This item was followed by finding temporary shelter (31%), accessing rental assistance (26%), remaining housed (20%), and accessing needed services (18%). Overall, these top items suggest that there are not enough adequate housing options and services to facilitate housing stability for families exiting homelessness. Open-ended answers specified where challenges were prominent and elaborated on selected answers:

- *“In Porter County, we do not have enough shelter beds for the number of individuals and families seeking emergency shelter. Transportation is also a HUGE barrier to access services and employment opportunities. This impacts the ability to afford rent, which is high. Finally, there isn’t enough money put into Rapid ReHousing programs to help people who need assistance with a security deposit and utilities to get rehoused. These folks end up staying in the shelter way longer than necessary.”*
- *“Several low-end hotels are operating as short-term housing.”*
- *“We lack services to keep people housed. People experiencing homelessness have no safe place to keep their things so ID’s Social Security cards, birth certificates, phones, mental and physical health meds are taken or disposed of all the time.”*
- *“With Transit it’s all of Lake County outside of Gary and GPTC [Gary Public Transportation Corp] service area. Housing issues primarily in Lake Station, Hobart, Merrillville.”*

Figure A-6.
Primary Challenges Faced By Persons and Families Experiencing Homelessness



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Figure A-7 breaks down challenges for homeless persons and families by region. Finding temporary housing, finding permanent housing options, and accessing rental assistance were identified as challenges in all regions. Transportation was identified as a challenge in Northwest, Southeast, and West Central regions. Access to needed homeless services was identified as a challenge in the East Central and Southeast regions.

Figure A-7.
Primary Challenges Faced By Persons and Families Experiencing Homelessness, Region

REGION

Indiana			Northwest			Northeast		
1	Finding permanent housing options	50%	1	Finding permanent housing options	76%	1	Finding temporary shelter	64%
2	Finding temporary shelter	31%	2	Finding temporary shelter	40%	2	Finding permanent housing options	64%
3	Accessing rental assistance	26%	3	Accessing rental assistance	36%	3	Accessing rental assistance	36%
4	Remaining housed	20%	4	Remaining housed	24%	4	Finding employment/ job training	36%
5	Accessing needed services	18%	5	Finding/accessing public transportation	20%	5	Remaining housed	18%
East Central			Southeast			West Central		
1	Finding permanent housing options	62%	1	Finding permanent housing options	63%	1	Finding permanent housing options	67%
2	Accessing rental assistance	36%	2	Finding temporary shelter	31%	2	Finding temporary shelter	60%
3	Accessing needed services	31%	3	Accessing rental assistance	19%	3	Accessing rental assistance	40%
4	Finding temporary shelter	29%	4	Accessing needed services	19%	4	Finding/accessing public transportation	33%
5	Remaining housed	26%	5	Finding/accessing public transportation	19%	5	Remaining housed	27%

Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Service providers were asked to expand on what homeless services are needed:

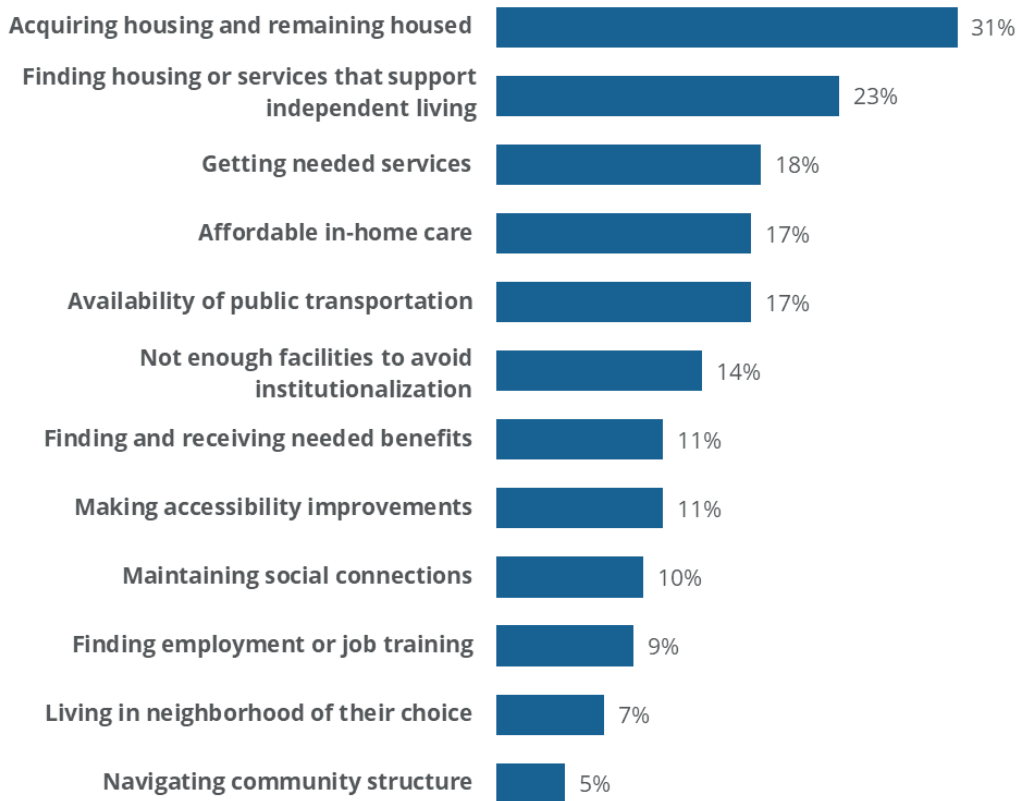
- *"54% of the homeless we see in our organization have income; either 40 hour a week job or social security. Seniors are the fastest growing homeless population in our country, and Indiana is not immune to this. There must be more housing these seniors on social security can afford."*
- *"We need more heating and cooling shelters to meet the needs of the unhoused in extreme weather. We really need more second chance housing."*
- *"More safe affordable accessible housing, rental assistance, no limit barrier on income for assistance. Better transportation system for person with disabilities needing to access their community stores, medical appointments, recreational facilities."*

- *“Affordable housing, assistance with housing navigation, supportive services for voucher recipients to remain housed, transportation to locate housing.”*
- *“Case management to provide consistent compassionate support for their wide range of needs.”*
- *“Funding to help cover deposit and one month rent. Money to pay someone who can follow up with the recently housed and the property manager to ensure everything is going well.”*
- *“More landlords who will accept assistance; increased FMR; more energy assistance funding.”*
- *“More regulation around housing discrimination and more enforcement of the regulations in place. It can take months to find placement for families/individual with marks in their rental profile.”*
- *“More shelter capacity.”*
- *“Assign a certain number of vouchers or funding for housing for person with disabilities, to Centers for Independent Living [CIL] in Indiana. Each CIL gets its own number of vouchers for its counties they serve. Streamline & simplify the application process for housing.”*

Disability Services Delivery Challenges

Top challenges faced by persons with disabilities were identified as acquiring housing and remaining housed (31%), finding housing or services that support independent living (23%), getting needed services (18%), affordable in-home care (17%), availability of public transportation (17%), and not enough facilities to avoid institutionalization (14%). Open-ended responses identified gaps in Morgan County, Porter County, Lake County, Elkhart County, and Indianapolis. A stakeholder in Porter County elaborated that they lack ADA compliant housing stock within both affordable and market-rate housing market.

Figure A-8.
Primary Challenges Faced By Persons with Disabilities



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Figure A-9 shows challenges faced by persons with disabilities by region. Acquiring housing and remaining housed was a challenge across regions. Affordable in-home care was a challenge in the Northeast, Southeast, and West Central regions. Public transportation was identified as a challenge in the Northeast, East Central, Southeast, and West Central regions. Stakeholders in the East Central and Southeast regions identified the lack of facilities to avoid institutionalization as a challenge.

Figure A-9.
Primary Challenges Faced By Persons with Disabilities, Region

REGION

Indiana			Northwest			Northeast		
1	Acquiring housing and remaining housed	31%	1	Housing/services for independent living	40%	1	Housing/services for independent living	55%
2	Housing/services for independent living	23%	2	Acquiring housing and remaining housed	32%	2	Acquiring housing and remaining housed	36%
3	Getting needed services	18%	3	Getting needed services	28%	3	Affordable in-home care	27%
4	Affordable in-home care	17%	4	Affordable in-home care	28%	4	Availability of public transportation	18%
5	Availability of public transportation	17%	5	Getting needed services	20%	5	Living in neighborhood of their choice	18%

East Central			Southeast			West Central		
1	Acquiring housing and remaining housed	45%	1	Acquiring housing and remaining housed	25%	1	Acquiring housing and remaining housed	47%
2	Housing/services for independent living	26%	2	Affordable in-home care	25%	2	Finding employment or job training	33%
3	Getting needed services	24%	3	Lack facilities to avoid institutionalization	25%	3	Availability of public transportation	33%
4	Availability of public transportation	24%	4	Housing/services for independent living	19%	4	Getting needed services	20%
5	Lack facilities to avoid institutionalization	24%	5	Availability of public transportation	19%	5	Affordable in-home care	20%

Note: n = 153.

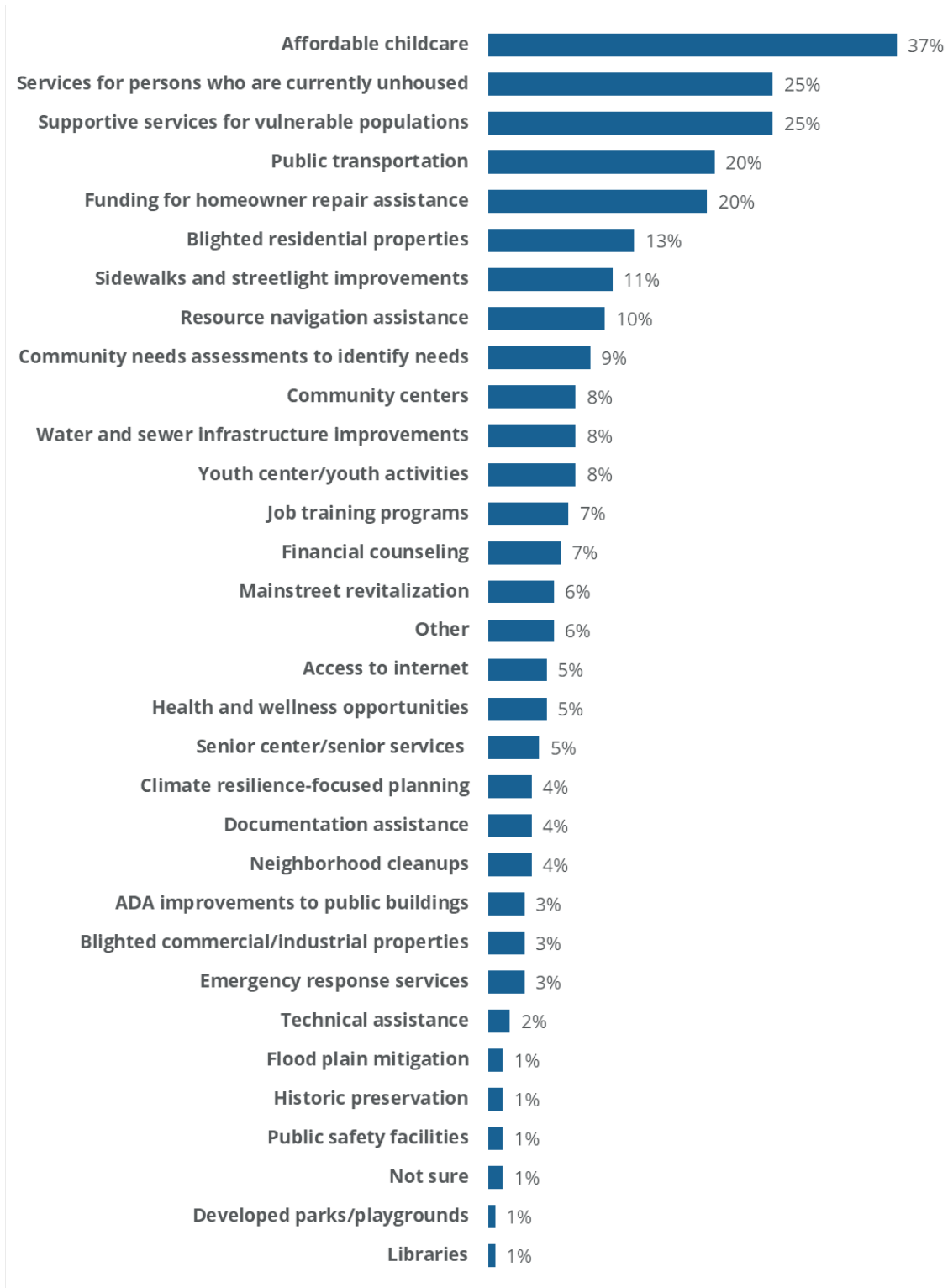
Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Community and Economic Development Needs

The top community and economic development needs identified by respondents were affordable childcare (37%), services for persons who are currently unhoused (25%), supportive services for vulnerable populations (25%), public transportation (20%), funding for homeowner repair assistance (20%), blighted residential properties (13%), and sidewalk and streetlight improvements (11%). Additional open-ended answers included:

- *“Water quality and quantity in rural areas, as well as air pollution from all the concentrated animal feeding operations.”*
- *“Access to healthy food.”*
- *“Access to mental health services, so many have to wait months.”*

Figure A-10.
Greatest Unmet Community and Economic Development Needs



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Figures A-11 and A-12 breakdown top community and economic development needs by region and stakeholder type:

- Affordable childcare was identified as a top need across regions. Services for unhoused were prioritized in the Northwest, East Central, and West Central regions;
- Mainstreet revitalization and blighted residential properties were prioritized in the Northeast, East Central, and Southeast regions. Public transportation was identified as a challenge in Northeast, West Central, and Southeast Indiana; and
- Residents selected services for unhoused at the highest proportion while affordable childcare was selected at higher proportions by other stakeholder groups. Economic and community development stakeholders prioritized funding for homeowner repair and transportation while service providers prioritized services for unhoused and supportive services for vulnerable populations.

Figure A-11.
Greatest Unmet Community and Economic Development Needs, Region

REGION		
Indiana		
1	Affordable childcare	37%
2	Services for unhoused	25%
3	Supportive services for vulnerable populations	25%
4	Public transportation	20%
5	Funding for homeowner repair	20%
Northwest		
1	Affordable childcare	36%
2	Services for unhoused	32%
3	Public transportation	28%
4	Supportive services for vulnerable populations	24%
5	Funding for homeowner repair	20%
Northeast		
1	Affordable childcare	64%
2	Supportive services for vulnerable populations	55%
3	Mainstreet revitalization	45%
4	Public transportation	36%
5	Community centers	27%
East Central		
1	Affordable childcare	50%
2	Supportive services for vulnerable populations	36%
3	Services for unhoused	31%
4	Funding for homeowner repair	29%
5	Blighted residential properties	21%
Southeast		
1	Affordable childcare	50%
2	Water and sewer improvements	38%
3	Public transportation	31%
4	Blighted residential properties	25%
5	Funding for homeowner repair	25%
West Central		
1	Affordable childcare	60%
2	Services for unhoused	47%
3	Funding for homeowner repair	40%
4	Public transportation	40%
5	Supportive services for vulnerable populations	40%

Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

**Figure A-12.
Greatest Unmet
Community and
Economic
Development Needs,
Stakeholder Type**

Note:
n = 153.

Source:
Root Policy Research from the 2025
Indiana Housing and Community
Development Resident and
Stakeholder Survey.

STAKEHOLDER TYPE		
Service Provider		
1	Affordable childcare	42%
2	Services for unhoused	38%
3	Supportive services for vulnerable populations	38%
4	Funding for homeowner repair	27%
5	Public transportation	27%
Econ. and Community Dev.		
1	Affordable childcare	50%
2	Funding for homeowner repair	30%
3	Public transportation	27%
4	Supportive services for vulnerable populations	25%
5	Services for unhoused	23%
Government		
1	Affordable childcare	53%
2	Public transportation	38%
3	Supportive services for vulnerable populations	26%
4	Water and sewer improvements	26%
5	Funding for homeowner repair	24%
Resident Only		
1	Services for unhoused	40%
2	Affordable childcare	30%
3	Blighted residential properties	30%
4	Supportive services for vulnerable populations	30%
5	-	-

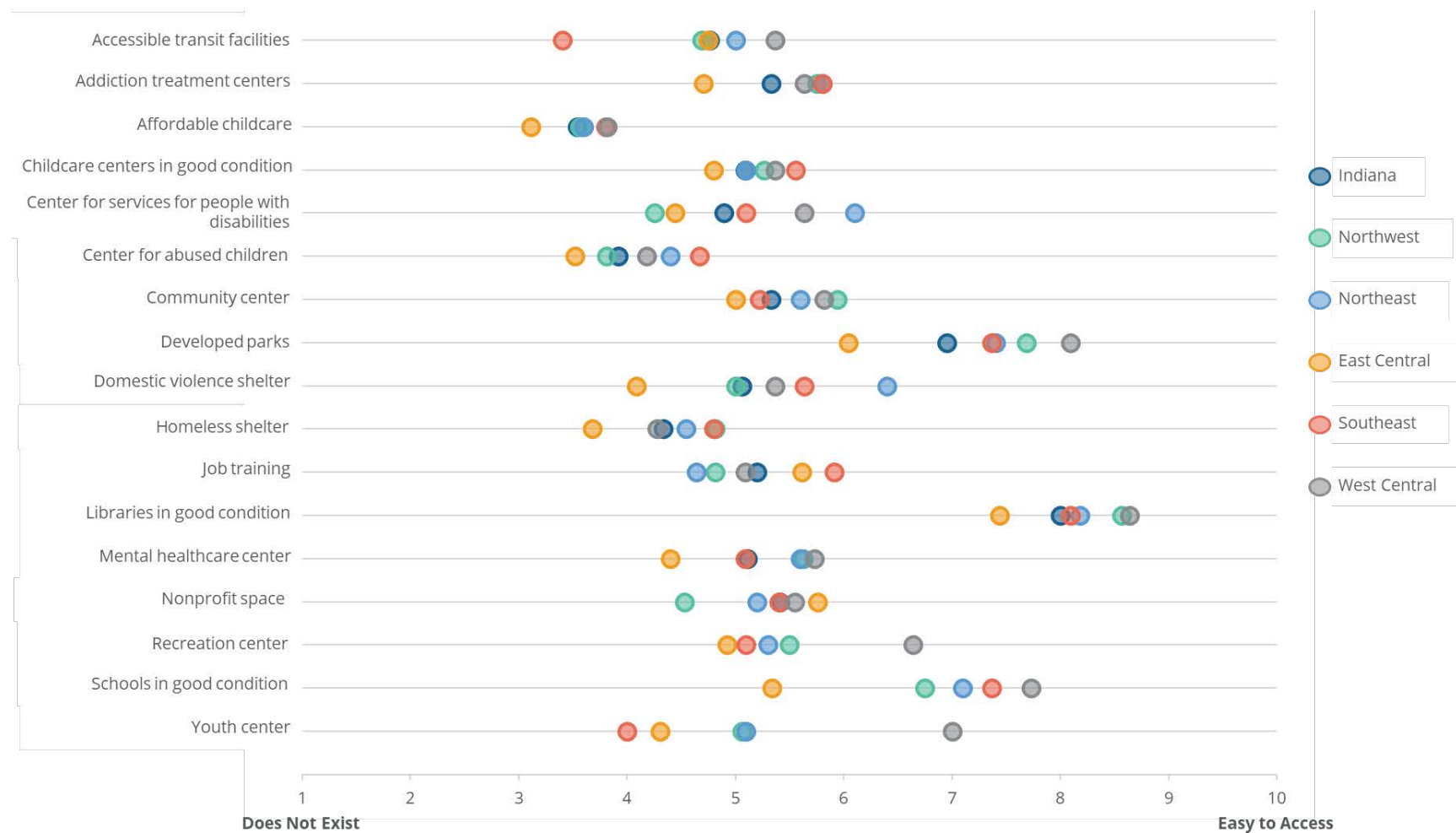
Public Facility Access

Respondents were asked to rate public facilities from 1, does not exist, to 10, easy to access and available. Figures A-13 and A-14 show the average ratings by region and stakeholder type:

- Libraries in good condition received the highest rating in the state while affordable childcare and a center for abused children received the lowest rating, indicating that these facilities do not exist in several areas of the state;
- Ratings for the condition of schools varied significantly: the highest average rating was in the West Central region and lowest in the East Central region;
- Stakeholders in the East Central region gave most facilities the lowest average ratings across items compared to stakeholders in other regions. East Central did have higher ratings for accessible transit facilities compared to the Southeast and Northwest regions; and

- Economic and community development stakeholders generally rated items lower than other stakeholder types. Service providers gave the lowest ratings to affordable childcare, homeless shelters, and centers for abused children.

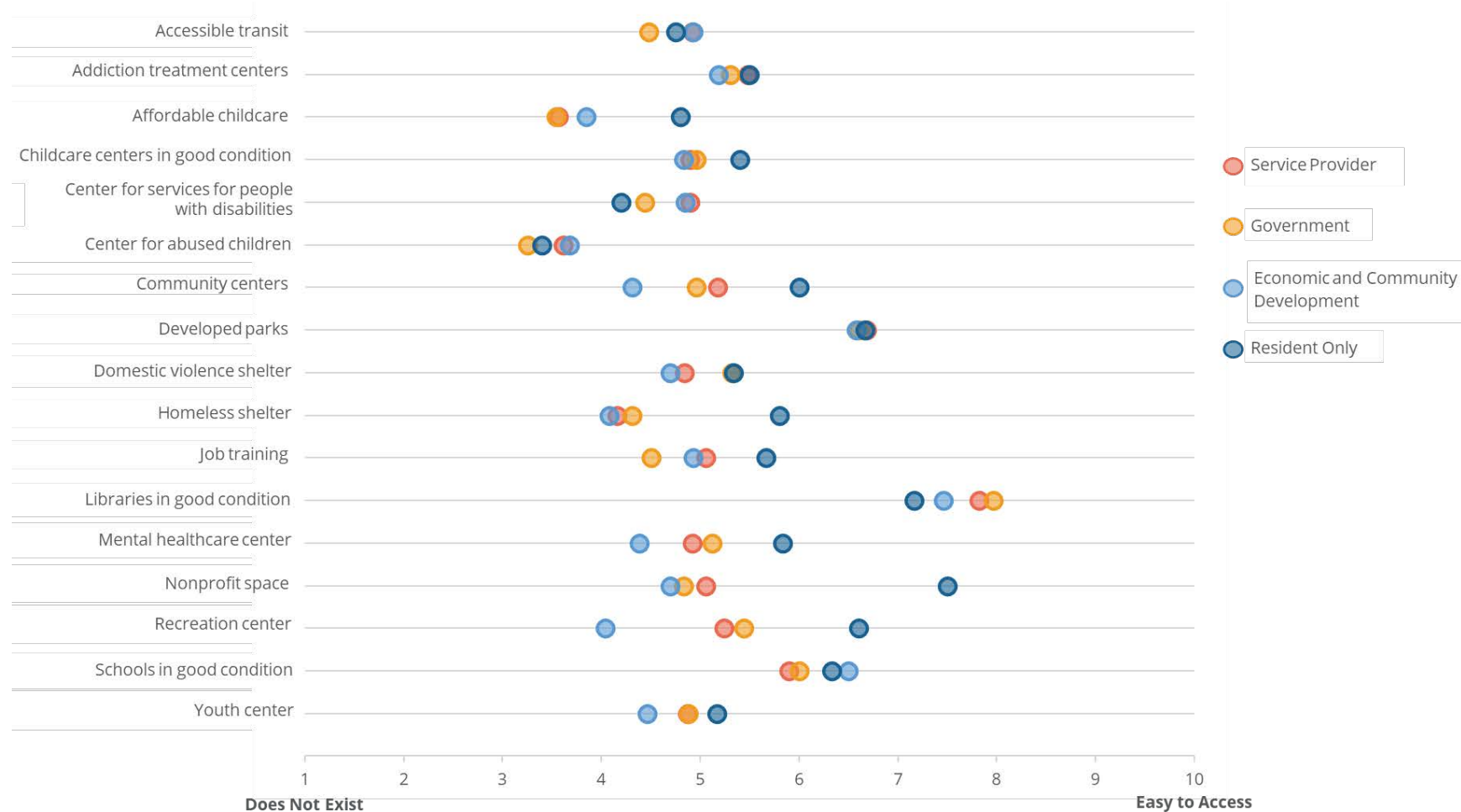
Figure A-13.
Average Availability Rating of Public Facilities, Region



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Figure A-14.
Average Availability Rating of Public Facilities, Stakeholder Type



Note: n = 153.

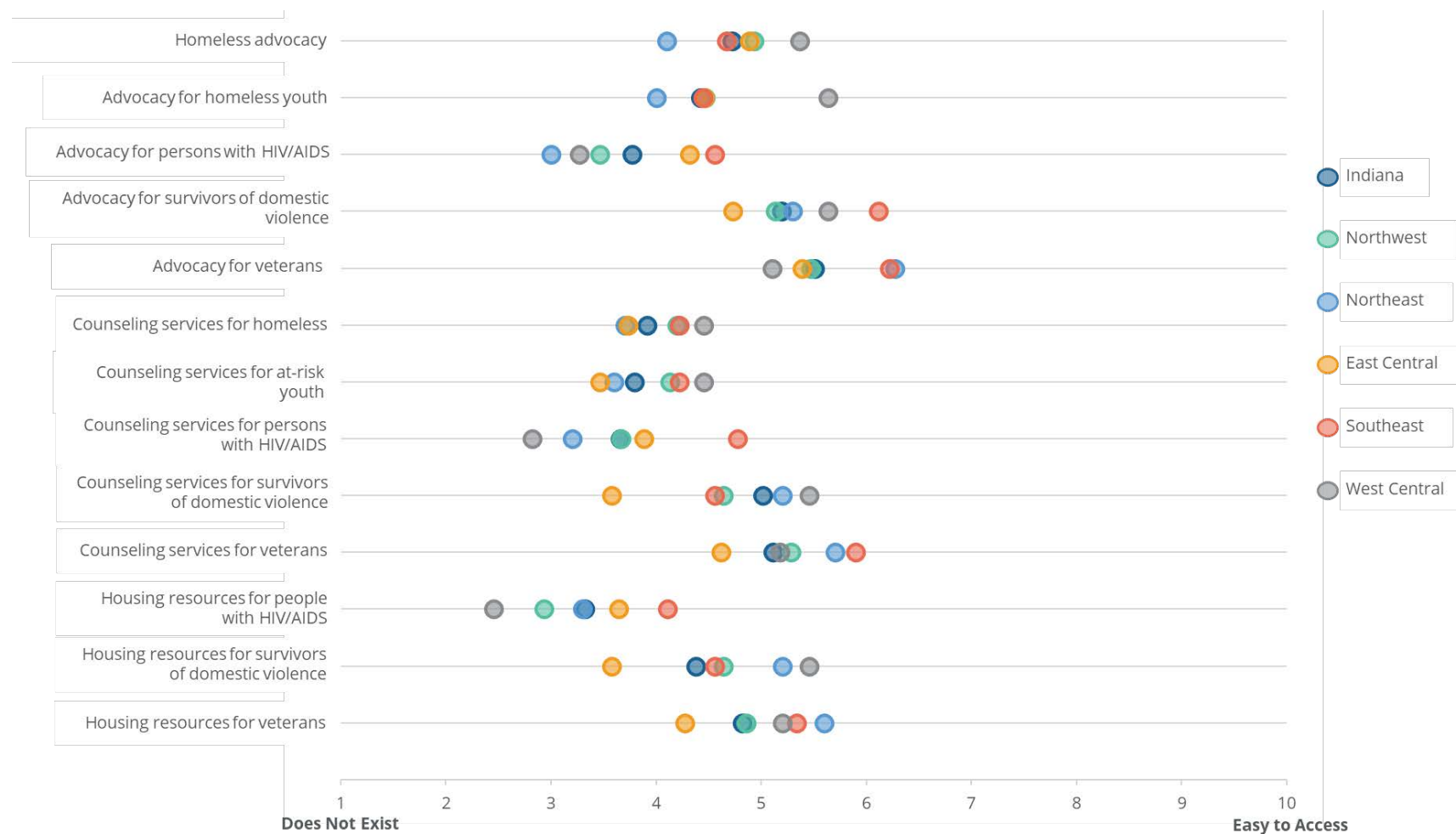
Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Availability of Services

Respondents rated services from 1, does not exist, to 10, easy to access and available. Figures A-15 through A-18 show the average ratings by region and stakeholder type:

- Overall, respondents rated advocacy and counseling for veterans and survivors of domestic violence the highest while childcare, education, and transportation services for homeless received the lowest average ratings;
- Counseling services for survivors of domestic violence were rated lowest in East Central Indiana and highest in the Southeast region. Homeless advocacy and advocacy for homeless youth was rated highest in West Central Indiana and lowest in Northeast Indiana;
- West Central Indiana had the highest ratings for services for survivors of domestic violence, homeless youth, and homeless individuals but had the lowest rating for housing resources for people with HIV/AIDS;
- Rental and mortgage assistance received the highest average ratings in Northwest and Southeast regions;
- Service providers rated homeless advocacy and advocacy for youth lower than other stakeholder groups while economic and community development stakeholders rated all services generally lower than other groups; and
- Government stakeholders rated community-based resources for low-income families, mortgage assistance, utilities assistance, and childcare and education services for low-income families the lowest of all groups.

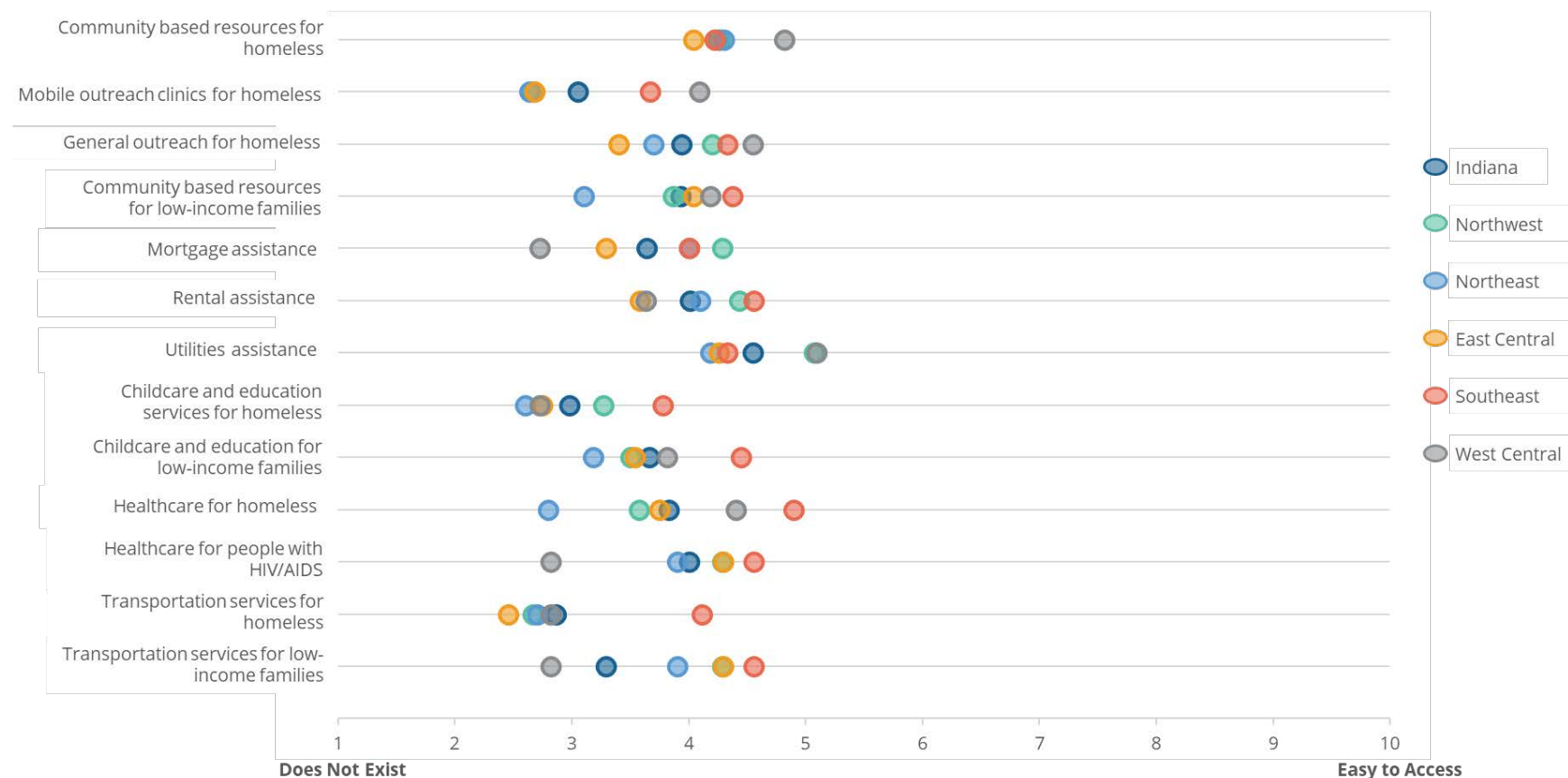
Figure A-15.
Average Availability Rating of Services, Region



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

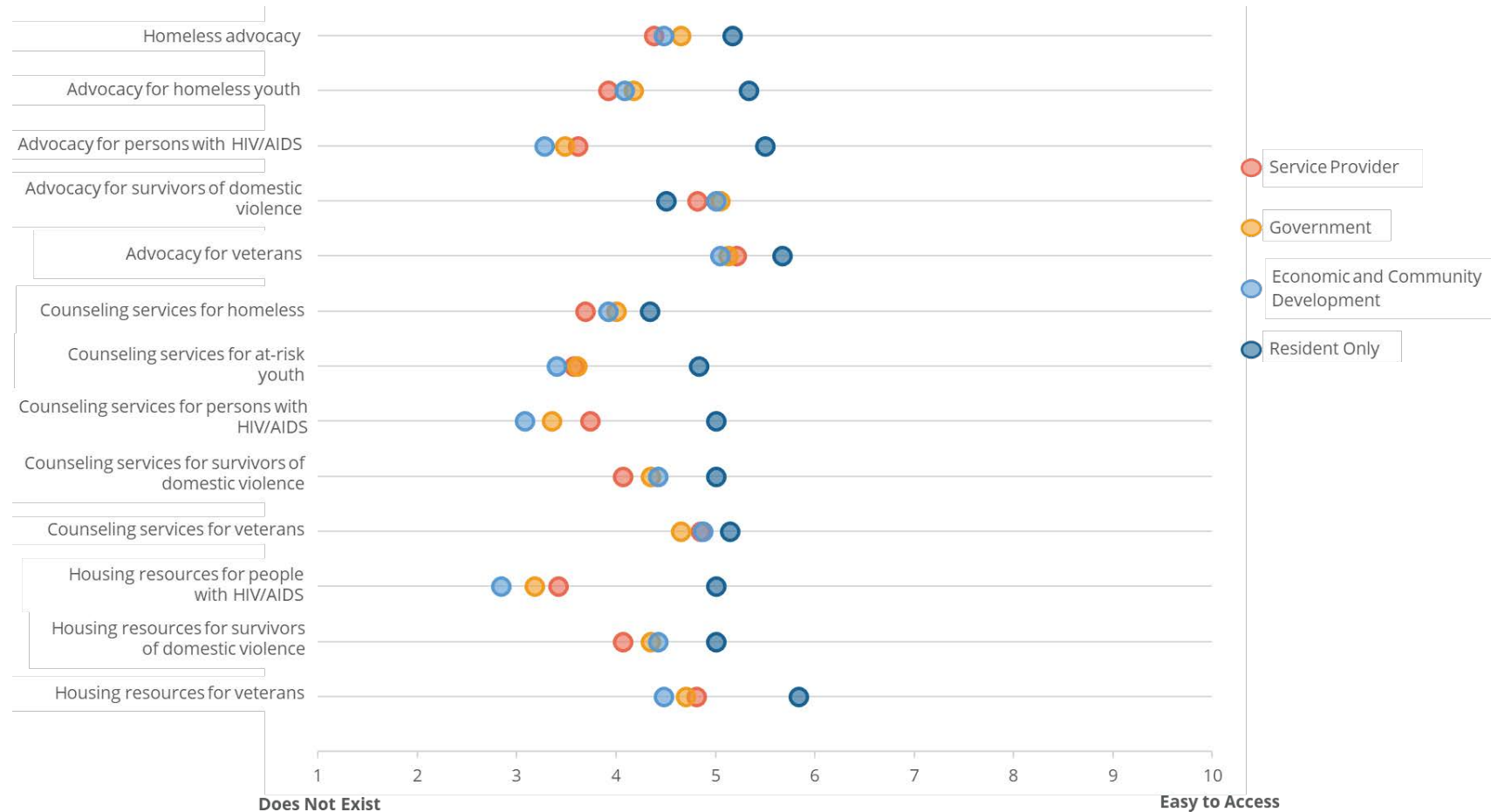
Figure A-16.
Average Availability Rating of Services Continued, Region



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

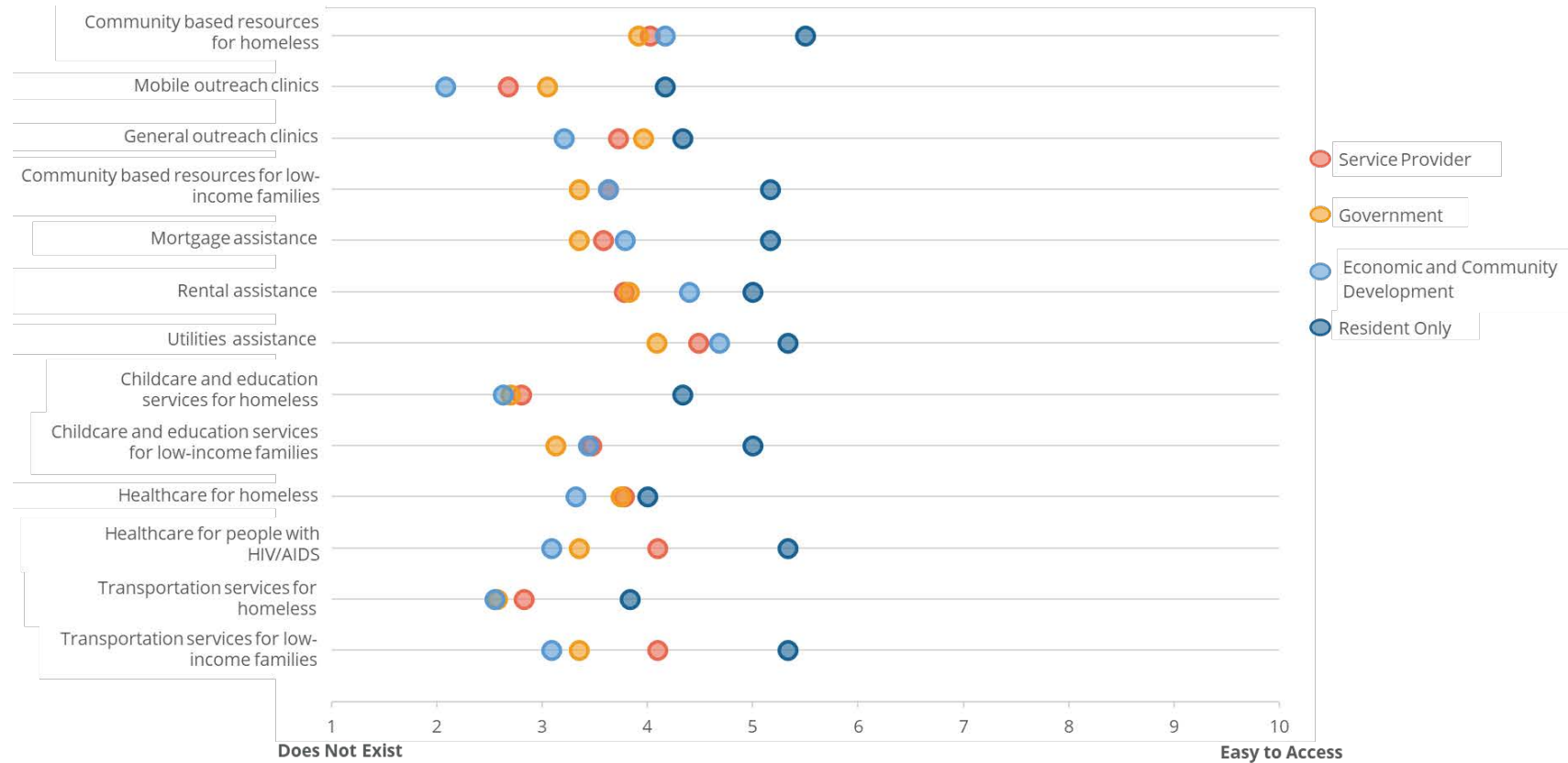
Figure A-17.
Average Availability Rating of Services, Stakeholder Type



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Figure A-18.
Average Availability Rating of Services Continued, Stakeholder Type



Note: n = 153.

Source: Root Policy Research from the 2025 Indiana Housing and Community Development Resident and Stakeholder Survey.

Effectiveness of State Programs

Stakeholders were asked a series of open-ended questions to elaborate on their views of OCRA's current programs, provide input on the types of policies and programs they hope the state could implement to address unmet housing need, and provide feedback on needed homeless services.

OCRA programs. Open-ended answers regarding OCRA's current programs and funding allocations included:

- *"Expansion of Community Outreach: Consider incorporating heat awareness and prevention campaigns alongside direct interventions. Providing educational resources, such as free online webinars or local workshops, on managing extreme heat and heatstroke prevention could increase the program's visibility and effectiveness. A particular focus could be placed on seniors, children, and those with chronic health conditions, ensuring they receive early alerts and personalized support. Use mobile apps or text alerts to provide real-time heat advisories and updates about cooling centers or other resources available."*
- *"Broaden accessibility for the Owner-Occupied Rehabilitation Program. The application process could be made more accessible by offering assistance or workshops to help applicants understand the paperwork and eligibility criteria. A simplified, user-friendly application could encourage more eligible homeowners to apply."*
- *"PreservINg Main Street Local Collaboration: Strengthen collaboration with local businesses and community groups. By involving local residents in planning and execution, the program could address specific needs more effectively and increase local buy-in."*
- *"Development and support for Main Street is essential to building economic base for communities and providing incubator space for new businesses with housing opportunities above."*
- *"Eliminate Beat the Heat and public facilities programs due to ineffective program management and burdensome requirements. Shift OOR and Recovery Housing Programs to IHCD since they are the expert on housing. PreservINg Mainstreet should incorporate business assistance into the program to support sustainability along with incorporating banks, credit unions and CDFIs into the program to leverage the grant funding."*
- *"Expand OOR: Weatherization (insulation, window/door replacement, air sealing) Plumbing/sewer repairs and updates Foundation or structural stabilization Bathroom/kitchen modifications for accessibility."*
- *"Healthy food access is critical for rural wellbeing. Residents are unable to manage chronic disease when only food comes from Dollar General. Fresh and local food solutions including produce prescriptions, small grocers, and support for healthy lifestyle changes need to be supported as infrastructure for community and public health."*

- *"I have worked with homeless families in Fort Wayne for over 15 years. I have never heard of these [OCRA] programs. I think there are better ways to communicate program availability to those on the front lines."*
- *"I thought OCRA was mostly for small towns/communities! I had not heard about all of these wonderful programs! BRAVO"*
- *"It has been nearly impossible to access Owner Occupied Rehabilitation program funding. Releasing/ distributing those funds will be critical in helping to keep people housed/ stable and allow for seniors, with no other affordable place to go, to be able to age in place."*
- *"Owner Occupied Rehab/Repair programs are needed, but it's difficult for homeowners to access funds since small communities often lack the time and/or expertise to apply for grants that don't directly benefit them. Opening the program to nonprofit partners could make the program available to homeowners in those communities."*
- *"PreservINg Mainstreet is a great initiative!! I work with Kendallville (one of the original 2 grant winners) and have seen what the long-term effects are for the downtown and community. Please make that a priority, as it brings new life to downtowns, which owners could never afford to do otherwise. Plus it inspires other property owners to work on their buildings, too!"*
- *"Public facilities grants should require design elements to address resilience to the most likely emergencies for that particular community and site. (wind, heat, grid disruption, ice, earthquake, wildfire, flooding, etc.)"*

Advice to increase program effectiveness. When asked to provide advice for the State of Indiana to increase effectiveness of community development and housing programs in general, stakeholders provided the following comments:

- *"Invest in workforce development and education. Expand Access to Skills Training. As industries evolve and automation increases, it's crucial for Indiana to invest more in workforce development, particularly in sectors like technology, advanced manufacturing, healthcare, and green energy."*
- *"Strengthen Partnerships Between Local Governments and Nonprofits Collaboration: Facilitate stronger collaboration between local governments, nonprofits, community organizations, and private developers. By pooling resources, knowledge, and efforts, communities can more effectively tackle housing and development challenges."*
- *"AFFORDABLE housing. We have to increase subsidized housing programs until the hourly wage catches up with the cost of living Increase homeownership program for low income households."*

- *"Communicate well with grant administrators and the turnover of liaisons is not helpful. The former plan stated a large allotment of money for educating communities --that is not needed, just bring the regional planning commissions up to speed and they can get the word out to their region."*
- *"Community development should take into account, more significantly, economic development. Longitudinal studies need to measure the impact on beneficiaries and the community at large, of the various types of funded housing. Focus less on housing production and more on impacts of housing on household stability, health, mental health, and wealth. Use that data to drive funding, spending more on housing types that show impact."*
- *"Find a way to counter the trend toward less property tax funding for rural public facilities that are essential to attract and keep families from moving away. Rural communities need "third places" like libraries, with expanded services to meet the challenges of extreme weather due to climate change."*
- *"Focus on revitalization more than new development - update existing structures and community spaces before working on disconnected new development."*
- *"In Historic Preservation, we have sticks, but no carrots. Many property owners would repair their buildings if they had financial help. Please help us make that possible!!"*
- *"Address the growing senior renter population by investing in home-based supports (e.g., home health, mobility modifications) to help older adults remain housed. Since a large share of ELI renters are in the labor force, partner with regional workforce boards to align job-training or wage-boosting programs with affordable housing initiatives."*
- *"Pass legislation that empowers and shows preferential treatment for PEOPLE to buy houses NOT Corporations. Pass Pro-worker/pro-labor protections, this will allow unionization, which will bring up wages, which will empower new home buyers."*
- *"The applications need to be modified to be more attainable for rural communities."*
- *"We MUST prioritize healthy food access and wellness for community development in order to reduce obesity and related diseases. Addictions, job training, education, healthy lifestyles can be addressed with healthy food access and a culture that enhances those choices. Community gardens are not the solution. Need to work with food systems experts all over the state who can work with multiple partners on creative solutions. Better yet, fund the organizations already doing this so they can do more of the good work they are doing to support food access, healthy eating and lifestyles in rural communities."*

Policy and program ideas. Stakeholders provided the following input on the types of policies and programs they wish to see the state implement to address unmet housing needs:

- *“Expanding emergency rental assistance, utility support, and short-term housing options can help prevent homelessness. State programs could provide funds to local organizations that help individuals facing eviction or housing instability.”*
- *“Low-Interest Loans and Grants for Landlords: Offering financial incentives, such as low-interest loans or grants, to property owners who agree to offer affordable rents for a set period can help preserve affordable rental housing in the private market.”*
- *“A program for county unhoused shelters - Johnson County doesn't have one and the nearest available help is in downtown Indianapolis - not serviced by our county's public transport. Emphasis on rehabilitation and repair programs coming with a maintenance guidebook or course to create long-term success in venerable populations remaining housed.”*
- *“Change law language around housing rights and regulations. They all say “reasonable” and this allows for a harmful amount of discretion and residents and tenants are forced with the burden of these harmful laws.”*
- *“Developments must attend to all income levels when proposing new housing. Developments and improvements MUST calculate and create access to healthy food in their design and plans, especially for low-income housing. Developments should not remove farmland from rural communities for 10 acres McMansions. Those housing developments should have to pay penalties for removing land from agriculture. Those funds could be used to support farmers beginning or staying on their land.”*
- *“Encourage state-level reforms that empower municipalities to streamline approvals for affordable housing developments.”*
- *“Tailor outreach and down payment assistance programs to communities where homeownership has declined most significantly; ensure renters of color have meaningful access to support services and legal protection.”*
- *“I would love to see the state issue a Public Bond that would provide money to invest in our existing housing stock to improve its conditions. I think the housing stock we have is not in good shape, which puts us at even higher risk of not having enough affordable, safe decent housing.”*
- *“Indiana needs to allow communities to require housing developers to support affordability. Inclusionary zoning, which has been illegal in Indiana since 2017, is a tool communities need to have at their disposal. If developers don't want x% of the homes they are building to be affordable, they would have to contribute land or money to a local community land trust (or housing trust fund or community foundation fund) to be used for affordable housing.”*
- *“More available vouchers for emergency situations.”*

- *“More coordinated efforts using multiple jurisdictions and non-profits to develop housing and to provide more housing vouchers.”*
- *“Rent escrow to force landlords to maintain & repair rentals therefore helping keep renters housed & reduce evictions. Caps on out-of-state investor ownership.”*
- *“Support for CDFIs to meet unmet lending needs through mortgage and construction loan products.”*
- *“The state needs to work more with local government leaders so the local government understands the programs available. The mayor of Valparaiso for example had no idea about state program that would assist with infrastructure upgrades if the city met certain zoning criteria. Perhaps if IHCD invited local mayors and county councils to the fall conference gratis, these officials would bring back new ideas and new connections to their communities.”*
- *“We struggle in our area with people, even understanding the importance of affordable condos, and or apartment complexes. People that rent are not bad people, Or building affordable housing in a subdivision is not a bad idea. People just do not like change and it's hard to get them to see the value of folks moving into their area. They need to see the what's in it for me. That they could attract possible grocery stores or other amenities in their community that would make their life easier for those who have already been there.”*

APPENDIX B.

Stakeholder Focus Group Summary

Overview

Appendix B summarizes the findings of six (6) stakeholder focus groups held between March 4th–13th, 2025, to inform the development of the State of Indiana’s 2025-29 Consolidated Plan. The focus groups were organized around specific topics and stakeholders were invited to participate in any of the discussions that best aligned with their expertise and interests. The topics were:

- Housing Affordability and Development (two (2) focus groups);
- Special Needs Populations (two (2) focus groups); and
- Business and Economic Development (two (2) focus groups).

Representatives from the following organizations participated in the focus groups:

- | | |
|--|--|
| ■ AARP Indiana | ■ Indiana Coalition to End Domestic Violence |
| ■ Arc of Indiana | ■ Indiana Coalition to End Sexual Assault |
| ■ Area 10 Agency on Aging | ■ Indiana Economic Development Corporation |
| ■ Bedford Housing Authority | ■ Indiana Landmarks |
| ■ Blue River Services | ■ Indiana Statewide Independent Living Council |
| ■ Brazil Housing Authority | ■ IU Environmental Resilience Institute |
| ■ Coburn Place Safe Haven | ■ IU Extension |
| ■ Evansville Regional Economic Partnership | ■ Kokomo Housing Authority |
| ■ Grace Horizon | ■ Lacas |
| ■ GRW Engineers | ■ Milestone Ventures |
| ■ HAND, Inc. | ■ Muncie Housing Authority |
| ■ HealthPlus Indiana | ■ Perry County Development Corporation |
| ■ HIV/AIDS service providers | ■ Prosperity Indiana |
| ■ Housing Matters | |
| ■ Immigrant Welcome Center | |

- Purdue Extension
- Radiant CDC
- Rauch Incorporated
- River Hills Economic Development District
- Riverhills Regional Planning Commission
- SIHCDC
- SIRPC
- YWCA Central Indiana

Summary

What are the most common housing problems?

Affordability. Housing affordability was identified as the most significant housing problem impacting the state of Indiana. Several stakeholders described the lack of affordable housing available in their communities. Compounding the lack of affordable housing is increases in the cost of living, with one stakeholder sharing that, “even when rents aren’t going up, increased prices for other household needs are disproportionately impacting households with income 30% or less, which in turn makes their housing situation more vulnerable.” Another stakeholder added that “even slight increases in rent can result in homelessness for residents currently living in subsidized housing.”

Stakeholders articulated that the cost of housing across the state is outpacing the increase of wages, making housing more unstable across incomes. One stakeholder cited a recently released report which showed that two-thirds of all extremely-low income households in Indiana are cost burdened or cannot find housing. Another stakeholder added that current developers and nonprofits are facing increasing uncertainty when it comes to federal funding.

Several stakeholders articulated that housing affordability is an even greater challenge in rural areas of the state. One stakeholder shared that “even if you have infrastructure, it’s unlikely that there will be support from the town or city. The entire onus is on the developer, [which makes it less likely that these projects occur].” Other stakeholders described the significant lack of funding in rural communities, as well as the disadvantage rural communities have competing with other jurisdictions for LIHTC projects. One stakeholder shared that these rural communities aren’t “pointing” well compared to other communities.

Stakeholders emphasized that a lot of the affordable housing being built is still unaffordable to extremely low and low-income households. One stakeholder shared that for a HOME project in a standard neighborhood appraised at \$240,000, “it’s still difficult to find a family that qualifies for this property and that can pay the mortgage.” Another stakeholder shared that with new businesses locating in Howard County/Kokomo, new housing is being built, however, “none of it is affordable.” They added that “a lot of our affordable housing is becoming unaffordable.”

Other stakeholders described the prevalence of out-of-state investors buying up housing in the state and charging exorbitant rates. One stakeholder articulated that “out-of-state buyers don’t care about the people living in their homes. They see what is being charged in Carmel and then charge that in Anderson County.” Another stakeholder shared that the same thing is occurring in Madison County.

One stakeholder shared that a lot of the naturally occurring affordable housing (NOAH) located in rural areas are mobile homes. However, for populations that are aging, it’s difficult to modify these homes to make them more accessible and these residents are less likely to want to move into multifamily apartment complexes. This stakeholder noted that a lot of people own the land under their mobile homes, but lot rents have risen for those who rent.

One stakeholder felt that in general, developers did not build “smaller houses” due to the lack of return. This stakeholder felt some of the affordability issues facing Indiana households could be addressed if a greater variety of housing types were allowed to be built throughout the state.

Providers of services to residents with HIV/AIDS prioritized long term rental assistance, followed by short term rental assistance and short term mortgage assistance as needed to address affordability shortages.

Lack of quality and insufficient affordable housing stock. Several stakeholders described the poor quality of affordable housing in their communities, emphasizing that it’s equally important to build new housing and maintain existing affordable housing. Stakeholders articulated that the quality of affordable housing suffers as developers and property managers’ budgets become tighter. One stakeholder called out the compounding effects of this issue, noting that “without income to maintain high quality housing, affordable housing can become the negative ‘stereotype,’ which makes communities less likely to embrace it.”

One stakeholder shared that in Anderson, one side of town “still has brown drinking water on a regular basis.” They added that on top of rent and other household costs, low-income families have to figure out how to budget for clean drinking water...some are using this water for sponge bathing.” Another stakeholder described some instances where tenants have told them “...their homes still have dirt floors...[and] they also don’t have water, heat, etc.” They emphasized that providing suitable housing “comes down to ethics...do you even care about the tenants living in your properties?” A different stakeholder added that while there are “lots” of waiting lists for affordable housing developments, “a lot of these units are not in good condition.”

One stakeholder shared that one of the apartment complexes in their town that houses older adults is closing down and “because we don’t have anywhere for them to go, we’re directing them to find places to live out of town.” Another stakeholder said that the

“condition of existing housing stock continues to decline and is not safe, especially as you go down income levels.” They identified a significant need for rehabilitation of existing units and new construction.

Related to safety of units, one stakeholder shared that the State of Indiana “has high levels of preemption when it comes to [tenant] safety...Indiana is a landlord-friendly state and tenants are afraid to report housing issues. They can be evicted without cause and have nowhere to go.” Another stakeholder emphasized the state’s levels of preemption is contributing to aging infrastructure and impacts the quality of housing. They added that Indiana is a target of out-of-state investors, which leads directly to a lack of accountability when offices are not in the state. This stakeholder added that “tenants cannot get their issues remediated and then the properties just sit there not being improved and not helping out tenants.”

Disproportionate impacts on rural areas. Several stakeholders articulated that there is insufficient housing stock in rural areas. They noted that many rural communities lack the infrastructure that’s required for housing development.

One stakeholder shared that “living in a smaller rural community, housing instability deflates hope and optimism.” They added that it’s difficult to work with landlords to get properties fixed, describing one situation with their landlord to fix their heating as “turmoil and a battle.” They added that their options are limited to find a better rental situation and that they are currently “working on their credit to get a better house...the lack of variety in housing and lack of quality is difficult to be successful.” Another stakeholder added that the lack of available and quality housing permeates into “how I work, how I engage in the community...I’m less happy. It’s a downward spiral.”

Infrastructure. A majority of stakeholders identified infrastructure as a significant challenge impacting Indiana municipalities, particularly rural areas. Specific infrastructure challenges highlighted include:

- **Water and sewer infrastructure.** Stakeholders note that the cost of repairing/building out sewer and water infrastructure is really high.
- **Broadband internet access.**
- **Lift stations (wastewater infrastructure).**

One stakeholder located in southern Indiana reported that localities and counties avoid doing infrastructure development with CDBG resources because they don’t have the capacity to make it work. They suggested more education and capacity building is needed, especially in rural areas. Another stakeholder added that some rural communities need partners and technical assistance to bring in the infrastructure that is needed. This stakeholder advocated for more relationship-building opportunities between municipalities and infrastructure partners.

Other stakeholders described that there is no incentive to be proactive in maintaining infrastructure or fixing existing assets, with one stakeholder adding that “everyone is always after the next shiny thing.” Stakeholders described that because of this, rural communities “get left behind.” Another stakeholder shared that OCRA requires communities to study what infrastructure is needed in their areas and justify what is needed and that they would qualify for funding. They added that a lot of rural communities don’t have this capacity and advocated for “these funding pots to be made more accessible by cutting a lot of the red tape currently required to access them.”

Construction and labor costs. Stakeholders described rising construction and labor costs as significant impediments to housing development. Stakeholders advocated for new funding sources to be identified because as one stakeholder shared, “local governments are not able to provide gap funding to projects.” Other stakeholders noted that labor shortages are leading to increased labor costs. One stakeholder noted that Davis-Bacon requirements make affordable housing development prohibitively expensive in rural areas of the state since prevailing wages are based on the price of unionized construction labor in Chicago. This stakeholder shared that one developer had to cut eight units from a project to make their expenses work, adding that this law is unintentionally “disincentivizing developers/small towns to build affordable housing.”

Other housing challenges. Stakeholders described several other housing challenges impacting populations throughout the state.

- **Low wages and incomes.** Stakeholders in Lake and Elkhart counties describe stagnant wages as exacerbating housing challenges, as well as the lack of housing stock available at all income levels.
- **Community opposition.** One stakeholder noted the “huge public pushback” against anything that isn’t single family homes. They advocated for more education around affordable housing to push back against misconceptions, adding that “we only have so much land to develop...we don’t have enough space [to just build single family homes].” Another stakeholder described the process of educating residents on housing developments, emphasizing the need to “talk a lot” with neighbors and encourage developers to meet with the community to explain their projects and get buy-in. They added that “it might slow them down in the beginning, but they are less likely to face public pushback later down the line.”
- **Housing discrimination.** A couple stakeholders noted that they have seen general discrimination in housing, with landlords disregarding fair housing law. One stakeholder noted they’ve seen fair housing complaints made on the basis of several protected classes, but fair housing complaints on the basis of disability make up between 40-45% of all complaints they see. Another stakeholder shared that 1991 fair housing requirements for accessibility/adaptability in multifamily housing are not

being enforced, especially in rural areas. They added that this is further limiting the supply of affordable and accessible housing in these areas.

- **Lack of strategic planning and partnerships.** One stakeholder advocated for more coordination among public, private, and nonprofit sectors to address housing challenges. They added that “a lot of communities struggle with strategy...it’s not strategic if farmland is lost to housing...you need to minimize those losses going through a strategic planning process.” They also added that, “the cost to build a home in rural areas is higher than what people can afford in rural areas...maybe partnership among these sectors can lead to some cost cutting efficiencies.”
- **Burdensome rental applications and requirements.** One stakeholder in Elkhart County noted that requiring hard copy rental applications is a barrier that significantly impacts populations living with mental health challenges. They also added that these populations are more likely to have the paperwork and identification needed to rent out units.
- **Source of income discrimination.** Stakeholders shared that many landlords are unwilling to rent their units to tenants utilizing housing choice vouchers. One stakeholder noted that they’ve been able to cultivate relationships with more sympathetic landlords that are more willing to rent to people with barriers. Another stakeholder shared that helping with evictions, past due balances, and cosigning for residents is the only way their clients get housed.
- **Evictions.** Stakeholders described that residents with evictions are forced to “jump through a lot of hoops” to find other suitable housing situations.
- **Declining homeownership rates.** One stakeholder shared that homeownership is declining statewide, driven by the decline of Black homeownership in the state.
- **Housing and service organization partnerships.** One stakeholder who develops affordable housing identified a need to better connect and partner with supportive service organizations that can better serve tenants with needs. They advocated for a statewide coalition of developers and service organizations to come together to create these partnerships.
- **Expanded service networks.** Service providers working with residents with HIV/AIDS compiled a list of activities needed to help these residents attain housing and economic stability. Those included affordable health care, education and job training, GED/trade classes, senior care, transportation to employment, and intentional support and adequate time to build baseline support and independence among those with needs (including skills in nutrition, safety, budgeting, planning for their future).
- **Tenant rights.** Several stakeholders identified a need for more education around tenant rights for both tenants and landlords. One stakeholder who serves survivors of domestic violence also advocated for more trauma-informed trainings for landlords on how to support survivors of domestic violence as tenants.

- **Funding.** Stakeholders emphasized the need for alternative sources of funding (e.g., community foundations) with both state and federal funding levels declining.
- **Occupancy restrictions.** One stakeholder shared that some developments across the state have a “one heartbeat per bedroom” policy, which the Fair Housing Center of Central Indiana has been working on to address. This stakeholder shared an example where a family with a newborn could only afford a one-bedroom apartment but they weren’t allowed to rent it because there would “3 heartbeats in a bedroom.”

What are the greatest housing and service needs of special needs populations?

Older adults/seniors. Stakeholders articulated that the greatest challenges facing this population related to housing are affordability and accessibility. One stakeholder shared that safety and accessibility are significant housing issues faced by this population, adding that “few developers are designing with aging in place in mind.” Affordability is especially challenging for people with accessibility needs: it’s exceedingly rare to find units with accessibility features that are affordable to people with disabilities (especially those on fixed incomes or those who can only work part time). A couple stakeholders described that many low-income residents forego basic needs to pay rent, even in affordable developments. One stakeholder added that, “many affordable housing residents, including seniors and people living with disabilities, do not have a bed in their unit because they cannot afford one on top of rent.”

Again, stakeholders identified the disproportionate impact on older adults living in rural areas of the state. As a result, older adults, who are more likely to be on fixed incomes, are unable to pay for the necessary modifications that would make their home more functional for their needs (e.g., converting a bathtub to a walk-in shower). Additionally, for those on fixed incomes, stakeholders noted that even minor rent increases (e.g., \$50/month) can increase the likelihood of a household falling into homelessness.

Related to modifications, stakeholders shared that the overwhelming majority of older adults want to stay in their community or home, however, as one stakeholder articulated, “for those looking to age in place or downsize, there are no options available for them. This forces older adults to then try and modify their homes but not everyone can afford to do so.”

Other stakeholders advocated for new housing developments to include more accessible units. In addition to being more cost effective to implement accessible designs into the initial construction than make modifications later, one stakeholder shared that “funding for owner-occupied modifications is insufficient.”

Services. Stakeholders identified several service challenges currently experienced by these populations.

- **Access to services.** Service providers in rural areas described that it's difficult for older adults and people living with disabilities to receive information about available services, let alone access them.
- **Social interaction.** Several stakeholders articulated that older populations lack access to socialization and recreation opportunities, with one stakeholder saying that in terms of health and overall well-being, "isolation is worse than smoking" for this population.
- **Food insecurity.** One stakeholder shared that they work at an affordable senior housing development and often observe seniors sharing food they don't need with others who may need it. They added that they've begun to see informal "food pantries" pop up among neighbors.
- **Transportation.** Stakeholders identified transportation as a significant challenge experienced by older adults. In addition to transit systems that either don't exist or don't go where people need them to go, demand for paratransit services far outpaces capacity. Stakeholders described limited schedules (e.g., 9am to 5pm on weekdays, no service on weekends) and lack of flexibility (e.g., calling two weeks in advance to schedule a ride).

Persons living with disabilities. Many of the housing and service challenges described for older adults also impact people living with disabilities, particularly a need for more affordable and accessible housing options. Several stakeholders emphasized the need for more integrated housing options and wraparound services. One stakeholder who works in Hamilton County shared that more housing developments with 3- or 4-bedroom units are getting built because they are "more profitable;" however, they added that people living with disabilities are more likely to live in a one- or two-bedroom unit.

Survivors of domestic violence. Stakeholders described that many survivors of domestic violence lack income and/or have poor employment or rental history, which makes it extremely challenging to find a different housing situation. As such, income requirements (e.g., making three times the amount of rent per month) make it infeasible for one-income households to find housing options. This is compounded by the urgency around the situation, since survivors are actively trying to leave dangerous situations and find safe housing situations immediately. In addition to the barriers mentioned above, stakeholders highlighted that survivors of domestic violence can easily fall into homelessness because of the impacts of trauma, as well as housing discrimination (e.g., having children). Similar issues also impact survivors of human trafficking.

Stakeholders described the prevalence of domestic violence against women in Indiana. One stakeholder shared that domestic violence is the number one cause for homelessness for women nationwide, while Indiana ranks 5th among states for the rate at which women experience domestic violence.

As such, stakeholders described the need for more trauma-informed housing situations and services for this population. One stakeholder shared that going into a shelter can be traumatic for survivors of domestic violence, so in some instances, for those who have previously stayed in a shelter, these survivors won't leave their current situations.

Stakeholders described permanent housing options as the most ideal housing situation for survivors of domestic violence, however, the process to place survivors in these housing situations is extremely long. One stakeholder stressed that "there is an immediacy of need that isn't met." Another stakeholder shared that federal policy has moved away from transitional housing to rapid rehousing (RRH) but RRH programs have not been effective for survivors of domestic violence. They noted that their organization's transitional housing program allows survivors to live in their units for two years and not pay rent or utilities. This stakeholder added that, "if they have income, they can save that [for when the two-year time period ends]."

Another benefit of transitional housing is the security measures, noting that "our facility has security 24/7...no one is getting in. However, if you're at a rental property, you might have a ring camera but it's much less safe if you're abuser is trying to look for you."

One stakeholder that operates transitional housing for survivors of domestic violence says it is difficult to find money for services and fixtures for their shelter, adding that operating costs are extremely high. This stakeholder would like to see expanded access to permanent supportive housing (which ideally has vouchers) for survivors.

Services and resources. A few stakeholders described competition of resources between people experiencing homelessness and survivors of domestic violence. One stakeholder shared that for Indianapolis' Coordinated Entry screening process, survivors of domestic violence often don't "score high enough" on intake evaluations because of their lack of chronicity. They added that, "as a result, survivors of domestic violence in the system tend to languish...75% of this population gets 'auto exited' from the system."

One stakeholder also described how a "decent amount" of survivors are now living with a range of disabilities. As a result, this segment of survivors are more likely to be taken advantage of, which in turn can "re-traumatize" these individuals and make it less likely that they are able to stay in stable housing and benefit from the services they need.

Other service and resource challenges identified include:

- **Lack of funding.** One stakeholder shared that there are not enough resources to tackle the scale of the problem [serving survivors of domestic violence], adding that as the largest organization in the state serving survivors of domestic violence, for every household they serve, they have to turn nine households away. They shared that as a result, they work full time and are only paid part time, adding "this is what you need to do...we take on the burden of being service providers."

- **Transportation.** One stakeholder described the challenges of households living in scattered site housing in relation to transportation services. They described that, “for all the services that are offered throughout Marion County, particularly specialized trauma services and EMDR therapies, residents in these living situations can’t access them. This stakeholder said they end up driving all over the county to pick up their clients to drive them to their appointments.
- **Staff capacity and support.** Stakeholders described the need for consistent and stable staffing as crucial to the success of their clients. One stakeholder added that, “once you develop a relationship with someone, consistent stability with case management is critical.” This stakeholder added that they are the emergency contact for more than 20 of their clients. They also emphasized a need to support staff who serve these populations.
- **Services for survivors with children.** One stakeholder articulated that “domestic violence is intergenerational...to ensure we break the cycle, we need to make sure these children are receiving trauma-informed services.” They advocated for ensuring robust and easy access to services for survivors and their children. Another stakeholder articulated that, “making these investments in those kids now will reduce their housing and health challenges in the future.”
- **Systems building.** One stakeholder in Indianapolis shared that they have put resources toward “system building” to help survivors of domestic violence, articulating that “outside of homeless services, we’ve created a system to have regular case conferencing for our clients around housing.” They added that because these systems are funded at such inadequate levels (e.g., CE), collaboration among organizations working in similar areas (e.g., homelessness, DV) suffer. This stakeholder advocated for building systems that are able to assess and serve both of these populations.

Ideas to better meet the needs of these populations include:

- Providing dedicated, set aside units in new housing developments and developing more permanent housing options for survivors of domestic violence;
- Trauma-informed service delivery is very important in shelters and property management. Financial support and education for service providers to support these populations while they’re in a temporary or permanent housing situation is critical.
- One stakeholder suggested that for Coordinated Entry (CE) to be more effective for survivors of domestic violence, CE housing assessor staff should be trained to do case management and should connect with DV organizations “so there is a bridge.” They added that the training would focus on the needs of survivors, particularly on the danger they’re currently facing, so that staff can act more urgently to assess the situation and connect the survivor with the appropriate housing and services. This would also serve staff (and survivors) well to better understand what signs to look for

in someone who has experienced domestic violence so they can get screened and connected with resources quicker.

Other special needs populations identified by stakeholders include:

- **Immigrants.** A couple stakeholders shared that they are “witnessing a lot of fear within the immigrant communities...these residents are no longer showing up for work because they are fearful of being targeted by the government. One stakeholder shared that as a result, “people in these communities are looking to move to other states because of their statuses.” They noted that in addition to the support these populations need,” the cost of housing is going to continue to rise because it’s going to be increasingly difficult to find people to build homes.”

- **People living with mental health challenges.** Several stakeholders identified people living with mental health challenges as having significant housing and service needs. One stakeholder articulated that this population has the highest barriers to housing, adding that “landlords will assume they’re on substances and evict them even though they might only have atypical behaviors.” Another stakeholder noted that in Howard County, because of the lack of available services, “our jail is the number one mental health provider.”

Compounding the housing challenges of this population are anti-camping bans being passed in Indiana communities, with one stakeholder adding that, “on top of not having income and access to services, this population is now being arrested for camping, which gives them a criminal record, which then makes it even hard to find housing.” Stakeholders identified the need for more permanent supportive housing and supportive services to support this population.

- **People living with addiction challenges.** A handful of stakeholders noted that residents experiencing homelessness or at risk of experiencing homelessness are more likely to be impacted by addiction challenges. One stakeholder shared that the prevalence of women between the ages of 65-85 experiencing addiction challenges and homelessness are increasing. They added that, “they usually have income but usually prioritize paying for their medication or car over housing or other bills.” This stakeholder advocated for more addiction and supportive services to be available to help this population “get the help they need that then sets them up to find a stable housing situation.”
- **People exiting the justice system.** Stakeholders articulated the housing and service challenges experienced by people exiting the prison system, with one stakeholder sharing that “the stigma around people coming out of prison needs to change...these people have served their time and should be able to participate in society, including finding a place to live.” Another stakeholder from Hamilton County noted that there is “no multifamily, affordable or recovery housing in the county.” They advocated for more one- to two-bedroom developments to be built to better serve this population and the broader low-income population, however, “these developments aren’t

penciling right now.” Job training and skills development were other services identified as significant needs for this population. One stakeholder shared that this population lacks access to mental health services because of the lack of clinicians and the inability to get reimbursed for working with this population.

- **Larger families.** One stakeholder shared that larger families struggle to find places to live that meet their needs, adding that “because three- or four-bedroom apartments are their only option, places that are affordable and available are limited.” They noted that they have been working with a family of five since fall 2024 and have yet to find them a suitable place to live.
- **Survivors of human trafficking.**
- **People experiencing chronic homelessness.**

Homelessness. In general, stakeholders described that there is not enough shelter capacity to meet the needs of people experiencing homelessness. A few stakeholders highlighted the lack of shelters available for families. Specific jurisdictions mentioned were Madison County and Delaware County. Other input included:

- Lack of low barrier shelters (e.g., shelters that accept pets) around the state. One stakeholder shared that there is a large, low-barrier shelter located in Elkhart County but noted that “because it has fewer barriers than other shelters, we can’t serve everyone who needs shelter.”
- A few stakeholders noted that their municipalities have implemented camping bans, as well as giving citations to unhoused people for camping, which acts as an additional barrier to finding housing.

Another stakeholder shared that rural areas often lack homeless services, which “gives the perception that rural places don’t have homelessness, but that’s not true. Homelessness isn’t visible because people are ‘doubled up.’”

One stakeholder noted that “a lot of transitional housing was lost” when HUD shifted its policy focus and resources. They added that while transitional housing serves a critical need, they’ve found that survivors with children build up a community and then have to leave after two years, which is really tough on the families.

A couple stakeholders identified the preservation of affordable housing as a critical strategy to prevent homelessness. However, one stakeholder, who acquired three affordable housing preservation properties for seniors, shared that the rents were lower than they should have been and “the previous owner had to set up a fund to help people pay rent/subsidize tenants while they raised rents for necessary improvements.” They emphasized that rent increases “...have to be done in a thoughtful way so that you’re not displacing people from an affordable housing situation.”

Rental assistance. Stakeholders described the importance of the housing choice voucher program/rental assistance in ensuring that residents at risk of being homeless remain housed. In general, stakeholders articulated that the need for rental assistance far outpaces the availability of assistance. One stakeholder identified Indiana Emergency Rental Assistance (IERA) as “a significant program that has kept so many people housed.” Another stakeholder shared that they are only able to administer around 90% of the vouchers they have because the other 10% of households who need them can’t find an affordable place to live in the allotted amount of time they are given to look for a unit.

Some stakeholders expressed frustration around certain restrictions on who is able to receive a housing choice voucher. One stakeholder shared that someone who is “couch surfing” does not qualify because they have not “experienced homelessness in a shelter,” which this stakeholder described as completely counter to the spirit of the program.

A couple of stakeholders expressed some frustration with the policies put in place by townships. One stakeholder felt that trustees could be more actively dispersing funds to residents in need, while another stakeholder shared that in their town, “trustees only assist [residents in need] when they’re two months behind rent, at which point they are already on their way to being homeless.”

Another stakeholder shared that preserving affordable housing units and providing housing choice vouchers work “hand in hand,” noting that “if we don’t have the funds to keep up with [building] improvements, people will get displaced from their units and then need a housing choice voucher to find another affordable place to live.”

Housing development barriers. Stakeholders described several barriers to housing development in their jurisdictions. A summary of feedback received is below.

- **Land.** One stakeholder shared that in northwest Indiana, “available land in landlocked communities is minimal, which means that people start looking at agricultural land to develop [which we don’t want].”
- **Infrastructure.** Stakeholders described infrastructure costs as a general impediment to housing development. One stakeholder shared that many rural areas are reluctant to consider upgrading existing infrastructure (e.g., updating lift station (sewer design) requirements), too.
- **Zoning.** Several stakeholders shared that current zoning regulations in their communities are an impediment to housing development, specifically, the limitations on density. One stakeholder added that “we need to have a better array of housing options.”
- **Education.** Related to zoning, stakeholders felt the lack of education around the benefits of higher density was contributing to the local regulations prohibiting it. Stakeholders felt there needed to be educational opportunities, for both elected officials and residents of smaller, rural areas, about the value that affordable housing can bring to communities.

- **Parking requirements.** One stakeholder who works in Elkhart County shared that for a current affordable housing project they're working on, parking requirements are estimated to add an additional \$300,000 to their project costs. They added that these types of requirements are "a massive deterrent to building affordable housing."
- **Permitting times.** One stakeholder noted that long permitting processes is impacting the financing they are able to secure for their affordable housing development.
- **Community opposition.** One stakeholder shared that in their community, there are a lot of NIMBYs who don't want to see any change, "even if it will benefit them."

Other regulatory barriers identified by stakeholders included high impact fees, design requirements, and state preemption, which impacts local municipalities from protecting renters.

Public facilities. Stakeholders identified several public facilities that were needed in their communities, including:

- **Grocery stores,** particularly in rural areas. One stakeholder added that, "there are a lot of areas where Dollar General stores are the only stores you can buy food within a fifty-mile radius. But they don't carry fresh fruit or vegetables." A couple stakeholders voiced a desire to see CDBG funds be used to build facilities that support farmers' markets.
- **Community centers.** In general, stakeholders wanted to see more community centers in their local areas. One stakeholder shared they've implemented a sliding fee scale to ensure low-income residents can utilize the community center and its amenities.
- **Youth-oriented facilities.** One stakeholder in Howard County shared they are looking into building an eSports facility to support the community around video games.

One stakeholder from Madison County shared that a lot of the public facilities available in the county (e.g., community center, bowling alley, skating rink) are in areas of the county with high rates of crime, which makes them underutilized. Compounding this issue is the lack of public transportation/limited service to get adults who don't have cars and/or kids to these facilities. Several stakeholders advocated for strengthening connections between public transit and public events/facilities.

Public infrastructure. Specific infrastructure needs highlighted by stakeholders included:

- **Sidewalks.** Several stakeholders identified the need for improved and/or new sidewalks in their communities. One stakeholder felt that "sidewalks are aging and deteriorating across the state...people living with disabilities need accessible, functioning sidewalks. Another stakeholder shared that, "one of my clients went viral on TikTok because he had to take his wheelchair on the highway in the snow to get to the grocery store because there were no sidewalks."

- **Water infrastructure.** Several stakeholders highlighted their communities' water infrastructure challenges. One stakeholder shared that in the northern rural part of Hamilton County, "water infrastructure is a big issue. We can't even propose a project in Cicero because they're 'tapped out' of water." Other counties needing water infrastructure for future development that stakeholders identified included Crawford, Harrison, and Washington counties. Another stakeholder shared that the Town of New Salisbury isn't allowing more development until they can increase their sewer system.

As previously highlighted, stakeholders emphasized that rural areas have the greatest infrastructure improvement needs. High costs were identified as the primary barrier, while stakeholders also highlighted a need for technical assistance to assist rural communities using CDBG for infrastructure development.

Public/nonprofit services. Stakeholders highlighted a variety of services that are needed to better serve low-income and special needs populations in their communities. Specific services cited by stakeholders are summarized below.

- **Service hubs.** Several stakeholders emphasized the importance of co-locating services (e.g., housing navigation, social security, food assistance, medical appointments, job training, etc.) since many low-income people don't have a car and public transportation might not exist/is difficult to use or expensive/doesn't get people where they need to go.
 - One stakeholder noted that the United Way in South Bend created a community center that provides parks and recreation opportunities alongside services. Another stakeholder noted that in Indianapolis, seniors can take advantage of \$1 Lyft rides to access services.

Several stakeholders identified the need for a comprehensive list of providers and resources throughout the state serving special needs populations. One stakeholder emphasized the need for someone to be in charge of ensuring the list is up to date (they added that Indiana has a web directory of housing resources but disclaimers that say it's not reliable). Another stakeholder said it would be great to have this type of list to refer a client to when the organization doesn't have capacity to serve them.

- **Public transportation.** Many stakeholders identified the need for more public transportation options in their local communities, particularly in rural areas. For those with public transportation in their communities, there was a general desire to see them become more reliable, consistent, and robust. Several stakeholders identified that particularly in rural areas, older adults can't get to their medical appointments, children aren't able to get to community centers, and employees can't get to work.

One stakeholder articulated that the public transportation system in their community "...[doesn't connect] residential areas with services, employment, grocery stores etc." Another stakeholder shared that, "on paper, transportation gets people to the services they need, but it's not sufficient. They could triple buses, number of stops, and it wouldn't be enough to meet rural needs. Another stakeholder articulated that for

public transportation systems that do exist, “most of their services are limited on the weekends.”

Other specific feedback is summarized below:

- One stakeholder shared that outside of public transit systems run through East Chicago, as well as Gary’s own public transit system, there are no other public transit options in northwest Indiana outside of the South Shoreline.
 - One stakeholder shared that families will share cars with other people in their apartment complexes because there are no public transit options available.
 - Several stakeholders advocated for more resources to be put toward paratransit systems that would allow for a greater volume of people to be served (e.g., staff increases) and for the system to operate on the weekends and weekdays after 5pm.
 - Several stakeholders emphasized how critical it is to plan around infrastructure needed to support the transportation system, including housing, specifically affordable housing and other services and amenities.
- **Mental health services.** Stakeholders identified a critical need for more mental health services throughout the state. One stakeholder advocated for more availability of telehealth mental health services for special needs populations, particularly in rural areas. Another stakeholder noted that for justice-involved residents, in addition to an overall lack of clinicians, many clinicians are unwilling to work with this population because they are unable to get reimbursed for their services.
 - **Affordable and available childcare.** Stakeholders described a lack of affordable and available childcare options throughout the state, particularly for parents who work “second shift” jobs or on non-traditional schedule. One stakeholder shared that in rural areas, “there are a lack of providers and certified childcare facilities. Some schools have even dropped Pre-K classes because of the lack of funding...[rural areas] are getting left in the dust. A handful of stakeholders added that many people need to get a second or third job to afford childcare costs. One stakeholder shared that their municipality just completed a feasibility study on their only childcare center, which found that “it’s less expensive to just build another building than rehabilitate this current one, but we would still have to raise tuition on parents to cover some costs. We don’t have a lot of options.”
 - **Health care services.** Health care services were identified as significant needs throughout the state, particularly in rural areas. Currently, many older residents living in rural areas need transportation to get to their medical appointments, which also serves as a challenge.

- **Food access.** Stakeholders identified a need for better food access for low- to moderate-income residents. One stakeholder shared that many residents live in “food swamps” where their only access to food is fast food. Another stakeholder shared that their community applied for a LIHTC development and one of the point categories was access to fresh produce within two miles. They added that, “the project was 0.2 miles too far so we lost points...I feel there needs to be different rules for rural communities. We even had a farmer’s market near the development but that did not count.”
- **Tenant rights/renter support.** Several stakeholders identified the need for more education around tenant rights, particularly for youth populations. One stakeholder suggested utilizing social media to inform younger residents of their rights, adding that “Indiana has the 8th highest eviction rate in the U.S.” Another stakeholder shared that one of their client’s landlords “charged an astronomical amount of money for an emotional support animal...we need to make sure that landlords are aware of fair housing laws and tenant rights, too.” They added that far too many landlords are not being held accountable for their actions and that IHCD should play a bigger role on this issue.
- **Broadband access**
- **Case management**

Economic development. Several stakeholders connected housing affordability with economic development outcomes, as one stakeholder articulated that “ensuring the community is safely and stably housed is an economic development issue.”

Several stakeholders described a mismatch between available housing and anticipated jobs, with one stakeholder sharing that “there is not enough housing for all of the jobs that the State is looking to bring in the next five years.” Another stakeholder shared that big corporations are looking to bring thousands of jobs to Indiana in the near future, but “there’s nowhere for them to live.”

Stakeholders described how many employees are forced to commute long distances to and from their job and home. One stakeholder articulated that “there are a lot of employers with sizable worksheds that are coming from an hour to an hour and a half to work from their home.” Many stakeholders highlighted that this is not sustainable and if investments aren’t made in housing, it will have negative effects on attracting and retaining employees. Some employers have tried to incentivize their employees to live closer to work. Examples provided by stakeholders included a bonus program/paying for mileage for living within 20-25 minutes of work, buying gas cards for employees who carpool, and purchasing PPE for their employees if they live within a certain distance of their employment. Stakeholders acknowledged this is even more difficult in rural areas.

One stakeholder suggested building out infrastructure to assist corporations and businesses who want to help contribute to developing housing for their workforce, with

this stakeholder saying “there is a gap between wanting to build housing and knowing how to make it happen.”

A few stakeholders spoke of the importance of historic preservation. They advocated for strategies that married historic preservation with affordable housing efforts, with one stakeholder emphasizing that, “these old buildings in our communities are assets...we need to embrace our roots and find projects that produce multiple outcomes.” Successful projects cited by stakeholders include a historic greyhound bus stop renovated into a restaurant in Evansville and an old cotton mill redeveloped into affordable housing.

In general, stakeholders spoke of the importance of strategies/efforts that strengthen independent small businesses and keeping local dollars in local communities. A few other stakeholders advocated for “creative thinking about new jobs,” such as embracing and investing in infrastructure that supports jobs in arts and culture. One stakeholder noted that many current employees working in agriculture, farming, and food production are near retirement and the State needs to focus resources on training the “younger generation” to take these jobs on.

Workforce development and upskilling. In general, stakeholders described a need for “upskilling the state’s workforce.” One stakeholder shared that there are great workforce development programs throughout the state, however, “they see all around the state that skills are not translating into the workforce.” They added that trades such as plumbing, electrical, and woodworking are fading away and the state is “losing these skill sets.” Suggestions on how to maintain these skills included:

- Provide opportunities that allow for students to train and learn skills while also paying them. Provide transportation to these opportunities if not located at schools.
- Set up technical education programs at local schools.
- More investment in regional and local programs (e.g., Prosser) that support building out the trades’ workforce.
- More skills development/workforce support for special needs populations (e.g., people exiting the prison system, people experiencing homelessness)

Cross-sector collaboration. Stakeholders described a need to build out systems that allow for the public, private, and nonprofit sectors to come together to discuss economic development opportunities. One stakeholder described an effort that brought together adult education stakeholders, chambers of commerce and economic development organizations, and a private company to discuss employment opportunities for special needs populations. This stakeholder added that, “all of the entities around the table learned about resources available to them that they didn’t know about before.” This stakeholder emphasized that making these connections, particularly in rural areas, is important to build up a workforce and support local economies.

What would you change about OCRA's and IHCD's current programs or funding allocations to make them more effective or to better meet needs?

Stakeholders provided feedback to be shared with OCRA and IHCD on how to make their current programs more effective.

- A few stakeholders wanted to see some CDBG resources allocated to IHCD (e.g., for land purchase for affordable housing).
- A few stakeholders described funding being given as direct loans as “problematic” for non-profits, with one stakeholder sharing that “nonprofits can’t use this funding to grow their asset base...it’s not building the nonprofit’s fundraising.” Another stakeholder felt that federal funds structured as loans with interest defeats the goal of trying to produce housing.
- One stakeholder shared that expanded access to Section 8 would be very helpful for keeping current residents housed in preservation projects where you need to raise rent slightly to provide quality housing. Several stakeholders recommended increased provision of Section 8, both HCV and PBV, but observed that agencies administering vouchers don’t have capacity to administer their current portfolios, much less expanded portfolios (due to funding constraints, insufficient staff capacity etc.). Rural areas tend to be underserved by Section 8, and participants attribute this partially to limited capacity of voucher administrators.
- Several stakeholders felt that in awarding funds for affordable projects, it’s important for the State to consider that some rural communities lack resources that richer rural communities have. Currently, richer rural communities tend to receive higher scores, but needs are arguably higher in the other communities that lack resources and get lower scores. This leaves rural areas underserved.
- One stakeholder wanted to see IHCD provide a bit more flexibility in their funding decisions, specifically allowing for new infill construction in existing historic districts to be an eligible project for funding.
- Several stakeholders shared that project funding requests were denied by IHCD because the costs of the projects were too high.
- One stakeholder added that IHCD has a subsidy limitation for each unit on new construction or rehabilitation projects and suggested that with increasing costs, “they should consider increasing those limits so that viable projects can be submitted and funded.”
- One stakeholder shared that in the past, “there have been some barriers in utilizing CDBG for rehab projects, as well as challenges in getting contractors to work on these projects.” Another stakeholder shared that they get a lot of CDBG rehab requests for window improvements and electrical support and would like to see “qualifications widened for this program to be able to help more people.”

- Several stakeholders advocated for more education/technical assistance offered by IHCD and OCRA for how smaller communities can be more competitive for funding opportunities, as well as more equipped for administration and meeting HUD funding-related requirements.
- One stakeholder noted that they would like IHCD to once again allow its funding to be used for emergency shelters.
- One stakeholder wanted to see additional set asides for minimum accessibility requirements, noting that “allowing a few extra points [in the QAP] in awarding developments can really matter.” They added that it’s much more cost effective to make new developments accessible in construction than to make modifications later.
- One stakeholder wanted to see OCRA and IHCD allow for joint applications for funding with developers or nonprofits.
- One stakeholder shared feedback on OCRA’s community facilities fund, sharing that, “I know it can be used for childcare centers but there are barriers to using [this funding] , including the requirement that 50% of those being served must be low- to moderate-income families. But a childcare center’s model can’t really work like that...they need to serve families in need in general.”
- Another stakeholder shared that, “I’m a huge fan of OCRA’s Main Street program. However, OCRA and the State of Indiana do not support this program to the extent it needs to.” They added that because this program creates a lot of local jobs, they wanted to see more state staff dedicated to this program.
- One stakeholder shared that their community has a negative opinion of income requirements related to who is eligible to benefit from funding, particularly for people who are just above the threshold to qualify for assistance.

Final thoughts. Stakeholders shared several solutions and ideas to address the housing and service needs of low-income and special needs populations in their communities and throughout the state. A summary is provided below.

- **More rental assistance and housing support.** One stakeholder wanted to see CDBG resources be put toward further providing more voucher subsidies, adding that “the voucher program has a substantial waitlist.” Another stakeholder articulated that, “[the state of Indiana] has incredible affordable housing developers...however, it costs more to produce a unit than the return they get. We’d like to see more programs to help them out.”
- **Focus on housing rehabilitation.** Several stakeholders shared that their communities don’t have the resources necessary for new construction, so rehabilitation funds are critical. Many stakeholders also described that there are a lot of underutilized buildings in their communities that could benefit from housing rehabilitation funding, emphasizing the need for more state and federal resources “to turn these blighted properties into homes for residents.”

- **More local flexibility to address contextual challenges.** Many stakeholders advocated for localities to have more policy flexibility from the State to implement more timely, local housing solutions.
- **More housing for housing insecure populations.** In general, stakeholders wanted to see more PSH, transitional housing, and rapid rehousing available throughout the state. Another stakeholder identified more education and service provision for those at risk of homelessness.
- **Specialized housing needed for special needs populations.** One stakeholder shared that it has been extremely challenging to find independent housing options that meet the needs of their child living with a disability. They cited Luna Azul, a for-sale residential community located in Arizona developed for adults living with disabilities as an example of what they would like to see. The community provides an inclusive and nurturing environment within a small, gated neighborhood managed by an experienced on-site director. This stakeholder advocated for more housing developments to be built with special needs populations in mind. Another stakeholder advocated for more project-based vouchers to be set aside for special needs populations. One stakeholder wanted to see LIHTC developments have set aside units for survivors of domestic violence.
- **Organizational housing navigator.** One stakeholder shared that, “it would be great to have a housing navigator from an organizational perspective...they would be able to answer questions about how to best serve our communities, what funding sources are available, etc. A lot of communities don’t where to start.”
- **Collaboration.** Several stakeholders stressed the importance of facilitating more collaboration among the private, public, and non-profit sectors to address the state’s housing challenges. Stakeholders felt that OCRA and IHCD were well positioned to help facilitate connections among these sectors.
- **Streamlining processes.** Several stakeholders expressed frustration about how long it takes to develop a housing project. One stakeholder shared there was an effort to support pre-approved contractors through the HOME rehab program to make the process more efficient. They advocated for a targeted effort to get more contractors signed up for the pre-approved list.
- **More development throughout the state.** One stakeholder felt that new development was concentrated in pockets in the state and needs to be spread more equitably.
- **Building local government capacity.** One stakeholder shared that in rural areas, some government agencies aren’t aware of what’s available to them in terms of grants or are unfamiliar with requirements. This stakeholder advocated for more technical assistance to assist rural areas in finding funding opportunities and to be competitive

pursuing them. Several stakeholders wanted to see more information and guidance on housing and service opportunities made available by their local municipalities.

What do you hope this plan will address?

Stakeholders were asked to articulate what they hope this Consolidated Plan will address over the next five years. A summary of those responses are below.

More affordable housing opportunities

In general, stakeholders wanted to see increased housing opportunities and more state funding made available for affordable housing development. Stakeholders also wanted to see an increase in affordable, integrated, accessible housing for people living with disabilities, as well as an emphasis on providing housing for extremely low-income populations.

Quality of life improvements

As a result of the plan, stakeholders hoped that the quality of life improved for all Hoosiers. Additionally, stakeholders wanted to see long-term solutions implemented to reduce homelessness and in the short term, more public spaces made available for unhoused populations.

Economic development

Stakeholders wanted to see resources to support small business resilience, economic revitalization in rural areas, and a robust and strong entrepreneurial ecosystem throughout the state.

Nonprofit support

Stakeholders articulated a desire to see robust support for nonprofit affordable housing developers. One stakeholder noted that “with net operational income for nonprofits, they can provide true quality housing and can actually invest in the people living in the units.”

Funding

Several stakeholders wanted to see a more equitable distribution of funding, as well as more funding opportunities for rural communities.

Urgency

Several stakeholders hoped the plan convinced state leaders to act with more urgency around the state’s housing challenges.