



# Homelessness and Health Metrics Dashboard *2025 and Q1 2026*

May 20, 2026

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# What success looks like

Safe community for everyone who lives, works and visits here.

- Fewer people sleeping outside
- Year-round safety net system
- More crisis care
- More housing
- Partnerships, funding, and data

Mayor Suzanne LaFrance

JANUARY 31, 2025

## HOMELESSNESS AND HEALTH STRATEGY

The LaFrance Administration is committed to a comprehensive and coordinated strategy to address homelessness and related health and public safety issues.

With a public health approach that focuses on harm reduction and prevention, we can improve the health and safety of our entire community, including those experiencing homelessness, with immediate action and long-term solutions.

Our response is driven by our focus on public safety. People sleeping outside need safe alternatives. We need enforcement of laws that keep our community safe. Since July, we have abated 15 camps that pose a public safety risk. We've stood up over 330 beds of shelter across four sites this winter and opened warming centers in mid-December as another layer of safety. We are looking ahead to spring to increase housing options so fewer people return to sleeping outside.

By balancing abatement and enforcement with shelter and services, we are doing the work to create a visible reduction in unsheltered homelessness in our community.

### RESULTS

In three years, we will see:

- Fewer people camping
- More people in housing and connected to health services and supports
- Adequate year-round shelter
- Legal parking for vehicles and RVs
- Fewer outdoor deaths
- Innovative pilot projects, including use of modular structures for transitional living

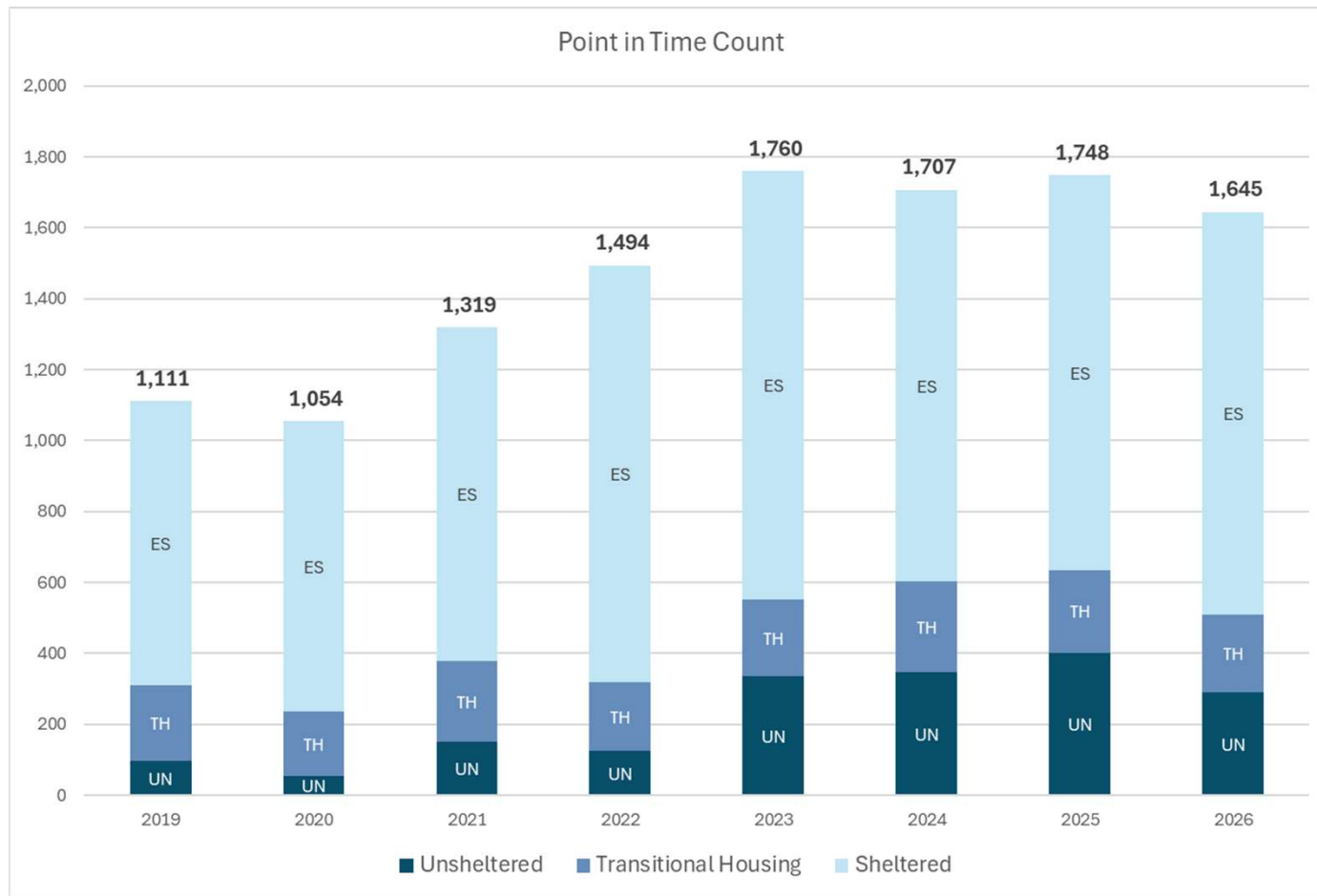
### GOALS

1. Significantly reduce unsheltered homelessness through low-barrier shelter and connections to housing.
2. Increase access to behavioral and physical health services.
3. Add new housing and increase access to existing housing.
4. Harness community partnerships, funding, and data to reduce systemic contributors to homelessness.



# How many people are unhoused?

## Point in Time Count, 2019-2025 + 2026 preliminary data

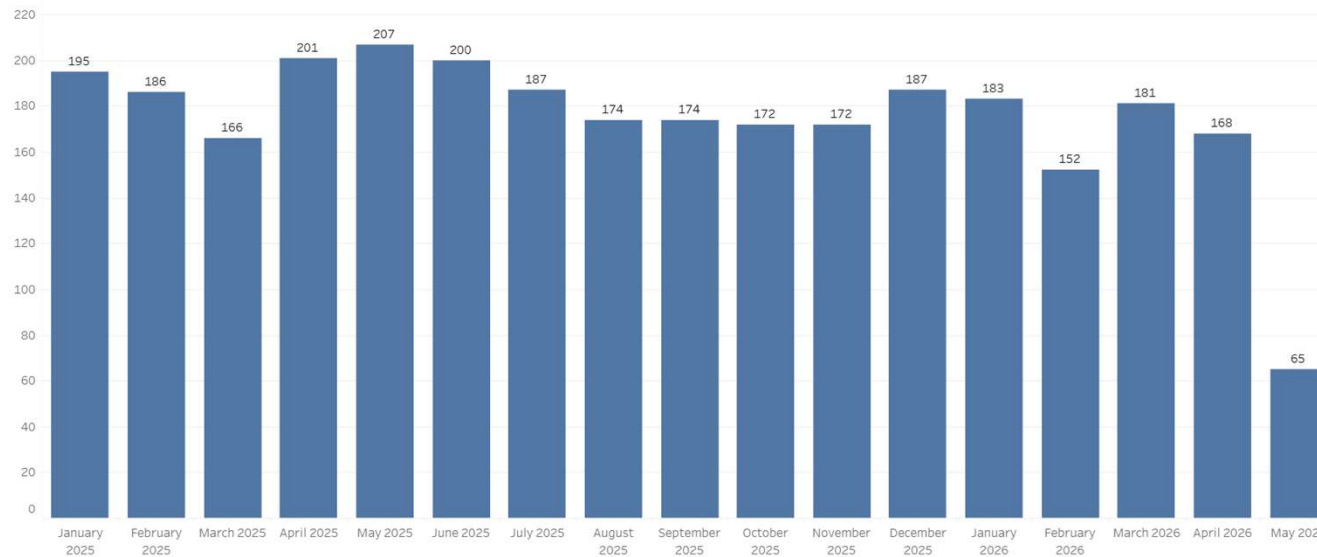


	Sheltered		Transitional Housing		Unsheltered		
	ES	TH	TH	UN	UN		
2019	802	212	97	1,111			
2020	819	180	55	1,054			
2021	941	226	152	1,319			
2022	1,175	194	125	1,494			
2023	1,209	216	335	1,760			
2024	1,105	256	346	1,707			
2025	1,113	233	402	1,748			
2026	1,137	217	291	1,645			

# How many people are in crisis?

## Opioid-related Incidents, 2025 and 2026 year-to-date

Opioid Related Incidents



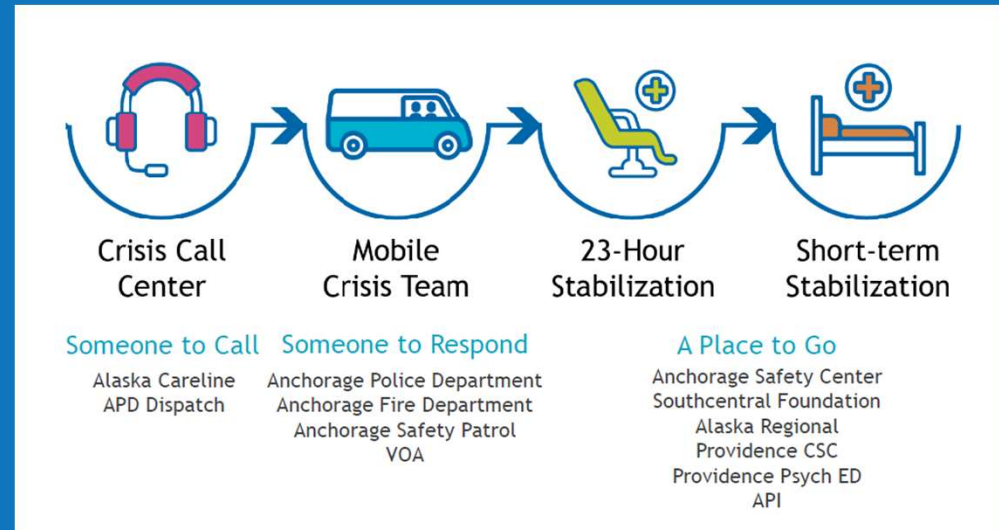
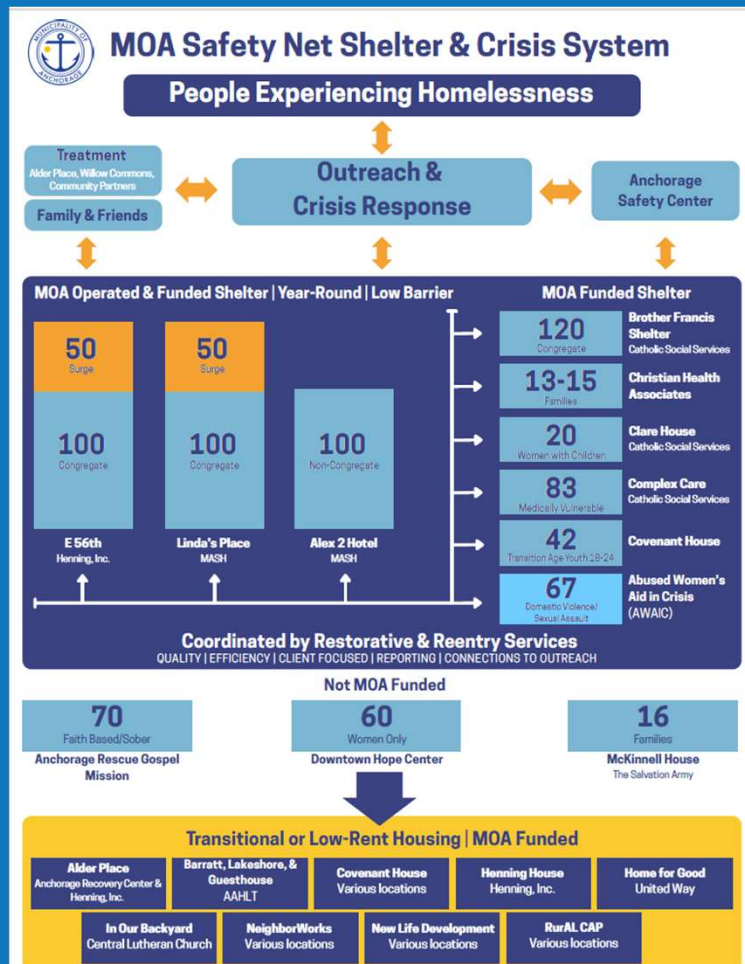
Criteria contains any of the following:

1. Medication administered contains Naloxone, Naloxone (Narcan).
2. Patient was administered Naloxone before arrival.
3. Patient alcohol drug use indicators contains drug paraphernalia at Scene or patient admits to drug use.
4. Primary or secondary impression of provider contains opioid abuse with withdrawal, polypharmacy overdose or opioid abuse.
5. Situation possible opioid related incident is marked yes.
6. Situation possible overdose is marked yes.

AFD reported **152 to 207** opioid-related incidents per month, about **5** per day

In Q1 2026, AHD distributed **442** Narcan kits in community locations

# How are we addressing this?



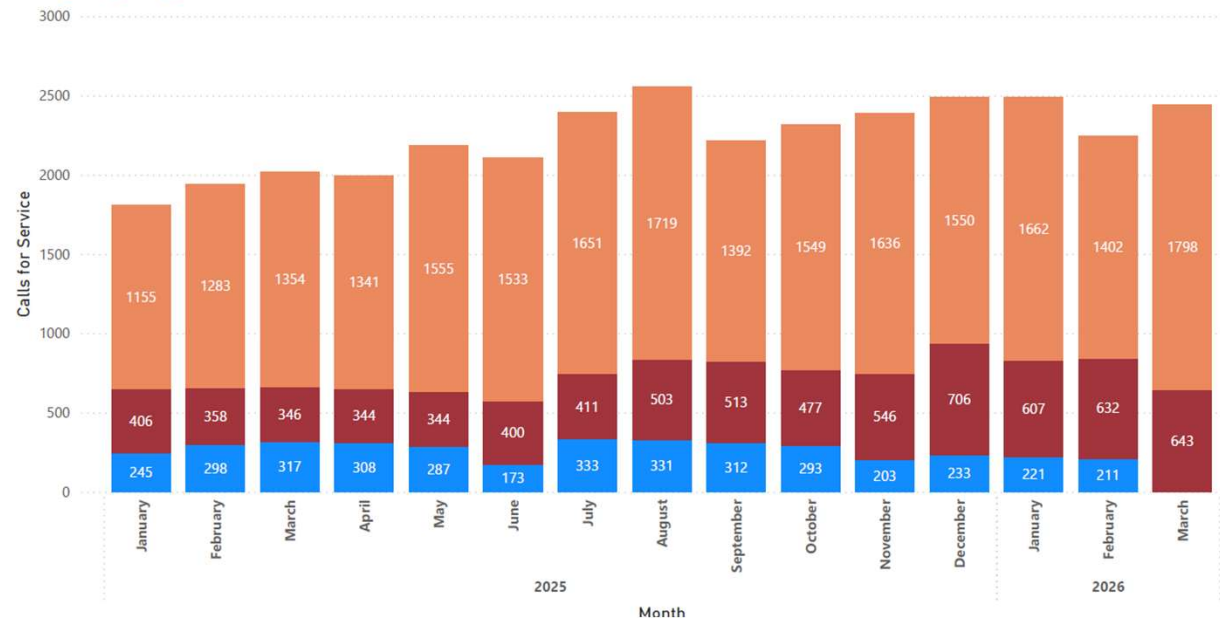
# Are we reaching people in crisis?

## Mobile Teams Calls for Service

**Definition:** Total number of mobile team responses during the time period. May include in person, telephonic, and outreach contacts.

Number of Calls for Service Per Month

team ● MIT ● MCT ● ASP



### SOMEONE TO RESPOND

Total Requests 2026 YTD

**7,176**

Total MIT Calls 2026 YTD

**432**

Total MCT Calls 2026 YTD

**1,882**

Total ASP Calls 2026 YTD

**4,862**

**Q1 2026:**  
HOPE team  
had **581**  
contacts

AHD Clinical  
Outreach  
team had  
**2,418**  
contacts

RRS had **1,269**  
contacts

# Are we reaching people in crisis?

## Mobile Teams Monthly Unique Individuals

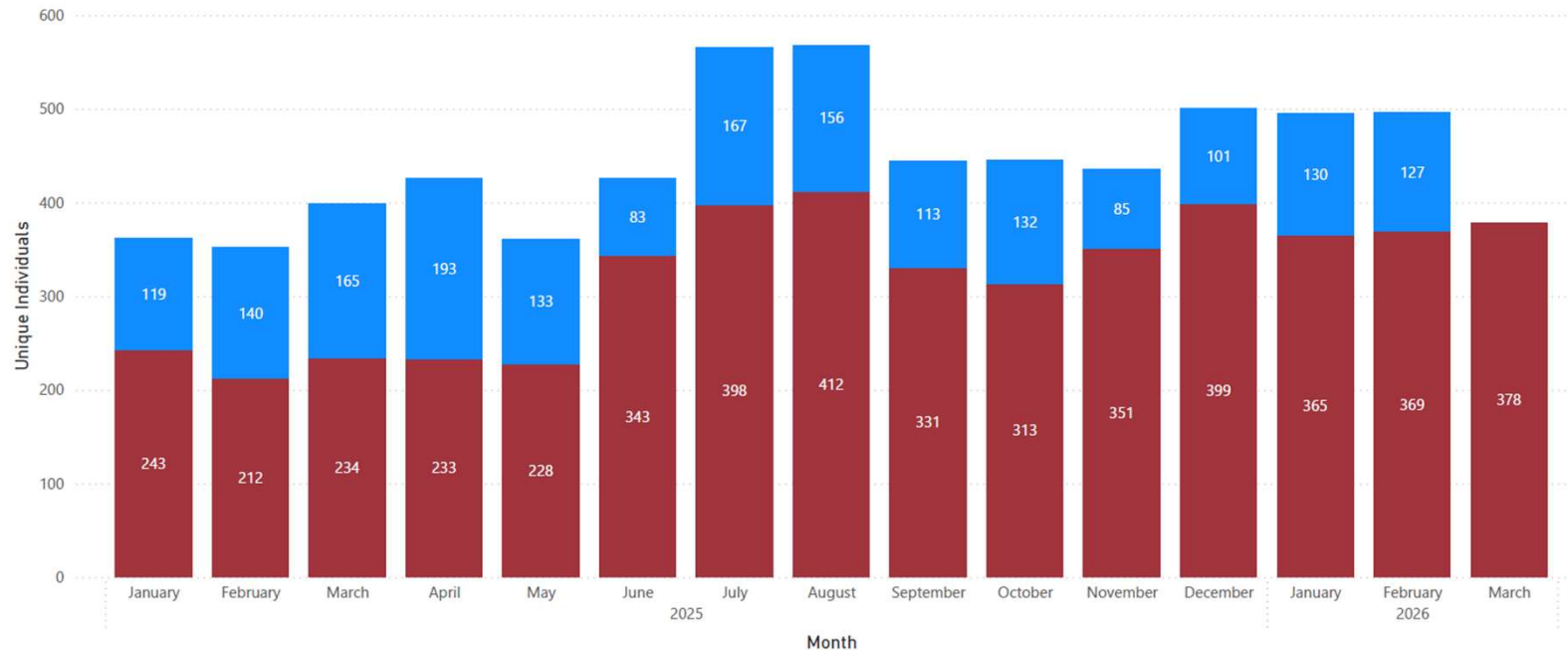
**Definition:** The total count of known unique individuals receiving mobile crisis services from the first to the last day of the month.



**SOMEONE TO RESPOND**

### Unique Individuals Per Month

team ● MCT ● MIT

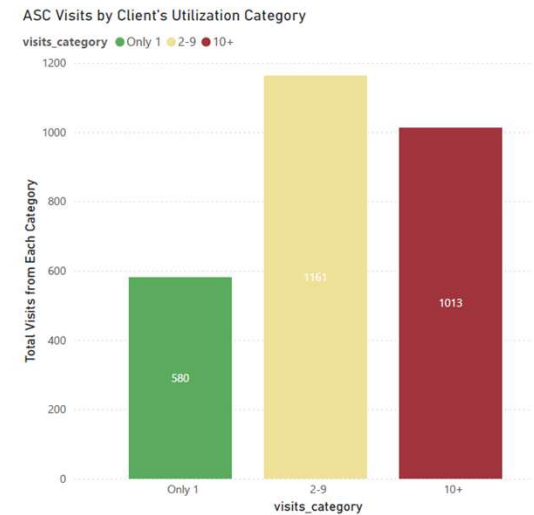
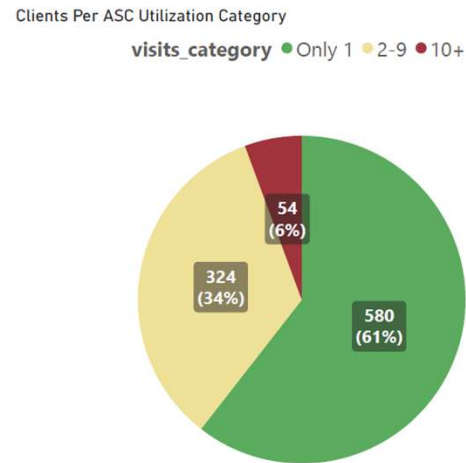


60-70% of MCT and MIT clients are housed.

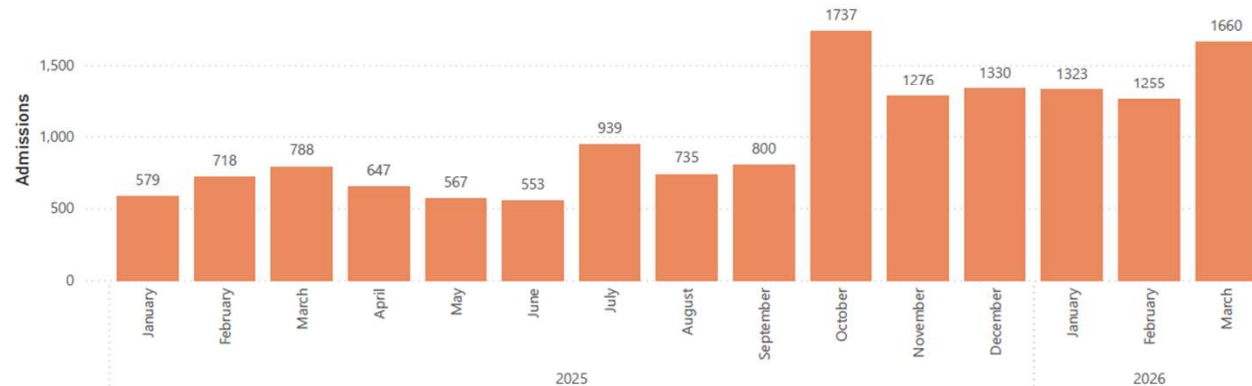
# Are we reaching people in crisis?

## Number of admissions to the Anchorage Safety Center and frequency of visits

- **61%** of Safety Center clients had 1 visit; **34%** had between 2-9 visits; **6%** had over 10 visits
- **54 individuals** accounted for 1,013 visits, an average of 19 visits per individual



Safety Center Admissions



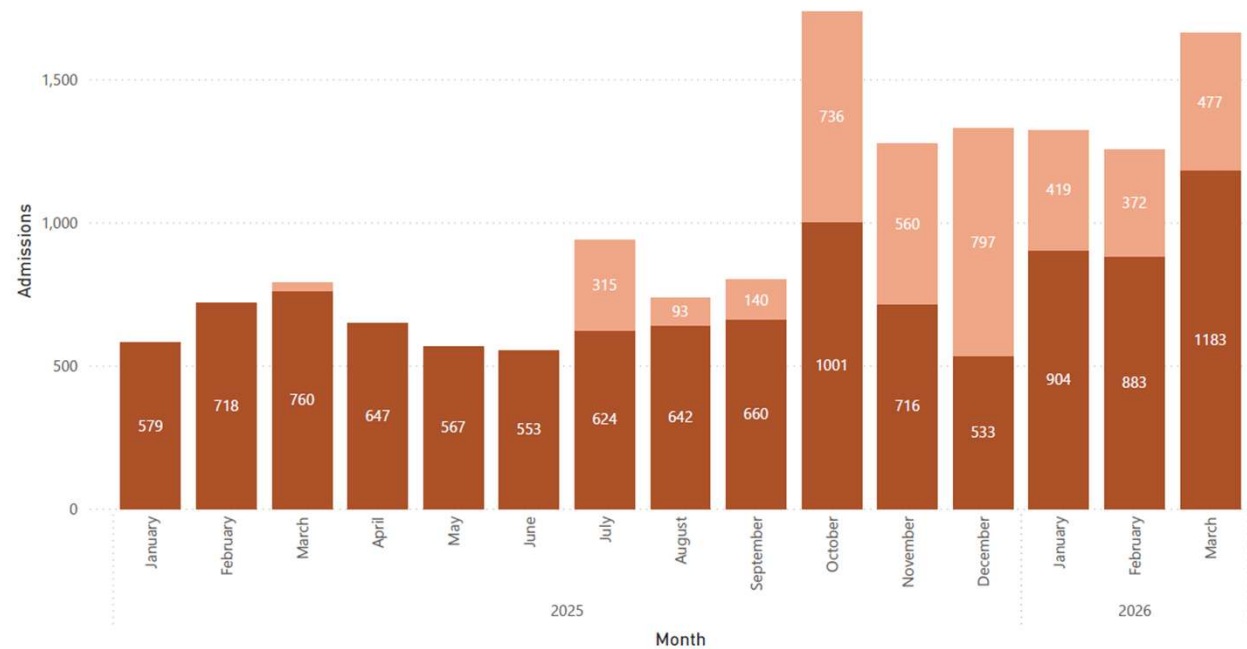
# Are we reaching people in crisis?

## Safety Center Admissions: Voluntary and Involuntary

**Definition:** The total count of admissions to the service/facility during the reporting period. This count is for all admissions, and may include duplicate for individuals within the reporting period.

Safety Center Total Admissions

metric ● # Involuntary ● Voluntary



## A PLACE TO GO

Total ASC Admissions - 2026 YTD

4,238

Total Involuntary ASC Admissions - 2026 YTD

2,970

Total Voluntary ASC Admissions - 2026 YTD

1,268

## Are we preventing people from becoming homeless?

- **1,357** clients in **839** households prevented from homelessness in **2025\***
  - **730** clients in **431** households prevented from homelessness in **Q1 2026**
- **211** people helped by AHD rental assistance in **Q1 2026**
- **11** Mobile Home Repairs (AHD) completed in **Q1 2026**
- **1,031** of the **1,397** people (73%) housed 2 years ago still housed in **2025**
  - **276** of the **386** people (71%) housed in this **quarter** 2 years ago still housed
- **2,401** people (57%) used shelter or transitional housing for the first time in **2025**
  - **552** people (39%) used shelter or transitional housing for the first time in **Q1 2026**

\*Note: This is the corrected total from the January 2026 presentation of these data.

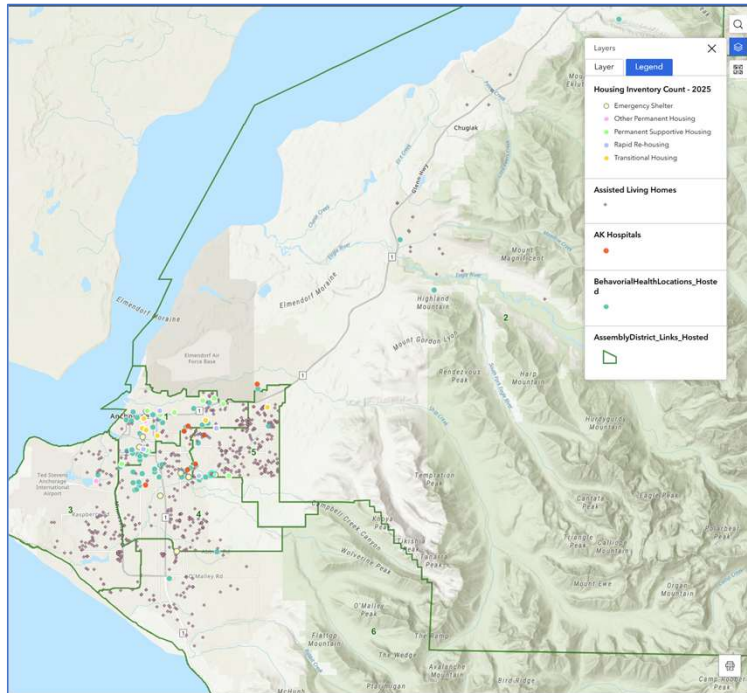
## Are we immediately connecting people with shelter, treatment, and housing?

- HOPE team coordinating **daily** huddles of Multi-Disciplinary Outreach Teams (AMDOT) with **40+** regular participants
- In **Q1 2026**:
  - HOPE team placed **18** individuals into shelter or housing and made **171** referrals to partners for care or services.
  - Community outreach had **146** contacts and helped **38** (26%) individuals enter shelter or housing
  - Good Neighbor Fund pilot project helped **130** people enter shelter or housing

## **Are we immediately connecting people with shelter, treatment, and housing? (Jan 1-April 22, 2026)**

- **AFD CORE (Community, Outreach, Referral, and Education) Team**
  - Community paramedic + Mental health clinician, T– F 8a-6p
  - Priority:
    - Frequent users of EMS
    - People with opioid use disorder seeking treatment and recovery
    - Vulnerable people needing help with basic needs and healthcare access
  - Referrals for all CORE functions:
    - 285 total contacts; 123 referrals; 102 unique cases completed
    - 66 new connections to resources, 28 of those are receiving services
    - 30% unhoused; most others at high risk of losing housing
  - Opioid use disorder (since March 1):
    - 8 Buprenorphine admins; 6 connected to treatment (3 of these unhoused); 5 still actively in treatment

# Are we adding treatment and supportive housing?



**Community Care map:** Emergency shelters, hospitals, supportive housing, assisted living facilities, behavioral health treatment, AHD - Community Care

**CDBG Property Acquisition grant:** True North Recovery for Launchpad, community engagement in process

**Supportive Housing RFP:** \$1.35M awards to Assembly in June

**Willow COMMONS**  
Providing transitional living to people participating in substance use treatment and who are unhoused.

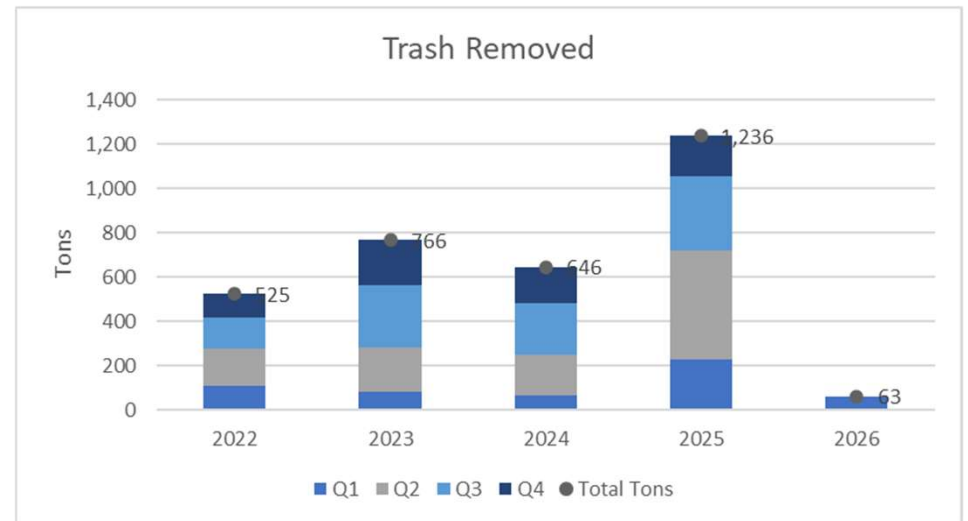
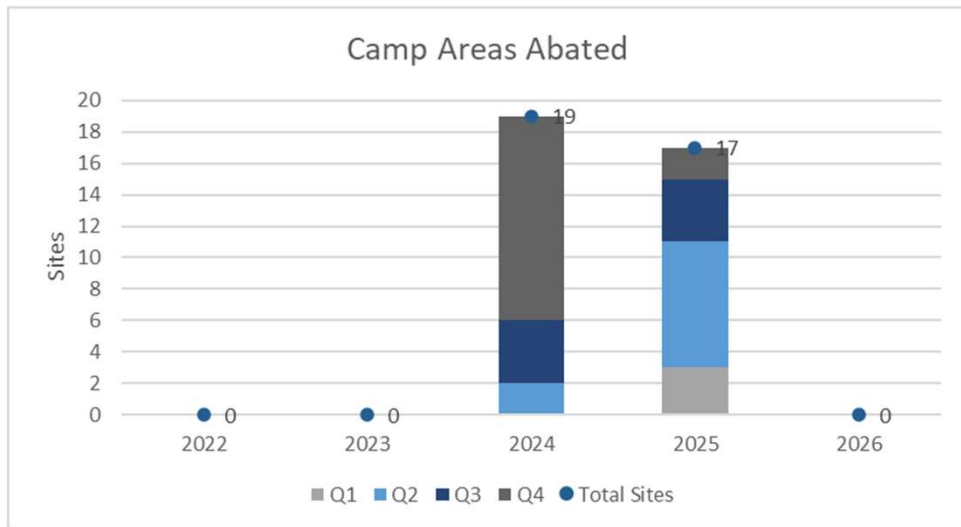
**GETTING STARTED**

- Call 907-560-5550**  
Your journey to recovery starts with a call to an intake coordinator or clinician who will discuss your treatment goals. There are no written applications.
- Assessment**  
Assessments are done by the Anchorage Recovery Center to determine the level of care needed.
- Admission**  
Admission is scheduled and occurs as soon as a bed is available.

Anchorage Recovery Center partners with Alaska Medicaid, various private insurance providers, and offers self-pay options.

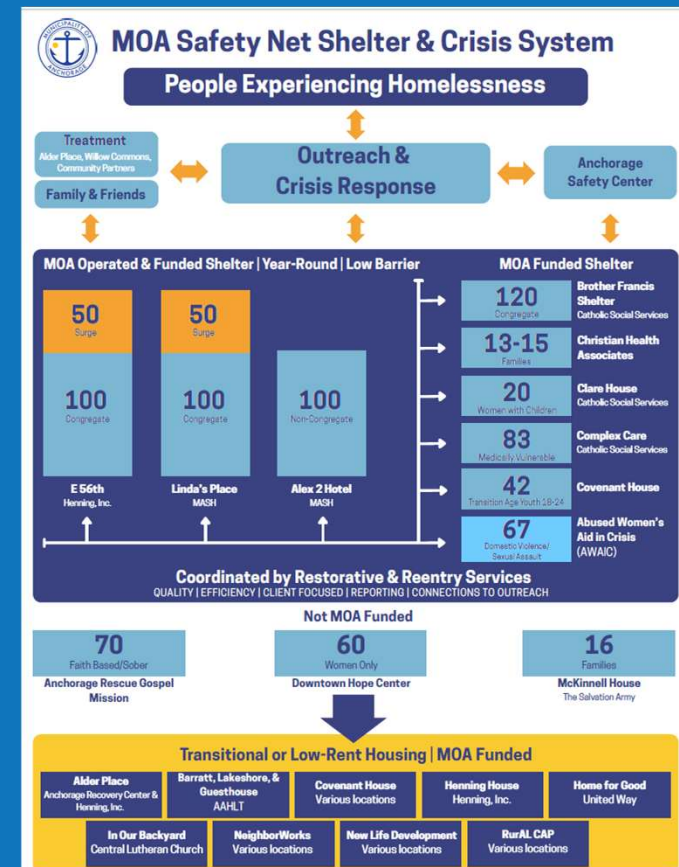
**Willow Commons:** 32-unit transitional living + substance use disorder treatment, open and full  
**Alder Place:** Outpatient treatment under construction, opening fall 2026

# Are we cleaning camps and making public spaces safe?



# Are we providing shelter and spaces to connect with resources?

- **Year-round: 300 beds**
  - 100 each at E. 56<sup>th</sup>, Linda's Place, Alex Hotel
- **Nov 2025 – April 2026: 450 beds**
  - MOA-operated emergency shelter
    - 300 year-round
    - 100 surge at E. 56<sup>th</sup>
    - 50 surge at Linda's Place
- **Dec 29, 2025 – Jan 15; Feb 27 – Mar 27, 2026**
  - 25 Safety Center overflow, night-only



# Are we providing shelter and connections to resources?

## Number of people served in Single adult and Family Shelters, Q1 2026

Report Dates: 1/1/2026 - 3/31/2026					
ALL Combined		FAMILY SHELTERS		SINGLES	
1. Total Number of Persons Served	2704	Total	428	1. Total Number of Persons Served	1653
		Number of Adults (age 18 or over)	162		
		Number of Children (under age 18)	247		
		Number of Persons with Unknown Age	19		

### Q1 2026:

- **2,704** unique clients served in emergency shelters
- Individuals had a median length of shelter stay between **8 and 50 days**; families, between **30 and 41 days**
- Shelters serving individuals **were 95% occupied**; those serving families were **87% occupied**
- MOA shelter providers reported **85** turnaways over the weekend in early May; method for de-duplicating turnaways not yet in place; bed turnover has slowed; we cannot currently meet demand for shelter
- Inadequate community beds for those who qualify for assisted living care and have General Relief as a payment source

# Are we providing shelter and connections to resources?

Percent of clients engaged in case management, with disabling conditions, and exits from shelter, Q1 2026

MOA Operated and Funded Shelter	
<b>E 56th Ave (Congregate)</b>	Quarter 1
Number of Admissions	713
Case Management Participation	468
	<b>66%</b>
<b>Linda's Place (Congregate)</b>	Quarter 1
Number of Admissions	863
Case Management Participation	120
	<b>14%</b>
<b>Alex 2 (Non-Congregate)</b>	Quarter 1
Number of Admissions	425
Case Management Participation	65
	<b>15%</b>
MOA Funded Shelter	
<b>Christian Health Associates - Family Shelter</b>	Quarter 1
Number of Families Served	60
Case Management Participation (Families)	42
	<b>70%</b>
<b>Covenant House</b>	Quarter 1
Number of Clients Served	115
Case Management Participation	75
	<b>65%</b>

## Where did people go from any emergency shelter?

- **42%** Unknown or other
- **24%** Other homeless
- **13%** Transitional: friends/family, hotel, etc.
- **12%** Permanent housing
- **4%** Emergency shelter
- **5%** Institutional care: foster care, hospital, jail, long-term care, treatment, etc.

## How many shelter clients report disabling conditions?

- **34%** None
- **56%** One or more disabling conditions
  - **25%** 3+ disabling conditions
- **8%** Unknown

# What did we learn last winter about emergency shelter?

## What went well?

- Year-round shelter!
- Voluntary admits at Safety Center reduces intoxication
- Team effort! Coordination among shelters and emergency responders
- Earlier curfew
- Case management and behavioral health at shelter
- Immediate access to detox and treatment

## What were challenges?

- So cold! Fingers, toes, feet injuries
- Not enough shelter or night-only beds
- Not enough assisted living or PCA
- Transportation nights and weekends
- Hospital discharges
- Add Gospel Rescue and Downtown HOPE to coordination

## How much would it cost for enough shelter to meet demand?

<i>Service + Operator</i>	Number of Months	Number of Add'l beds	Add'l 2026 Budget
<b>Safety Net Coordinated Shelter</b>			
E. 56th Avenue Congregate shelter:	7	100	\$ 1,816,073
Linda's Place Congregate shelter: MASH	2	50	\$ 334,800
Non-congregate shelter: MASH	2	20	\$ 155,645
Night-only shelter	1.5	30	\$ 139,500
<b>SUBTOTAL: Safety Net Coordinated</b>		<b>200</b>	<b>\$ 2,446,018</b>

- +100 year-round E. 56<sup>th</sup>
  - +50 Nov-Dec Linda's Place
  - +20 Nov-Dec Alex
  - +30 Nov -Dec Night-only
- Additional \$2.45M for 2026

# What did we learn last winter about Cold-related Injuries?

Alert Levels for Prevention of Cold-related Injuries (CRI) among Persons Experiencing Homelessness (PEH) in Anchorage							
Anchorage Health Department							
Timeframe:	April 2023-March 2026						
Total number of weeks:	156						
Risk Level due to Outdoor Temperature and Wind Chill	# of Weeks	# of Cold-Related Injuries among PEH	Mean CRI per week	% of total weeks	est # of weeks per year	est # of Months per year	Recommended Action
<b>Level 3</b>	40	709	18	26%	13	3	Access to 24/7 shelter for all, increased outreach
<b>Level 2</b>	14	161	12	9%	5	1.2	Access to overnight shelter for all, increased outreach
<b>Level 1</b>	43	209	5	28%	14	3.2	Access to cold-weather gear, increased outreach
<b>Level 0</b>	59	124	2	38%	20	4.6	No action needed, continue to monitor
Definitions							
<b>Level 3</b>	Temp < 10 °F OR Wind-chill < 0 °F						
<b>Level 2</b>	Temp 10-< 20 °F OR Wind-chill 0-< 10 °F						
<b>Level 1</b>	Temp 20-< 30 °F OR Wind-chill 10-< 30 °F						
<b>Level 0 — Baseline</b>	Temp ≥ 30 °F AND Wind-chill ≥ 30 °F						

- AHD analysis of cold-related injury among people experiencing homelessness from April 2023 to March 2026
- Level 2 and 3 conditions exist approximately 4.2 months per year
- Recommendation during these conditions is shelter for all + outreach

# Are we making the pie bigger?

## Who is helping address homelessness in Anchorage?

2026 Mayor's Community Safety Budget				
	GG	ATAX	Other	TOTAL
<b>Outreach + Crisis Response: Safe Streets, Parks, Neighborhoods</b>	\$ -	\$ 2,799,592	\$ 175,000	\$ 2,974,592
APD: HOPE Multi-Disp Outreach Team/3RNC		\$ 500,000		
APD: Program Operations		\$ 798,206		
Muni Attorney: Program Operations		\$ 292,195		
Parks: Healthy Spaces Team		\$ 859,191		
AHD: ACEH Outreach + Navigation		\$ 350,000		
AFD: MCT + CORE Team			\$ 175,000	
<b>Prevent + Divert from Homelessness</b>	\$ 165,000	\$ 2,248,699	\$ 167,000	\$ 2,580,699
AHD: Eviction Prevention, ADRC			\$ 167,000	
AHD: Child Abuse and Neglect Prevention		\$ 1,500,000		
AHD: DV/SA Core Services	\$ 165,000	\$ 675,000		
AHD: Program Operations		\$ 73,699		
<b>Low-barrier, Emergency Shelter</b>	\$ 9,067,458	\$ 10,104,488	\$ 363,440	\$ 19,535,386
AHD: Program Operations	\$ 370,589	\$ 721,008		
AHD: Shelter Transportation			\$ 213,440	
AHD: MOA-Operated Low-Barrier Shelter	\$ 8,696,869			
AHD: MOA-Funded Low-Barrier Shelter		\$ 9,383,480	\$ 150,000	
<b>More Housing!</b>	\$ -	\$ -	\$ 4,792,325	\$ 4,792,325
AHD: Low-Income Housing Development			\$ 1,450,000	
AHD: Housing exits from shelter			\$ 550,000	
AHD: Microunits for Recovery Residences			\$ 2,100,000	
AHD: Housing Rehabilitation Fund			\$ 692,325	
<b>Data: Monitor and Share Results</b>	\$ -	\$ -	\$ 100,729	\$ 100,729
AHD: HMIS Data System Support			\$ 100,729	
<b>TOTAL</b>	\$ 9,232,458	\$ 15,152,779	\$ 5,598,494	\$ 29,983,731

**2026 Community Safety Budget: 80% MOA, 20% Other Sources**

Are we making the pie bigger?

Who is helping address homelessness in Anchorage?

## Good Neighbor Fund

- Established at Alaska Community Foundation
- Steering Committee formed, MOA directors ex officio
- **296** donors (**25** monthly repeating) since October 1, 2025
- **\$178,690** contributed by community members
- Celebration event: **June 17, 5 pm, Cuddy Park**



**FOR ANCHORAGE, BY ANCHORAGE.**

# 2026 Priorities

# Goal 1: Fewer people sleeping outside

- **Coordinate outreach, crisis care, and diversion**
  - HOPE AMDOT Daily Coordination
- **Maintain and improve safety net system**
  - Adequate emergency shelter to meet demand
  - More successful exits from shelter
  - Better transportation
- **Continue to rapidly address camping in public spaces**
  - Enforcement of AO 2025-74 S2
  - Enforcement of AO 2026-10

## Goal 2: More crisis care

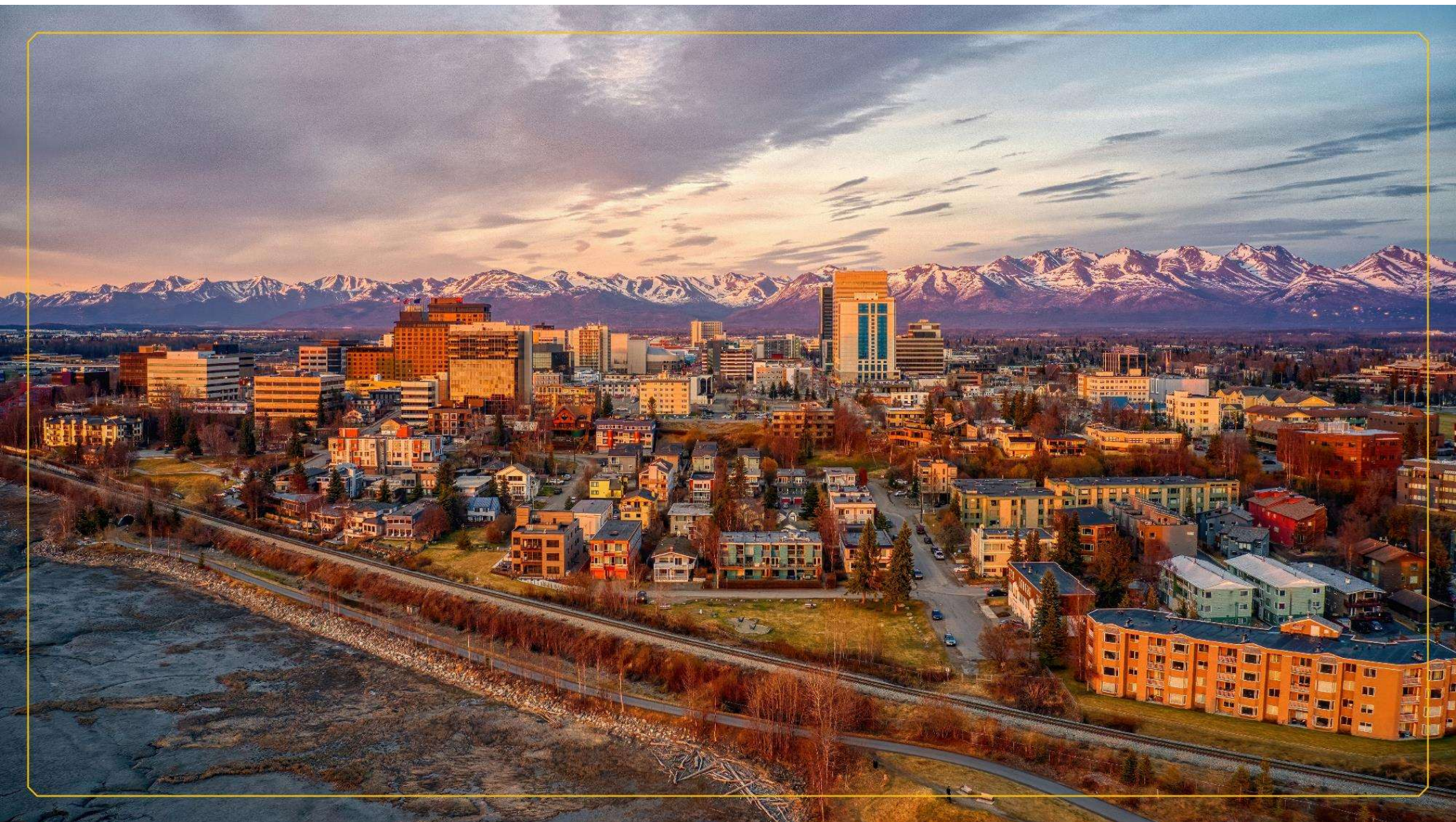
- **Immediate access to healthcare and supports**
  - Immediate access to MAT by AFD CORE and AHD Clinical
  - APD Pre-arrest deflection to treatment
  - Immediate access from any contact to behavioral health treatment
  - Support launch of Crisis Stabilization Centers (SCF, Providence)
  - Maintain Anchorage Safety Center
- **Address people with complex care needs**
  - Add Assisted Living beds appropriate to meet needs
  - Launch interoperable electronic health records at MOA departments for care coordination, data, and towards billing

## **Goal 3: More housing**

- **Add transitional, supportive, and very-affordable housing**
  - Pilot Modular design and construction for housing
  - Launch AHFC-MOA Voucher Program
  - Launch Housing Rehab Fund
  - Maintain and add supportive housing units
  - Support CoC-funded housing and preserve and add units

## **Goal 4: More partnerships, data, and funding**

- **Grow Good Neighbor Fund**
- **Secure Rural Health Transformation funds**
  - Technology leap! Care coordination, data reporting, shared intake and referral tool, real-time bed availability
- **Secure private and State funds**
- **Preserve and guide federal funds**





**THANK YOU!**