

**APPENDIX D.**

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**HOUSING NEEDS ANALYSIS SUPPLEMENT**



## **APPENDIX D.**

# **Housing Needs Assessment**

This section of the Consolidated Plan supplements the HUD-required Needs Assessment (NA). It provides more detail on the needs of “special needs populations.” These residents are more likely to encounter difficulties finding and paying for adequate housing for a number of reasons including very low incomes, inability to attain or engage in full employment, and/or life circumstances. These residents have some of the most acute housing and supportive service needs, are more likely than other residents to experience housing discrimination, and, as such, warrant special attention in this housing needs assessment.

The groups discussed in this section include:

- The elderly and frail elderly;
- Persons with mental illnesses and/or substance use disorders;
- Persons with physical and developmental disabilities;
- Survivors of domestic violence;
- Persons with HIV/AIDS;
- Persons experiencing homelessness;
- The justice involved community; and
- Migrant agricultural workers/farmworkers.

This section draws on a number of data sources to estimate the needs of special populations; those are referenced throughout the report.

Individuals with extremely low and very low incomes are also considered a special needs group by many policymakers and advocates. Their needs are addressed in the companion Housing Market Analysis section.

## Summary of HUD-defined Special Needs Populations

Figure D-1 contains a high-level summary of the special needs populations in Washington County for which HUD requires an identification of their current housing needs, as well as future housing needs in the next five years. These needs were determined by a combination of indicators, poverty, in addition to national incidence rates.

The future housing need depicts a stabilization scenario, where population continues to grow at the same rate as the previous five years.

The largest special needs group in the county is elderly households, followed by households with disabilities—and these categories overlap, particularly for residents who are 75 years and older. These groups also have the largest housing needs, based on data from HUD's housing problems database and the incidence of poverty. Single-person households and households who have experienced domestic violence and are also large in numbers, yet have lower rates of housing need based on housing problems data and, for domestic violence, estimates from the Centers for Disease Control. The housing needs of large families are the third largest, although these are half the size of elderly households and households with disabilities. Limited English Proficiency (LEP) populations have low rates of poverty and, as such, lower needs based on this poverty-focused methodology.

**Figure D-1.  
Housing Need of Special Needs Populations, Washington County, Current and Future Growth**

	Current		Future	
	Total Households	# of Households with Need	Housing Need in 5 Years	Change in Housing Need
Elderly Households	55,960	21,235	22,876	1,641
Single Person households	50,334	3,595	3,873	278
Large Families	19,525	9,805	10,563	758
Households with LEP	8,465	931	1,003	72
Households Containing Persons with a Disab	42,635	20,880	22,494	1,614
<i>Hearing/Vision Impairment</i>	<i>19,140</i>	<i>8,885</i>	<i>9,572</i>	<i>687</i>
<i>Ambulatory Limitation</i>	<i>21,315</i>	<i>10,610</i>	<i>11,430</i>	<i>820</i>
<i>Cognitive Limitation</i>	<i>18,200</i>	<i>9,035</i>	<i>9,733</i>	<i>698</i>
<i>Self-Care/Independent Living Limitation</i>	<i>17,150</i>	<i>8,595</i>	<i>9,259</i>	<i>664</i>
Victims of Domestic Violence	24,194	3,773	4,065	292

Note: Housing need defined as a household having one or more of four housing problems, which includes: 1. Lacks complete kitchen facilities, 2. Lacks complete plumbing facilities, 3. More than one person per room, 4. Cost burden greater than 30%.

Elderly households contain at least one person aged 62 years or older. 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. Large families are defined as a family size of 5 or more. Persons with disabilities may be captured in multiple categories if they have multiple types of disabilities. Persons with disabilities may also be represented in the elderly category.

Source: 2017 5-year ACS.

The remainder of this report contains more detailed narrative and data on the needs of each special needs population group above, in addition to other special needs groups identified by county stakeholders as focus populations. Rounded numbers are used throughout the document to simplify the findings for the reader.

## Summary of Gaps

According to the analysis in this section, unmet demand for housing for special needs populations includes:

- The elderly and frail elderly—between 8,000 and 20,000 elderly and frail elderly have unaddressed housing needs, largely rental assistance, assistance with property taxes and home improvement needs and in-home and supportive services;
- Persons with mental illnesses and/or substance use disorders—as many as 40,000 residents have unaddressed addiction counseling and recovery services;
- Persons with physical and developmental disabilities—An estimated 20,000 residents have some level of housing and supportive service needs. A range of affordable and accessible housing in community settings is needed to accommodate the wide range of needs of this resident group.
- Survivors of domestic violence—an estimated 500 to 1,000 housing units or supports are needed to address the lifetime needs of survivors of domestic violence;
- Persons with HIV/AIDS—450 units to assist persons with HIV/AIDS and their families;
- Persons experiencing homelessness—530 beds, a lower bound estimate, the full extent of need to house the hidden homeless is unknown;
- The justice involved community—1,400 units in a supportive, community setting; and
- Migrant agricultural workers/farmworkers—6,000 beds, or ideally, units to accommodate families.

## Elderly and Frail Elderly

**Total population.** According to Comprehensive Housing Affordability Strategy (CHAS) data, there are approximately 56,960 total households with at least one person age 62 or older in Washington County, representing 26 percent of households in the entire County.

These households are made up of approximately 95,000 individuals. Of these, 6,000 or nearly seven percent, are categorized as frail elderly, as defined by an elderly person who requires assistance with three or more activities of daily living, such as bathing, walking, and performing light housework.

**Needs.** Of these 55,960 households:

- 21,000 households, or 38 percent, have a housing and supportive service need, as defined by having one or more of the following housing problems: substandard housing (lacking complete plumbing or kitchen facilities), overcrowding or severe overcrowding, housing

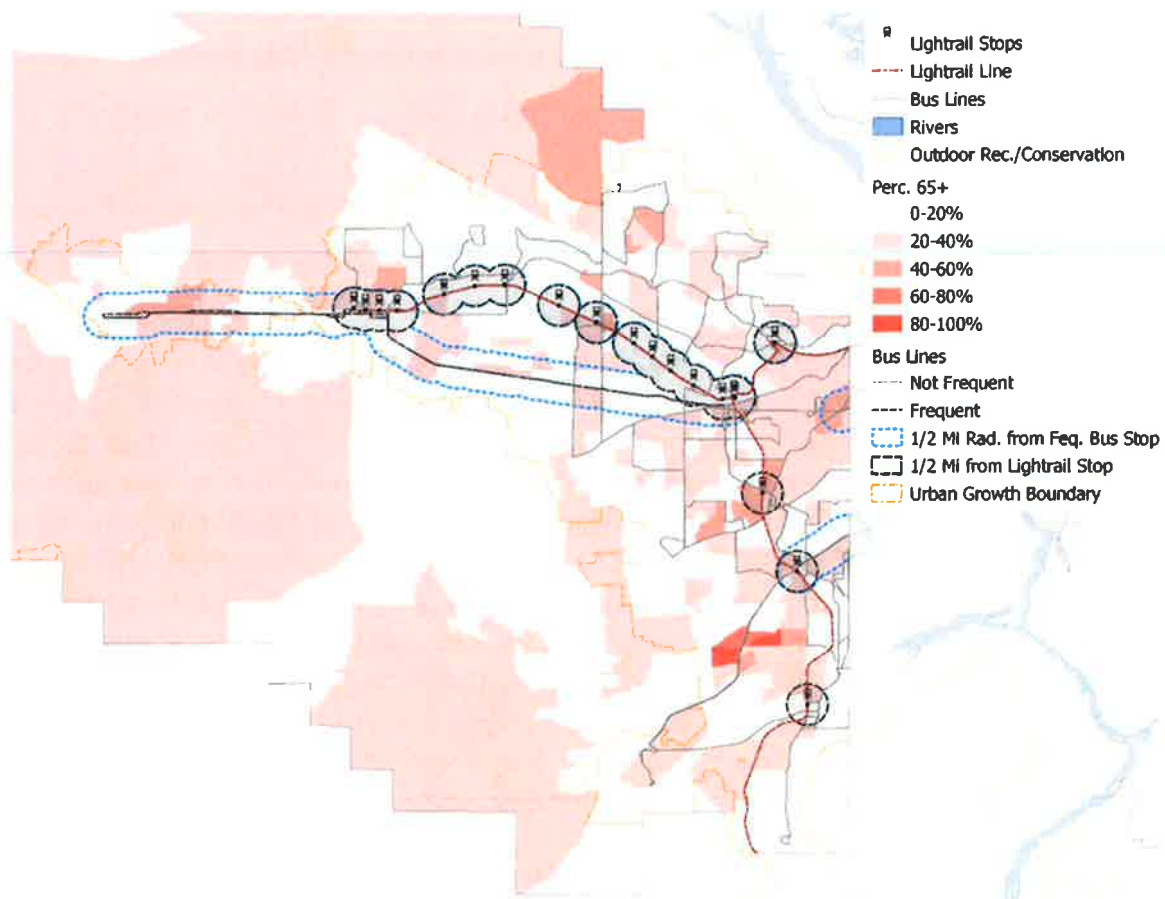
cost burden greater than 30 percent of income or housing cost burden greater than 50 percent of income, and/or zero/negative income.

- 25,000 earn less than 80 percent of the MFI and are very low income. This compares to 19,265 reported in the last Consolidated Plan.
  - 6,000 are extremely low income, earning less than 30 percent of the MFI.
- 3,000 are renters and are cost burdened; nearly 4,000 are renters and are severely cost burdened.
- 3,130 are owners and are cost burdened; and another 4,100 are severely cost burdened.
- 6,150 are “frail elderly,” defined as residents 62 years and older with a self-care limitation.

As seniors who participated in focus groups in Cornelius, Tualatin, and Sherwood shared, managing rising housing costs on fixed incomes is the primary concern of seniors who own their home or live in market rate rental housing. Wait lists for low income senior housing may be longer than their life expectancy, especially if they need a ground floor unit. Moderate income seniors have no options for help. If property tax deferrals are available to seniors, none are aware of such a program. Not surprisingly, those living in income-based senior housing are not worried about housing costs. A lack of access to transportation is a significant challenge for most seniors. Those who no longer drive primarily rely on rides with friends to get around. Bus service and in these communities is commuter-focused and does not connect seniors from where they live to where they need to go (grocery stores, medical appointments, senior centers). Lack of transportation results in missed appointments, social isolation, and an inability to access resources. Where there is service, how to plan a trip is not intuitive. Accessing TriMet Lift can be intimidating and inconvenient—there is a two hour window for arrival/pickup.

Figure D-2 illustrates that very few segments of public transportation routes within Washington County align with concentrations of older adults. Instead, access oriented toward workers/commuters.

**Figure D-2.**  
**Access to Light Rail and Fixed Route Bus Service in Washington County and Share of**  
**Neighborhood Population Age 65+**



Source: 2017 ACS 5 year estimates and Root Policy Research.

These findings are supported by the Community Action’s “2019 Issues of Poverty Report”<sup>1</sup>, which shows a growing number of seniors in Washington County struggling to meet their basic needs. In the 2016 community needs survey conducted by Washington County Department of Aging and Veterans Services, housing costs, health care and medical costs, and the cost of food were identified as concerns for the senior population.<sup>2</sup>

Stakeholders who participated in development of the Consolidated Plan expressed a need for accessible units near transit and in areas with high walkability; onsite health care and community supports/day programming to work against isolation.

<sup>1</sup> [https://caowash.org/file\\_download/945cc9c0-39a9-4900-b854-562e0cf8e994](https://caowash.org/file_download/945cc9c0-39a9-4900-b854-562e0cf8e994)

<sup>2</sup> Washington County DAVS Area Plan 2017-20



**Available resources.** According to the HUD PD&R Picture of Subsidized Households, 1,632 (40%) of the 4,079 subsidized units available in Washington County are occupied by households in which the head or spouse (or both) are aged 62 or over.<sup>3</sup> The state housing inventory database reports 700 affordable units serving the elderly.

There are 892 beds available in residential care facilities in Washington County<sup>4</sup> and 964 beds available in nursing facilities in Washington County.<sup>5</sup> As of the 2010 Census, 693 elderly individuals (age 65 and older) were reported to be living in institutional settings.

In total, an estimated 3,500 units and beds are available to serve elderly and frail elderly—much lower than the 25,000 low income and even 6,000 extremely low income elderly who have some type of need.

**Estimated Gap/Unaddressed Need.** The low end of need is rental relief in the form of affordable units or tenant-based subsidies for 4,000 low income senior renters; property tax relief and home improvement grants for 4,000 owners, for a total of 8,000 households. At the high end is housing and supportive services for the 21,000 seniors with some type of housing problem and service needs.

## **Persons with Mental Illnesses and/or Substance Use Disorders**

**Total population.** The Washington County Department of Health and Human Services estimates that there are about 40,000 Washington County residents who are in need of treatment for a substance use disorder.<sup>6</sup> This is consistent with the 44,000 residents who are estimated to have a need based on state level incidence rates from the Substance Abuse and Mental Health Services Administration (SAMSHA). About 10 percent of people with needs receive treatment.

According to SAMHSA, 7.87 percent of residents in the State of Oregon are age 12 and older and are alcohol-dependent; 3.27 percent have an illicit drug dependency. 7.5 percent need and are not receiving treatment for alcohol dependency or abuse; 2.9 percent need and are not receiving treatment for illicit drug abuse. Compared to the U.S. overall, Oregonians have higher rates of alcohol dependency and abuse and average rates of drug dependency and abuse.

Substance abuse and suicide are related and, like the incidence rate of substance abuse, Washington County has a higher rate of suicide than the national rate (8% higher). Seventy-four Washington County residents died by suicide in 2017. Suicide disproportionately affects males and non-Hispanic White residents.

**Needs.** Residents with mental illness and/or a history of addiction participated in a focus group included residents of peer-supported group living homes and residents of project-based

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<sup>3</sup> <https://www.huduser.gov/portal/datasets/assthsg.html>

<sup>4</sup> <https://www.co.washington.or.us/HHS/DAVS/CareFacilities/upload/Residential-Care-Facilities.pdf>

<sup>5</sup> <https://www.co.washington.or.us/HHS/DAVS/CareFacilities/upload/Nursing-Home-Facilities.pdf>

<sup>6</sup> <https://www.co.washington.or.us/HHS/Addiction/index.cfm>

subsidized housing with supportive services. All strongly value their case managers and the role the case manager plays in helping them live independently. For many, their disability limits their employment options. With respect to supportive services and other program providers, participants described a need for training in trauma-informed care and increased knowledge of best practices in providing care to residents with mental illness. They also emphasized that they prioritize housing that is safe as well as housing that has transit access.

**Available resources.** According to the state database on affordable housing, there are only three developments in Washington County that serve persons with substance abuse; these have a total of 84 beds.

**Estimated Gap/Unaddressed Need.** As many as 40,000 Washington County residents have untreated substance abuse challenges, most of which are related to alcohol use. It is difficult to estimate the number of treatment beds and services needed due to the complexity of the disease. Qualitative data suggest that focusing on case management support, working with employers to improve understanding about the needs and services required by employees who may have substance abuse challenges, and expanding affordable housing with supportive services are all needed.

## Persons with Disabilities

**Total population.** According to 2011-2015 CHAS data, there are 57,605 households containing an individual with a self-care limitation, independent living limitation, and/or a physical disability, representing 26 percent of households in the entire County.

There are another 18,200 households containing an individual with a cognitive limitation, representing eight percent of households in the entire County.

HUD's CHAS data contain special tabulations that break out housing problems by disability type. According to these data:

- 8,885 persons with hearing or vision impairments have housing problems;
- 10,610 with ambulatory impairments have housing problems;
- 9,035 with cognitive limitations have housing problems; and
- 8,500 with self-care or independent living limitations have housing problems.
- Altogether, this totals 20,800 households with disabilities with some type of housing need.

**Needs.** Persons with disabilities have a range of needs depending on their ability to work, live independently, and drive. The best type of housing to accommodate the needs of persons with disabilities is in a community-support setting that is accessible and is easily accessible to public transportation. All too often persons with disabilities are placed in institutions of care rather than a community-support setting.

Stakeholders participating in needs-identification discussions for this Consolidated Plan confirmed that housing gaps for persons with disabilities are very large. Priority needs include:

- Support services that are well-designed and integrated into housing and school environments;
- A range of housing options, from independent living to cooperative housing to permanent supportive housing;
- Accessible and visitable housing within easy access to transportation.

**Available resources.** Resources vary considerably depending on the need. The state affordable housing database identifies about 375 units that serve people with developmental (36) and physical disabilities. It is important to note that these types of settings are not desired by all persons with disabilities, however; many prefer independent or cooperative settings.

**Estimated Gap/Unaddressed Need.** At least 20,000 residents with disabilities have some type of housing need, according to HUD data. A subset of these residents likely have unmet service needs.

## Survivors of Domestic Violence

**Total population.** National incidence rates indicate that 37 percent of women and 34 percent of men aged 18 or older have experienced contact sexual violence, physical violence, or stalking by an intimate partner in their lifetime. Annual incidence rates—meaning the proportion of people who have experienced contact sexual violence, physical violence, or stalking by an intimate partner in the previous year—are 5.5 percent for women and 5.2 percent for men.

Local CDC estimates for Washington County indicate that there are 24,194 households that include survivors of domestic violence (including rape, physical violence and/or stalking by an intimate partner), representing 11 percent of households in the entire County.

**Needs.** Applying national CDC estimates to Washington County survivors of domestic violence, of these 24,194 households:

- An estimated 573 (2%) have an annual housing and supportive service need
- An estimated 3,773 (16%) have a housing and supportive need within their lifetime.

In the past Consolidated Plan, estimates from the Washington County District Attorney's Office put annual need at 1,070 households—twice as high as the CDC estimates suggest.

Although the supportive and housing services needed by survivors of domestic violence vary, generally, all need health care and counseling immediately following the event and continued mental health support to assist with the traumatic stress disorder related to the event. Survivors may also require assistance with substance abuse and mental health services, both of which are common among survivors of domestic violence. Affordable housing is also critical: The National Alliance to End Homelessness argues that a "strong investment in housing is crucial [to victims

of domestic violence] ...so that the family or woman is able to leave the shelter system as quickly as possible without returning to the abuse." The Alliance also reports that studies on homelessness have shown a correlation between domestic violence and homelessness ([http://www.endhomelessness.org/pages/domestic\\_violence](http://www.endhomelessness.org/pages/domestic_violence)).

**Available resources.** The Domestic Violence Resource Center (DVRC) is located in Beaverton within the Family Justice Center. DVRC offers a full continuum of programs and services, emergency shelter (24 beds), transitional housing (14 beds), permanent housing (10 one and two bedroom scattered site apartments), safety planning, counseling (individual and group), advocacy, case management, protective order assistance, a 24 hour crisis line, and community training and presentations.

**Estimated Gap/Unaddressed Need.** Based on the CDC estimates of annual need, to adequately serve survivors of domestic violence, as many as 550 units and 1,000 beds (assuming an average of two persons per household) could be needed. Based on the Washington County District Attorney estimates, this gap could be twice that amount.

### **Persons with HIV/AIDS**

**Total population.** According to the Oregon Adult and Communicable Disease Database, there are 917 people living with HIV or AIDS in Washington County,<sup>7</sup> representing nearly two percent of the population of the entire County. Of these individuals, 398 (43%) are men living with HIV and 414 (45%) are men living with AIDS. There are 43 (5%) women living with HIV and 62 (7%) women living with AIDS.

**Needs.** According to the National Alliance to End Homelessness, up to 50 percent of people living with HIV and AIDS in the US are at risk of becoming homeless. When applied to the Washington County population, up to 458 of people living with HIV and AIDS in Washington County are at risk of becoming homeless.

This can be attributed to the costs of health care and medication needed to manage their disease and the fact that these individuals are in danger of losing their jobs due to discrimination or as a result of frequent health-related absences. People living with HIV/AIDS who have stable housing are better able to access HIV care and adhere to antiretroviral medications which leads to viral suppression.

**Available resources.** The resources needed by persons with HIV/AIDS and their families are similar to those of households experiencing homelessness: stable housing, affordable housing, emergency assistance for homeless prevention, and shelter and transitional housing for those to experience homelessness.

**Estimated Gap/Unaddressed Need.** As many as 450 persons with HIV/AIDS and their families need emergency assistance, homeless prevention support, and/or transitional housing.

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<sup>7</sup><https://www.oregon.gov/oha/PH/DISEASES/CONDITIONS/COMMUNICABLEDISEASE/DISEASESURVEILLANCEDATA/HIVDATA/Documents/LivingWithHIV/Washington.pdf>

## Persons Experiencing Homelessness

**Total population.** As of January 2019, according to the Point-in-Time count, 423 households and 530 individuals were experiencing homelessness. The majority of households and individuals were sheltered (298 people in 216 households sheltered).

Although individuals experiencing homelessness were more likely to be over the age of 24, there were 81 children under the age of 18 and 37 young adults between the ages of 18 and 24 experiencing homelessness in Washington County. Children were more likely than other age groups to be staying in emergency shelters.

The point-in-time count is not without limitations. There is variation in count methodology year-to-year within and across communities. Unsheltered counts have more limitations than sheltered counts, therefore it is likely that the number of unsheltered individuals experiencing homelessness is larger. This count also does not include persons who are at-risk of homelessness and is thought to undercount families and children, many of whom “float” among temporary residence and may be living in domestic violence situations.

### Households Experiencing Homelessness in Washington County, January 2019

	Emergency	Transitional	Safe Haven	Unshelterd	Total
Total Households	134	75	7	207	<b>423</b>
Total Individuals	186	105	7	232	<b>530</b>
<i>Under age 18</i>	42	18	0	21	<b>81</b>
<i>Ages 18 to 24</i>	13	15	0	9	<b>37</b>
<i>Over age 24</i>	131	72	7	202	<b>412</b>

Source: Point-in-time Count 2019.

**Needs.** The adults experiencing homelessness who participated in focus group discussions currently camp or live in their vehicle. They are chronically homeless and all but one disclosed severe mental illness, addiction to opiates or meth, work-related physical disabilities, and/or mobility disability. Some are currently unemployable due to addiction and/or mental illness. Others have injuries that prevent working in their trade and need retraining. Some are unable to keep employment as a direct result of their homelessness (e.g., hygiene, no storage for personal belongings). Not surprisingly, a wide range of housing options, and movement from one to another along a spectrum of independence, from short-term transitional shelter to permanent supportive housing are needed.

The youth at risk of homelessness and homeless youth who participated in focus group discussions at generally live in chaotic circumstances, moving in and out of homelessness, couch surfing, living with family, renting with friends, to camping or sleeping at youth shelters (as a last resort). Youth expressed the competing desires of wanting to live independently while needing skill development and support to achieve stability and grow into successful adults. Support for

expanded drop-in days/hours is desired and could be leveraged to further support these youth in employment, housing, financial, and life skills development.

Stakeholders participating in this Consolidated Plan identified a range of needs and solutions to resolve the precarious situation faced by persons experiencing homelessness:

- Temporary housing with access to job training and wrap-around services;
- Increases in “safe spaces” to shower, receive meals, especially for those living in their cars, which is an increasing situations;
- More welcoming adult shelters;
- Homeless navigators for those with mental illness;
- A greater understanding of the root causes of homelessness by the broader community, including businesses.

**Available resources.** Resources are typically in the form of shelter and transitional beds.

According to the Point-in-Time Count from January 2019, there are:

- 115 year-round emergency shelter beds;
- 129 voucher/overflow beds;
- 119 transitional housing beds;
- 230 permanent, rapid-rehousing beds; and
- 501 permanent supportive housing beds.

**Estimated Gap/Unaddressed Need.** In addition to transitional and supportive housing to serve the 530 persons experiencing homelessness—and the many more that were not adequately identified by the county—the primary gap is in services for persons experiencing homelessness is adequate services, particularly to enhance employability and address mental illness.

## Justice Involved/Released Offenders

**Total population.** According to Washington County Community Corrections, the County’s Probation and Parole Division supervises over 3,400 , representing two percent of the County’s total population.<sup>8</sup> According to the Corrections Biennium Plan that covers 2017-2019, 70 percent of probation and parole offenders are not convicted of another felony crime and 60 percent are not convicted of a misdemeanor or felony crime. Eighty percent are successfully released from the Center.

**Needs.** Participants in a Community Corrections focus group had a wide ranging discussion of housing choice, access to opportunity, law enforcement and prosecutors, and the extent to which Washington County’s probation system hinders rather than helps their reentry into the community. Criminal history is the primary barrier to securing housing of choice, followed by the

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<sup>8</sup> <https://www.co.washington.or.us/CommunityCorrections/ProbationParole/index.cfm>

cost of securing housing (e.g., deposits, first and last month rent). Most did not express difficulty finding employment, but they did share that the mandatory, fixed, probation requirements, often led to job loss, as the newly employed must request time off to attend meetings, classes, etc. They emphasized the need for treatment, not jail time.

Stakeholders participating in this Plan identified transitional housing with live-in mentors; healthy living environments in quality housing, including tiny home communities; a full continuum of services; low-barrier rental and employment screening; and businesses/employers that are part of the solution.

**Available resources.** The state database on affordable housing reports zero units available to justice involved residents. Community Corrections has 12 beds available to homeless, mentally ill, and sex offenders while they search for alternative housing. Lodgers must agree to abide by supervision conditions and Center rules to remain in the program. They must work, or actively pursue it, while seeking other housing. They must also participate in programs at the Center that can facilitate their transition back into the community.

According to the Community Corrections report, there are 484 beds, in 56 facilities, throughout the County to treat justice involved residents in a clean/sober setting. Of those, 298 are beds for males and 186 are beds for females. An additional 84 beds are available according to the state affordable housing database.

Community Corrections reports that, at any point in time, approximately 2,700 justice involved residents are participating in some type of treatment, ranging from substance abuse services, to counseling, to employment search services.

**Estimated Gap/Unaddressed Need.** The largest gap is in housing for justice-involved residents who have histories of sex offenses and mental illness and are highest-risk (have anti-social behavior, cognitive challenges). Based on the Community Corrections report, about 2 percent of offenders (those categorized as high risk) could need intensive housing and supportive services to facilitate community integration. This equals 82 beds, a very low-bound estimate. An upper-bound estimate assumes all released justice involved residents need housing and would put the need at 2,800 beds or about 1,400 units, assuming shared units.

## **Migrant Agricultural Workers**

**Total population.** The Oregon State University Extension Service's *Estimates of Migrant and Seasonal Farmworkers in Agriculture, 2018 Update*, defines a seasonal farmworker as an individual who was actively employed in agriculture on a seasonal basis (not more than 9 months out of the survey year for some industries); a migrant farmworker meets the same definition as a seasonal farmworker, but establishes for the purposes of such employment a temporary abode.<sup>9</sup>

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<sup>9</sup> <https://www.oregon.gov/ohcs/DO/Farmworker/2018/05-24-18-AWHFT-Oregon-MSFW-Enumeration-Study.pdf>



According to the 2018 Update, there are 4,963 seasonal farmworkers in Washington County. There are an estimated additional 5,230 non-farmworkers (e.g., spouses and children) in seasonal farmworker households. There 2,500 migrant farmworkers<sup>10</sup> in Washington County. In addition, there are an estimated 2,219 non-farmworkers in migrant farmworker households.

**Needs.** In sum, there are an estimated combined 7,463 seasonal and migrant farmworkers in Washington County, with a total of 14,911 individuals in seasonal and migrant farmworker households, when non-farmworker family members are included in the total.

**Available resources.** Agriculture has long been an important part of the County's economy; in 2017, the market value of agricultural products sold in Washington County totaled more than \$201million. According to the American Community Survey, Washington County's agricultural industry farmworkers earn a median annual income of \$20,059 (2017 survey data).

These earnings are much lower than the income needed to afford the median contract rent in Washington County. The median rent is \$1,371 per month, according to 2017 American Community Survey data, requiring an income of \$54,840 to avoid cost burden. At this rent level, farmworkers would need to live three persons to one unit.<sup>11</sup>

Nonprofit developer Bienestar has developed or renovated nine properties for farmworker families with 299 units (793 beds) in Washington County.<sup>12</sup> In addition, there are nine registered agricultural labor housing sites with a total of 757 beds on the Oregon Department of Consumer & Business Services 2019 Agricultural Labor Housing Registry for 2019.<sup>13</sup>

**Estimated Gap/Unaddressed Need.** There is a significant gap between need and supply of housing for farmworkers in Washington County. Given that there are roughly 7,463 seasonal and migrant farmworkers in the County (not including other household members), there is a gap of nearly 6,000 beds to house the workers alone. To allow these workers to live with their families, 6,000 units, rather than beds, are needed.

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<sup>10</sup> Note: this number includes migrant labor in livestock production.

<sup>11</sup> [https://www.huduser.gov/portal/pdredge/pdr\\_edge\\_inpractice\\_090913.html](https://www.huduser.gov/portal/pdredge/pdr_edge_inpractice_090913.html)

<sup>12</sup> <http://www.bienestar-or.org/our-housing/>

<sup>13</sup> [http://actprod.cbs.state.or.us/iportal/report\\_catalog.html](http://actprod.cbs.state.or.us/iportal/report_catalog.html)