

**DRAFT 1**  
**Consolidated Plan 2025-2029**  
**Action Plan 2025-2026**  
City of Cranston

April 1, 2025

# Executive Summary

## ES-05: Executive Summary - 24 CFR 91.200(c), 91.220(b)

### Introduction

The City of Cranston has completed the Consolidated Planning process for the 2025-2029 Program Years. The purpose of the Plan is to identify the city's housing, community development, public service, and economic development needs, prioritize those needs, and develop goals and strategies about how funding will be allocated to eligible housing and community development activities to meet the city's priority needs. The Consolidated Plan provides the vision that guides policies and the use of city resources to address these important issues over a five-year period.

The City of Cranston is an Entitlement Community and receives annual allocation of Community Development Block Grant (CDBG) funds from the U.S. Department of Housing and Urban Development (HUD). The total amount of funding fluctuates but was approximately \$1.09 Million for the 2024-2025 Program Year. Over the past 5 years, the federal grants have seen a decrease in funding of about 1%. The city anticipates receiving an estimated \$5.4 million in total funding over the 5-year period from July 1, 2025, to June 30, 2030. What is unknown is the projected funding amounts based on the priorities of future administrations. However, based on the trends in historical funding, the 5-year estimates by program are as follows:

- CDBG: \$5,398,197

The Consolidated Plan assists the city in making strategic and planful allocation decisions about how to use limited CDBG funds for housing, social services, public infrastructure, facility improvements, economic development, and other community development programs and projects.

The city contracted with CEW Advisors, Inc. to draft the Consolidated Plan following the prescribed format detailed by HUD and ensuring compliance with all relevant federal regulatory requirements. The plan was developed based on an analysis of demographic, housing and economic data, and information collected from consultation interviews with stakeholders, community meetings and focus groups, survey data, past program performance, current planning documents and studies, and other public input.

The 2025-2029 Consolidated Plan is divided into five sections:

- The Process (PR)
- Needs Assessment (NA)
- Market Analysis (MA)
- Strategic Plan (SP)
- First-Year Action Plan (AP)

**The Process** section describes the development of the Plan and discusses how citizens were involved in the process, and how service providers and other stakeholders were consulted in the development of the Plan. The section also shares key findings from the citizen participation and consultation processes.

**Needs Assessment** provides data, analysis, and other relevant information on the city's needs for affordable housing, special needs housing and services, community development, economic

development, and homelessness. Throughout the Needs Assessment section, special attention is paid to the needs of Low and Moderate Income (LMI) households, racial and ethnic minorities, homeless persons, and non-homeless special needs populations (e.g. persons with HIV/AIDS, disabilities, the elderly, limited English proficiency, and other populations.).

**Market Analysis** provides data and analysis on the local housing market conditions and economic landscape in the city. The Market Analysis is meant to supplement information gleaned from the Needs Assessment to identify goals that are tailored to the local context of Cranston. In this way, the purpose of the Housing Market Analysis is to ensure that the priority goals developed through the planning process will effectively work locally.

The **Strategic Plan** section is based on the findings from the Needs Assessment, Market Analysis, stakeholder and resident input, and review of additional planning documents and studies. The purpose of the Strategic Plan is to prioritize the needs identified through the Consolidated Planning process and create goals to direct the allocation of federal funds that maximize community impact and is driven by the preferences of those who are to benefit from these investments.

Finally, the **Annual Action Plan** describes the city's first year activities and projects for addressing the needs and priorities set forth in the Strategic Plan.

## **Summary of the objectives and outcomes identified in the Plan Needs Assessment Overview**

As part of the citizen participation process, an online survey collected information from Cranston residents to help supplement the data available from public sources and information collected from public service agencies and community service providers. In addition to the issues identified through the Housing and Community Development survey, the below concerns were identified through consultation, community meetings, and analysis of public data sources, including the American Community Survey, the Comprehensive Housing Affordability Strategy data, the U.S. Bureau of Economic Analysis, the U.S. Bureau of Labor Statistics, the U.S. Department of Housing and Urban Development, and the Homelessness Management Information System. The following is a summary of the key points in the Needs Assessment.

### **Housing Affordability**

Cranston has experienced population growth of 2.5% between 2010 and 2023. Over the same time period the city saw an increase in the number of occupied housing units (7.3%) and a massive drop of 31.2% in the number of vacant units. The available public data, information from community meetings and stakeholder interviews, and recent research all show that housing affordability and increasing cost burden is a significant and growing concern for Cranston residents. Slightly under one-third (31.5%) of all households in Cranston are paying more than 30% of their income on housing (cost burdened or severely cost burdened). There is a desperate need for affordable homeownership and affordable rental housing throughout the city.

### **Housing Rehabilitation**

There are properties throughout the city that are in need of rehabilitation, including roof repairs, peeling paint, damaged siding, and boiler replacement. Most of the housing stock in the city is older, with 75.2% being built before 1980. This older housing stock requires more rehabilitation and upkeep to maintain. Typically, after a home reaches 30 or 40 years old it begins to require significant repairs and/or major rehabilitation. This becomes even more problematic if the home wasn't well-maintained throughout. Further, homes in the Northeastern United States suffer from additional weather-related problems due to icy weather, heavy snow, and frigid temperatures. Also, damage from more intense storms related to climate change is also creating more demand for home repairs.

### **Public Housing**

The Cranston Housing Authority (CHA) is the sole agency in the city tasked with the administration of public housing. Most public housing units are for elderly and disabled occupants whose needs are primarily related to improved accessibility due to mobility challenges. Housing choice voucher holders are finding it increasingly more difficult to secure and remain in rental housing as rental prices keep increasing. Voucher holders can often be priced out of the rental market because the voucher will not cover the full cost of rent.

### **Homelessness**

Homelessness has been increasing in the state of Rhode Island since the pandemic began in 2020, increasing 121% from 1,104 homeless people in 2020 to 2,442 homeless people in 2024. In the Cranston, Johnston, Central Falls, and North Providence area, there were 110 sheltered persons and another 16 unsheltered persons as of the 2024 PIT count. The PIT data which estimates the number of persons experiencing homelessness on a given night is for the combined suburban area of Cranston, Johnston, Central Falls, and North Providence. This is the smallest level of

disaggregation available from the PIT Count. There is a significant risk of homelessness due to the unsustainable increases in housing costs.

### **Non-Homeless Special Needs Assessment:**

There are households throughout the city that have special needs unrelated to homelessness. Some of these population groups include the elderly and frail elderly; those living with some type of physical or cognitive disability; persons with substance use disorders; persons with mental illness; and victims of domestic violence, dating violence, sexual assault, and stalking.

Special needs populations face a multitude of housing and support service needs unique to their circumstances. A wide availability of housing options for each of these groups, with the requisite supporting services will be necessary to truly meet their needs. Key support needs include additional accommodations for the city's aging population and those that suffer from ambulatory and independent living difficulties.

Of particular note, Cranston's elderly population (aged 65+) has been growing over the past several years and currently represents 17.1% (14,133) of the total population (82,632) and 31.9% (10,390) of all households in the city (32,596). A significant percentage of all senior households, 44.7%, live alone, and 67% of all senior households own their own home. Generally, the senior population has more limited fixed incomes than the population as a whole, primarily Social Security and other retirement income. The elderly and frail elderly populations have additional unique challenges that come with age, including chronic and other medical conditions, higher rates of physical and mental disabilities (such as Alzheimer's and dementia), mobility challenges, and higher health care costs. A significant concern for the senior population is the eventual transition from independent living to assisted living and nursing home care.

### **Non-Housing Community Development Needs**

#### **Public Facilities and Infrastructure Needs**

Key priorities include relocating three aging fire stations to larger, modern facilities, upgrading the city's IT system for emergency communication reliability, and improving stormwater management in flood-prone areas. Critical wastewater infrastructure, such as pump stations, requires elevation to prevent flood damage. The city also needs a new fire station in Western Cranston to accommodate growth. Other priorities include municipal building renovations, redesigning the historic Budlong Swimming Pool, enhancing senior services, consolidating municipal offices, and expanding recreational facilities. These improvements are essential for disaster resilience, public safety, and maintaining Cranston's quality of life. Additional infrastructure needs are street and sidewalk improvements, public parks, bicycle and walking paths, and sewers and storm water management related to periodic flooding.

#### **Public Services**

The primary public service needs are afterschool and summer recreation programs for youth and teens, affordable childcare, mental health services and services for individuals with mental illness, programs and services for the city's senior population, and emergency food assistance.

## **Evaluation of past performance**

### **Progress the jurisdiction has made in carrying out its strategic plan and its action plan. 91.520(a)**

The high priorities in 2020-2025 Consolidated Plan were addressed in these program years. With the onset of the COVID-19 Pandemic, progress slowed, but progress on outcomes has increased substantially. Housing rehabilitation continued to be a popular program. First Time Homebuyers Assistance again was available for eligible households, but there were no participants due to the rapid increase in home values. One foreclosed house was purchased for the Acquisition for Rehabilitation project and was rehabilitated during program year 2023 and has been sold to an eligible household. The city made great strides in its public infrastructure program and its public service activities.

## **Summary of citizen participation process and consultation process**

Both local and statewide consultation and citizen participation occurred through a variety of means. One-on-one meetings, community meetings, focus groups, online surveys, discussion groups, public hearings, news articles, request for proposals, and consultations with business, nonprofit agencies, elected officials, municipal staff, and other stakeholders were all used to inform this Plan's priorities and goals.

Requests for input on community needs were made to community-based organizations and various City Committees and Commissions. Information on needs was also collected from Public Service agencies reporting, review of additional research studies, and from community meeting notes. During the solicitation process for CDBG funds, a Request for Proposals is published, and respondents are required to state the community need they are requesting funding to address.

Citizens were able to participate in the development of the Consolidated Plan and offer public comment on the draft Consolidated Plan in several ways. A community needs assessment survey was created and was available online for citizens to offer comments on priority needs in Cranston. Several community meetings and focus group discussions were held during the development of the plan to ensure the needs of the community were fully recognized and embedded in the Consolidated Plan. Finally, a public hearing was held on April 9, 2025, at the Cranston Senior Center to offer another opportunity for the public to comment on the Consolidated Plan.

## **Summary of public comments**

A public hearing was held on April 9, 2025, at the Cranston Senior Center to offer another opportunity for the public to comment on the Consolidated Plan.

Add information related to attendees and public comments.

## **Summary of comments or views not accepted and the reasons for not accepting them**

All public comments gathered during the citizen participation process were reviewed and accepted and have been incorporated into the Consolidated Plan.

## Summary

This Five-Year Consolidated Plan for the years 2025-2029 identifies goals, objectives and strategies to address the City of Cranston’s housing, community, and economic development needs. These needs were identified through an extensive citizen participation and stakeholder consultation process that involved neighborhood residents, service providers, state agencies, and other community partners. The Consolidated Plan guides the city's use of CDBG funds to accomplish goals addressing the articulated needs of the community described more fully in the Needs Assessment and the existing landscape of to meet these needs described in the Market Analysis.

Over the next five years, Cranston will deliver housing, community, and economic development services to meet the needs highlighted in the Plan. The city will seek to balance the need for housing, community, and economic development needs with the resources that the city receives through the Community Development Block Grant program, and the city seeks to leverage these funds through innovative partnerships and braided funding whenever possible to maximize the impact it can have on the quality of life for Cranston residents. Given this comprehensive approach and the continued capacity of the City, this plan’s goals and objectives are feasible and achievable.

# The Process

## PR-05: Lead & Responsible Agencies- 24 CFR

### 91.200(b)

#### Responsible Agencies

*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.

PR-05 Figure 1: Responsible Agencies		
Agency Role	Name	Department/Agency
CDBG Administrator	Cranston	Department of Community Development

#### Narrative

Cranston’s Department of Community Development (DCD) is the lead agency for the development of the Consolidated Plan and is responsible for the ongoing administration and management of all aspects of the Community Development Block Grant (CDBG) program. DCD administers Cranston’s housing, neighborhood revitalization, economic development, and public services programs funded by the U.S. Department of Housing and Urban Development (HUD). The primary function of the department includes planning and policymaking, program administration, coordination with subrecipients, management of grants and loans, and monitoring and inspection.

In addition, the Rhode Island Continuum of Care [CoC] is statewide, servicing all communities in the State of Rhode Island. Rhode Island Housing is the lead agency for the CoC. Groups who make up the CoC have been working closely over many years with leadership in each of the communities, including Cranston, to address the needs of those that are homeless or at risk of homelessness.

#### Consolidated Plan Public Contact Information

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# **PR-10: Consultation - 91.100, 91.110, 91.200(b), 91.300(b), 91.215(I) and 91.315(I)**

## **Introduction**

In developing the Consolidated Plan, the City of Cranston consulted with numerous organizations. The process included formal and informal meetings, an online survey, and discussions with state and local agencies along with many advocacy groups in the region. The process of developing the Plan began in November 2024 when community organizations and the public were notified of the Planning process and asked to participate. The City contracted with CEW Advisors, Inc. to conduct a comprehensive community outreach, stakeholder engagement, and public consultation process. In late 2024 and early 2025, CEW Advisors, Inc., on behalf of the City of Cranston, began consulting with City Departments, the Cranston Housing Authority, nonprofit service agencies, Community and Housing Development Corporations, other State Agencies and Departments, business organizations, the Chamber of Commerce, and the public to discuss short-term and long-term housing, community development, and economic development needs for the residents of Cranston and strategies for meeting these needs.

This outreach effort was designed to duly record stakeholder input, collect all relevant data and information, and develop an informed set of priority needs to help guide the city's investment strategies over the 2025-2029 time period for this Consolidated Plan. This outreach effort included multiple stakeholder interviews, where organizations, service providers, and residents of all types from across the city discussed the City's needs and discussed strategies to address those needs. Additionally, an online survey allowed for additional opportunities for Cranston residents to add their voice and articulate community needs.

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

The city works with numerous agencies, both public and non-profit, to deliver housing, community development, economic development, and public services to its residents. The city has regular contact with community residents, business owners, nonprofit organizations, service providers, as well as the beneficiaries of the programs administered by the Department of Community Development. Coordination among entities includes serving on joint committees, on-going communication and long-term strategic planning. Organizations include public institutions on the local, regional, state levels, local nonprofits, faith-based organizations and the private sector. Financial and technical support is provided to these agencies when and where possible. This direct contact with developers, business owners, the public, and provider agencies results in regular input regarding the needs of the community, allows for alignment and coordination with the city's goals, and assists in program development and implementation.

The city also partners with the Central RI Chamber of Commerce which acts as a broker between the city and its members and new businesses interested in opening in Cranston. The Chamber communicates with the city on licensing and building permits to help facilitate new business development.

Cranston is a member of the RI League of Cities and Towns which represents municipal government interests before the state legislature, executive and state administrative agencies, as well as providing technical assistance, information sharing, and training to assist municipal

officials in fulfilling their responsibilities. Through this membership, Cranston has relationships with the other municipal leaders in the state in a structured and formalized manner.

*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*

The City of Cranston does not receive dedicated Emergency Solutions Grant funding for homeless services from the U.S. Dept. of Housing and Urban Development; however, the Department of Community Development communicates with local and regional homeless services providers. CDBG funds are utilized to support agencies that provide services to the homeless population, such as the Blessed Mother Mary Food Bank, House of Hope, and Comprehensive Community Action Program. Local agencies are participants in the RI Continuum of Care and coordinate efforts with the Rhode Island Coalition to End Homelessness, the Continuum of Care, and the Consolidated Homeless Fund.

Rhode Island has a single Continuum of Care (RiCoC). RI Housing is the Collaborative Applicant for the RiCoC and is responsible for overseeing its annual funding competition, compliance processes and system planning and policy oversight. The RiCoC is supported by the Rhode Island Coalition to End Homeless (RICEH) as the entity that manages the HMIS and Coordinated Entry System. RICEH is responsible for managing, training, collecting and reporting data into and out of the system.

Under the requirements of the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), over the past several years the system of programs and services for homeless individuals and families in RI has been organized around a more cohesive statewide Coordinated Entry System that, although has had its critics and limitations, has helped better target the most vulnerable population which has the highest need for services. RICEH operates the Coordinated Entry Hotline and manages entry to the shelter system.

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

Cranston does not receive an allocation of ESG funds.

In Rhode Island, the coordination between the city, the Consolidated Homeless Fund, and the Continuum of Care (CoC) is based on a comprehensive effort involving a range of state agencies, local governments, and community partners. Due to the state's size and the transient nature of the homeless population, a statewide system was developed to prevent and end homelessness, coordinating in the following ways:

- **Single Continuum of Care:** Rhode Island has a single CoC that guides the state's homelessness programs and policies and administers federal and state homeless funds.
- **Community-Wide Planning:** The CoC promotes community-wide planning and strategic use of resources to address homelessness. There are shared members among the Consolidated Homeless Fund and the Continuum of Care for better planning of services.
- **Integration with Mainstream Resources:** The CoC aims to improve coordination and integration with mainstream resources and other programs targeted at people experiencing homelessness. This is based on a comprehensive intake and assessment process during initial enrollment.

- **Data Collection and Performance Measurement:** The CoC also focuses on improving data collection and performance measurement to optimize self-sufficiency among individuals and families experiencing homelessness.
- **Collaborative Applicant:** Rhode Island Housing is the current Collaborative Applicant for the RI CoC, responsible for overseeing the annual funding competition, compliance processes, and system planning and policy oversight. Having a single entity assists with streamlining the service delivery system in the state.
- **Statewide Coordinated Entry System:** The CoC has implemented a Statewide Coordinated Entry System to ensure that households experiencing homelessness are matched with the most efficient and effective intervention to end their homelessness.

The CoC's approach is person-focused, prioritizing individuals most in need of assistance and strategically allocating resources to meet those needs. This coordination ensures that the Consolidated Homeless Fund is utilized effectively within the framework established by the CoC to achieve the shared goal of ending homelessness in Rhode Island.

Local agencies, including the Cranston Housing Authority, operate autonomously and seek their own funds to address needs. The Cranston Housing Authority submits its own application for funding and is subject to individual requirements from each funding source. Some of these may include establishing performance measures and reporting outcomes in systems such as the HMIS system utilized by HUD.

## Participating Agencies

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

1	<b>Agency/Group/Organization</b>	AccessPoint RI
	<b>Agency/Group/Organization Type</b>	Services - Housing Services - Children Services - Persons with Disabilities
	<b>What section of the Plan was addressed by Consultation?</b>	Non-Homeless Special Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting to discuss the housing and service needs of individuals with developmental disabilities, the services offered by the agency. The consultation emphasized the need for and the preservation of these programs.
2	<b>Agency/Group/Organization</b>	Adoption RI
	<b>Agency/Group/Organization Type</b>	Services - Children Child Welfare Agency
	<b>What section of the Plan was addressed by Consultation?</b>	Homelessness Strategy Homelessness Needs - Unaccompanied youth Market Analysis Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Executive Director and leadership to discuss service needs and programs for youth in the foster care system, and youth at risk of homelessness as they transition out of the foster care system. Spoke about the coordinated partnership with several agencies in the foster care system and assistance for disconnected youth who are at risk of aging out of the foster care system without permanency or who have aged out. Behavioral health services are critical for children and youth and their families to respond to specific behavioral issues exhibited by youth and to address underlying issues among parents to prevent DCYF involvement.
3	<b>Agency/Group/Organization</b>	AIDS Care Ocean State
	<b>Agency/Group/Organization Type</b>	Housing Services - Persons with HIV/AIDS Services - Health
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Non-Homeless Special Needs

	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with staff to discuss specific services and housing needs for persons living with HIV/AIDS and their families. Also discussed coordination with homeless service providers to identify and rapidly house HIV-infected persons.
4	<b>Agency/Group/Organization</b>	Cranston Senior Services
	<b>Agency/Group/Organization Type</b>	Services - Elderly Persons Services - Persons with Disabilities Other Government - Local
	<b>What section of the Plan was addressed by Consultation?</b>	Non-Homeless Special Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting to discuss the service needs of the elderly population in Cranston including elder care programs for seniors and disabled residents and those suffering from the early onset of dementia, in-home care needs and shortage of healthcare staff that impact supportive service needs.
5	<b>Agency/Group/Organization</b>	Comprehensive Community Action Program
	<b>Agency/Group/Organization Type</b>	Services - Children Services - Elderly Persons Services - Persons with Disabilities Services - Health Services - Education Services - Employment Regional Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homeless Needs - Chronically Homeless Homeless Needs - Families with Children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied Youth Homelessness Strategy Non-Homeless Special Needs Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Executive Director and leadership to discuss programs and services for low-income residents, inclusive of programs for families and children, housing and homelessness, heating assistance, lead paint remediation, basic needs, education and workforce development, health care enrollment, and other services.
6	<b>Agency/Group/Organization</b>	Central RI Chamber of Commerce
	<b>Agency/Group/Organization Type</b>	Services - Employment Regional Organization Business Leaders

	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Economic Development Market Analysis Anti-poverty Strategy Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	In-person meeting to discuss business needs and concerns for Cranston area business members of the Chamber. Surveys also were collected from Cranston-based businesses to solicit information on a range of business and economic development activities in Cranston.
7	<b>Agency/Group/Organization</b>	Hope Alzheimer's Center
	<b>Agency/Group/Organization Type</b>	Services - Elderly Persons Services - Persons with Disabilities Neighborhood Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Non-Homeless Special Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Phone and email discussion about day care needs for those suffering from Alzheimer's disease or dementia. The consultation emphasized the necessity of such a service for Cranston area residents.
8	<b>Agency/Group/Organization</b>	Sstarbirth
	<b>Agency/Group/Organization Type</b>	Services - Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs - Families with Children
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with staff to discuss transitional housing and counseling needs of pregnant women and women with children. The consultation emphasized the need for such services for the Cranston area.
9	<b>Agency/Group/Organization</b>	Cranston Housing Authority
	<b>Agency/Group/Organization Type</b>	Housing PHA Services - Housing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Public Housing Needs Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Non-Homeless Special Needs

	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Phone and email consultation related to coordination between the City Consolidated Plan and the CHA Annual Plan for public housing, the needs of public housing residents, the waiting list for Section 8 vouchers, housing market trends, and the service needs of public housing residents
10	<b>Agency/Group/Organization</b>	Crossroads RI
	<b>Agency/Group/Organization Type</b>	Housing Services - Housing Services - Homeless Services - Education Services - Employment
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Market Analysis Anti-Poverty Strategy
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with the Executive Director and leadership team to discuss trends in homelessness, available programs and services, housing for homeless individuals and families, new and upcoming developments, and the coordinated entry system. Housing availability is still the most pressing challenge for homelessness as well as co-occurring mental health and additional disorders.
11	<b>Agency/Group/Organization</b>	Day One
	<b>Agency/Group/Organization Type</b>	Services - Victims of Domestic Violence
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homeless Needs - Families with Children Non-Homeless Special Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Email communication and review of data related to the housing and supportive services needs of victims of domestic violence.
12	<b>Agency/Group/Organization</b>	Elizabeth Buffum Chace Center
	<b>Agency/Group/Organization Type</b>	Housing Services - Housing Services - Victims of Domestic Violence
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Non-Homeless Special Needs Non-Housing Community Development Needs

	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	In-person meeting with Executive Director and Director of Resident Services to discuss housing and services needs for victims of sexual assault and domestic violence, prevention and educational services, the changing nature of domestic violence, and new laws that help with removing the abuser from the home. The escalating rental costs create challenges for victims and more affordable housing options are critical to move people into independent living.
13	<b>Agency/Group/Organization</b>	Foster Forward
	<b>Agency/Group/Organization Type</b>	Services - Children Services - Homeless Child Welfare Agency Regional Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homeless Needs - Families with children Non-Homeless Special Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Email communication with agency director to discuss the needs of foster children and the frequency of homelessness. Discussed the partnership with ONE Neighborhood Builders on the housing development for foster children who are aging out of the foster care system.
14	<b>Agency/Group/Organization</b>	House of Hope Community Development Corporation
	<b>Agency/Group/Organization Type</b>	Housing Services - Housing Services-homeless
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Executive Director about housing and services needs for homeless individuals and families in Cranston, street outreach, their Fair House development and other units, the NIMBY mentality in the state that blocks affordable housing development, and the Coordinated Entry System. The need for more affordable housing is enormous.

15	<b>Agency/Group/Organization</b>	Housing Network of RI
	<b>Agency/Group/Organization Type</b>	Housing Services - Housing Services - Homeless Services - Fair Housing Planning Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Public Housing Needs Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Non-Homeless Special Needs Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Director about affordable housing, housing finance, investment needs, programs to support new homeowners, the existing market for new owner and rental units, barriers to affordable housing, and opportunities for innovative development. As the Housing Network in a coalition of all the CDCs in the state, consultation leads to better coordination of programs and projects among the various CDCs operating in the State.
16	<b>Agency/Group/Organization</b>	Local Initiatives Support Corporation
	<b>Agency/Group/Organization Type</b>	Housing Services - Housing Services - Homeless Services - Employment Regional Organization Community Development Financial Institution
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Non-Homeless Special Needs Market Analysis Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Executive Director, and the Program Officers for Income and Wealth Building and Lending to discuss housing issues generally and innovative programs and services in Cranston and the State.
17	<b>Agency/Group/Organization</b>	Ocean State Center for Independent Living
	<b>Agency/Group/Organization Type</b>	Services - Housing Services - Elderly Persons Services - Persons with Disabilities Services - Health

	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Non-Homeless Special Needs Market Analysis Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Executive Director and Associate Director to discuss housing needs, and programs and services to meet the needs of individuals living with disabilities, including peer support groups, assistive equipment, at home care, home modifications to enable independent living, and affordable housing needs. There were 17 Cranston households that received home modification services from OSCIL between September 2022 and February 2025. There is still a large demand for affordable units for individuals living with disabilities.
<b>18</b>	<b>Agency/Group/Organization</b>	Operation Stand Down Rhode Island
	<b>Agency/Group/Organization Type</b>	Housing Services - Housing Services - Persons with Disabilities Services - Homeless Services - Employment
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Homelessness Needs - Veterans Non-Homeless Special Needs Market Analysis Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Director of Veteran Housing and Employment to discuss housing and service needs of veterans, veteran homelessness, mental health and addiction recovery services, and legal services. Consultation highlighted the need for more legal services to help address Social Security, housing, VA Compensation, and other issues. Additional education and training are necessary for returning veterans so they can get connected to better employment opportunities and more affordable housing options are needed for veterans and their families.
<b>19</b>	<b>Agency/Group/Organization</b>	Paul V. Sherlock Center on Disabilities
	<b>Agency/Group/Organization Type</b>	Services - Persons with Disabilities Services - Employment Other Government - State Regional organization

	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Non - Homeless Special Needs Market Analysis
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Youth and Adult Initiatives Coordinator to discuss the housing and service needs for individuals with developmental disabilities. There is a large demand for deeply subsidized housing units for individuals with developmental disabilities, especially as they transition into adulthood and seek independent living arrangements.
20	<b>Agency/Group/Organization</b>	RI Coalition to End Homelessness
	<b>Agency/Group/Organization Type</b>	Services - Homeless Services - Fair Housing Regional Organization Continuum of Care
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Market Analysis Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with staff to discuss homeless data, the availability of services and housing for the homeless, the implementation of the Coordinated Entry System, prior research on homelessness and programs, and the transformation of the homelessness system towards more permanent supportive housing. Consultation highlighted the strength of homeless providers in the state, some fragmentation and occasional duplication of services, and strengths and challenges of the coordinated entry system.
21	<b>Agency/Group/Organization</b>	RI Continuum of Care
	<b>Agency/Group/Organization Type</b>	Services - Homeless Other Government - State Continuum of Care
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth

	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Consultation was specific to how the RICoC coordinates with service organizations, municipalities, and state agencies to address the needs of homeless persons and persons at risk of homelessness, as well as how the RICoC and the Consolidated Homeless Fund interact to develop strategies for service provision among the various types of funding streams that support programs and services to address homelessness. There is significant coordination among the various funding streams, municipalities, and agencies that are involved in homelessness.
<b>22</b>	<b>Agency/Group/Organization</b>	RI Dept of Behavioral Healthcare, Developmental Disabilities and Hospitals
	<b>Agency/Group/Organization Type</b>	Services - Persons with Disabilities Services - Health Health Agency Publicly Funded Institution/System of Care Other Government - State
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Non-Homeless Special Needs Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting with Policy and Planning to discuss programs and services available for individuals living with mental illness, substance abuse disorders, and developmental disabilities, and the ecosystem of agency providers in Cranston. Consultation also involved innovative investments in housing and services for these populations. Medicaid rates are generally too low to adequately cover the costs of services, creating financial pressure for provider agencies and a need to do additional fundraising and grant solicitation to support these services.
<b>23</b>	<b>Agency/Group/Organization</b>	RI Department of Corrections
	<b>Agency/Group/Organization Type</b>	Publicly Funded Institution/System of Care Other government - State
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Homeless Needs - Chronically homeless Non-Homeless Special Needs

	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	In-person meeting with Interdepartmental Project Manager, Institutional Programs and Services, Professional Services Coordinator / Transitional Services, and the Principal Research Technician to discuss the inmate population, discharge planning, recidivism rates, and programs and services available in Correctional Facilities and services necessary for newly released individuals. Service appointments are made for individuals upon release, but often they do not appear. Especially challenging are drug treatment appointments are set for too long after release and individuals fall back into drug use.
24	<b>Agency/Group/Organization</b>	Rhode Island Housing and Mortgage Finance Corporation
	<b>Agency/Group/Organization Type</b>	Housing Services - Housing Services - Fair Housing Other Government - State Continuum of Care Private Sector Banking / Financing
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Lead-based Paint Strategy Homeless Needs - Chronically homeless Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Consultation involved the affordable housing developments that were funded by RI Housing, general affordable housing needs for new and rehab units, lead abatement and property rehabilitation, demographic trends and their impact on housing needs, and the housing and service needs of the homeless.
25	<b>Agency/Group/Organization</b>	Thrive Behavioral Health
	<b>Agency/Group/Organization Type</b>	Housing Services - Children Services - Homeless Services - Health
	<b>What section of the Plan was addressed by Consultation?</b>	Housing Need Assessment Homelessness Strategy Non-Homeless Special Needs Market Analysis Non-Homeless Community Development Needs

	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	In-person meeting with Chief Executive Officer to discuss mental health, behavioral health, and substance abuse needs and services available in Cranston, opioid epidemic, housing needs and supportive services for homeless individuals and families, and the dramatic rise of kinship care.
26	<b>Agency/Group/Organization</b>	Tides Family Services
	<b>Agency/Group/Organization Type</b>	Services - Children Services - Health Services - Education
	<b>What section of the Plan was addressed by Consultation?</b>	Non-Homeless Special Needs Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	In-person meeting with Chief Executive Officer, Vice President of Treatment Programs, and Director of Human Resources to discuss intensive, community and home-based services that address behavioral issues to help avoid placing children into DCYF care and preserve family stability, and reentry services to transition youth and young adults from the Rhode Island Training School back into the community.
27	<b>Agency/Group/Organization</b>	Cranston Public School District
	<b>Agency/Group/Organization Type</b>	Services - Children Services - Education Other government - Local Grantee Department
	<b>What section of the Plan was addressed by Consultation?</b>	Homeless Needs - Families with children Non-Homeless Special Needs Non-Housing Community Development Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Consultation related to recent school consolidation, declining student enrollments, conditions of facilities, student homelessness, and general needs of public school students.
28	<b>Agency/Group/Organization</b>	City of Pawtucket
	<b>Agency/Group/Organization Type</b>	Other Government - Local
	<b>What section of the Plan was addressed by Consultation?</b>	Homelessness Strategy Non-Homeless Special Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting to discuss the State's homelessness plan and strategy.

29	<b>Agency/Group/Organization</b>	City of Warwick Office of Housing & Community Development
	<b>Agency/Group/Organization Type</b>	Other Government - Local
	<b>What section of the Plan was addressed by Consultation?</b>	Homelessness Strategy Non-Homeless Special Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Meeting to discuss the State's homelessness plan and strategy, CDBG programming, and collaboration of joint municipality issues.
30	<b>Agency/Group/Organization</b>	Blessed Mother Mary Food Pantry, Inc.
	<b>Agency/Group/Organization Type</b>	Food Bank for the Needy Neighborhood Organization
	<b>What section of the Plan was addressed by Consultation?</b>	Non-Homeless Special Needs
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Discussions in-person and by phone. The city will continue to support the needs of the food bank.
31	<b>Agency/Group/Organization</b>	Rhode Island Emergency Management Agency
	<b>Agency/Group/Organization Type</b>	Agency - Emergency Management
	<b>What section of the Plan was addressed by Consultation?</b>	Non-Housing Community Development
	<b>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</b>	Phone, website. RIEMA prepares for and responds to statewide emergencies, such as flooding.

**Identify any Agency Types not consulted and provide rationale for not consulting**

CEW Advisors, Inc., the consultant hired by the City of Cranston, scheduled several one-on-one conversations with organizations and agencies engaged in affordable housing, homelessness, social service delivery, senior and youth programming, community and economic development, and other relevant issue areas. Most of these organizations and agencies have existing relationships and partnerships with the city. There were no agency types serving the Cranston community that were not consulted during the development of this Consolidated Plan. Further, the information gleaned from the myriads of agencies and community members consulted was largely in alignment and self-reinforcing. Because of CDBG’s broad application, most community interests have the potential to impact priority needs and their solutions.

## Other planning efforts

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

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
Continuum of Care	Rhode Island Continuum of Care	This operational and policy guidance document details the priorities of the RICoC, including the policy of prioritizing the chronically homeless for permanent supportive housing. This aligns with the priorities of the City and undergirds the work of the agencies working with the homeless.
2024 Housing Fact Book	HousingWorks RI	Affordable housing is one of the most significant needs in the City of Cranston. The Housing Fact Book supports this finding and also discusses additional housing strategies that could be implemented in Cranston. There is information about healthy housing strategies and the state transportation system that were integrated into the Needs Assessment. Finally, the Cranston city profile was a useful summary snapshot of the affordable housing challenges.
2024 Rhode Island Kids Count Factbook	Rhode Island KIDS COUNT	Rhode Island KIDS COUNT is a policy and advocacy agency that works to improve the health, safety, education, economic well-being, and development of Rhode Island's children. The Fact Book is the preeminent resource on child well-being and covers a wealth of indicators. The data contained in the report informed the Needs Assessment section as well as supported program ideas contained in the Strategic Plan.
2023 Strategic Plan	Rhode Island Office of Healthy Aging	Strategic plan discusses the priority areas of focus for the Office of Healthy Aging and details the various programs and services which are available through the office for older individuals. Many of the comments align with the strategic goals of this Consolidated Plan: place-based supports, programs to age in place, health and wellness, including behavioral health and food security, and protections for older individuals.

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
City of Cranston Comprehensive Plan 2024	City of Cranston	The Comprehensive Plan addresses many community and economic development concerns such as housing, parks, transportation, community services, innovation district, the airport, neighborhood activity centers, sustainability, and many others. The Plan is based on a substantial community engagement process that was designed to find out what Cranston residents, businesses, and other stakeholders were thinking about the future of the city. The goals detailed in the Strategic Plan support the goals and concepts of the Comprehensive Plan.
City of Cranston Hazard Mitigation Plan (2022)	City of Cranston	The purpose of the Cranston Hazard Mitigation Strategy is to advocate the concepts of disaster resilient and sustainable communities. Cranston is committed to building a disaster resistant community, achieving sustainable development, and mitigating hazard impacts before a disaster hits. The Consolidated Plan aligns with the strategies contained in this report to create a more resilient and safer community.
Biennial Employment and Training Plan, FY26-FY27	Governors Workforce Board RI	This Plan outlines overarching priorities of the state workforce development system aimed to increase the impact of its programs and services to create a more robust and capable workforce to meet the needs of high-wage jobs in high-growth industries.
How to End Long-Term Homelessness in Rhode Island	HousingWorks RI	This report recommends the production of a substantial number of deeply affordable homes to house individuals and families earning less than 50% AMI. The city is fully supportive of this recommendation and works with agencies in Cranston to increase the supply of affordable housing.
Rhode Island Innovates: 2.0	New Localism Associates; City Facilitators; Qvarts	A comprehensive economic development strategy for the state based on an evaluation of current conditions and best opportunities for high-quality economic growth, based on leveraging existing assets in the state, with the goal of promoting an advanced economy based on high-growth and high-wage industries.

<b>Name of Plan</b>	<b>Lead Organization</b>	<b>How do the goals of your Strategic Plan overlap with the goals of each plan?</b>
RI Regional Analysis of Impediments to Fair Housing	State of RI Office of Housing and Community Development	The State of Rhode Island undertook a regional analysis of impediments to fair housing as part of a HUD funded Sustainable Communities Regional Planning Grant. As part of the development of the statewide Analysis, the city had the opportunity to consult with, offer comment, and supplement additional information relevant to the city. The regional analysis discusses broader level market trends that inhibit the development of affordable housing in the city and State.
2024 Rhode Island Standard of Need	Economic Progress Institute of Rhode Island	This report summarizes what the real cost is to meet basic needs for families and individuals in Rhode Island, and how state and federal work supports help households meet those needs.
State Plan for Independent Living	Rhode Island Statewide Independent Living Council	The State Plan for Independent Living is a three-year blueprint for improving lives of individuals with significant disabilities through implementing the Independent Living Philosophy. The State Plan outlines the current scope of services provided by the Centers for Independent Living, as well as the goals for expansion and improvement of Independent Living in Rhode Island. The State Plan addresses issues important to Independent Living, including transitioning, home modification, assistive technology, legislative advocacy, health care, and transportation so that all persons with disabilities have access to the resources necessary to live fully in the community.
Transit Forward RI 2040	RI Public Transit Authority, RI Department of Transportation, RI Department of Statewide Planning	The Transit Master Plan will envision how the public transportation network should look and operate in the state. RI passenger transportation network currently includes bus, rail and water transportation services. The Transit Master Plan will envision how this network should be enhanced and further developed to best meet the travel needs of the state's residents, workers and visitors.

<b>Name of Plan</b>	<b>Lead Organization</b>	<b>How do the goals of your Strategic Plan overlap with the goals of each plan?</b>
WIOA State Plan 2024-2028	Governors Workforce Board RI	The Rhode Island State workforce plan contains three strategies to improve workforce development efforts in RI: (1) a demand-driven, sector-based strategy that aggregates labor demand by industry; (2) a career pathway strategy to provide employment, education, training and support services for individuals; and (3) an effective performance measurement strategy to track labor market interactions beyond federal reporting requirements. These strategies aim to ensure Rhode Island employers have the talent they need to continue to expand their operations while ensuring Rhode Islanders are equipped to take advantage of the employment opportunities available in the state.

## Coordination with other public entities

*Describe cooperation and coordination with other public entities, including the State and any adjacent units of general local government, in the implementation of the Consolidated Plan (91.215(l))*

As discussed above, Cranston has a productive and symbiotic working relationship with the state in a number of different ways. RI Housing, the State's housing finance agency, works closely with the Department of Community Development on a cross-referral basis for single and multi-family housing rehabilitation, the development of affordable housing units, and lead hazard reduction. When projects are funded through multiple sources (e.g., HOME, the State's Abandoned Property Program, Rhode Island Housing), the City works closely with these groups or agencies to coordinate efforts and compliance for individual programs, funding sources, regulations and laws/ordinances. The City also shares responsibilities in areas such as environmental review and monitoring issues such as Davis/Bacon, Section 3 and other project compliance requirements.

The city interacts with State agencies and departments directly through various city departments including the Planning Department, Economic Development, the Cranston Senior Center, and on a regional basis through local non-profit social service agencies. Some of the State agencies and departments include Department of Behavioral Healthcare, Development Disabilities & Hospitals; Department of Children Youth and Families; Office of Healthy Aging; Department of Health; Department of Labor and Training; Department of Human Services; Department of Transportation; Office of Statewide Planning; State Office of Housing & Community Development; Department of Environmental Management; and Department of Emergency Management. These connections help the city to determine and meet social service, job training, housing, economic development, and emergency preparedness needs.

Finally, Cranston consults with neighboring municipalities on a periodic basis, both through direct communication when projects and issues cross municipal borders, but also through the Rhode Island League of Cities and Towns (discussed above). Importantly, all the state's Entitlement Communities have established a working group to discuss broader regional issues and how the municipalities can work closer together and learn from each other to better develop proactive and forward-looking collaborative efforts to address local, regional, and statewide housing and community development needs.

## Narrative (optional)

N/A

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

## **Summary of citizen participation process**

*Summarize citizen participation process and how it impacted goal-setting*

Citizen participation is an essential part of the consolidated planning process because it helps ensure that decisions are made with careful attention to articulated community needs and prioritizes the preferences of Cranston residents. Further, the input of stakeholders and community members generates additional public awareness about the consolidated planning process. Public involvement in the process allowed for the perspectives of residents to be elevated and highlighted during the decision-making process, which gave the City of Cranston more relevant information to develop the Consolidated Plan's priorities and goals. Receiving input and buy-in from planning officials, stakeholders, agency staff, and residents of Cranston played a significant role in helping the plan take shape.

The City of Cranston contracted with CEW Advisors, Inc. to conduct a broad consultation and community engagement process to develop the Consolidated Plan. This process involved dozens of stakeholder interviews with public services organizations, chamber of commerce, city staff, community groups and associations, several community meetings, focus groups with neighborhood residents and business owners, and an online survey to supplement the public hearings process. These public engagements and citizen participation methods were used to share information about the Consolidated Planning process, identify relevant community needs, and develop a set of priorities and goals to guide city actions over the next five years.

Information gathered from the consultation process, previous surveys and community meetings, and the citizen participation process was generally self-reinforcing and aligned with the previous information collected from other planning processes. All the survey results were collected and incorporated in the Needs Assessment and Market Analysis sections of the Consolidated Plan and helped inform the selection process for funding projects described in the Strategic Plan and Annual Action Plan sections.

## Citizen Participation Outreach

Online Community Needs Survey	
<i>Mode of Outreach</i>	Internet Outreach
<i>Target of Outreach</i>	Non-targeted/broad community
<i>Summary of response/attendance</i>	Online survey had a total of 67 survey responses that were received from residents throughout the city.
<i>Summary of comments received</i>	The Citywide survey results were used to inform the Needs Assessment and Market Analysis sections of the Consolidated Plan.
<i>Summary of comments not accepted and reasons</i>	Not Applicable.
<i>URL (If applicable)</i>	<a href="https://bit.ly/CranstonCommunitySurvey">https://bit.ly/CranstonCommunitySurvey</a>

Comprehensive Plan Public Hearing	
<i>Mode of Outreach</i>	Public Meeting Cranston City Council September 24, 2024
<i>Target of Outreach</i>	Non-targeted/broad community
<i>Summary of response/attendance</i>	The meeting was a discussion about the purpose, structure, and process of adopting the city’s updated Comprehensive Plan, which serves as a long-term policy guide for city development.
<i>Summary of comments received</i>	<p>The most salient topics discussed were as follows:</p> <p><b>Affordable Housing Need:</b></p> <ul style="list-style-type: none"> <li>• A specific goal from the current plan targets 30 new affordable units per year, which was often unmet until recent years.</li> <li>• In the last two years, the city has seen over 100–150 affordable units negotiated and approved.</li> <li>• Phase 2 will reevaluate this goal and potentially expand strategies to increase affordability.</li> </ul> <p><b>Accessory Dwelling Units (ADUs):</b></p> <ul style="list-style-type: none"> <li>• New state legislation allows ADUs by right, especially on lots over 20,000 sq. ft.</li> </ul>

	<ul style="list-style-type: none"> <li>• The city is working on clear local processes and regulations for ADUs.</li> <li>• ADUs are seen as a solution for multi-generational living, first-time renters, and older adults—but don’t currently count toward state-defined “affordable housing” metrics.</li> <li>• Discussion included concerns about possible impacts on school capacity and city services, though planners believe ADUs will have diffuse, lower-density impacts.</li> </ul> <p><b>Zoning Challenges:</b></p> <ul style="list-style-type: none"> <li>• Cranston has ~1,500 parcels with mismatched zoning (e.g., homes zoned as industrial).</li> <li>• These discrepancies hinder refinancing, permitting, and contribute to housing supply issues.</li> <li>• Fixing this requires substantial public process and funding for rezoning efforts—seen as a long-term project beyond Phase 2.</li> </ul> <p><b>Nonconforming Lots:</b></p> <ul style="list-style-type: none"> <li>• Many residential lots are smaller than the minimum zoning requirements, especially A6 zones requiring 6,000 sq. ft.</li> <li>• The state has intervened to allow building on such lots without zoning board approval, facilitating modest infill development.</li> <li>• Future policy changes will aim to align zoning rules with real neighborhood conditions to support appropriate growth.</li> </ul>
<b>Summary of comments not accepted and reasons</b>	Not Applicable. All comments were used to inform the Needs Assessment and Market Analysis.
<b>URL (If applicable)</b>	<a href="https://www.youtube.com/watch?v=zhcxrTTslYc&amp;list=PLCAAjaiof4ujmS_qae-jBEvsghw-UTYka1&amp;index=13">https://www.youtube.com/watch?v=zhcxrTTslYc&amp;list=PLCAAjaiof4ujmS_qae-jBEvsghw-UTYka1&amp;index=13</a>

<b>Analysis of Impediments to Fair Housing Stakeholder Workshop</b>	
<b>Mode of Outreach</b>	Public Meeting January 9, 2025 Virtual Meeting
<b>Target of Outreach</b>	<ul style="list-style-type: none"> <li>• Non-Targeted / Broad Community</li> </ul>
<b>Summary of response/attendance</b>	Attendees from across the state of Rhode Island inclusive of stakeholders on affordable housing, fair housing, and

	community development for the purpose of drafting the state’s Analysis of Impediments to Fair Housing Choice.
<b>Summary of comments received</b>	Broad-based discussion on challenges and barriers to developing affordable housing. Participants discussed housing needs, obstacles, and gaps in services related to barriers to achieving fair housing, housing for homeless and special needs populations, healthy housing, neighborhood development, community development, and preservation of affordable housing.
<b>Summary of comments not accepted and reasons</b>	Not Applicable. All comments were accepted and used to inform the Needs Assessment and Market Analysis.
<b>URL (If applicable)</b>	N/A

**CDBG Public Service Hearing #1 (Cranston Senior Center)**

<b>Mode of Outreach</b>	Public Meeting 2025-02-10 Cranston Senior Center
<b>Target of Outreach</b>	Non-targeted/broad community
<b>Summary of response/attendance</b>	Attendees included representative from Hope Alzheimer’s Center, Blessed Mother Mary Food Pantry, Sojourner House, YMCA Cranston, Sstarbirth, and Clothes to Kids RI
<b>Summary of comments received</b>	Information was related to specific programming outcomes and capabilities of each organization.
<b>Summary of comments not accepted and reasons</b>	Not Applicable. All comments were accepted.
<b>URL (If applicable)</b>	N/A

**CDBG Public Service Hearing #2 (Cranston Senior Center)**

<b>Mode of Outreach</b>	Public Meeting 2025-02-12 Cranston Senior Center
<b>Target of Outreach</b>	Non-targeted/broad community
<b>Summary of response/attendance</b>	Attendees included representative from Cranston Senior Enrichment Center, Elizabeth Buffam Chase Center, and Day One

<b>Summary of comments received</b>	Information was related to specific programming outcomes and capabilities of each organization.
<b>Summary of comments not accepted and reasons</b>	Not Applicable. All comments were accepted.
<b>URL (If applicable)</b>	N/A

**CDBG Public Service Hearing #3 (Cranston Senior Center)**

<b>Mode of Outreach</b>	Public Meeting 2025-02-19 Cranston Senior Center
<b>Target of Outreach</b>	Non-targeted/broad community
<b>Summary of response/attendance</b>	Attendees included representative from Comprehensive Community Action Program
<b>Summary of comments received</b>	Information was related to specific programming outcomes and capabilities of each organization.
<b>Summary of comments not accepted and reasons</b>	Not Applicable. All comments were accepted.
<b>URL (If applicable)</b>	N/A

**Public Hearing (Cranston Senior Center)**

<b>Mode of Outreach</b>	Public Meeting April 9, 2025 Cranston Senior Center
<b>Target of Outreach</b>	<ul style="list-style-type: none"> <li>Non-Targeted / Broad Community</li> </ul>
<b>Summary of response/attendance</b>	To be written after meeting.
<b>Summary of comments received</b>	To be written after meeting.
<b>Summary of comments not accepted and reasons</b>	To be written after meeting.
<b>URL (If applicable)</b>	To be written after meeting.

# Needs Assessment

## NA-05 Overview

### Needs Assessment Overview

This section introduces and summarizes the key points of the Needs Assessment. These elements are described in more detail in the following sections of the Needs Assessment:

- Housing Needs Assessment
- Disproportionately Greater Need
- Public Housing
- Homeless Needs Assessment
- Non-Homeless Special Needs Assessment
- Non-Housing Community Development Needs

The Housing and Community Needs Assessment was developed utilizing various data sources and local planning studies and compiled through consultation and community engagement with stakeholders throughout the Cranston community including state agencies, service providers, affordable housing developers, community partners, and city residents. The Needs Assessment investigates the baseline, trends, and future housing supply and demand. Housing and services for special needs populations were also examined which included the elderly and frail elderly, homeless individuals and families, formerly incarcerated individuals, persons with HIV/AIDS, victims of domestic violence, youth aging out of the foster care system, veterans, persons with physical and cognitive disabilities, and persons with drug and/or alcohol addiction.

### Major needs

The following issues were identified through consultation (see PR-10), community meetings (see PR-15), and analysis of public data sources (see Appendix A). The following is a summary of the key points in the Needs Assessment.

#### Housing Affordability

Cranston has experienced population growth of 2.5% between 2010 and 2023. Over the same time period the city saw an increase in the number of occupied housing units (7.3%) and a massive drop of 31.2% in the number of vacant units. The available public data, information from community meetings and stakeholder interviews, and recent research all show that housing affordability and increasing cost burden is a significant and growing concern for Cranston residents. Slightly under one-third (31.5%) of all households in Cranston are paying more than 30% of their income on housing (cost burdened or severely cost burdened). There is a desperate need for affordable homeownership and affordable rental housing throughout the city.

#### Housing Rehabilitation

There are properties throughout the city that are in need of rehabilitation, including roof repairs, peeling paint, damaged siding, and boiler replacement. Most of the housing stock in the city is older, with 75.2% being built before 1980. This older housing stock requires more rehabilitation and upkeep to maintain. Typically, after a home reaches 30 or 40 years old it begins to require significant repairs and/or major rehabilitation. This becomes even more problematic if the home wasn't well-maintained throughout. Further, homes in the Northeastern United States suffer from additional weather-related problems due to icy weather, heavy snow, and frigid temperatures.

Also, damage from more intense storms related to climate change is also creating more demand for home repairs.

### **Public Housing**

The Cranston Housing Authority (CHA) is the sole agency in the city tasked with the administration of public housing. Most public housing units are for elderly and disabled occupants whose needs are primarily related to improved accessibility due to mobility challenges. Housing choice voucher holders are finding it increasingly more difficult to secure and remain in rental housing as rental prices keep increasing. Voucher holders can often be priced out of the rental market because the voucher will not cover the full cost of rent.

### **Homelessness**

Homelessness has been increasing in the state of Rhode Island since the pandemic began in 2020, increasing 121% from 1,104 homeless people in 2020 to 2,442 homeless people in 2024. In the Cranston, Johnston, Central Falls, and North Providence area, there were 110 sheltered persons and another 16 unsheltered persons as of the 2024 PIT count. The PIT data which estimates the number of persons experiencing homelessness on a given night is for the combined suburban area of Cranston, Johnston, Central Falls, and North Providence. This is the smallest level of disaggregation available from the PIT Count. There is a significant risk of homelessness due to the unsustainable increases in housing costs.

### **Non-Homeless Special Needs Assessment:**

There are households throughout the city that have special needs unrelated to homelessness. Some of these population groups include the elderly and frail elderly; those living with some type of physical or cognitive disability; persons with substance use disorders; persons with mental illness; and victims of domestic violence, dating violence, sexual assault, and stalking.

Special needs populations face a multitude of housing and support service needs unique to their circumstances. A wide availability of housing options for each of these groups, with the requisite supporting services will be necessary to truly meet their needs. Key support needs include additional accommodations for the city's aging population and those that suffer from ambulatory and independent living difficulties.

Of particular note, Cranston's elderly population (aged 65+) has been growing over the past several years and currently represents 17.1% (14,133) of the total population (82,632) and 31.9% (10,390) of all households in the city (32,596). A significant percentage of all senior households, 44.7%, live alone, and 67% of all senior households own their own home. Generally, the senior population has more limited fixed incomes than the population as a whole, primarily Social Security and other retirement income. The elderly and frail elderly populations have additional unique challenges that come with age, including chronic and other medical conditions, higher rates of physical and mental disabilities (such as Alzheimer's and dementia), mobility challenges, and higher health care costs. A significant concern for the senior population is the eventual transition from independent living to assisted living and nursing home care.

### **Non-Housing Community Development Needs**

#### **Public Facilities and Infrastructure Needs**

Key priorities include relocating three aging fire stations to larger, modern facilities, upgrading the city's IT system for emergency communication reliability, and improving stormwater management in flood-prone areas. Critical wastewater infrastructure, such as pump stations, requires elevation to prevent flood damage. The city also needs a new fire station in Western Cranston to accommodate growth. Other priorities include municipal building renovations, redesigning the

historic Budlong Swimming Pool, enhancing senior services, consolidating municipal offices, and expanding recreational facilities. These improvements are essential for disaster resilience, public safety, and maintaining Cranston's quality of life. Additional infrastructure needs are street and sidewalk improvements, public parks, bicycle and walking paths, and sewers and storm water management related to periodic flooding.

### Public Services

The primary public service needs are afterschool and summer recreation programs for youth and teens, affordable childcare, mental health services and services for individuals with mental illness, programs and services for the city's senior population, and emergency food assistance.

## Community Survey Results

As part of the City's citizen participation process, an online survey collected information from Cranston residents to supplement the data available from public sources and information collected from public service agencies, community service providers, and community meetings and focus groups.

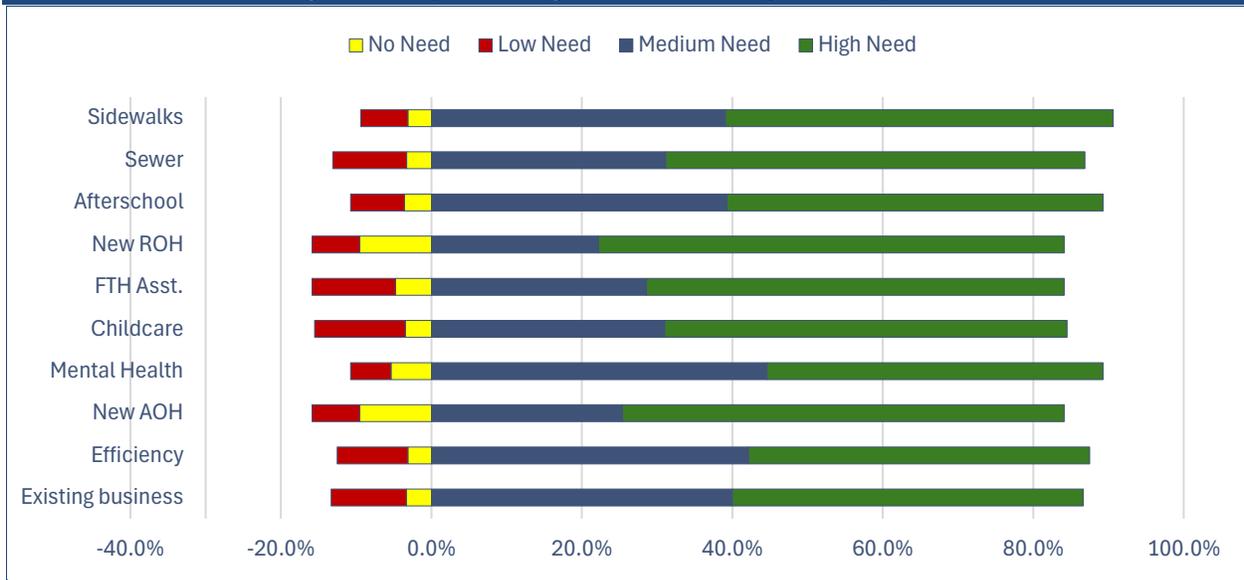
The survey had 65 respondents, of whom:

- 78% own their home and 22% rent
- 9% were Very Low Income, 14% were Low Income, 32% were Moderate Income, and 45% were High Income
- The median age was 51
- Lived in a household with:
  - at least one person over 65 (23%)
  - at least one person under 18 (38%)
  - at least one person with a disability (5%)
  - at least one active military or veteran (3%)
  - membership meeting more than one of these categories (11%)

The online survey asked respondents to select the most important issues of concern or priority needs. The top ten needs were identified as:

- **Sidewalk improvements** (90.6% medium or high need).
- **Sewer system / flood draining improvements** (86.9% medium or high need).
- **Afterschool and summer recreation programs for youth and teens** (89.3% medium or high need).
- **Construction of new affordable housing for rent** (84.1% medium or high need).
- **First-time homebuyer assistance** (84.1% medium or high need).
- **Affordable childcare** (84.5% medium or high need).
- **Mental health services / Services for persons with mental illness** (89.3% medium or high need).
- **Construction of new affordable housing for sale** (84.1% medium or high need).
- **Energy efficiency upgrades** (87.5% medium or high need).
- **Retention / expansion of existing businesses** (86.7% medium or high need).

**NA-05 Figure 1: Top Housing and Community Development Needs**



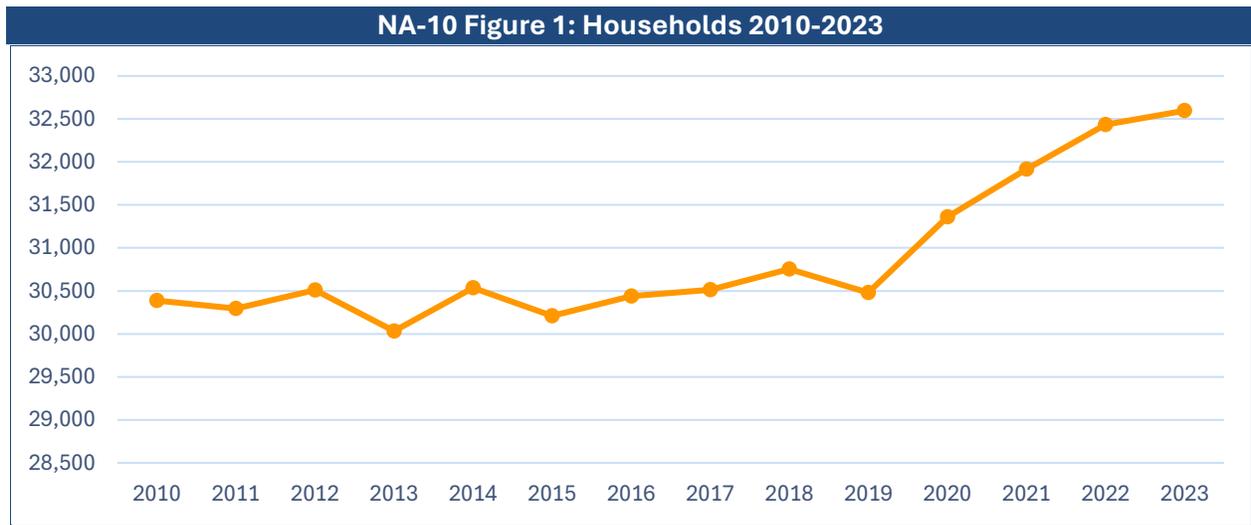
	Definition	No Need	Low Need	Medium Need	High Need
<b>Sidewalks</b>	Sidewalk improvements	3.1%	6.3%	39.1%	51.6%
<b>Sewer</b>	Sewer system / flood draining improvements	3.3%	9.8%	31.1%	55.7%
<b>Afterschool</b>	Afterschool and summer recreation programs for youth and teens	3.6%	7.1%	39.3%	50.0%
<b>New ROH</b>	Construction of new affordable housing for RENT	9.5%	6.3%	22.2%	61.9%
<b>FTH Asst.</b>	First-time homebuyer assistance	4.8%	11.1%	28.6%	55.6%
<b>Childcare</b>	Affordable childcare	3.4%	12.1%	31.0%	53.4%
<b>Mental Health</b>	Mental health services / Services for persons with mental illness	5.4%	5.4%	44.6%	44.6%
<b>New AOH</b>	Construction of new affordable housing for SALE	9.5%	6.3%	25.4%	58.7%
<b>Efficiency</b>	Energy efficiency upgrades	3.1%	9.4%	42.2%	45.3%
<b>Existing business</b>	Retention / expansion of existing businesses	3.3%	10.0%	40.0%	46.7%

Data Source: CEW Advisors, Inc. Housing & Community Development Survey

# NA-10 Housing Needs Assessment - 24 CFR 91.205 (a,b,c)

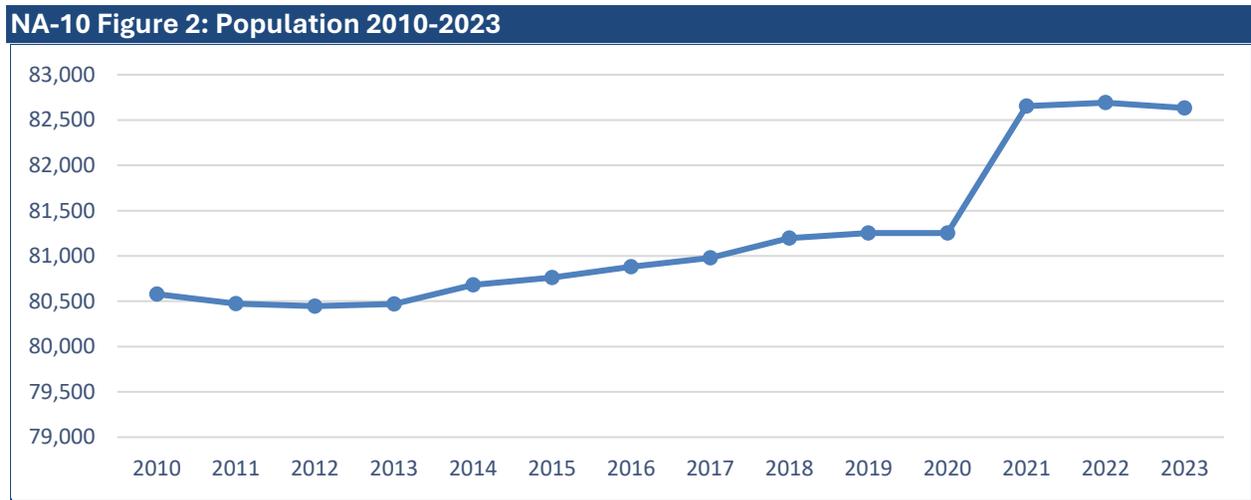
## Summary of Housing Needs

Stable, safe, and affordable homes are foundational to a healthy and resilient Cranston community where every resident has the opportunity to succeed and thrive. There are a total of 32,596 households in the City of Cranston, based on the 2023 American Community Survey 5-Year Estimate. The total number of households in Cranston was largely stable from 2010 through 2019. That number has grown rapidly from 2019 until 2023 but shows signs of levelling off. There are 7.3% more households in Cranston now than there were in 2010.



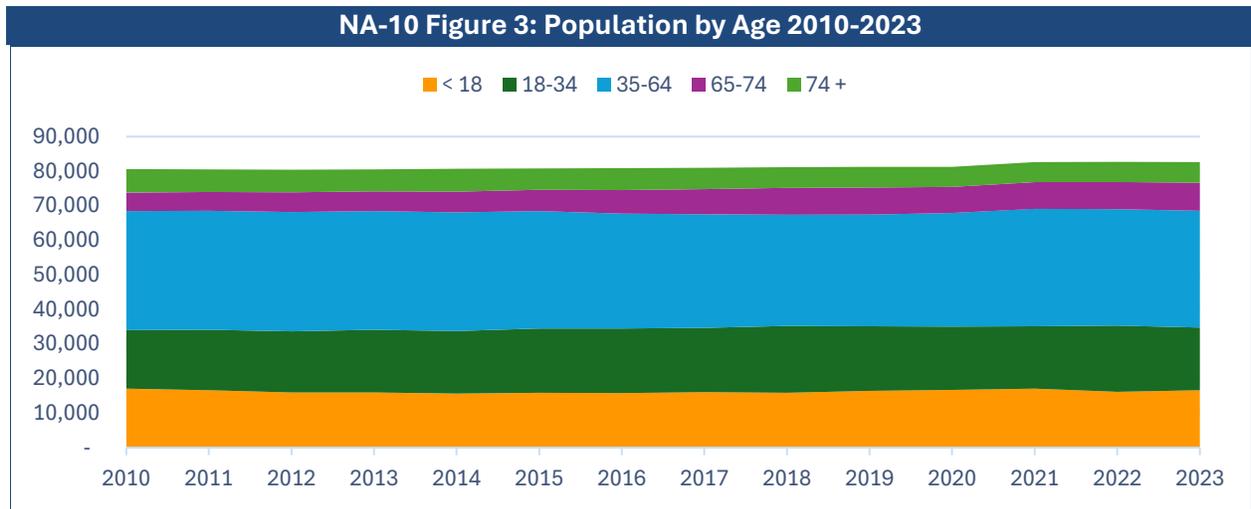
Data Source: 2010-2023 ACS5 – DP02

Population trends in Cranston show that the city’s population was growing slowly from 2012 until 2020, then it experienced a large jump during the first year of the start of the COVID-19 pandemic. After 2021 the population levelled off then declined slightly. There are 2.5% more people in Cranston now than there were in 2010. As of 2023, Cranston’s population was 82,632.



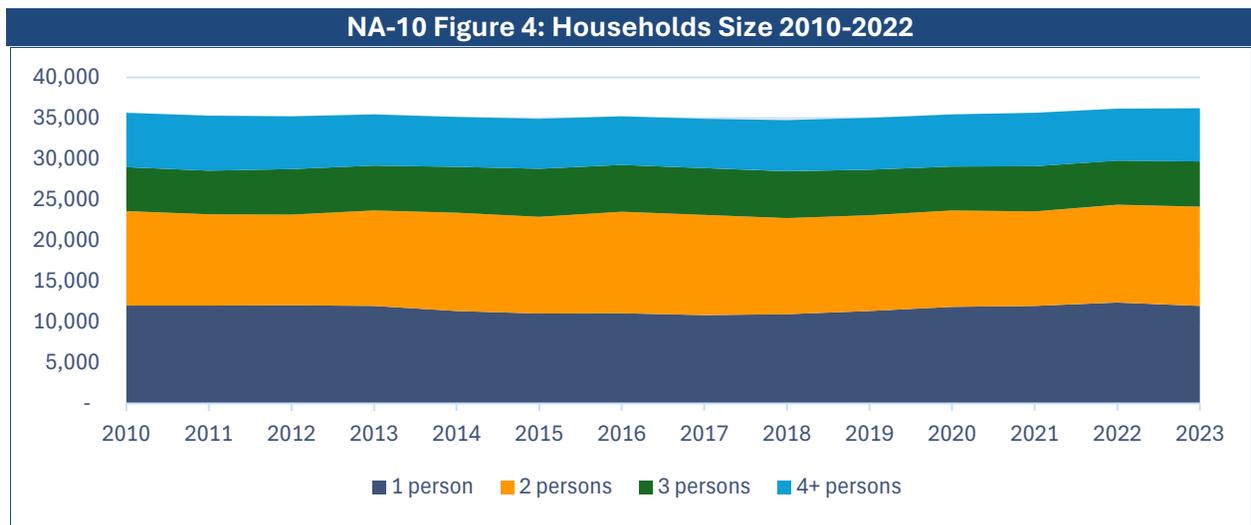
Data Source: 2010-2023 ACS5 – DP02

Cranston has seen a significant 16.5% increase in the population aged 65 and older over the past 14 years, from 12,217 in 2010 to 14,133 in 2023. At the same time, the population of children under the age of 18 has declined 2.3%, from 17,046 in 2010 to 16,662 in 2023. As people live longer and healthier lives, the composition and needs of the housing market change. This increases the needs of people with a wider range of abilities, needs and disabilities. These needs range from the more typical age-related changes such as those relating to vision, hearing, and mobility, to those of mental health, educational opportunities, and transportation. It will grow increasingly important for communities to plan for and address this spectrum of needs, rather than focus on just one.



Data Source: 2010-2023 ACS5 – DP04

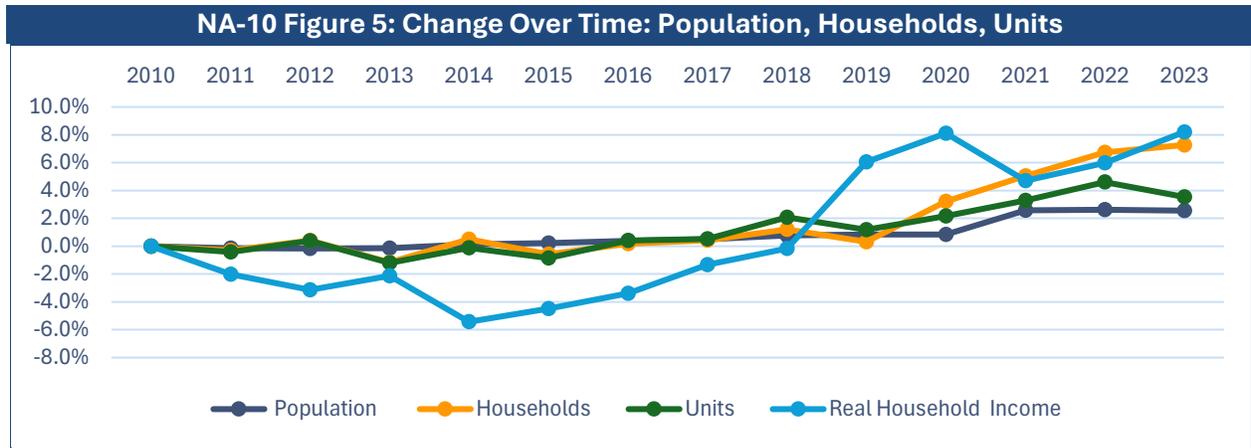
The predominance of one-person and two-person households in Cranston is significant. 63.8% of all households in Cranston are one- and two-person households. Three-person households comprise 16% of all households, while households with four or more individuals account for 20.2% of all households in the city. Cranston saw growth in every household size. One-person households grew 12.8%; two-person households grew 4.6%; three-person households grew 9.9%; and four-person and larger households grew by 1.7% over the 2010-2023 period. These trends correspond with the demographic shifts seen in the city, with fewer children and more seniors.



Data Source: 2010-2023 ACS5 – S2501

This overall trend towards smaller households impacts the cost of housing. More households in a community increase the demand for more housing units. Additionally, the changing size of households in Cranston, with an increasing share of smaller households also changes the type of housing that is needed in the city, with an emphasis on smaller housing units that are better suited for smaller household sizes.

While the total population in Cranston saw a 2.5% increase from 2010 to 2023, the total number of households saw a larger increase of 7.3% during the same period. In 2010, the average household size was 2.46 persons, while in 2023 the average household declined to 2.42 persons.



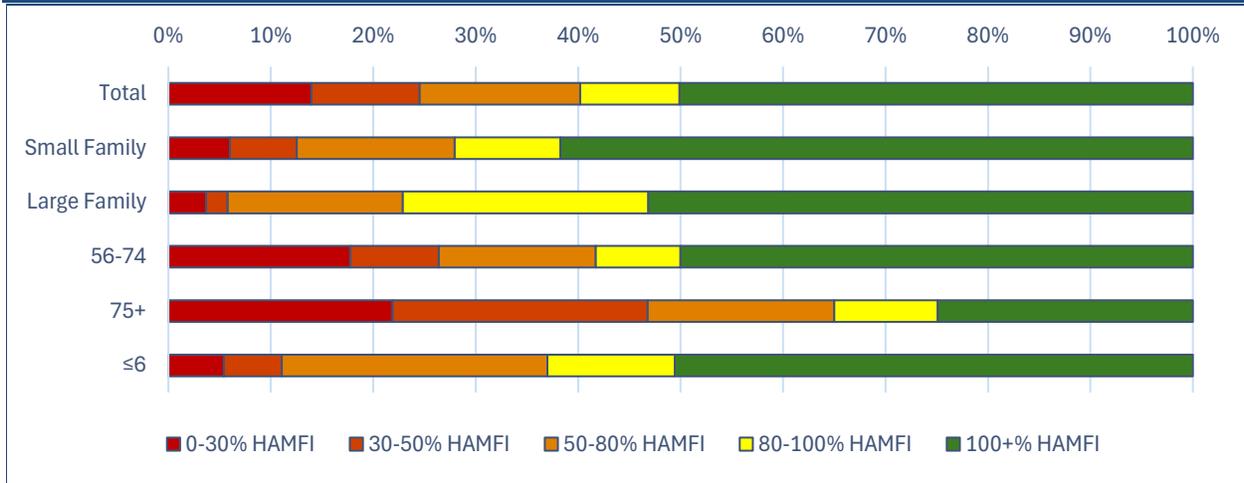
From 2010-2019 the population, number of households, and number of housing units in Cranston was remarkably stable. Over the same time period real household incomes declined in the aftermath of the 2008 financial crisis, slowly recovering from 2014-2018. From 2018-2020 income grew much faster than the other three metrics but fell sharply in 2021. Income and the number of households have grown at about the same rate since then. Meanwhile, growth in the number of housing units has slightly outpaced growth in total population but has not kept pace with the growth in the number of households. In 2023 compared to 2010, population had grown 2.5%, the number of households had grown 7.3%, the number of housing units had grown 3.5% and real household income adjusted for inflation had grown 8.2%.

**NA-10 Figure 6: Housing Needs Assessment Demographics**

	2010	2023	% Δ
<b>Population</b>	80,580	82,632	2.5%
<b>Households</b>	30,386	32,596	7.3%
<b>Units</b>	32,580	33,733	3.5%
<b>Nominal Median Household Income</b>	\$57,922	\$87,716	51.4%
<b>Median Household Income (2010 dollars)</b>	\$57,922	\$62,676	8.2%
<b>Median Household Income (2022 dollars)</b>	\$81,063	\$87,716	8.2%

Data Source: 2010-2023 ACS5 - DP02, DP03, DP04, DP05. BLS CPI Calculator

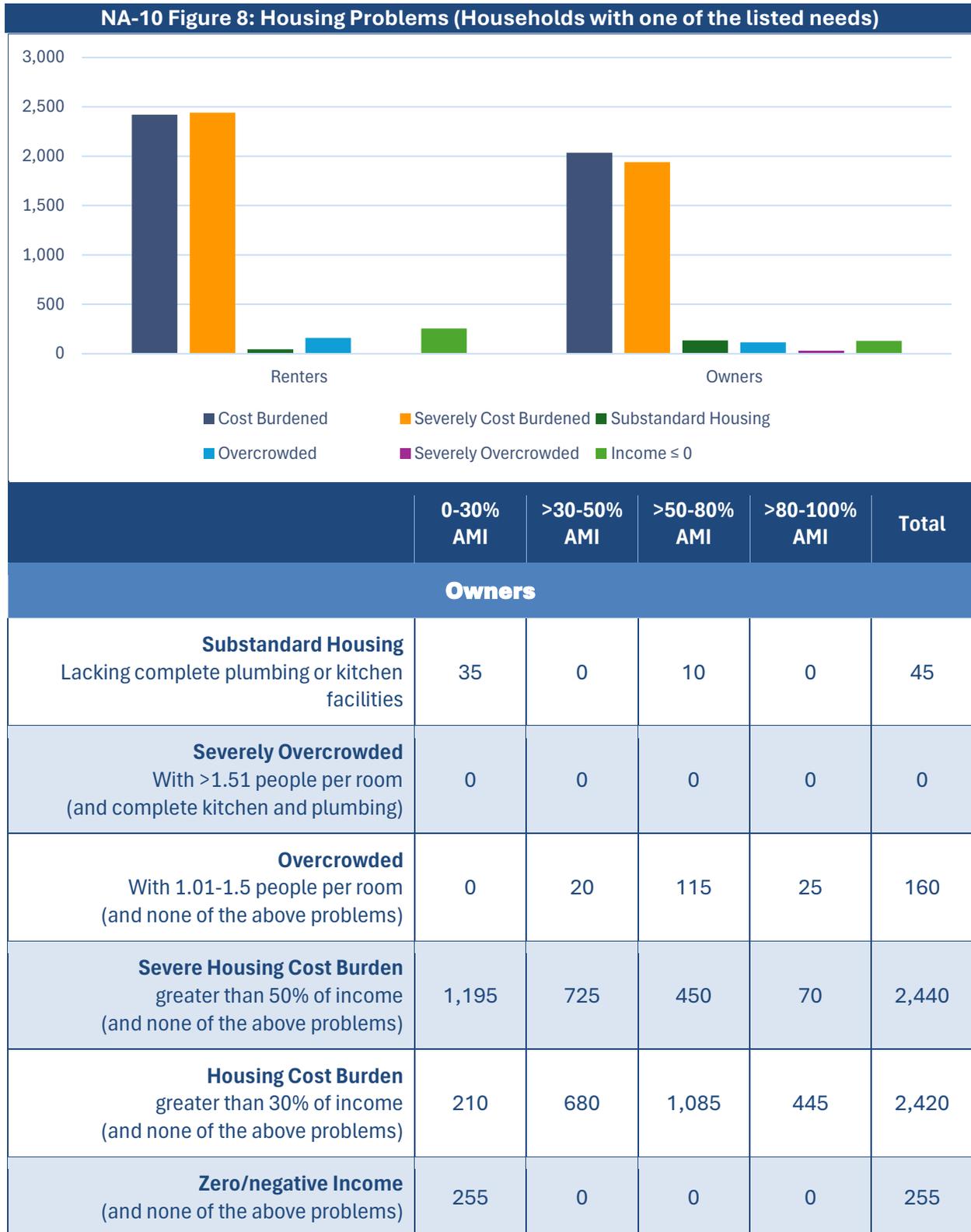
**NA-10 Figure 7: Total Households Table**



	0-30% HAMFI	30-50% HAMFI	50-80% HAMFI	80-100% HAMFI	100+% HAMFI
<b>Total Households</b>	4,455	3,375	5,000	3,095	15,995
<b>Small Family Households</b>	785	855	2,020	1,355	8,085
<b>Large Family Households</b>	70	40	325	455	1,010
<b>Household contains at least one person 62-74 years of age</b>	1,500	730	1,295	700	4,225
<b>Household contains at least one person age 75 or older</b>	919	1,045	765	425	1,045
<b>Households with one or more children 6 years old or younger</b>	215	225	1,030	495	2,010

Data Source: 2017-2021 CHAS - Tables 5, 7, 13

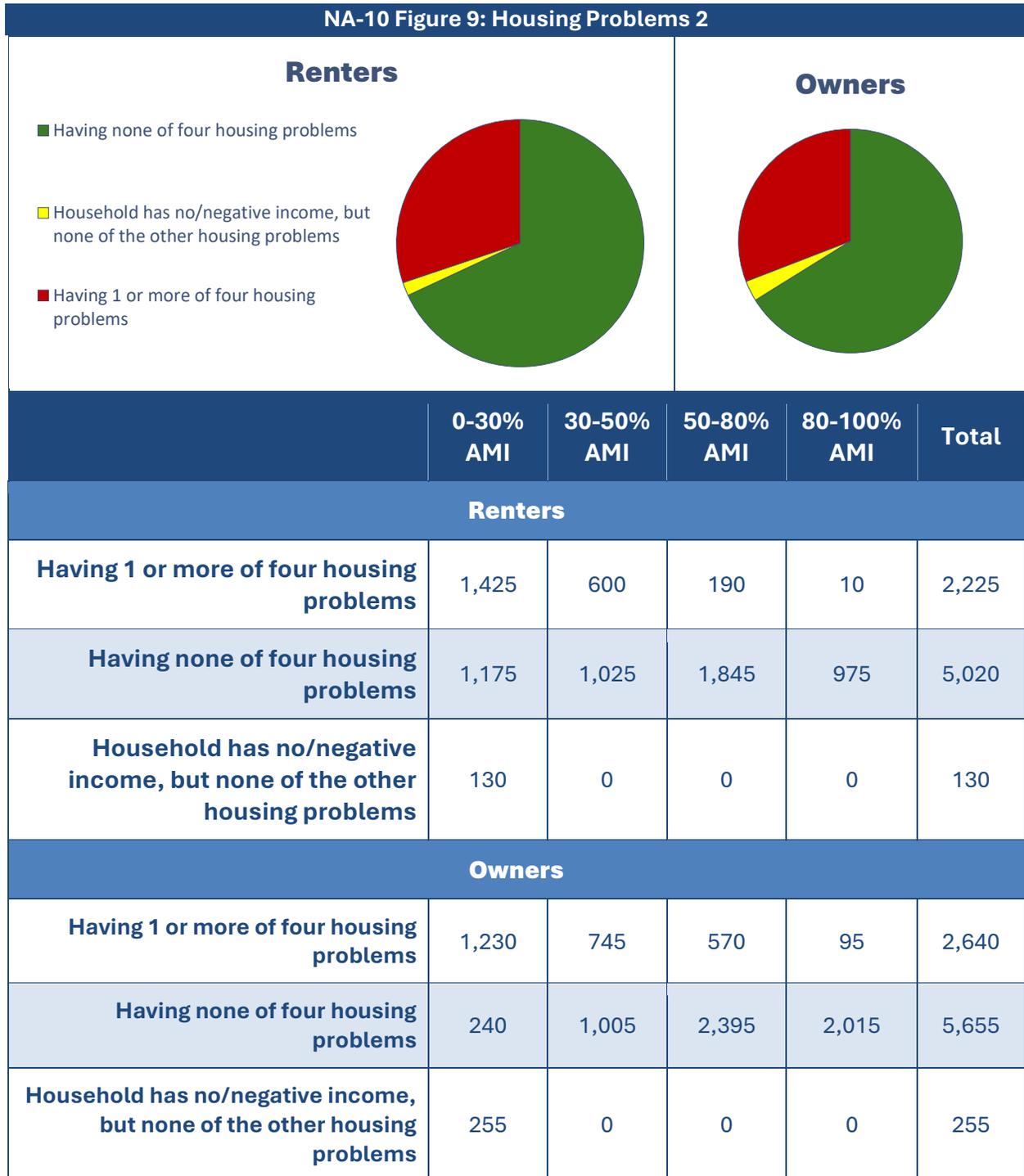
## Housing Needs Summary Tables



	0-30% AMI	>30-50% AMI	>50-80% AMI	>80-100% AMI	Total
<b>Renters</b>					
<b>Substandard Housing</b> Lacking complete plumbing or kitchen facilities	95	0	40	0	135
<b>Severely Overcrowded</b> With >1.51 people per room (and complete kitchen and plumbing)	0	10	10	10	30
<b>Overcrowded</b> With 1.01-1.5 people per room (and none of the above problems)	45	0	70	0	115
<b>Severe Housing Cost Burden</b> greater than 50% of income (and none of the above problems)	1,285	590	65	0	1,940
<b>Housing Cost Burden</b> greater than 30% of income (and none of the above problems)	400	635	905	95	2,035
<b>Zero/negative Income</b> (and none of the above problems)	130	0	0	0	130

Data Source: 2017-2021 CHAS - Table 3

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



Data Source: 2017-2021 CHAS - Tables 2, 3

NA-10 Figure 10: Cost Burden > 30%								
	< 30% AMI	30-50% AMI	50-80% AMI	Total	< 30% AMI	30-50% AMI	50-80% AMI	Total
	Renters				Owners			
Small family	130	260	420	825	0	40	560	1,110
Large family	45	10	0	55	50	0	30	139
Elderly family	0	75	90	220	45	135	85	450
Elderly non-family	180	115	75	410	135	370	250	930
Other	145	180	320	814	10	135	155	705
<b>Total</b>	<b>500</b>	<b>640</b>	<b>905</b>	<b>2,324</b>	<b>240</b>	<b>680</b>	<b>1,080</b>	<b>3,334</b>

Data Source: 2017-2021 CHAS Table 7

NA-10 Figure 11: Cost Burden > 50%								
	< 30% AMI	30-50% AMI	50-80% AMI	Total	< 30% AMI	30-50% AMI	50-80% AMI	Total
	Renters				Owners			
Small family	330	145	15	490	200	325	245	830
Large family	4	0	0	4	10	30	50	90
Elderly family	35	20	10	65	125	170	50	410
Elderly non-family	460	180	20	660	830	125	65	1,020
Other	495	245	25	765	70	100	90	300
<b>Total</b>	<b>1,324</b>	<b>590</b>	<b>70</b>	<b>1,984</b>	<b>1,235</b>	<b>750</b>	<b>500</b>	<b>2,650</b>

Data Source: 2017-2021 CHAS Table 7

NA-10 Figure 12: Crowding (More than one person per room)						
	0-30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	100+% AMI	Total
<b>Renters</b>						
Single family households	45	10	80	10	30	175
Multiple, unrelated family households	0	0	0	0	0	0
Other, non-family households	0	0	40	0	0	40
<b>Total need by income</b>	<b>45</b>	<b>10</b>	<b>120</b>	<b>10</b>	<b>30</b>	<b>215</b>
<b>Owners</b>						
Single family households	0	20	115	10	30	175
Multiple, unrelated family households	0	0	0	15	10	25
Other, non-family households	0	0	0	0	0	0
<b>Total need by income</b>	<b>0</b>	<b>20</b>	<b>115</b>	<b>25</b>	<b>40</b>	<b>200</b>

Data Source: 2017-2021 CHAS - Table 10

NA-10 Figure 13: Crowding (Households With Children)								
	0-30% AMI	30-50% AMI	50-80% AMI	Total	0-30% AMI	30-50% AMI	50-80% AMI	Total
	<b>Renters</b>				<b>Owners</b>			
<b>Lower Bound</b>	0	0	0	0	0	0	0	0
<b>Upper Bound</b>	45	10	120	175	0	20	115	135

**Data Notes:** Cranston, like most jurisdictions, does not track crowding specifically for households with children. Using the data from CHAS Table 13 (Tenure by Year Structure Built by Household Income by Presence of Children), we can put an upper and lower bound on the possible number of overcrowded households with children by tenure and income level. We use the definition from CHAS Table 13 of children being aged six or younger. Unfortunately, as is often the case, these ranges are not very helpful – the minimum for each category is zero and the maximum is the known number of crowded households for each tenure/income category.

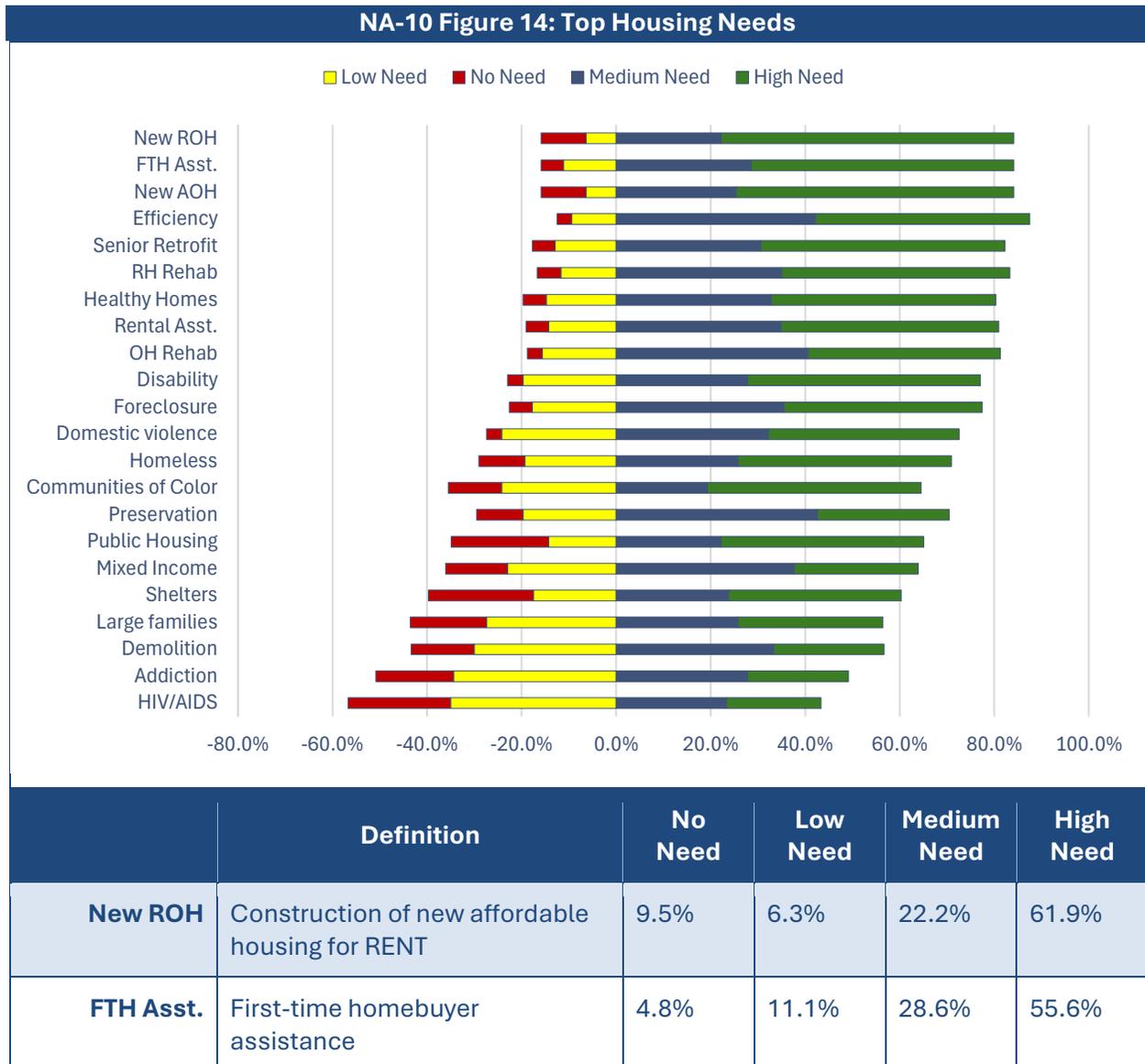
Data Source: 2017-2021 CHAS - Tables 10, 13

## Survey Results

CEW’s Housing and Community Development survey asked respondents to rank several housing needs on a four-point scale: no need, low need, medium need, or high need. A weighted total score is then calculated and used to rank the needs. The top five housing needs identified by survey respondents are:

- **Construction of new affordable housing for rent** (84.1% medium or high need).
- **First-time homebuyer assistance** (84.1% medium or high need).
- **Construction of new affordable housing for sale** (84.1% medium or high need).
- **Energy efficiency upgrades** (87.5% medium or high need).
- **Retrofit existing housing to meet seniors' needs** (82.3% medium or high need).

Other high priority housing needs include Rental housing rehabilitation; Programs to address home-based health issues (lead, radon, asbestos, etc.); Rental and utilities assistance; and Homeowner housing rehabilitation.



	<b>Definition</b>	<b>No Need</b>	<b>Low Need</b>	<b>Medium Need</b>	<b>High Need</b>
<b>New AOH</b>	Construction of new affordable housing for SALE	9.5%	6.3%	25.4%	58.7%
<b>Efficiency</b>	Energy efficiency upgrades	3.1%	9.4%	42.2%	45.3%
<b>Senior Retrofit</b>	Retrofit existing housing to meet seniors' needs	4.8%	12.9%	30.6%	51.6%
<b>RH Rehab</b>	Rental housing rehabilitation	5.0%	11.7%	35.0%	48.3%
<b>Healthy Homes</b>	Programs to address home-based health issues (lead, radon, asbestos, etc.)	4.9%	14.8%	32.8%	47.5%
<b>Rental Asst.</b>	Rental and utilities assistance	4.8%	14.3%	34.9%	46.0%
<b>OH Rehab</b>	Homeowner housing rehabilitation	3.1%	15.6%	40.6%	40.6%
<b>Disability</b>	Supportive housing for persons with a disability	3.3%	19.7%	27.9%	49.2%
<b>Foreclosure</b>	Foreclosure prevention	4.8%	17.7%	35.5%	41.9%
<b>Domestic violence</b>	Supportive housing for victims of domestic violence	3.2%	24.2%	32.3%	40.3%
<b>Homeless</b>	Supportive housing for the homeless	9.7%	19.4%	25.8%	45.2%
<b>Communities of Color</b>	Homeownership in communities of color	11.3%	24.2%	19.4%	45.2%
<b>Preservation</b>	Historic Preservation	9.8%	19.7%	42.6%	27.9%
<b>Public Housing</b>	Increase in Public Housing	20.6%	14.3%	22.2%	42.9%
<b>Mixed Income</b>	Mixed-income housing	13.1%	23.0%	37.7%	26.2%
<b>Shelters</b>	Additional Homeless Shelters	22.2%	17.5%	23.8%	36.5%
<b>Large families</b>	Housing designed for larger families (6 or more persons living together)	16.1%	27.4%	25.8%	30.6%

	Definition	No Need	Low Need	Medium Need	High Need
<b>Demolition</b>	Demolition of dilapidated housing	13.3%	30.0%	33.3%	23.3%
<b>Addiction</b>	Recovery housing for persons with alcohol or drug addiction	16.4%	34.4%	27.9%	21.3%
<b>HIV/AIDS</b>	Housing for persons living with HIV/AIDS and their families	21.7%	35.0%	23.3%	20.0%

Data Source: CEW Advisors, Inc. Housing & Community Development Survey

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

Cranston has 12,381 single person households, including 4,478 senior single person households. According to the 2019-2023 ACS, the median rents for Cranston 1-, 2-, and 3-bedroom units were \$1,032, \$1,438, and \$1,688 respectively (note, there are not enough 0-bed units in Cranston for the Census to publish rents). Looking at the table below, we can see that this likely puts many single person households in the **cost burdened** or **severely cost burdened** categories depending on their age, sex, and size of rental unit. Single women aged 65 and older who are living alone have the lowest earnings, averaging \$27,513 annually, putting this group at the highest need for housing assistance and at the greatest risk of homelessness.

	#	Earnings	0 Beds	1 Bed	2 Beds	3 Beds
<b>Single Female (&lt;65)</b>	2,298	\$53,581	n/a	23.1%	32.2%	37.8%
<b>Single Female (65+)</b>	3,227	\$27,513	n/a	45.0%	62.7%	73.6%
<b>Single Male (&lt;65)</b>	3,755	\$37,361	n/a	33.1%	46.2%	54.2%
<b>Single Male (65+)</b>	1,251	\$45,331	n/a	27.3%	38.1%	44.7%

Data Source: 2023 ACS5 - B19215, B25031, DP02

## Homelessness

According to data from the RI Coalition to End Homelessness. In the Cranston, Johnston, Central Falls, and North Providence area, there were 110 sheltered persons and another 16 unsheltered persons as of the 2024 PIT count. Homelessness has been increasing in the state of Rhode Island since the pandemic began in 2020, increasing 121% from 1,104 homeless people in 2020 to 2,442 homeless people in 2024. With the growth of homelessness, the state has seen homeless encampments in different municipalities. Often, these encampments are cleared which then makes serving the homeless more difficult as they are redispersed. With the dramatic growth of homelessness throughout the state, driven

by the rapid increase in rents and the lack of affordable housing options, the shelter system is overcapacity.

### **Foster Care**

As of December 1, 2023, there were 1,653 children under age 21 in the care of DCYF who were in out-of-home placements. DCYF is no longer sharing data on the number of youth aging out the foster care system each year, but based on the census of youth in care who are 18 or over it is estimated that about 100 per year will transition out of the foster care system. Residency information for these youth is not available. Aging out can present significant challenges as these young adults transition to independent living, including:

- **Homelessness:** Many young adults who age out of foster care struggle to find stable housing. Studies show that between 11% and 36% of these youths experience homelessness during their transition to adulthood.
- **Employment and Financial Stability:** Securing and maintaining employment can be difficult due to a lack of job experience and necessary life skills. Financial independence is often a significant hurdle.
- **Education:** Continuity in education is often disrupted by frequent moves and instability in foster care. This can lead to lower educational attainment and limited opportunities for higher education.
- **Mental Health:** Many foster youth have experienced trauma, abuse, or neglect, leading to mental health issues such as depression, anxiety, and PTSD. These issues can be exacerbated by the stress of transitioning to independent living.
- **Lack of Support Networks:** Without a stable family or support system, these young adults may feel isolated and lack the guidance needed to navigate adulthood.
- **Substance Abuse:** The absence of a supportive environment can increase the risk of substance abuse as a coping mechanism for the challenges they face.

Addressing these challenges requires comprehensive support systems, including access to housing, education, employment opportunities, mental health services, and mentorship programs.

### **Department of Corrections**

In Rhode Island, 124 out of every 100,000 residents are imprisoned, much lower than the national rate of 355 out of 100,000. The Rhode Island Department of Corrections (RIDOC) operates a unified correctional system, meaning that all pretrial detainees and all sentenced offenders (regardless of sentence length or crime) are under the jurisdiction of the RIDOC. During FY 2024 RIDOC processed a total of 2,359 releases, with approximately 7% of sentenced releases self-reported that they were homeless or had no permanent address. Approximately 6% of sentenced releases reported returning to a Cranston address upon release. During Calendar Year 2024, there were 80 instances of individuals released from a correctional facility to a self-identified Cranston address, and another 295 awaiting trial releases.

People re-entering the community from prisons and jails are more likely to be excluded from housing because they have criminal records. Criminal records are also significant barriers to jobs, especially higher-wage employment. Without housing and employment many people re-entering the community are at risk of homelessness. And those who are experiencing homelessness with a criminal record can be homeless for longer periods of time. Many former inmates need reentry services that include education and workforce development programs, and affordable housing options.

*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.*

### **Disabled Population**

Cranston has 597 people with hearing difficulty, 271 people with vision difficulty, 3,701 people with cognitive difficulty, 2,820 people with ambulatory difficulty 1,164 people with self-care difficulty, and 825 with independent living difficulty. It is not possible to calculate with any accuracy how many disabled individuals require housing assistance; however, given the size of the population, the need will be significant.

### **Victims of Domestic Violence**

There are two primary agencies that serve victims of domestic violence in the Cranston area, the Elizabeth Buffum Chace Center and Day One. According to the Coalition Against Domestic Violence, in calendar year 2023 there were 9,362 individuals who were victims of domestic violence who received assistance through the network of agencies providing victim services. Additionally, 278 adults and children stayed in shelters/safe homes, and 58 adults and children lived in transitional housing. This is supplemented with data from Elizabeth Buffum Chace Center which reports serving approximately 500 unduplicated clients in 2024. According to the 2024 Kids Count Factbook, there were 264 incidents of reported domestic violence in Cranston in 2022 which resulted in an arrest – 63 of them with a child present. Importantly, it must be noted that according to the Bureau of Justice Statistics only half of all domestic-violence victimizations are reported to police, with reporting rates similar for intimate-partner violence and violence committed by other relatives. It should be assumed that the actual rates of domestic violence in the city and state are much higher than what is reported.

*What are the most common housing problems?*

The most common housing problem is cost burden. The HUD Area Median Family Income (HAMFI) is the median family income calculated by HUD for each jurisdiction, so HUD can determine Fair Market Rents (FMRs) and income limits for HUD programs. Cranston is part of the Providence-Fall River, RI-MA HUD Metro FMR Area. In the greater Providence-Fall River, RI-MA HUD Metro FMR Area, the median household income is \$85,646, compared to \$ 87,716 for the city of Cranston.

HUD categorizes low-income households as follows:

- Extremely Low Income = 0% to 30% Area Median Income
- Very Low Income = >30% to 50% Area Median Income
- Low Income = >50% to 80% Area Median Income

Approximately 14% of all households are Extremely Low Income, either having no income or up to 30% HAMFI. Another 10.6% of all households are Very Low Income, earning between 30% and 50% of HAMFI. And another 15.7% of all households are Low Income, earning between 50% and 80% of HAMFI. In total, 40.2% of households in Cranston are low-income households. Among these low-income households, 48.7% (6,254 households) have at least one member that is aged 62 or older. Additionally, there are 1,470 low-income households with one or more children aged 6 or younger, representing 11.5% of all low-income households and 4.5% of total Cranston households.

The following housing problems are described below:

- Substandard Housing – Lacking complete plumbing or kitchen facilities
- Overcrowding – With 1.01 to 1.5 people per room
- Severe Overcrowding – With more than 1.51 people per room

- Cost Burden – Households spending more than 30% of income on housing
- Severe Cost Burden – Households spending more than 50% of income on housing

As the data illustrates, the most pronounced housing problems are Cost Burden and Severe Cost Burden. Housing cost burden, as either greater than 30% or 50% of total income spent on housing, is the most significant housing problem in Cranston as with most other municipalities throughout Ohio. According to the Comprehensive Housing Affordability Strategy (CHAS) data, there are 4,860 renter households that pay more than 30% of their income on rent, while 3,975 homeowners pay more than 30% of their income on their mortgages.

The 2019-2023 American Community Survey 5-Year estimates and shows that 18.1% of all owner households are cost burdened while 45.6% of all renter households are cost burdened. Combined, 40.6% of all households are spending more than 30% of their income on housing.

Further, housing costs have increased dramatically in the past 5 years, exacerbating the affordability problem in Cranston. The median cost of a home has grown 52.8% between 2018 and 2023, from \$228,300 to \$348,800. The average rent for a 2-bedroom apartment has increased 32.2% during this period, from \$1,088 in 2018 to \$1,438 in 2023. The income needed to afford these housing costs is \$106,920 (assuming a 20% deposit and a 30-year mortgage at 7.125%) and \$57,520 respectively. Household income growth over the same time period was also 32.3% from \$66,283 to \$87,716. The growth in wages has kept pace with the growth in rents but is far outpaced by the growth in home values.

Most other housing problems are not of major concern to Cranston’s housing stock. The total number of units that lack either complete plumbing or kitchen facilities is 180, or 0.6% of all units. There are a total of 305 units that are either overcrowded (between 1.01-1.5 people per room) or severely overcrowded (with more than 1.51 people per room), 0.9% of all units. This is in stark contrast to the significant issue of Housing Cost Burden.

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

Housing cost burden appears to disproportionately impact Elderly households – defined as households that have an older individual aged 62 or older as the Head of Household, Spouse, or Sole Member. There are 630 renter households and 1,380 owner households in the Elderly category that are Cost Burdened. Additionally, there are 725 Elderly renter households, and 1,430 Elderly owner households are Severely Cost Burdened. In total, there are 4,165 Elderly Households that are paying more than 30% of their income on housing. This represents 40.6% of all households that have an older individual aged 62 or older. This is likely due to the fixed incomes of older individuals, and these cost burdened Elderly Households often find it challenging to afford rising housing costs associated with increasing rents, property taxes, home repairs, at-home care, transportation, and medical costs. Importantly, the other housing problems discussed above (Substandard Housing, Overcrowding, and Severe Overcrowding) are concentrated almost exclusively among low- and moderate-income households.

*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*

According to the 2021 CHAS data, there are 12,830 low-income households in Cranston, out of a total of 32,596 households, 40.2% of all households.

- 4,455 @ 0-30% AMI
- 3,375 @ >30-50% AMI
- 5,000 @ >50-80% AMI

Households with at least one person 65 or older are more likely than average to be low-income. Low-income individuals and families living in Cranston often find it difficult to pay their housing costs, particularly due to the lack of affordable housing for the most economically vulnerable populations. Many of these low-income households are spending over 30% of their income on housing and have little savings which could be used in case of an emergency. There can often be instances when low-income families have a major home repair or auto repair need, medical emergency, or become unemployed. Without sufficient savings, a large financial shock can make them late on a rental or mortgage payment and begin the painful process of being evicted or being pushed into foreclosure.

According to the 2023 ACS 5-Year Estimates, there are 16,662 children under 18 living in 8,879 households in Cranston. Among these households, 6,675 are married or cohabitating couple households with children, 225 are with an unmarried male head of household and 1,371 are unmarried female head of household. Additionally, there are 300 grandparents who are taking care of their grandchildren. 4,574 children are living in single-parent households. Children living in single-parent families are more likely to live in poverty than children living in two-parent families.

In Cranston, 2.7% of married-couple households with children live in poverty versus 15.8% poverty rate among single-parent Cranston households with children. Most single-parent families have only one potential wage earner<sup>1</sup>, compared with the two potential wage earners in two-parent families.

It is also likely that many low-income households lack the higher skills and education necessary to gain access to higher-wage jobs. Many are likely working at one or more low-wage jobs that do not pay sufficient wages to meet the increased burden of housing costs. While the City and State are experiencing some of the lowest unemployment rates in history, a significant number of employment opportunities are low-skilled and low-wage jobs in service sectors such as hospitality and food service. These low wage jobs do not provide a salary sufficient to afford rent in most communities in the state.

Another population group at risk of homelessness are older youth who are aging out of the foster care, social service, and juvenile justice systems upon their eighteenth birthday. Historically, the foster care and juvenile justice systems expected youth to live independently at age 18; however, these youth are often ill-prepared for independent living and often lack the supports for high school completion, obtaining employment, enrolling in or accessing health care, continued educational opportunities, or housing and transitional living arrangements. These insufficient supports lead to longer-term housing and supportive service needs.

As of December 1, 2023, there were 1,653 children under age 21 in the care of DCYF who were in out-of-home placements. DCYF is no longer sharing data on the number of youth aging out the

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<sup>1</sup> We note that in table B17010 from which the poverty by family type data is drawn, there is no data on “cohabitating couples.” Thus, it seems that the ACS in this case groups cohabitating couples into the “single householder, no spouse present” category. Therefore, we know that some “single parent” families in these data potentially have two incomes.

foster care system each year, but based on the census of youth in care who are 18 or over it is estimated that about 100 per year will transition out of the foster care system. Residency information for these youth is not available.

There has been an increase in families who come to DCYF's attention because of housing instability and homelessness, so there is speculation that there may be an increase in the number of youth entering the foster care system. There needs to be an increase in the development of affordable housing for families – both for young families raising children and for kinship caregivers who are supporting family member. Nationally there is a movement towards creating more innovative intergenerational housing options that support families, kinship families, older adults who can live independently but want to be in an active and supportive community, along with youth aging out of foster care or and/or young adults experiencing homelessness.

*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:*

Cranston does not estimate "at-risk" populations.

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

The threat of homelessness is strongest among the households that are experiencing extreme cost burdens of 50% or more of their income. In Cranston, there are 4,380 households of all income categories that are extremely cost burdened, or 13.4% of all households in the city.

Other housing characteristics associated with instability and increased risk of homelessness include overcrowding and substandard housing units that lack complete plumbing or kitchen facilities. In Cranston there are 160 renter households that are overcrowded. For homeowners, there are 115 households that are overcrowded and 30 households that are severely overcrowded. There are 45 renter units that lack complete plumbing and kitchen facilities and 135 such owner households.

Another related risk factor is a common phenomenon of “doubling up,” or temporarily living with friends or families due to housing cost burden or other situation (i.e., eviction, foreclosure, loss of employment, etc.). According to The State of Homelessness in America report for 2023, living doubled up is the most common living situation prior to becoming homeless. ACS data shows there are 5,776 persons in Cranston who are not the spouse, unmarried partner, or child of the householder. These may be roommates, or parents/siblings of the householder, but some percentage of them may be people who are “doubled up.”

Age of the housing stock is another driver of housing cost burden affecting the stability of low-income homeowners and their risk of becoming homeless. 28.9% of the City's housing was constructed prior to 1940 with about 7.3% constructed after 2000. The majority, 63.8% of the City's housing units were built between 1940 and 1999. Older housing stock requires periodic maintenance and upkeep to ensure housing units are safe, warm, clean, and healthy. The cost of maintenance and rehabilitation has increased significantly over the past several years along with general housing costs. This places a significant burden on individual homeowners, especially for older adults who are on a fixed income and are increasingly less able to afford to maintain their homes themselves and require hiring others to do so.

Low-income renters, especially single-income households and those on fixed incomes, are at risk of becoming homeless and are also significantly more likely to have housing cost burdens over 50% of their income. Small interruptions of income, sudden emergencies such as an unforeseen emergency car repair, and increased household expenses have significant consequences when these households lack the savings to bear the costs of these expenses.

## Discussion

The data presented above paints a clear picture of the city's housing challenges; primary among them is the issue of affordability. The housing cost burden among the city's low- to moderate-income residents creates significant difficulty for the households and for the city when cost burdens lead to homelessness. The lack of ongoing maintenance of some of the city's housing stock in low- and moderate-income neighborhoods has created situations where units are of substandard quality, are unhealthy, and potentially unsafe for habitation.

While housing problems impact many different demographics in the city, low-income households and elderly households are two groups that experience disproportionately high cost-burdens.

- 27.1% of Cranston households experience cost burdens greater than 30% percent of household income. Of those households that are extremely low income (0 – 30% of HAMFI), 80.3% have cost burdens that exceed thirty percent of their household income.
- There are a total of 4,165 Elderly households that are cost burdened, paying more than 30% of their income on housing. This represents 40.6% of all the households that have at least one person aged 62 and older.

The very low-income and the elderly both may have difficulty overcoming excessive cost burdens due to the following:

- (1) very low-income households are unlikely to have income to spare on mobility opportunities like pursuing higher education due to the majority of their paycheck going towards basic necessities
- (2) elderly households are on a fixed income. Cranston's aging housing stock compounds this due to large maintenance costs

The overall conclusion is that the cost of housing is by far the greatest problem being faced by residents. The level of need far outpaces the level of resources available through the CDBG program or other resources that can support new housing production or lowering the cost of housing.

# NA-15 Disproportionately Greater Need: Housing Problems - 91.205 (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

A disproportionately greater need exists when the members of racial or ethnic group at any specific income level experience housing problems at a greater rate (10 percentage points or more) than the income level as a whole. For example, if 50% of all low-income households within Cranston have a housing problem and 60% of low-income Hispanic households have a housing problem, this would be considered an instance of disproportionately greater need. This section has four tables that capture the number of housing problems by income, race, and ethnicity. Each table provides data for a different income level (0–30%, 30–50%, 50–80%, and 80–100% AMI).

In Cranston, the total population and the total households are predominantly White; 70.9% of the population is White, while 79.4% of all the households have a White head of household.

NA-15 Figure 1: Demographics - Race				
	Households		Population	
	#	%	#	%
White	25,888	79.4%	58,626	70.9%
Black or African American	1,509	4.6%	4,918	6.0%
American Indian and Alaska Native	32	0.1%	327	0.4%
Asian	1,711	5.2%	6,029	7.3%
Native Hawaiian and Other Pacific Islander	120	0.4%	160	0.2%
Some Other Race	1,242	3.8%	5,137	6.2%
Two or More Races	2,094	6.4%	7,435	9.0%
<b>Total</b>	<b>32,596</b>	<b>100.0%</b>	<b>82,632</b>	<b>100.0%</b>

Data Source: 2019-2023 ACS - B25006, DP05

NA-15 Figure 2: Demographics - Ethnicity				
	Households		Population	
	#	%	#	%
Hispanic or Latino	3,912	12.0%	13,787	16.7%
White, Not Hispanic or Latino	3,912	12.0%	55,185	66.8%
Other Race, Not Hispanic or Latino	24,772	76.0%	13,660	16.5%
<b>Total</b>	<b>32,596</b>	<b>100.0%</b>	<b>82,632</b>	<b>100.0%</b>

Data Source: 2019-2023 ACS - B11001H, B11001I, DP05

As part of the Consolidated Planning process, Cranston must provide an assessment for each disproportionately greater need identified. Although the purpose of these tables is to analyze the relative level of need for each racial and ethnic category, the data also provide information that can be useful in describing overall need.

As discussed above, housing problems are defined as having one of the following four living conditions:

- Lacking complete plumbing (including hot and cold running water, a flush toilet, and a bathtub or shower)
- Lacking complete kitchen facilities (including a kitchen sink; a cooking stove, built-in burners, or a microwave oven; and a refrigerator)
- Overcrowding with more than 1.01 persons per room (not including bathrooms, porches, foyers, halls, or half-rooms)
- Cost burden of spending more than 30% of household income on housing

NA-15 Figure 3: Housing Cost Burden by Tenure						
	Owners		Renters		Total	
	#	%	#	%	#	%
Cost Burden <=30%	15,260	71.1%	6,030	57.7%	21,290	66.7%
Cost Burden >30% to <=50%	3,305	15.4%	2,325	22.2%	5,630	17.6%
Cost Burden >50%	2,635	12.3%	1,975	18.9%	4,610	14.4%
Cost Burden not available	255	1.2%	129	1.2%	384	1.2%
<b>Total</b>	<b>21,455</b>	<b>100.0%</b>	<b>10,459</b>	<b>100.0%</b>	<b>31,914</b>	<b>100.0%</b>

Data Source: 2017-2021 CHAS Table 9

To reiterate, 32.1% of all the households in Cranston are cost burdened, with renter-occupied households being most likely to be cost burdened compared to owner-occupied housing. 41.1% of all the renter households are cost burdened compared to 27.7% of owner-occupied households.

**NA-15 Figure 4: Disproportionally Greater Need - Housing Problems (0 - 30% AMI)**

	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		Total
	#	%	#	%	#	%	
<b>Jurisdiction as a whole</b>	3,265	73.3%	806	18.1%	384	8.6%	4,455
<b>White</b>	2,240	73.4%	535	17.5%	275	9.0%	3,050
<b>Black / African American</b>	255	71.8%	75	21.1%	25	7.0%	355
<b>Asian</b>	120	<b>89.6%</b>	14	10.4%	0	0.0%	134
<b>American Indian, Alaska Native</b>	0	n/a	0	n/a	0	n/a	0
<b>Pacific Islander</b>	0	n/a	0	n/a	0	n/a	0
<b>Hispanic</b>	565	67.3%	191	22.7%	84	10.0%	840

**Data Notes:** 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%

**Data Source:** 2017-2021 CHAS - Tables 1, 9

Of all the income levels within Cranston, households within the 0-30% AMI category have the highest percentage of households with one or more of four housing problems. Approximately 73.3% of all households in this income category have one or more housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 73.4% of White households in the 0-30% AMI income group have one or more of four housing problems and 78.1% of Black/African American households in the 0-30% AMI income group have one or more of four housing problems. 89.6% of Asian households in the 0-30% AMI income group have one or more of four housing problems. There are no American Indian, Alaska Native, or Pacific Islander households at this income level in Cranston. When considering ethnicity and this income category, 67.3% of Hispanic households have one or more of four housing problems.

Within the 0-30% HAMFI income range, Asian households are disproportionately likely to have one or more of the four housing problems.

**NA-15 Figure 5: Disproportionally Greater Need - Housing Problems (30 - 50% AMI)**

	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		Total
	#	%	#	%	#	%	
<b>Jurisdiction as a whole</b>	2,660	78.8%	715	21.2%	0	0.0%	3,375
<b>White</b>	1,940	77.6%	560	22.4%	0	0.0%	2,500
<b>Black / African American</b>	85	77.3%	25	22.7%	0	0.0%	110
<b>Asian</b>	80	72.7%	30	27.3%	0	0.0%	110
<b>American Indian, Alaska Native</b>	0	n/a	0	n/a	0	n/a	0
<b>Pacific Islander</b>	20	<b>100.0%</b>	0	0.0%	0	0.0%	20
<b>Hispanic</b>	385	<b>90.6%</b>	40	9.4%	0	0.0%	425

**Data Notes:** 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%

**Data Source:** 2017-2021 CHAS - Tables 1, 9

Of all the income levels within Cranston, households within the 30-50% AMI category have the second-highest percentage of households with one or more of four housing problems. 78.8% of all households in this income category have one or more housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 77.6% of White households in this income group have one or more of four housing problems, 77.3% of Black/African American households and 72.7% of Asian households in this income group have one or more of four housing problems. 100% of Pacific Islander households have one or more of the four housing problems. There are no American Indian or Alaska Native households in Cranston at this income level. When considering ethnicity and this income category, 90.6% of Hispanic households have one or more of four housing problems.

Within the 30-50% HAMFI income group Pacific Islander and Hispanic households are disproportionately likely to have one or more of the four housing problems.

**NA-15 Figure 6: Disproportionally Greater Need - Housing Problems (50 - 80% AMI)**

	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		Total
	#	%	#	%	#	%	
<b>Jurisdiction as a whole</b>	2,750	55.0%	2,250	45.0%	0	0.0%	5,000
<b>White</b>	1,670	48.1%	1,800	51.9%	0	0.0%	3,470
<b>Black / African American</b>	165	<b>76.7%</b>	50	23.3%	0	0.0%	215
<b>Asian</b>	180	50.0%	180	50.0%	0	0.0%	360
<b>American Indian, Alaska Native</b>	0	n/a	0	n/a	0	n/a	0
<b>Pacific Islander</b>	0	n/a	0	n/a	0	n/a	0
<b>Hispanic</b>	665	<b>80.1%</b>	165	19.9%	0	0.0%	830

**Data Notes:** 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%

**Data Source:** 2017-2021 CHAS - Tables 1, 9

Among all households within the 50-80% AMI category, approximately 55% have one or more housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 48.1% of White households in this income group have one or more of four housing problems, 76.7% of Black/African American households and 50% of Asian households in this income group have one or more of four housing problems. When considering ethnicity and this income category, 80.5% of Hispanic households have one or more of four housing problems.

Within the 50-100% HAMFI income Black and Hispanic households are disproportionately likely to have one or more of the four housing problems.

**NA-15 Figure 7: Disproportionally Greater Need - Housing Problems (80 - 100% AMI)**

	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		Total
	#	%	#	%	#	%	
<b>Jurisdiction as a whole</b>	645	20.9%	2,445	79.1%	0	0.0%	3,090
<b>White</b>	455	21.0%	1,715	79.0%	0	0.0%	2,170
<b>Black / African American</b>	25	15.6%	135	84.4%	0	0.0%	160
<b>Asian</b>	25	<b>38.5%</b>	40	61.5%	0	0.0%	65
<b>American Indian, Alaska Native</b>	0	0.0%	35	100.0%	0	0.0%	35
<b>Pacific Islander</b>	0	0.0%	10	100.0%	0	0.0%	10
<b>Hispanic</b>	85	15.0%	480	85.0%	0	0.0%	565

**Data Notes:** 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%

**Data Source:** 2017-2021 CHAS - Tables 1, 9

Unsurprisingly, the 80-100% AMI income group has the lowest percentage of households with one or more of four housing problems. 20.9% of all households in this income category have one or more housing problems.

As shown in the table above, when considering race, 21% of White households in this income group have one or more of four housing problems, 15.6% of Black/African American households and 38.5% of Asian households in this income group have one or more of four housing problems. When considering ethnicity and this income category, 15% of Hispanic households have one or more of four housing problems.

Within the 80-100% HAMFI income group Asian households are disproportionately likely to have one or more of the four housing problems.

## Discussion

Reviewing all the information above, the following are instances of disproportionate greater need.

- Within the 0-30% HAMFI income range, Asian households are disproportionately likely to have one or more of the four housing problems.
- Within the 30-50% HAMFI income group Pacific Islander and Hispanic households are disproportionately likely to have one or more of the four housing problems.
- Within the 50-100% HAMFI income Black and Hispanic households are disproportionately likely to have one or more of the four housing problems.
- Within the 80-100% HAMFI income group Asian households are disproportionately likely to have one or more of the four housing problems.

# NA-20 Disproportionately Greater Need: Severe Housing Problems - 91.205 (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

A disproportionately greater need exists when the members of racial or ethnic group at any specific income level experience housing problems at a greater rate (10 percentage points or more) than the income level as a whole. For example, if 50% of all low-income households within Cranston have a severe housing problem and 60% of low-income Hispanic households have a severe housing problem, this would be considered an instance of disproportionately greater need. This section has four tables that capture the number of severe housing problems by income, race, and ethnicity. Each table provides data for a different income level (0–30%, 30–50%, 50–80%, and 80–100% AMI). As discussed above, severe housing problems are defined as having one of the following four living conditions:

- Lacking complete plumbing (including hot and cold running water, a flush toilet, and a bathtub or shower)
- Lacking complete kitchen facilities (including a kitchen sink; a cooking stove, built-in burners, or a microwave oven; and a refrigerator)
- Severe Overcrowding with more than 1.5 persons per room (not including bathrooms, porches, foyers, halls, or half-rooms)
- Severe Cost Burden of spending more than 50% of household income on housing

**NA-20 Figure 1: Disproportionately Greater Need - Severe Housing Problems (0 - 30% AMI)**

	Has one or more of four severe housing problems		Has none of the four severe housing problems		Household has no/negative income, but none of the other severe housing problems		Total
	#	%	#	%	#	%	
<b>Jurisdiction as a whole</b>	2,655	59.6%	1,416	31.8%	384	8.6%	4,455
<b>White</b>	1,900	62.3%	875	28.7%	275	9.0%	3,050
<b>Black / African American</b>	160	45.7%	165	47.1%	25	7.1%	350
<b>Asian</b>	100	<b>77.5%</b>	29	22.5%	0	0.0%	129
<b>American Indian, Alaska Native</b>	0	n/a	0	n/a	0	n/a	0

	Has one or more of four severe housing problems		Has none of the four severe housing problems		Household has no/negative income, but none of the other severe housing problems		Total
	#	%	#	%	#	%	
<b>Pacific Islander</b>	0	n/a	0	n/a	0	n/a	0
<b>Hispanic</b>	415	49.7%	336	40.2%	84	10.1%	835

**Data Notes:** 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%.

**Data Source:** 2017-2021 CHAS - Tables 2, 9

Of all the income levels within Cranston, households within the 0-30% AMI category have the highest percentage of households with one or more of four severe housing problems. 59.6% of all households in this income category have one or more severe housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 62.3% of White households in the 0-30% AMI income group have one or more of four severe housing problems and 45.7% of Black/African American households in the 0-30% AMI income group have one or more of four severe housing problems. 77.5% of Asian households in the 0-30% AMI income group have one or more of four severe housing problems. There are no American Indian, Alaska Native or Pacific Islander households in the 0-30% AMI category in Cranston. 49.7% of Hispanic households have one or more of four housing problems.

Within the 0-30% AMI income category, Asian households earning 0-30% AMI are disproportionately likely to have one or more of the four severe housing problems.

**NA-20 Figure 2: Disproportionally Greater Need - Severe Housing Problems (30 - 50% AMI)**

	Has one or more of four severe housing problems		Has none of the four severe housing problems		Household has no/negative income, but none of the other severe housing problems		Total
	#	%	#	%	#	%	
<b>Jurisdiction as a whole</b>	1,345	39.9%	2,030	60.1%	0	0.0%	3,375
<b>White</b>	940	37.6%	1,560	62.4%	0	0.0%	2,500
<b>Black / African American</b>	25	22.7%	85	77.3%	0	0.0%	110

	Has one or more of four severe housing problems		Has none of the four severe housing problems		Household has no/negative income, but none of the other severe housing problems		Total
	#	%	#	%	#	%	
<b>Asian</b>	45	42.9%	60	57.1%	0	0.0%	105
<b>American Indian, Alaska Native</b>	0	n/a!	0	n/a	0	n/a	0
<b>Pacific Islander</b>	0	0.0%	20	100.0%	0	0.0%	20
<b>Hispanic</b>	190	44.2%	240	55.8%	0	0.0%	430

**Data Notes:** 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%.

**Data Source:** 2017-2021 CHAS - Tables 2, 9

Of all the income levels within Cranston, households within the 30-50% AMI category have the second-highest percentage of households with one or more of four severe housing problems. 39.9% of all households in this income category have one or more severe housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 37.6% of White households in the 30-50% AMI income group have one or more of four severe housing problems and 22.7% of Black/African American households in the 0-30% AMI income group have one or more of four severe housing problems. 42.9% of Asian households in the 0-30% AMI income group have one or more of four severe housing problems. No American Indian or Alaska Native households in the 0-30% AMI income group have one or more of four severe housing problems. There are no Pacific Islander households in the 30-50% AMI income group in Cranston. When considering ethnicity and this income category, 44.2% of Hispanic households have one or more of four housing problems.

Within the 30-50% AMI income category no specific racial or ethnic group is disproportionately likely to have one or more of the four severe housing problems.

**NA-20 Figure 3: Disproportionally Greater Need - Severe Housing Problems (50 - 80% AMI)**

	Has one or more of four severe housing problems		Has none of the four severe housing problems		Household has no/negative income, but none of the other severe housing problems		Total
	#	%	#	%	#	%	
<b>Jurisdiction as a whole</b>	760	15.2%	4,240	84.8%	0	0.0%	5,000

	Has one or more of four severe housing problems		Has none of the four severe housing problems		Household has no/negative income, but none of the other severe housing problems		Total
	#	%	#	%	#	%	
<b>White</b>	475	13.7%	2,995	86.3%	0	0.0%	3,470
<b>Black / African American</b>	25	11.6%	190	88.4%	0	0.0%	215
<b>Asian</b>	130	<b>36.6%</b>	225	63.4%	0	0.0%	355
<b>American Indian, Alaska Native</b>	0	n/a	0	n/a	0	n/a	0
<b>Pacific Islander</b>	0	n/a	0	n/a	0	n/a	0
<b>Hispanic</b>	135	16.2%	700	83.8%	0	0.0%	835

**Data Notes:** 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%.

**Data Source:** 2017-2021 CHAS - Tables 2, 9

Approximately 15.2% of all households in the 50-80% AMI income category have one or more severe housing problems. As shown in the table above, when considering race, 13.7% of White households in this income group have one or more of four severe housing problems, 11.6% of Black/African American households in this income group have one or more of four severe housing problems, and 36.6% of Asian households in this income group have one or more severe housing problems. There are no American Indian, Alaska Native or Pacific Islander households in this income group according to the available data. 16.2% of Hispanic households in this income group have one or more of four severe housing problems.

In the 50-80% AMI income category, Asian households are disproportionately likely to have one or more of the four severe housing problems.

<b>NA-20 Figure 4: Disproportionally Greater Need - Severe Housing Problems (80 - 100% AMI)</b>							
	Has one or more of four severe housing problems		Has none of the four severe housing problems		Household has no/negative income, but none of the other severe housing problems		Total
	#	%	#	%	#	%	
<b>Jurisdiction as a whole</b>	105	3.4%	2,990	96.6%	0	0.0%	3,095

	Has one or more of four severe housing problems		Has none of the four severe housing problems		Household has no/negative income, but none of the other severe housing problems		Total
	Count	Percentage	Count	Percentage	Count	Percentage	
<b>White</b>	60	2.8%	2,105	97.2%	0	0.0%	2,165
<b>Black / African American</b>	10	6.5%	145	93.5%	0	0.0%	155
<b>Asian</b>	25	<b>38.5%</b>	40	61.5%	0	0.0%	65
<b>American Indian, Alaska Native</b>	0	0.0%	35	100.0%	0	0.0%	35
<b>Pacific Islander</b>	0	0.0%	10	100.0%	0	0.0%	10
<b>Hispanic</b>	10	1.8%	560	98.2%	0	0.0%	570

**Data Notes:** 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%.

**Data Source:** 2017-2021 CHAS - Tables 2, 9

Similar to the previous section, the 80-100% AMI income group has the lowest percentage of households with one or more of four severe housing problems. 3.4% of all households in this income category have one or more severe housing problems.

In the 80-100% AMI income category, Asian households are disproportionately likely to have one or more of the four severe housing problems.

## Discussion

Reviewing all the information above, the following are instances of disproportionate greater need.

- Within the 0-30% AMI income category, Asian households earning 0-30% AMI are disproportionately likely to have one or more of the four severe housing problems.
- Within the 30-50% AMI income category no specific racial or ethnic group is disproportionately likely to have one or more of the four severe housing problems.
- In the 50-80% AMI income category, Asian households are disproportionately likely to have one or more of the four severe housing problems.
- In the 80-100% AMI income category, Asian households are disproportionately likely to have one or more of the four severe housing problems.

# NA-25 Disproportionately Greater Need: Housing Cost Burdens - 91.205 (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

A disproportionately greater need exists when the members of racial or ethnic group at an income level experience housing problems at a greater rate (10 percentage points or more) than the income level as a whole. Per the regulations at 91.205(b)(2), 91.305(b)(2), and 91.405, a grantee must provide an assessment for each disproportionately greater need identified. In this section, the analysis is specifically on the housing cost burden.

NA-25 Figure 1: Disproportionately Greater Need - Housing Cost Burden								
	No Cost Burden ≤30% of Income on Housing		Cost Burden of 30-50% of Income on Housing		Severe Cost Burden of >50% of Income on Housing		No / negative income (not computed)	
	#	%	#	%	#	%	#	%
<b>Jurisdiction as a whole</b>	21,290	66.7%	5,630	17.6%	4,610	14.4%	384	1.2%
<b>White</b>	17,045	69.7%	3,760	15.4%	3,375	13.8%	275	1.1%
<b>Black or African American</b>	720	51.2%	450	<b>32.0%</b>	210	14.9%	25	1.8%
<b>Asian</b>	1,255	81.8%	115	7.5%	165	10.7%	0	0.0%
<b>American Indian or Alaska Native</b>	35	100.0%	0	0.0%	0	0.0%	0	0.0%
<b>Pacific Islander</b>	40	66.7%	20	<b>33.3%</b>	0	0.0%	0	0.0%
<b>Hispanic</b>	1,730	48.9%	1,100	<b>31.1%</b>	625	17.7%	84	2.4%
<b>Multiracial or Other</b>	465	52.5%	185	20.9%	235	<b>26.6%</b>	0	0.0%

Data Source: 2017-2021 CHAS - Table 9

## **Discussion**

Using HUD's definition, in Cranston, Black, Pacific Islander, and Hispanic households are disproportionately more likely to spend more than 30% but no more than 50% of its monthly income on housing.

Multiracial households in Cranston are disproportionately more likely to spend more than 50% of their monthly income on housing.

In sum, the data highlights that 32.1% (10,240) of all households in Cranston suffer from a housing cost burden and reinforces the ongoing discussion that cost burden is the most significant housing problem in Cranston.

## NA-30 Disproportionately Greater Need: Discussion - 91.205(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?*

As previously discussed, a disproportionately greater need exists when the members of racial or ethnic group at any specific income level experience housing problems at a greater rate (10 percentage points or more) than the income level as a whole. Based on the available data discussed above, here are a few instances of racial or ethnic groups that have a disproportionately greater need. These include the following noted in NA-15, NA-20, and NA-25:

### Housing Problems

- Within the 0-30% HAMFI income range, Asian households are disproportionately likely to have one or more of the four housing problems.
- Within the 30-50% HAMFI income group Pacific Islander and Hispanic households are disproportionately likely to have one or more of the four housing problems.
- Within the 50-100% HAMFI income Black and Hispanic households are disproportionately likely to have one or more of the four housing problems.
- Within the 80-100% HAMFI income group Asian households are disproportionately likely to have one or more of the four housing problems.

### Severe Housing Problems

- Within the 0-30% AMI income category, Asian households earning 0-30% AMI are disproportionately likely to have one or more of the four severe housing problems.
- Within the 30-50% AMI income category no specific racial or ethnic group is disproportionately likely to have one or more of the four severe housing problems.
- In the 50-80% AMI income category, Asian households are disproportionately likely to have one or more of the four severe housing problems.
- In the 80-100% AMI income category, Asian households are disproportionately likely to have one or more of the four severe housing problems.

### Cost Burden

- Using HUD's definition, in Cranston, Black, Pacific Islander, and Hispanic households are disproportionately more likely to spend more than 30% but no more than 50% of its monthly income on housing.
- Multiracial households in Cranston are disproportionately more likely to spend more than 50% of their monthly income on housing.
- In sum, the data highlights that 32.1% (10,240) of all households in Cranston suffer from a housing cost burden and reinforces the ongoing discussion that cost burden is the most significant housing problem in Cranston.

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

N/A

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

Below we list the 17 census tracts either wholly or partially in Cranston. For each tract we list the total number of households and the percentage of by race and ethnicity. Using the HUD definition of disproportionate of 10 percentage points away from the average for the city as a whole, we highlight the tracts where a certain group is disproportionately **over-** or **under-** represented.

NA-30 Figure 1: Race and Ethnicity by Census Tract									
	White	Black	AI/NA	Asian	NH/PI	Other	Multi-Racial	Latino	Total Households
Cranston	79.4%	4.6%	0.1%	5.2%	0.4%	3.8%	6.4%	12.0%	32,596
44007013400	87.7%	2.5%	0.5%	2.3%	0.0%	2.6%	4.4%	5.7%	1,677
44007013500	66.3%	10.4%	0.0%	4.0%	0.0%	9.5%	9.9%	16.6%	2,190
44007013600	53.3%	5.3%	0.0%	13.2%	0.0%	17.6%	10.5%	24.0%	1,125
44007013701	77.6%	3.8%	0.0%	7.0%	1.7%	5.8%	4.0%	6.9%	1,717
44007013702	73.2%	4.8%	0.0%	6.2%	1.7%	2.2%	11.9%	13.4%	1,287
44007013800	83.1%	1.2%	0.0%	2.2%	0.0%	2.1%	11.4%	15.7%	2,230
44007013900	87.5%	3.1%	0.0%	7.2%	0.0%	0.4%	1.8%	1.6%	1,580
44007014000	71.7%	8.5%	1.0%	7.1%	0.0%	6.3%	5.4%	9.5%	2,504
44007014100	67.2%	5.4%	0.0%	7.0%	0.0%	8.5%	11.9%	46.8%	1,808
44007014200	93.0%	2.1%	0.0%	1.7%	0.0%	1.8%	1.4%	0.5%	866
44007014300	86.6%	6.5%	0.0%	4.0%	0.0%	0.9%	2.0%	5.0%	2,142
44007014400	94.4%	0.7%	0.0%	1.7%	0.0%	1.2%	2.1%	1.5%	1,626
44007014501	95.6%	0.6%	0.0%	2.0%	0.0%	0.5%	1.2%	1.3%	1,710
44007014502	87.3%	5.3%	0.0%	4.0%	0.0%	1.8%	1.5%	4.8%	2,172
44007014600	89.7%	0.0%	0.0%	7.6%	0.0%	0.0%	2.7%	3.1%	2,478
44007014700	63.1%	8.3%	0.0%	5.0%	2.2%	4.2%	17.3%	30.3%	3,076
44007014800	81.1%	4.9%	0.0%	7.4%	0.0%	2.9%	3.7%	6.6%	2,408

Data Source: 2019-2023 ACS – B11001I, B25006

# NA-35 Public Housing – 91.205(b)

## Introduction

The Cranston Housing Authority owns, manages, and maintains 586 units of public housing in the city that are designated for elderly and disabled residents, located in six different properties.

- Arlington Manor: 50 Birch Street
- Budlong Manor: 100 Arthur Street
- Hall Manor: 70 Warwick Avenue
- Jennings Manor: 125 Harris Avenue
- Knightsville Manor: 85 Briggs Street
- Randall Manor: 75 Mathewson Street

The Cranston Housing Authority has a total of 262 Housing Choice Vouchers available with a current utilization of 252 vouchers as of November 2024, resulting in a leasing percentage of 98.85%. The total budgetary authority for 2024 was \$3,005,584.

NA-35 Figure 1: 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	602	262	0		0	0	0
# of accessible units			40						

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

**Data Source:** PIC (PIH Information Center)

NA-35 Figure 2: 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	
Average Annual Income	0	0	15,911	13,545	0	13,629	12,066	0	
Average length of stay	0	0	6	7	0	7	0	0	
Average Household size	0	0	1	2	0	2	1	0	
# Homeless at admission	0	0	0	1	0	0	1	0	

Program Type								
# of Elderly Program Participants (>62)	0	0	314	40	0	40	0	0
# of Disabled Families	0	0	156	97	0	88	9	0
# of Families requesting accessibility features	0	0	513	225	0	213	12	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: PIC (PIH Information Center)

NA-35 Figure 3: 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	503	210	0	201	9	0	0
Black/African American	0	0	5	10	0	9	1	0	0
Asian	0	0	1	4	0	3	1	0	0
American Indian/Alaska Native	0	0	4	1	0	0	1	0	0
Pacific Islander	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0

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

Data Source: PIC (PIH Information Center)

NA-35 Figure 4: 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	12	15	0	14	1	0	0
Not Hispanic	0	0	501	210	0	199	11	0	0

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

Data Source: PIC (PIH Information Center)

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

Public housing residents who are disabled generally require units which have been modified for mobility impairments. Applicants for this program are primarily one and two-person families. There

are limited units which feature mobility, vision and hearing impairment assistive devices. The information the Housing Authority collects determines if there is a need for mobility impairments. This information is collected during the application process and used to identify if applicants require these features. Mobility impairment is the most common disability. According to available information there are 513 individuals awaiting accessible public housing units and another 225 households on the Housing Choice Voucher waitlist seeking accessible units. Additionally, if an applicant requires hearing or vision accessibility features these are completed as reasonable accommodation. Further, the non-disabled elderly, while not needing physically accessible units presently, will need consideration of their growing frailty as they age in place.

*Most immediate needs of residents of Public Housing and Housing Choice voucher holders*

In addition to the Section 504 (Disability) needs addressed above, most of the households in CHA housing earn less than half the area median income. The most immediate needs of Public Housing residents and holders of Housing Choice Vouchers are affordable, decent, safe, and sanitary housing.

Voucher holders face significant obstacles in the private rental market that can make it difficult to find a housing unit within the fair market rent reasonableness standard. With the dramatic increase in rents over the past several years, the Cranston Housing Authority is outspending its budget authority and expending their reserve funds. This inhibits the ability of the housing authority to distribute new vouchers if a family can find a unit that would accept a housing choice voucher. Additionally, rent increases that do meet rent reasonableness can become a rent burden for housing choice voucher holders after the initial lease period.

Aging in place is important for the elderly population in Cranston, those occupying Public Housing developments or other Section 8 or market rate units. Beyond any physical modifications to their housing units discussed above, elderly residents' primary needs are related to medical care, transportation, and activities for socialization. The primary entities that assist with services for the elderly population are the Cranston Senior Center and Comprehensive Community Action Program.

Breaking the cycle of poverty with financial stability is a need for many public housing families. For Housing Choice Voucher holders, the Family Self-Sufficiency program assists households to increase income and assets, working with the family to end their dependence on welfare assistance and rental subsidies.

In recent years, utility costs have placed an increased financial burden on the current Section 8 households, even though Section 8 voucher holders are provided with subsidized utility allowances and payments each month. The rising cost of utilities is a very common complaint among this population. Food insecurity is another major concern among public housing residents and holders of HCVs. The majority of residents in the elderly and disabled housing units fall within the 0-30% AMI income category and do not have much additional income to absorb rising housing, utility, food and other household item expenses.

*How do these needs compare to the housing needs of the population at large*

The needs of public housing tenants are fairly similar to those of the greater population, particularly those of the same income level, age, and disability status. The primary needs for low-income families are affordable housing, opportunities to earn more income through higher-wage jobs, and

a myriad of services required to help support those that are living in or near poverty such as food assistance, affordable childcare, transportation options, financial literacy, and educational and workforce development programs for higher quality jobs. The housing and service needs of existing public housing residents are similar to the elderly and disabled population throughout the city, particularly home renovations and accommodations that will allow for continued residency for individuals in need of mobility accessibility.

## **Discussion**

There is an urgent need for additional affordable housing for the many families and individuals on the public housing and Section 8 waiting list. Modifications to existing units are required to accommodate the elderly population and those living with a physical disability. Services to address the education, economic, and healthcare needs of youth and adults, and the mobility and healthcare need of the elderly and disabled populations in public housing are required.

# NA-40 Homeless Needs Assessment – 91.205(c)

## Introduction

Homelessness is a statewide and national issue of great concern. Due to the transient nature of the homeless population, it is difficult to isolate and quantify homelessness specific to the city. As detailed by the Rhode Island Coalition to End Homelessness, experiencing homelessness can mean constant marginalization, harassment, stigma, as well as losing access to safety and stability. Homelessness affects people from all different demographics and backgrounds – young adults, families, elders, veterans, and children – however, some groups are disproportionately affected more than others. Being homeless is a symptom of larger, systemic problems that inhibit individuals from being able to obtain and maintain safe, stable, and affordable housing.

Homelessness has been increasing in the state of Rhode Island since the pandemic began in 2020, increasing 121% from 1,104 homeless people in 2020 to 2,442 homeless people in 2024. In the Cranston, Johnston, Central Falls, and North Providence area, there were 110 sheltered persons and another 16 unsheltered persons as of the 2024 PIT count. The PIT data which estimates the number of persons experiencing homelessness on a given night is for the combined suburban area of Cranston, Johnston, Central Falls, and North Providence. This is the smallest level of disaggregation available from the PIT Count.

With the growth of homelessness, the state has seen homeless encampments in different municipalities. Often, these encampments are cleared which then makes serving the homeless more difficult as they are redispersed. With the dramatic growth of homelessness throughout the state, driven by the rapid increase in rents and the lack of affordable housing options, the shelter system is overcapacity.

The HMIS data for below is lowest level of aggregation available - Providence suburbs not in other regions (specifically Cranston, Johnston, Central Falls and North Providence)

NA-40 Figure 1: Homeless Needs Assessment						
Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
	Sheltered	Unsheltered				
Persons in Households with Adult(s) and Child(ren)	0	0	43	26	***	280
Persons in Households with Only Children	0	0	0	0	0	0
Persons in Households with Only Adults	110	16	672	180	47	496

Population	Estimate the # of persons experiencing homelessness on a given night		Estimate the # experiencing homelessness each year	Estimate the # becoming homeless each year	Estimate the # exiting homelessness each year	Estimate the # of days persons experience homelessness
<b>Chronically Homeless Individuals</b>	56	10	n/a	n/a	n/a	n/a
<b>Chronically Homeless Families</b>	0	0	n/a	n/a	n/a	n/a
<b>Veterans</b>	11	***	34	12	***	411
<b>Unaccompanied Child</b>	0	0	0	0	0	0
<b>Persons with HIV</b>	***	***	***	***	***	***

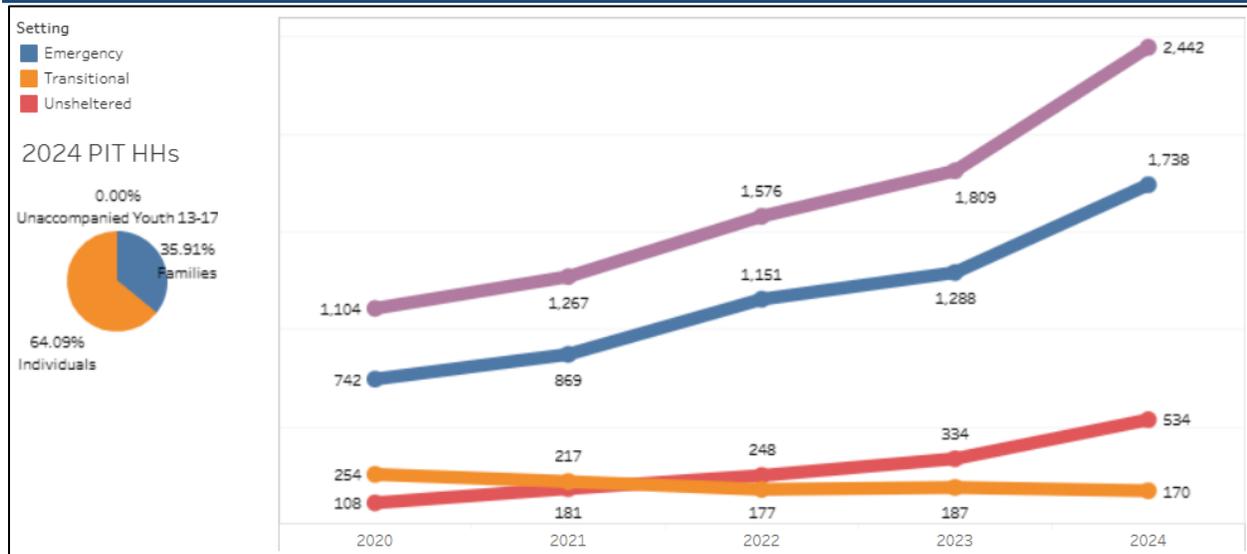
**Data Source:** Rhode Island Coalition to End Homelessness

**Data Notes:** \*\*\* indicates small cell suppression

There are several agencies that work to address homelessness in and around the city. These include House of Hope, Comprehensive Community Action Program, Elizabeth Buffum Chace Center, Thrive Behavioral Health Rhode Island, and Open Doors.

HUD mandated that all Continuums of Care (CoC) implement a Coordinated Entry System which is a process developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs. Rhode Island has fully implemented its CES in 2018. The CES is managed by the RI Coalition or End Homelessness. While the city does not receive Emergency Solutions Grant funds, the main providers of homeless services in the area participate in the coordinated entry system.

**Figure 1 - Homelessness 5 Year Trends**



**Data Source:** 2024 PIT Count, RI Coalition to End Homelessness

*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):*

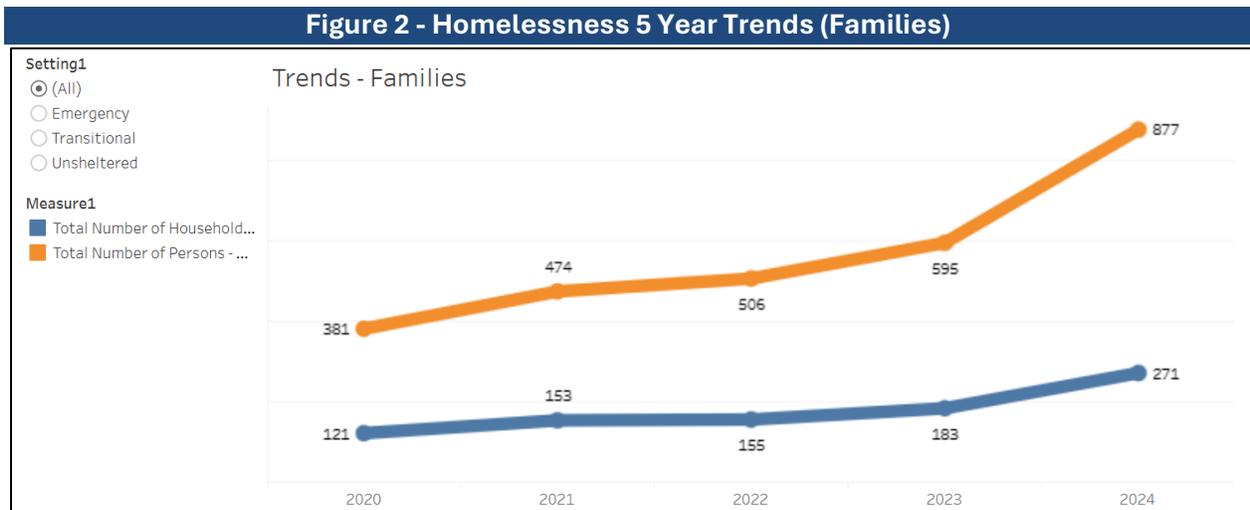
### Chronically Homeless

HUD defines a person as chronically homeless if they have been homeless for one year or longer or have had four or more episodes of homelessness within the past three years and have a disabling condition. National studies have found that when all costs are factored in, chronically homeless persons account for approximately 50% of the total expenditures for homeless services. This percent of expenditure is based on a national average of just fewer than 16% of all homeless persons being considered as chronically homeless. In the Cranston area, there were 66 chronically homeless individuals as of the 2024 PIT count. This included 56 sheltered individuals and another 10 who were unsheltered.<sup>2</sup>

### Families with Children

PIT data was not available exclusively for Cranston; however, information provided by the RI Coalition to End Homelessness, there were approximately 43 individuals in families with children identified as homeless, with approximately 26 persons becoming homeless each year in the Cranston area.

Statewide, there were 271 families with 877 total individuals reported as homeless during the 2024 Point-In-Time count, representing a 47% increase from the 2023 PIT. Among these individuals, there were 376 children. This represents an increase of 130% of the total number of individuals in homeless families, and an increase of 124% of the total number of homeless families between 2020 and 2024.



**Data Source:** 2020-2024 PIT Count, RI Coalition to End Homelessness

<sup>2</sup> **Note:** The lowest level of aggregation available includes the following suburban communities: Cranston, Johnston, Central Falls and North Providence together.

According to the Cranston School District, there were 44 Cranston Public School students reported as being homeless as of February 2025, out of a total of 11,245 students in the public school system. While the total number of homeless students has fluctuated annually, the annual student homeless population in Cranston has been quite small over the past 4 school years.

### **Veterans**

There were 130 homeless Veterans statewide identified during the 2024 PIT count, with 11 sheltered Veterans in the Cranston area. The majority of these Veterans are single and are over the age of 50. Many of Veterans have co-occurring mental health and/or drug addiction issues and other mental health disorders such as anxiety, depression, or post-traumatic stress disorder (PTSD). Combat exposure, military culture, and post-deployment challenges significantly contribute to the development of co-occurring disorders among veterans.

### **Unaccompanied Youth**

There are no reported unaccompanied homeless youth in the Cranston area.

*Nature and Extent of Homelessness: (Optional)*

See above.

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

See above.

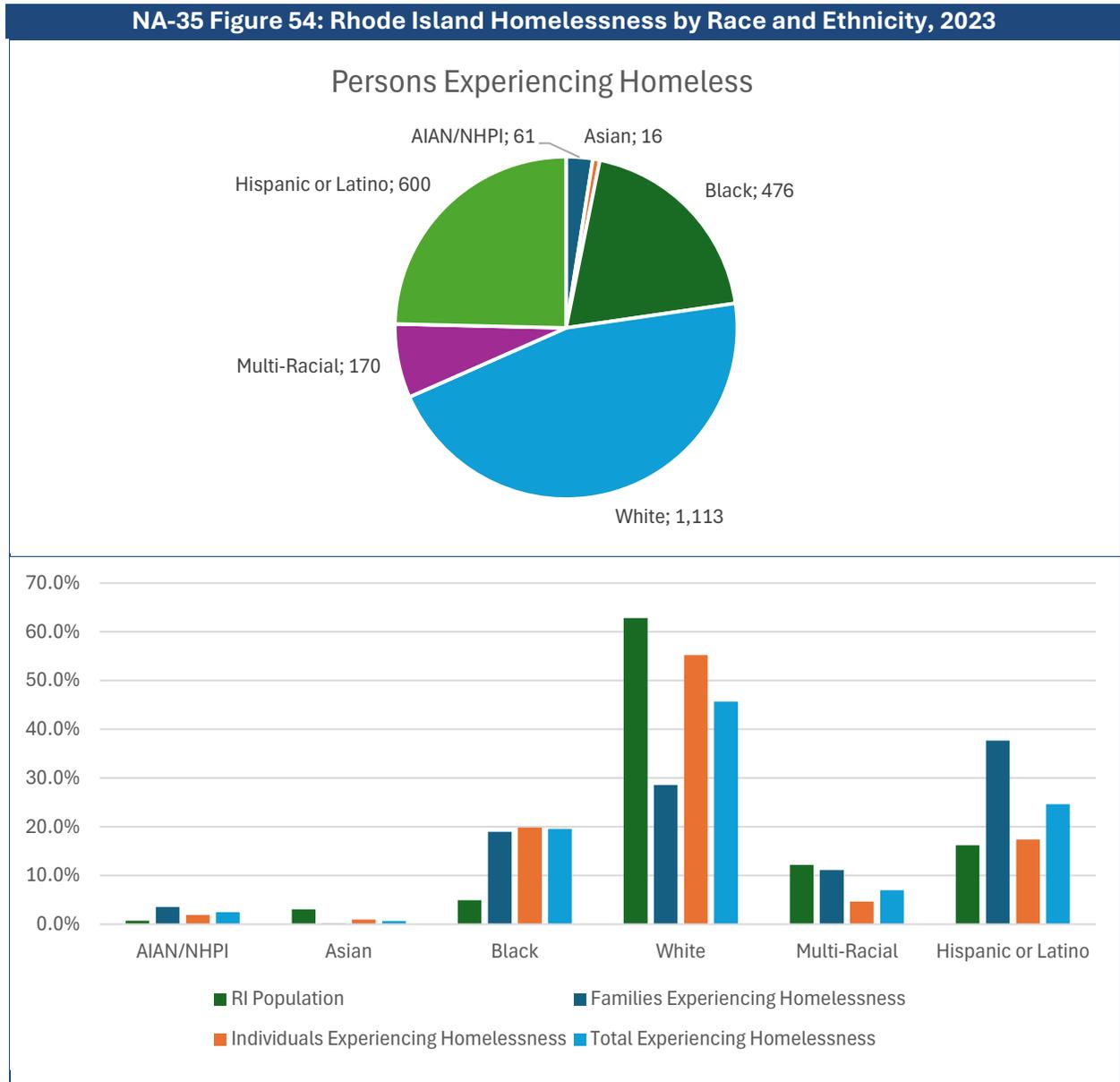
With the substantial growth of the total homeless population in the state, the shelter system is significantly overcapacity. The shelter queue is a dynamic waitlist of individuals and families awaiting shelter placement. As of October 2024, there were 1,055 unsheltered persons waiting for shelter, but in the last year there were only an average of 7 openings per day. Even though new Emergency Shelter beds have been added to the system each year, there is still a gap when compared to the growing number of persons outside. Further, as of October 2024, there were 2,013 persons waiting for housing, but in the past year there were only an average of 24 openings per month. The number of available housing units within the system has not kept up with the increasing number of persons experiencing homelessness. The lack of affordable housing units, and in particular, deeply subsidized housing units, creates a significant bottleneck as more and more people enter the shelter system but are unable to transition into affordable housing units. This extends waiting times and the average duration of shelter stays.

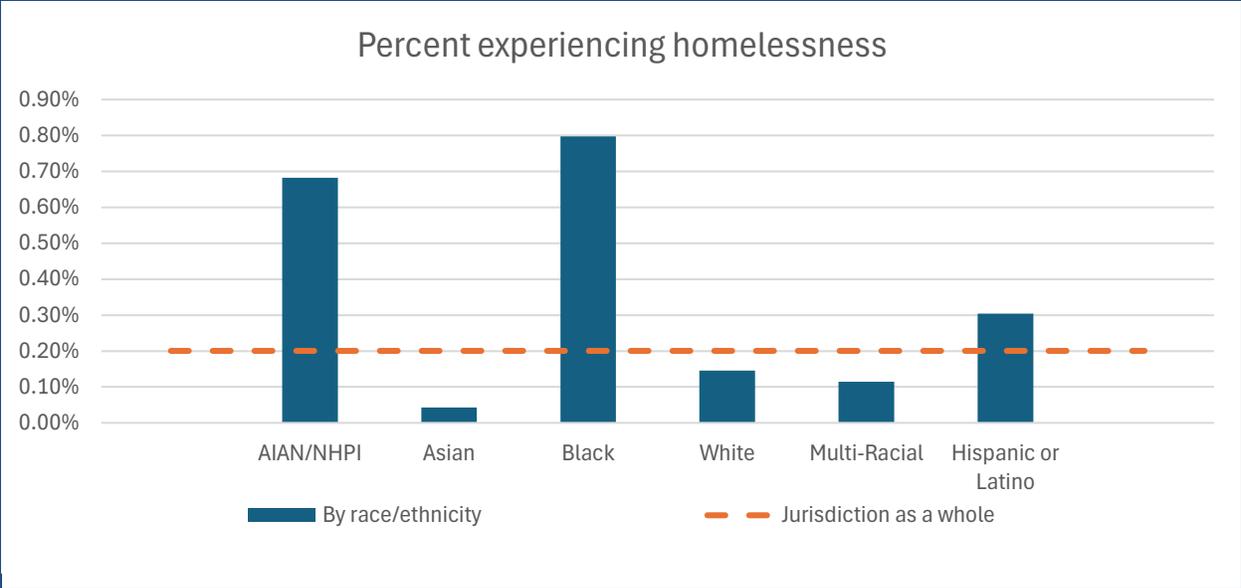
*Describe the Nature and Extent of Homelessness by Racial and Ethnic Group.*

Racial and ethnic data from the PIT Count is only available at the CoC level, which is the entire state of Rhode Island. Approximately 0.20% (2,436 individuals) of Rhode Islanders experienced homelessness in 2024. Of this group, 61 are American Indian, Alaska Native, Native Hawaiian, or Pacific Islander, 16 are Asian or Asian American, 476 are Black or African American, 1,113 are White, 170 are multi-racial, and 600 identify as Hispanic or Latino.

We see that AIAN/NHPI and Black/African American individuals were far more likely to experience homelessness last year than the population as a whole. The probability of a random Rhode Islander experiencing homelessness in 2024 was 0.0020. When conditioned on race and ethnicity the probability of a random African American experiencing homelessness was 0.0080 and the

probability of a random American Indian, Alaska Native, Native Hawaiian, or Pacific Islander experiencing homelessness was 0.0068.





	Families Experiencing Homelessness	Individuals Experiencing Homelessness	RI Population
<b>AIAN/NHPI</b>	31	30	8,935
<b>Asian</b>	1	15	37,419
<b>Black</b>	165	311	59,714
<b>White</b>	249	864	763,493
<b>Multi-Racial</b>	97	73	147,889
<b>Hispanic or Latino</b>	328	272	197,405
<b>Total</b>	871	1,565	1,214,855

Data Source: 2024 PIT Count; CoC RI-500. 2019-2023 ACS

*Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.*

The lowest level of aggregation available from the HMIS includes the Providence suburbs not in other regions (specifically Cranston, Johnston, Central Falls and North Providence). This area's homelessness situation is characterized by 126 individuals experiencing homelessness on any given night, 110 sheltered and 16 unsheltered. Key findings include:

- Adult-only households represent the majority of both sheltered (110) and unsheltered (16) individuals
- No children are experiencing unsheltered homelessness

- Chronic homelessness affects 66 individuals (56 sheltered, 10 unsheltered)
- Adults without children remain homeless for an average of 496 days
- Annually, 715 people experience homelessness, 206 become homeless each year, and only approximately 50 exit the system annually

The data reveals a system that effectively protects children from street homelessness but struggles with long-term homelessness among single adults. The significant gap between those entering and exiting homelessness suggests ongoing challenges in providing permanent housing solutions, particularly for adult-only households.

## **Discussion**

The city and the state are in desperate need of deeply subsidized affordable housing units. The crisis of unaffordable housing has been persistent for many years and has been exacerbated with the post-pandemic market changes. The lack of affordable housing and the limited scale of housing assistance programs contribute to the current housing crisis and increases homelessness in every community in the state, including Cranston. The deficit of affordable housing has led to high rent burdens which constantly put a growing number of people at risk of becoming homeless as the cost burden for housing continually increases. Expanding affordable housing is still the most critical need facing the City and the State, and without more affordable housing options combined with supportive services for individuals and families, homelessness and the risk of homelessness will continue to be an issue facing the City and the State.

# NA-45 Non-Homeless Special Needs Assessment - 91.205 (b,d)

## Introduction

There are households in the City of Cranston that may have special housing and supportive service needs unrelated to homelessness. Some of these population groups include the elderly and frail elderly; those living with some type of physical or cognitive disability; those living with HIV/AIDS and their families; persons with substance use disorders; and victims of domestic violence, dating violence, sexual assault, and stalking. These groups typically face greater housing challenges than the general population due to their specific circumstances and the City's housing stock may not be suitable for households with particular special needs. These groups may also require special attention due to additional social services required.

*Describe the characteristics of special needs populations in your community:*

### Elderly and Frail Elderly

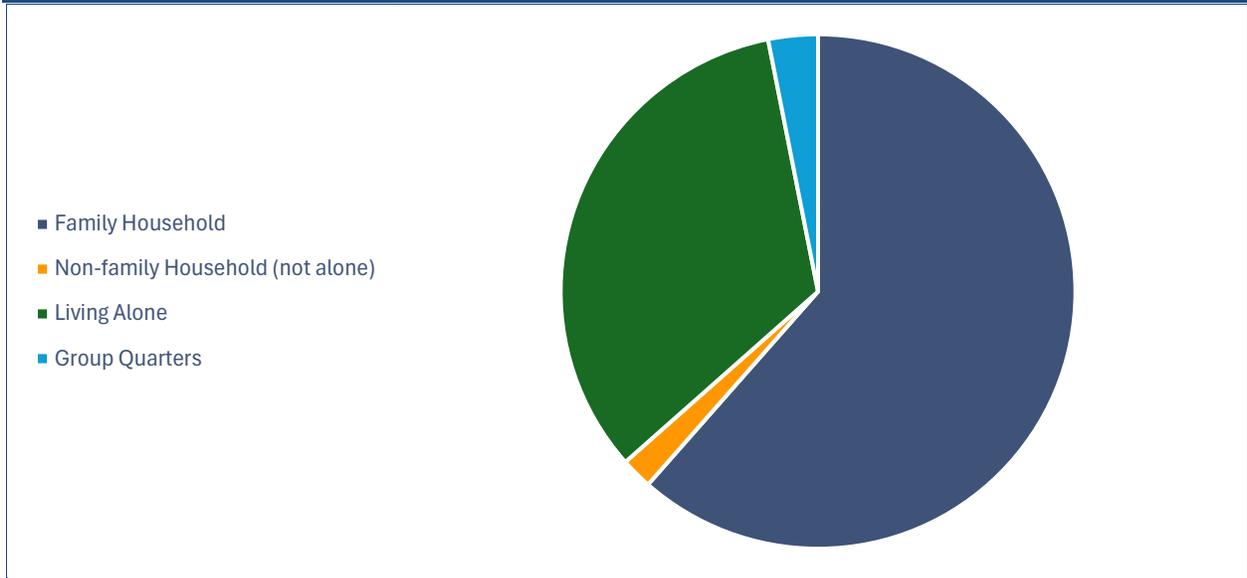
In the City of Cranston, the senior population has seen significant growth over the past several years. The aged 65-74 population has grown 51% since 2010, when during the same time span the overall population of the city grew by only 2.5%. The 2023 ACS 5-year survey data shows Cranston residents aged 65 and older comprised 21.4% of the total population of the city, standing at 14,133 persons.

Generally, the senior population has more limited fixed incomes than the population as a whole, primarily Social Security and other retirement income. However, 22.5% of all older individuals in Cranston are still in the labor force, with 2,982 working seniors aged 65 and older, and another 204 in the labor force seeking employment. This is likely a manifestation of the rising cost of living, particularly the ongoing housing cost burden experienced by seniors, or their interest to stay active and social in their community.

Many seniors also lack their own transportation and are often subject to social isolation when they have limited opportunities to leave their homes and engage in beneficial socializing and recreational activities. The Cranston Senior Center has a significant number of daily activities for older individuals that provide entertainment, recreation, and various case management services to the elderly population; however, they are not able to transport seniors to and from the center. They are only able to serve seniors who are able to coordinate their own transportation. Public transportation options are limited, making it difficult for seniors to access medical appointments, shopping centers, and other essential services, and alternative services like Uber are cost-prohibitive for many. Many seniors depend on family or community networks for transportation, but those without support face challenges in maintaining independence. Many seniors actively participate in social and recreational activities at the senior center, but a significant portion remain homebound or isolated.

Through discussions with Cranston residents and in consultation with the Cranston Housing Authority, Senior Center, and Assisted Living Facilities, there is a large and growing concern among Cranston seniors about their ability to afford the transition from independent living to assisted living and nursing home care. Income limits for Medicaid are incredibly low in Rhode Island and many seniors exceed the income threshold but still have very low incomes. The state's cost share leaves seniors with incredibly high medical expenses even when covered by Medicare.

**NA-45 Figure 1: Senior Population by Household Type**



	#	%
Family Household	8,551	60.5%
Non-family Household (Not Living Alone)	275	1.9%
Living Alone	4,648	32.9%
Group Quarters	433	3.1%

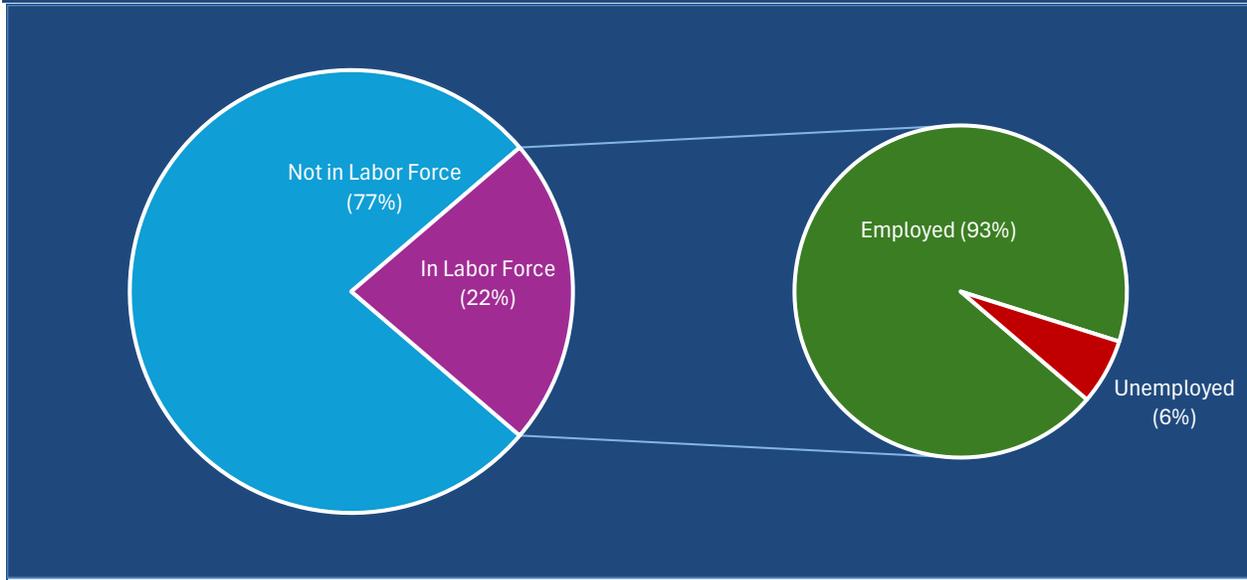
Data Source: 2019-2023 ACS - B09020

**NA-45 Figure 2: Senior Households Cost Burden**

	Renters		Owners		Total	
	#	%	#	%	#	%
Cost Burden <= 30%	1,375	50.4%	4,715	62.7%	6,090	59.4%
Cost Burden > 30%	1,355	49.6%	2,810	37.3%	4,165	40.6%

Data Source: 2017-2021 CHAS Table 7

**NA-45 Figure 3: Seniors in the Labor Force**



	#	%
<b>Employed</b>	2,982	21.1%
<b>Unemployed</b>	204	1.4%
<b>Not in Labor Force</b>	10,947	77.5%

Data Source: 2019-2023 ACS - B23001

**NA-45 Figure 4: Senior Population by Poverty Status**

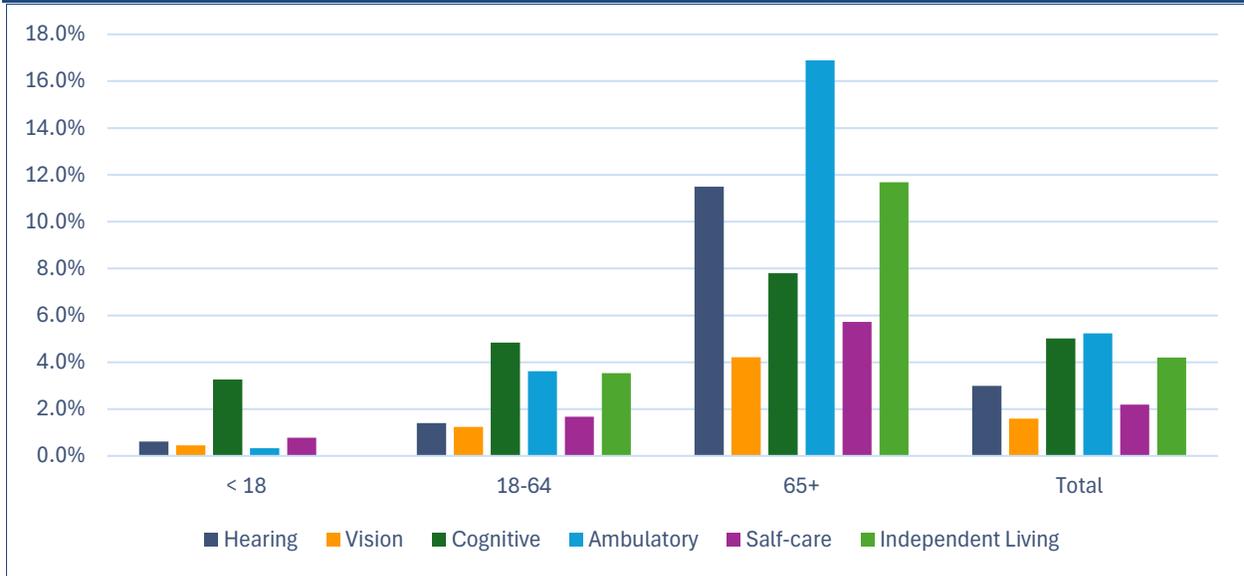
	#	%
<b>Income at or above poverty level</b>	11,864	86.0%
<b>income below poverty level</b>	1,938	14.0%

Data Source: 2019-2023 ACS - B17001

**Persons with Physical or Cognitive Disabilities**

The largest absolute number of Cranston residents living with a disability are persons 18-64, with 4,629 persons living with a disability (9.4% of the total population). However, as a percentage of the total population by age, older individuals aged 65 and older are most likely to live with a disability, with 29% living with some type of disability. Residents that are physically or cognitively disabled have special housing needs to accommodate their specific conditions. There are 4,159 adults receiving Developmental Disability Services, 54% of whom reside in Providence County (the state’s largest county which includes Cranston). This represents approximately 2,245 individuals.

NA-45 Figure 5: Disabilities by Age



	< 18		18-64		65+		Total	
	#	%	#	%	#	%	#	%
Hearing difficulty	102	0.6%	695	1.4%	1,586	11.5%	2,383	3.0%
Vision difficulty	74	0.4%	614	1.2%	581	4.2%	1,269	1.6%
Cognitive difficulty	541	3.3%	2,392	4.8%	1,076	7.8%	4,009	5.0%
Ambulatory difficulty	54	0.3%	1,788	3.6%	2,331	16.9%	4,173	5.2%
Self-care difficulty	130	0.8%	828	1.7%	790	5.7%	1,748	2.2%
Independent living difficulty	n/a	n/a	1,745	3.5%	1,612	11.7%	3,357	4.2%
Total with any disability	734	4.4%	4,629	9.4%	3,999	29.0%	9,362	11.7%
Total Population	16,608		49,420		13,802		79,830	

Data Source: 2019-2023 ACS – Tables B18101, S1810

### Persons with Alcohol or Other Drug Addiction

According to the National Survey on Drug Use and Health published by Substance Abuse and Mental Health Services Administration (SAMHSA), almost 22% of all Rhode Islanders aged 12 and

older had a substance use disorder (SUD) from 2022 to 2023, inclusive of alcohol and illicit drugs.<sup>3</sup> This includes 12.59% of Rhode Islanders with an alcohol use disorder and 11.69% of Rhode Islanders with an illicit drug use disorder. Using these incidence rates, it is estimated that approximately 15,600 Cranston residents ages 12 and older could have a substance use disorder.

A key principle to reduce substance abuse is to treat alcohol and drug addiction as a medical issue rather than a criminal issue. The state of Rhode Island created an Adult Drug Court within Superior Court to more efficiently divert certain drug cases from the criminal justice system. There is recognition that drug and alcohol addiction can be managed and treated, and with the appropriate treatments people can create for themselves a renewed sense of self and personal responsibility. Rehabilitation is possible through adherence to prescribed clinical treatment and counseling, drug testing, individualized services coordination, probation contact, participation in recovery programs, and frequent court appearances to ensure compliance for required behavioral changes. However, much of this is predicated on the stability of one's housing.

CODAC Behavioral Healthcare and The Providence Center provide treatment for substance use disorders in Cranston. These facilities are discussed further in **Section MA-35**. There is a need for inpatient drug and alcohol treatment facilities including sober living environments. According to the Rhode Island Department of Health: Opioid and Stimulant Use Data Hub, during the 2024 calendar year, there were 177 Non-Fatal Opioid Overdoses in Cranston.<sup>4</sup>

### **Victims of Domestic Violence**

According to the Coalition Against Domestic Violence, in calendar year 2022 there were 8,538 individuals who were victims of domestic violence that received assistance through the network of agencies providing victim services. Additionally, 244 adults and children stayed in shelters/safe homes, and 63 adults and children lived in transitional housing. This is supplemented with data from Sojourner House which reports 1,810 unduplicated clients for FY2023. Among those, 82% are females, 16% are male, and 2% are other. It is possible, although unlikely, that there could be some duplication among these two sets of data; however, duplication should be minimal specifically because victims typically work very closely with a single agency as they are going through the process of rebuilding their lives.

According to the 2024 Kids Count Factbook, there were 264 incidents of reported domestic violence in Cranston in 2022 which resulted in an arrest, 63 of them with a child present. It must be noted that according to the Bureau of Justice Statistics only half of all domestic-violence victimizations are reported to police, with reporting rates similar for intimate-partner violence and violence committed by other relatives. It should be assumed that the actual rates of domestic violence in the city and state are much higher than what is reported.

A critical need for victims of domestic violence is stable affordable housing that allows people and their children to leave an abusive environment and become stable and independent. The two primary organizations that supports victims of domestic violence, dating violence, sexual assault and stalking in Cranston are the Elizabeth Buffum Chace Center (EBCC) and Day One. They serve approximately 500 Cranston residents annually, providing a wide variety of services including Law

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<sup>3</sup> <https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health/national-releases>

<sup>4</sup> <https://ridoh-drug-overdose-surveillance-iss-rihealth.hub.arcgis.com/>

Enforcement Advocacy, Court Advocacy, Counseling and Support Services, Residential Services, and Outreach and Education. EBCC has 7 units of short-term, safe, confidential shelter for victims of domestic violence and sexual assault and their children. Shelter residents are provided with all basic needs and are encouraged to participate in their other programs, including education about domestic violence, parenting and financial literacy. Families are moved from shelter units to transitional housing as appropriate while they receive services that lead to safety and productivity in the community, as they continue to work towards independence. In 2020, EBCC completed 7 units of Permanent Supportive Housing to assist with the long-term housing needs of victims of domestic violence.

### Veterans

Cranston has a veteran population of 2,513, or 3.8% of the 18-and-over population. This population skews much older and more male than the population as a whole. Education levels of the veteran population are similar to the population as a whole. Both veterans and non-veterans have a high level of college attendance (62.7% and 64.9% respectively) but non-veterans are more likely to have completed a bachelor’s degree or higher. Median income for veterans is higher than for non-veterans, which should not be surprising given that the veterans age and gender correlate with higher incomes.

Approximately 26.1% of Cranston veterans have a service-connected disability rating greater than 10%. In addition, veterans’ age distribution makes them much more likely to have at least one disability.

	Veteran	Non-Veteran
<b>18-34</b>	6.8%	28.2%
<b>35-54</b>	18.6%	33.5%
<b>55-64</b>	17.7%	18.3%
<b>65-74</b>	20.6%	12.0%
<b>75+</b>	36.3%	8.1%
<b>Male</b>	94.4%	48.1%
<b>Female</b>	5.6%	51.9%
<b>Less than high school graduate</b>	6.3%	9.5%
<b>High school graduate (includes equivalency)</b>	31.0%	25.6%

	Veteran	Non-Veteran
<b>Some college or associate's degree</b>	36.5%	28.7%
<b>Bachelor's degree or higher</b>	26.2%	36.2%
<b>Income</b>	\$50,526	\$45,710

Data Source: 2019-2023 ACS

### Youth Aging out of Foster Care

As of December 1, 2023, there were 1,653 children under age 21 in the care of DCYF who were in out-of-home placements. DCYF is no longer sharing data on the number of youth aging out the foster care system each year, but based on the census of youth in care who are 18 or over it is estimated that about 100 per year will transition out of the foster care system. Residency information for these youth is not available. Aging out can present significant challenges as these young adults transition to independent living, including:

- **Homelessness:** Many young adults who age out of foster care struggle to find stable housing. National studies show that between 11% and 36% of these youth experience homelessness during their transition to adulthood.
- **Employment and Financial Stability:** Securing and maintaining employment can be difficult due to a lack of job experience and necessary life skills. Financial independence is often a significant hurdle.
- **Education:** Continuity in education is often disrupted by frequent moves and instability in foster care. This can lead to lower educational attainment and limited opportunities for higher education.
- **Mental Health:** Many foster youth have experienced trauma, abuse, or neglect, leading to mental health issues such as depression, anxiety, and PTSD. These issues can be exacerbated by the stress of transitioning to independent living.
- **Lack of Support Networks:** Without a stable family or support system, these young adults may feel isolated and lack the guidance needed to navigate adulthood.
- **Substance Abuse:** The absence of a supportive environment can increase the risk of substance abuse as a coping mechanism for the challenges they face.

Addressing these challenges requires comprehensive support systems, including access to housing, education, employment opportunities, mental health services, and mentorship programs.

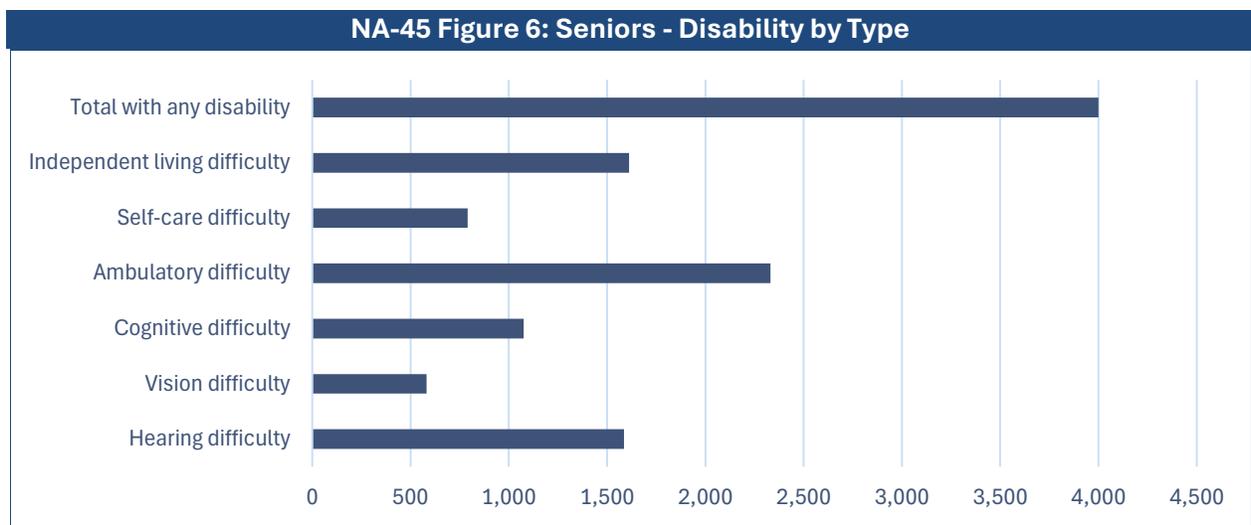
*What are the housing and supportive service needs of these populations and how are these needs determined?*

### Elderly and Frail Elderly

While 86% of Cranston seniors aged 65 and older are at or above the Federal Poverty Level, there are 4,165 elderly households (40.6%) that experience housing cost burdens of over 30% (1,355 renter-occupied households (50.4%) and 2,810 owner-occupied (37.3%) households). Further, as discussed in NA-10, there are 725 elderly renters (30.3%) and 1,430 elderly homeowners (21.5%) of all income categories that spend more than 50% of their income on housing. Additionally, limited

incomes inhibit the ability to make the necessary home improvements to ensure their homes are in compliance with the City’s building and property maintenance codes that ensures the home meets minimum health and safety standards. It is not uncommon in the city to see homes occupied by seniors to in need of repairs to major building components, primarily roof and heating system replacements, but also exterior paint and siding deterioration.

The elderly and frail elderly populations have additional unique challenges that come with age, including chronic and other medical conditions, higher rates of physical and mental disabilities (such as Alzheimer’s and dementia), mobility challenges, and higher health care costs. According to the 2019-2023 American Community Survey, 28.3% of the elderly population aged 65 and over in Cranston, 3,999 seniors, experiences at least one type of mental or physical disability. Among the most common are ambulatory and independent living difficulties, representing 16.9% and 5.7% of the elderly population respectively. While these are the most common disabilities among the elderly population in the city, other disabilities also greatly impact their housing options. Seniors are often in need of in-home support or other housing types such as intermediate care facilities, nursing homes, and other housing that includes a planned service component to care for seniors when independent living, self-care, and mobility issues increasingly become a challenge. A growing challenge to providing these services to the senior population is the lack of healthcare staff to provide these services.



Data Source: 2019-2023 ACS – B1810, S1810

Many seniors also lack their own transportation and are often subject to social isolation when they have limited opportunities to leave their homes and engage in beneficial socializing and recreational activities. The Cranston Senior Center has a significant number of daily activities for older individuals that provide entertainment, recreation, and various case management services to the elderly population; however, they are not able to transport seniors to and from the center. They are only able to serve seniors who are able to coordinate their own transportation.

**Persons with Physical or Cognitive Disabilities**

Ambulatory difficulty inhibits an individual’s ability to walk or climb stairs. Due to the physical characteristics of the city’s housing stock, with many split-level ranch-style homes and multi-story two- to four-unit homes, a primary concern is providing housing options for the 4,173 Cranston residents (5.2%) that experience ambulatory difficulty, and the 1,748 residents (2.2% of the total Cranston population) with self-care and independent living difficulties. Specific construction

features and accessibility modifications are often required for those with mobility challenges, depending on the type and severity of these challenges (i.e., handrails, ramps, wider doorways, grab-bars, etc.).

While the city is not fully aware of the total population that struggles living in housing units that do not have all the elements and amenities required for those with mobility challenges, given the size of the population and the anecdotal information from the citizen participation and consultation process, it is estimated to be several hundred. To maintain people living in their own homes longer, there is a need to make appropriate in-home modifications described above.

Stable housing for persons with mental illness is hugely beneficial regarding their mental health care because the primary location of a support network is directly linked to their residence. Those living with a mental or developmental disability can find it difficult to retain housing and often their disability prevents them from finding suitable employment or earning an adequate wage that allows for independent living. Many individuals with mental illness are dependent solely on Supplemental Security Income as their primary source of income. Affordability issues become even more challenging for this population as there are few options in the private housing market and their disability leaves them at greater risk of homelessness and ill-equipped to navigate the public support system without substantial assistance.

Individuals with moderate to severe dementia or another cognitive impairment often require special care including supervision of up to 24 hours a day. Some may exhibit impulsive or difficult behaviors, paranoia, lack of motivation, memory problems, incontinence, poor judgment, and wandering that could be detrimental to their health and safety. Occasionally specialized communication techniques and/or devices are needed to communicate. They may need help with activities of daily living, such as bathing, eating, transferring from bed to a chair or wheelchair, toileting, or other personal care needs.

### **Persons with Alcohol or Other Drug Addiction**

In addition to diversion, specific treatment can manifest in a variety of forms depending on the specific acuity of the circumstance. A continuum of services ranging from in-patient hospitalization, residential sobriety treatment in a supportive and structured environment, long-term outpatient treatment, relapse prevention and recovery programs, regular toxicology screening, medication management, and other programs could be necessary to increase the likelihood of future abstinence from drugs and alcohol. Often times, there are contributing or concurrent conditions that result in alcohol or drug abuse which need to be addressed in order to assist the individual from dependence on alcohol or drugs. In all cases, stable housing is critical to recovery. Through consultation, there is an unmet need for inpatient drug and alcohol treatment facilities including sober living environments.

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

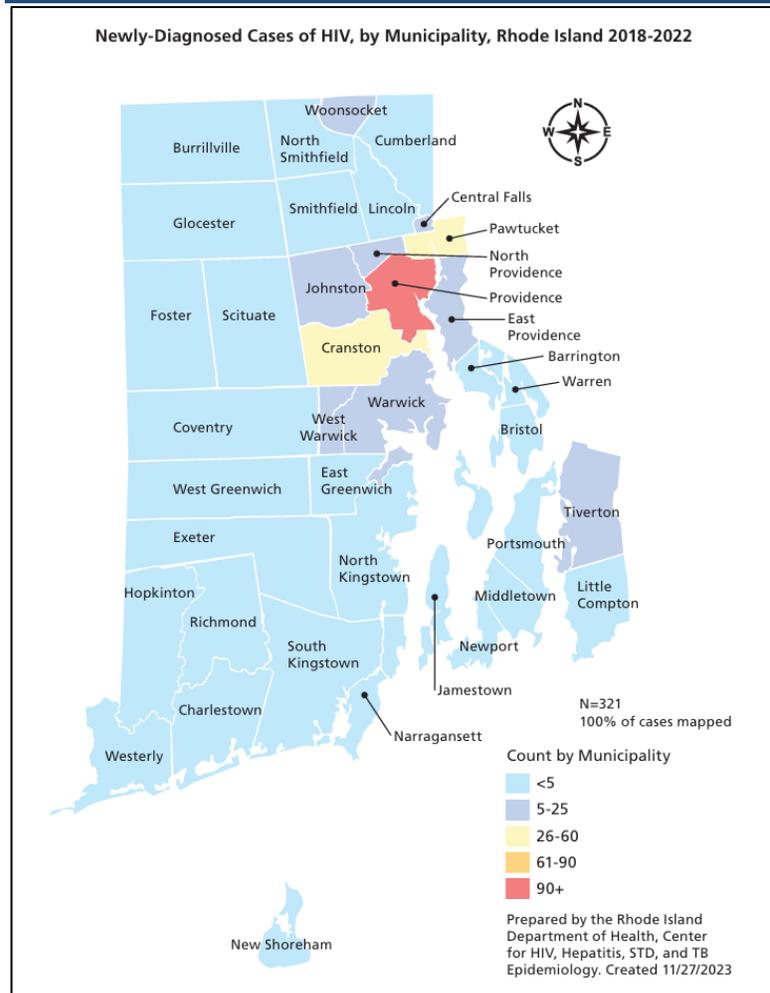
Cranston is one of the top three municipalities in the state (along with Providence and Pawtucket) with the highest rate of newly diagnosed cases of HIV, according to the RI Department of Health. Newly diagnosed cases of HIV have seen a declining trend from 121 new infections in 2008 to 65 new infections in 2022. Cranston accounts for between 26 and 60 of those infections.

There are three primary organizations that provide supportive services and housing to persons living with HIV/AIDS: AIDS Care Ocean State (ACOS), AIDS Project Rhode Island (APRI), and Community Care Alliance (CCA). According to ACOS, the largest HIV/AIDS housing provider in Rhode Island, they provide 95 units of HIV/AIDS specific housing in Rhode Island. These include licensed assisted facility scattered site apartments, and nonprofit owned houses which range from assisted living to fully independent apartments. ACOS currently supports 127 clients residing in 48 apartments owned and operated by the agency, as well as an additional 47 sub-leased apartments housing an additional 76 clients. These housing units are primarily located in Providence, Cranston, Pawtucket, and North Providence.

Information from the RI Department of Health shows that there were 2,749 people living with HIV in Rhode Island at the end of 2021. The number of individuals living with HIV in Rhode Island is impacted by patients moving in and out of the state or to and from another country. It is also estimated that about 13% of individuals who are HIV-infected do not know their status and so the numbers discussed in this section are likely to be an underestimate of all Rhode Islanders living with HIV. Due to advances in effective HIV medication, people who are HIV-positive are living longer lives and represent a growing segment of Rhode Island’s population.

On average, there are approximately 150 persons living with HIV/AIDS that are searching for supportive housing in the state. As with any other population group, affordable housing options are of urgent concern for persons living with HIV/AIDS. Stable housing is required to maintain a

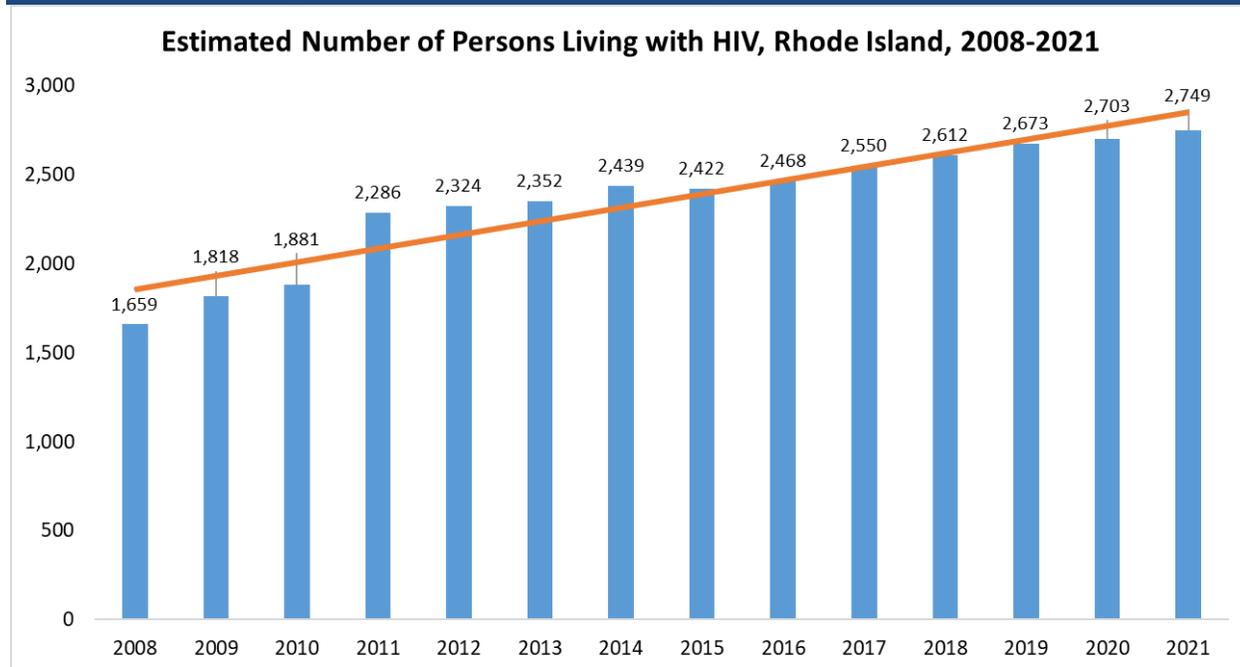
**Figure 3 - Newly Diagnosed Cases of HIV by Municipality**



**Data Source:** Rhode Island Department of Health

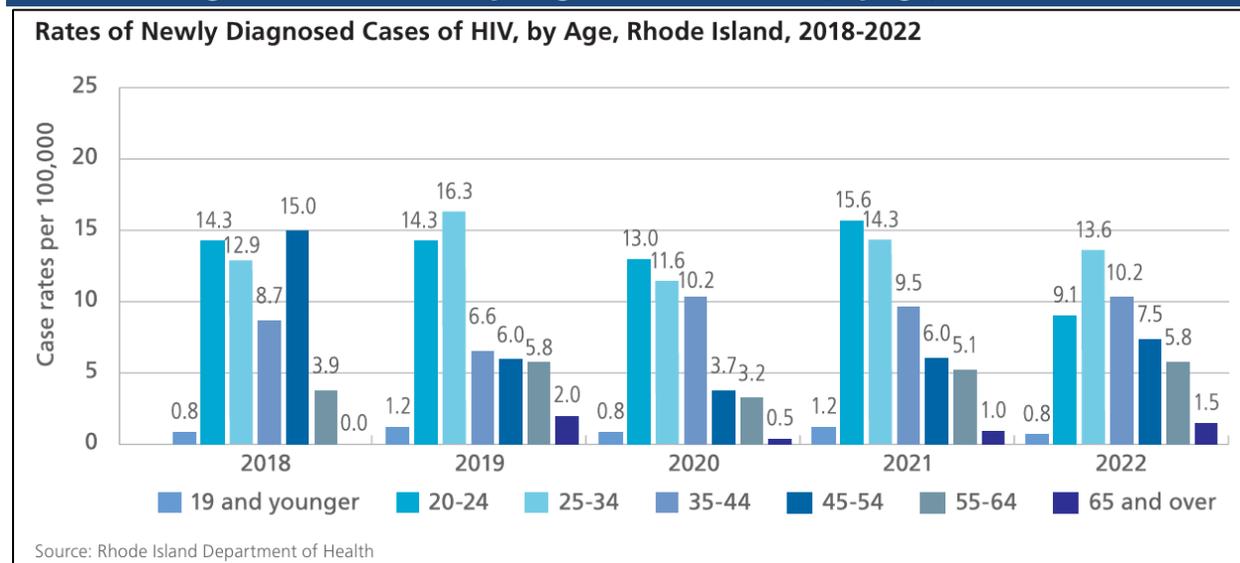
consistent medication regime. Individuals need a place to take care of hygiene and their immune system. No one who lives on the street can be compliant with their medication treatment or HIV care, similarly with other medical and/or mental health or behavioral health conditions. When people have stable housing, they are able to get the services they need.

**Figure 4 - Number of Persons Living with HIV, 2008-2021**



Data Source: Rhode Island Department of Health

**Figure 5 - Rates of Newly Diagnosed Cases of HIV, by Age, 2018-2022**

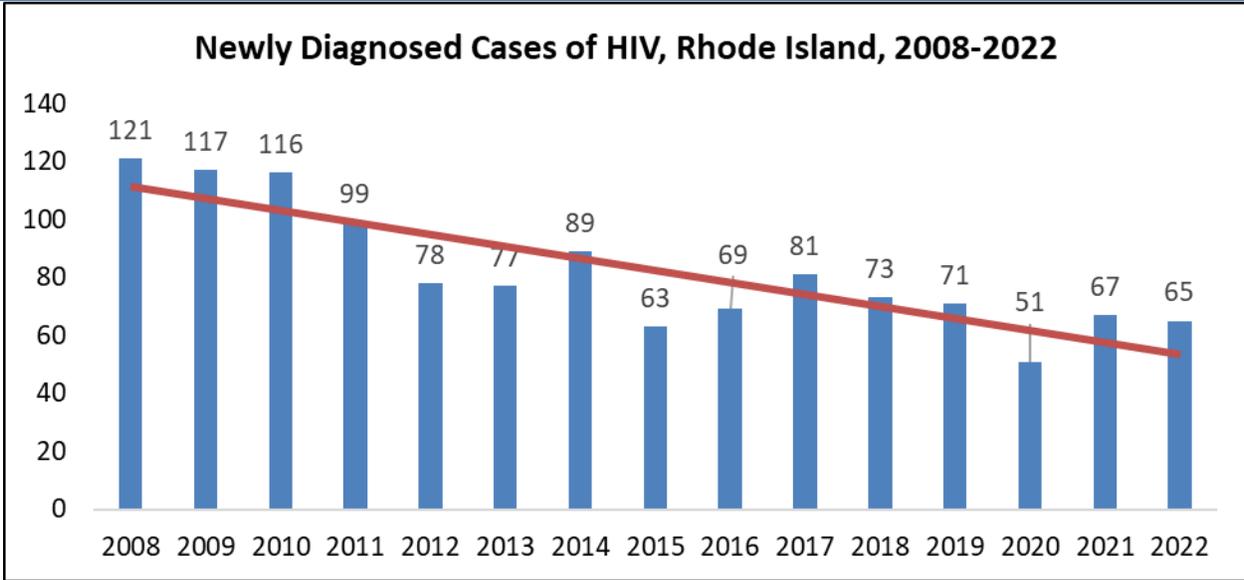


Source: Rhode Island Department of Health

Data Source: Rhode Island Department of Health

Between 2018 and 2022, the rates of newly diagnosed HIV cases were highest among Rhode Islanders in their 20s, 30s, and 40s. Rates among individuals ages 20-24 and 25-34 have remained consistently high compared to other groups.

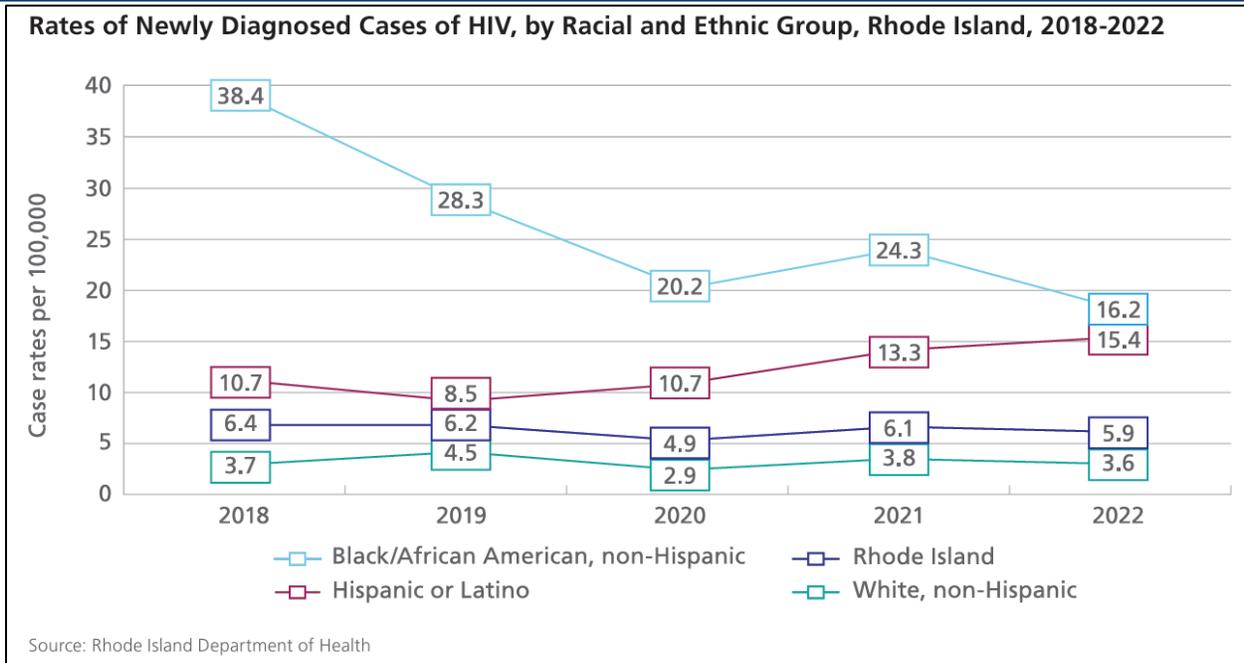
**Figure 6 - Newly Diagnosed Cases of HIV, 2008-2022**



Data Source: Rhode Island Department of Health

While HIV diagnoses have decreased overall in the last 10 years, disparities in HIV rates among racial and ethnic groups in Rhode Island persist. When compared to the Non-Hispanic White population, in 2022, the rates of HIV were about four times higher among both the Hispanic/Latino population and the Black / African-American population. Since 2018 the rate of newly diagnosed HIV among the Black / African-American population has dropped by 57% and increased among the Hispanic/Latino population by 44%.

**Figure 7 - Rates of Newly Diagnosed Cases of HIV by Race and Ethnicity, 2018-2022**



Source: Rhode Island Department of Health

Data Source: Rhode Island Department of Health

*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))*

Cranston is not a recipient of HOME funds.

*Discussion:*

The above special needs populations face a multitude of housing and supportive service needs unique to their condition. A wide availability of housing choices for each of these groups, with the requisite supporting services will be necessary to truly meet their needs. Key highlights include additional accommodation for the city's aging population and those that live with ambulatory and independent living difficulties. Individuals living with disabilities need housing that can accommodate wheelchairs or other mobility devices that allow individuals with mobility challenges to access upper and lower levels of homes. Those living with HIV/AIDS are in need of housing and supportive medically related services. Similarly, those diagnosed with mental or developmental disabilities require affordable housing which allows for independent living with the requisite supportive services.

There were additional needs identified through consultation with providers of rental assistance regarding having a pool of flexible funds that can be used to repair damages to housing units occupied by homeless individuals or those with significant mental health or addiction issues. Historically, damages have been paid by the agency in order to preserve the relationship with the property owner; however, funds for damages reduce the amount of rental assistance they are able to provide.

# NA-50 Non-Housing Community Development Needs - 91.215 (f)

*Describe the jurisdiction's need for Public Facilities*

As part of the consultation and citizen participation processes, CEW Advisors solicited information from community-based organizations, social service providers, relevant municipal staff, and Cranston residents to identify the most important community needs, neighborhood concerns, and public facilities. Public facility needs were collected in several ways: through the online community needs survey, through citizen participation discussions and focus groups, in consultation with municipal staff, and evaluating the City's Comprehensive Plan and Hazard Mitigation Plan.

Reviewing the **2022 Hazard Mitigation Plan**, we see that The City of Cranston faces several critical needs for public facilities that support disaster resilience and community safety. Three aging fire stations need to be relocated into larger facilities to safely accommodate modern equipment and staff, with estimated costs of \$9 million for headquarters and \$5 million per station. The city's public safety infrastructure also requires improved communication capabilities, with assessments and upgrades needed throughout the City's Information Technology System to ensure system redundancy and reliability during emergencies.

Additionally, the plan identifies the need to upgrade stormwater management facilities, particularly in flood-prone areas like Wedge Street and surrounding neighborhoods. Several wastewater pump stations (Mayflower, Howard, and Plainfield) require rebuilding and elevation of generators to protect critical infrastructure from flooding events. These infrastructure improvements are essential for maintaining critical public safety operations during the increasingly severe weather events identified in the city's hazard assessment, which ranks nor'easters, hurricanes, flooding, and winter storms as high-priority concerns for the community.

The **2024 Comprehensive Plan** also discusses the need for fire protection facilities particularly in the southwestern part of the city where continued evaluation for a new fire station is recommended to address growth in Western Cranston.

Municipal building maintenance represents another critical need, with several buildings requiring renovations to meet modern fire codes and address long-term maintenance concerns. The plan also identifies the Budlong Swimming Pool as a facility of significant community importance requiring redesign to better align with contemporary usage patterns while maintaining its historical significance. Additional priorities include improving senior services facilities to accommodate the city's aging population, consolidating municipal offices near City Hall to enhance service efficiency, and expanding recreational facilities to meet the diverse needs of residents. These facility improvements are essential for maintaining Cranston's quality of life and supporting its continued development.

Several infrastructure improvements are discussed in both plans, and we address those in the Public Improvements section below.

*How were these needs determined?*

As part of the consultation and citizen participation processes, CEW Advisors solicited information from community-based organizations, social service providers, relevant municipal staff, and Cranston residents to identify the most important community needs, neighborhood concerns, and public facilities. Public facility needs were collected in several ways: through the online community

needs survey, through citizen participation discussions and focus groups, in consultation with municipal staff, and evaluating the City's Comprehensive Plan.

*Describe the jurisdiction's need for Public Improvements:*

Community feedback on public improvement needs was collected through an online Housing & Community Development Survey (64 respondents) and supplemented with targeted input from community meetings, the city's comprehensive plan, and its hazard mitigation plan.

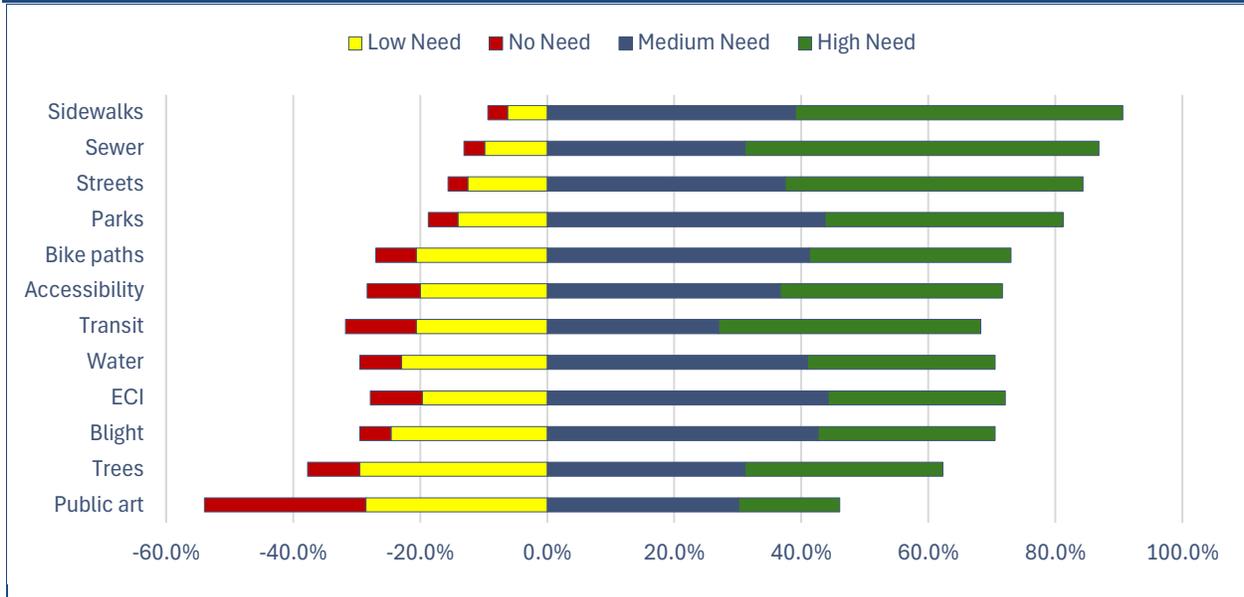
Based on the **online survey**, residents identified the following top five infrastructure improvement needs:

- **Sidewalk improvements** (90.6% medium or high need).
- **Sewer system / flood draining improvements** (86.9% medium or high need).
- **Street and road improvements** (84.4% medium or high need).
- **Public parks and recreation facilities** (81.3% medium or high need).
- **Bicycle and walking paths** (73.0% medium or high need).

Looking at the **2024 Comprehensive Plan** and **2022 Hazard Mitigation Plan**, stormwater management represents perhaps the most critical need, with eastern areas of the city particularly vulnerable to flooding due to denser development and inadequate drainage capacity. Both the Comprehensive Plan and Hazard Mitigation Plan emphasize the necessity of hydraulic mapping of the citywide stormwater system and targeted improvements along problem areas including Wedge Street, Meshanticut Brook, Pocasset River, and Pawtuxet River. Where engineering solutions aren't feasible, property buyouts continue as an important flood mitigation strategy.

The city's water and wastewater infrastructure similarly demands significant attention, with multiple pump stations (Mayflower, Howard, and Plainfield) requiring complete rebuilding and elevation of generators at an estimated cost of \$4 million. Treatment capacity upgrades are needed to improve water quality in the Pawtuxet River alongside watershed protection strategies and water conservation measures. Additional infrastructure priorities include transportation improvements for congested east-west arterials and rehabilitation of fifteen bridges in poor condition, as well as energy resilience enhancements to protect against power outages during extreme weather events. Coordination with National Grid for more frequent tree trimming around powerlines is specifically identified as essential to reduce storm-related outages that affect residents and critical facilities. These comprehensive infrastructure improvements are vital to support Cranston's continued development while enhancing sustainability and reducing vulnerability to increasingly frequent climate-related impacts, particularly nor'easters, hurricanes, and flooding events.

**Figure 8 - Top Infrastructure Improvement Needs**



	Definition	No Need	Low Need	Medium Need	High Need
<b>Sidewalks</b>	Sidewalk improvements	3.1%	6.3%	39.1%	51.6%
<b>Sewer</b>	Sewer system / flood draining improvements	3.3%	9.8%	31.1%	55.7%
<b>Streets</b>	Street and road improvements	3.1%	12.5%	37.5%	46.9%
<b>Parks</b>	Public parks and recreation facilities	4.7%	14.1%	43.8%	37.5%
<b>Bike paths</b>	Bicycle and walking paths	6.3%	20.6%	41.3%	31.7%
<b>Accessibility</b>	Handicapped accessibility for public buildings	8.3%	20.0%	36.7%	35.0%
<b>Transit</b>	Public transportation improvements	11.1%	20.6%	27.0%	41.3%
<b>Water</b>	Drinking water quality improvements	6.6%	23.0%	41.0%	29.5%
<b>ECI</b>	Environmental contamination issues	8.2%	19.7%	44.3%	27.9%
<b>Blight</b>	Neighborhood blight	4.9%	24.6%	42.6%	27.9%
<b>Trees</b>	Tree planting	8.2%	29.5%	31.1%	31.1%

	Definition	No Need	Low Need	Medium Need	High Need
<b>Public art</b>	Public art / murals / beautification	25.4%	28.6%	30.2%	15.9%

Data Source: CEW Advisors, Inc. Housing & Community Development Survey

*How were these needs determined?*

As part of the consultation and citizen participation processes, CEW Advisors solicited information from community-based organizations, social service providers, relevant municipal staff, and Cranston residents to identify the most important community needs, neighborhood concerns, and public facilities. Public infrastructure improvement needs were collected in several ways: through the online community needs survey, through citizen participation discussions and focus groups, in consultation with municipal staff, and evaluating the City’s Comprehensive Plan.

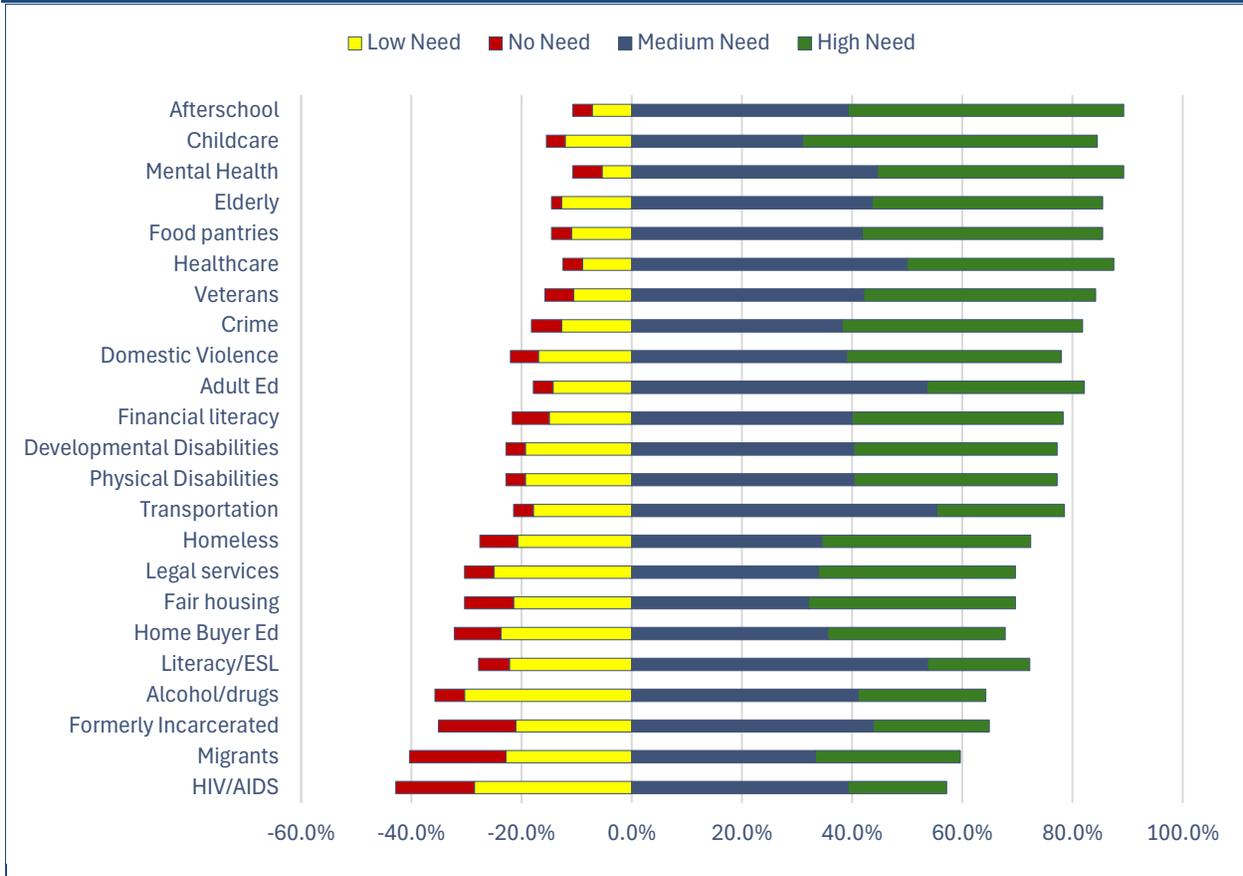
*Describe the jurisdiction’s need for Public Services:*

The Housing & Community Development Survey asked residents to evaluate various public service needs across the city using a scale from no need to high need. The results provide clear insights into the community's priorities for service enhancement.

Based on the survey responses, the top five public service needs identified by Cranston residents are:

- **Afterschool and summer recreation programs for youth and teens** (89.3% medium or high need).
- **Affordable** childcare (84.5% medium or high need).
- **Mental health services / Services for persons with mental illness** (89.3% medium or high need).
- **Programs or services for the elderly and frail elderly** (85.5% medium or high need).
- **Emergency food assistance / food pantries** (85.5% medium or high need).

**Figure 9 - Top Public Service Needs**



	Definition	No Need	Low Need	Medium Need	High Need
<b>Afterschool</b>	Afterschool and summer recreation programs for youth and teens	3.6%	7.1%	39.3%	50.0%
<b>Childcare</b>	Affordable childcare	3.4%	12.1%	31.0%	53.4%
<b>Mental Health</b>	Mental health services / Services for persons with mental illness	5.4%	5.4%	44.6%	44.6%
<b>Elderly</b>	Programs or services for the elderly and frail elderly	1.8%	12.7%	43.6%	41.8%
<b>Food pantries</b>	Emergency food assistance / food pantries	3.6%	10.9%	41.8%	43.6%
<b>Healthcare</b>	Healthcare services	3.6%	8.9%	50.0%	37.5%
<b>Veterans</b>	Programs and services for Veterans	5.3%	10.5%	42.1%	42.1%

	<b>Definition</b>	<b>No Need</b>	<b>Low Need</b>	<b>Medium Need</b>	<b>High Need</b>
<b>Crime</b>	Crime prevention	5.5%	12.7%	38.2%	43.6%
<b>Domestic Violence</b>	Supportive housing for victims of domestic violence	5.1%	16.9%	39.0%	39.0%
<b>Adult Ed</b>	Adult education / workforce training classes	3.6%	14.3%	53.6%	28.6%
<b>Financial literacy</b>	Financial literacy programs	6.7%	15.0%	40.0%	38.3%
<b>Developmental Disabilities</b>	Programs for individuals with developmental disabilities	3.5%	19.3%	40.4%	36.8%
<b>Physical Disabilities</b>	Services for individuals with physical disabilities	3.5%	19.3%	40.4%	36.8%
<b>Transportation</b>	Transportation services	3.6%	17.9%	55.4%	23.2%
<b>Homeless</b>	Supportive housing for the homeless	6.9%	20.7%	34.5%	37.9%
<b>Legal services</b>	Legal services	5.4%	25.0%	33.9%	35.7%
<b>Fair housing</b>	Fair housing programs (to uncover evidence of discrimination in housing)	8.9%	21.4%	32.1%	37.5%
<b>Home Buyer Ed</b>	Homebuyer education classes	8.5%	23.7%	35.6%	32.2%
<b>Literacy/ESL</b>	English literacy programs	5.6%	22.2%	53.7%	18.5%
<b>Alcohol/drugs</b>	Alcohol and substance abuse counseling services	5.4%	30.4%	41.1%	23.2%
<b>Formerly Incarcerated</b>	Services for the formerly incarcerated	14.0%	21.1%	43.9%	21.1%
<b>Migrants</b>	Services for immigrants	17.5%	22.8%	33.3%	26.3%
<b>HIV/AIDS</b>	Housing for persons living with HIV/AIDS and their families	14.3%	28.6%	39.3%	17.9%

Data Source: CEW Advisors, Inc. Housing & Community Development Survey

*How were these needs determined?*

As part of the consultation and citizen participation processes, CEW Advisors solicited information from community-based organizations, social service providers, relevant municipal staff, and Cranston residents to identify the most important community needs, neighborhood concerns, and public facilities. Public service needs were collected in several ways: through the online community needs survey, through citizen participation discussions and focus groups, in consultation with municipal staff, and through CDBG public service grantee meetings.

# Housing Market Analysis

## MA-05 Overview

### Housing Market Analysis Overview:

The City of Cranston has a total of 32,596 occupied housing units and 1,137 vacant units based on the 2019-2023 American Community Survey, representing a vacancy rate of 3.4%. In total, 67.3% of the housing units in Cranston are homeownership units, while 32.7% of units are rental units.

There is a significant demand for housing in Cranston, with current homes being listed and sold in less than one month. Housing prices and rental costs have escalated dramatically over the course of the past decade, with the pandemic buying spree pushing prices up even more. The median home value in Cranston grew from \$225,800 in 2013 to \$348,800 in 2023, an increase of 54.5%. The escalation in prices has increased the housing cost burden on Cranston families, with the lowest income households feeling the impacts the most.

The City of Cranston has a significant supply of older housing units, with 75.5% of owner-occupied and 82.3% of renter-occupied housing was built prior to 1980. Despite this, the city does not suffer from a significant incidence of lead poisoning in children. Some of the most significant home repair needs are roofing repairs, window replacement, and exterior siding or painting. Notably, this does not necessarily account for the interior rehabilitation needs which are often invisible from the street.

In total there are 1,805 affordable subsidized housing units available in Cranston. Among these, the Cranston Housing Authority owns, manages, and maintains 587 units of public housing in the city, located in six different properties. Additionally, they have a total of 262 Housing Choice Vouchers available with a current utilization of 252 vouchers as of November 2024, resulting in a leasing percentage of 98.85%.

Cranston has a wide range of medical offices offering primary and specialty healthcare, including CCAP, Garden City Treatment Center, Cranston Medical, and Brown Health Medical Group. CCAP, a Federally Qualified Community Health Center, provides affordable healthcare on a sliding fee scale. Behavioral health services are also available through CODAC, Thrive Behavioral Health, and Bridgemark Addiction Recovery Services, which offer mental health, substance use treatment, and specialized programs, including residential treatment and services for the deaf and Spanish-speaking communities. These facilities ensure accessible and comprehensive healthcare for Cranston residents.

The primary Special Needs populations in Cranston that need supportive housing needs include the elderly and frail elderly, persons with disabilities, individuals with alcohol or other drug addiction, and victims of domestic violence. These supportive housing needs are each described more fully below.

Cranston prioritizes economic development by attracting new businesses, supporting existing ones, and expanding its tax base and job opportunities. The city offers tax incentives for industrial properties and has successfully fostered industrial and commercial growth through strategic investment and infrastructure support. The Western Cranston Industrial Area is a key hub, hosting major national and regional businesses. Retail and commercial development are plentiful in Garden City Center, Rhode Island's premier shopping destination, featuring national and local retailers, and Chapel View Center, an upscale mixed-use development with offices, residences,

and retail spaces. These initiatives ensure a balanced economy, quality job creation, and a strong business-friendly environment.

# MA-10 Number of Housing Units - 91.210(a)&(b)(2)

## Introduction

The City of Cranston has a total of 32,596 occupied housing units and 1,137 vacant units based on the 2019-2023 American Community Survey, representing a vacancy rate of 3.4%.

Single family detached homes make up the majority share of the housing stock in Cranston at 62.7%. An additional 21.8% of units are in smaller 2-4 unit properties, most of which are the standard Rhode Island multi-family. The next largest category is units in large developments of 20 or more (9.5%). Finally, mid-range developments of 5-19 units account for 5.8% of all units in the city.

Of the 21,152 single-family detached homes in Cranston, 89.2% of them are occupied by homeowners, 8.9% are occupied by renters, and 1.9% are unoccupied. Conversely, the large complexes are primarily occupied with renters. Of the 4,289 units in complexes with 10 or more units, 90.8% of all units are occupied by renters, 6.6% are occupied by homeowners, and 2.6% are unoccupied.

The small multifamily homes (2-4 units) in Cranston have a somewhat more even distribution of tenure. For units in these types of properties, 30.8% are owner-occupied, 62.9% are renter occupied and 6.2% are unoccupied. This may reflect the practice of owners buying a single multifamily property, living on one floor and renting out the others.

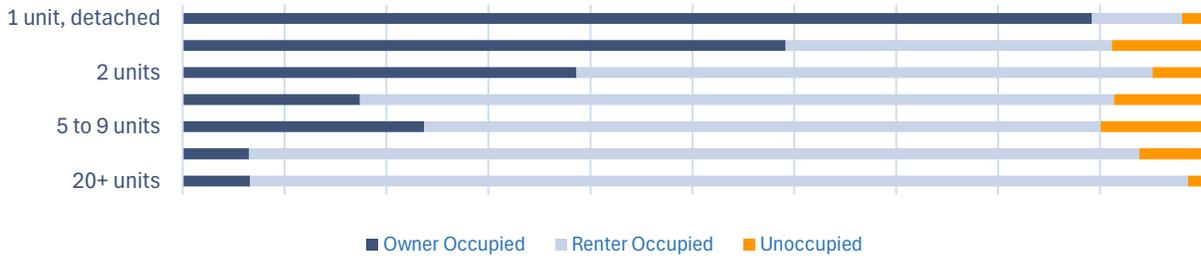
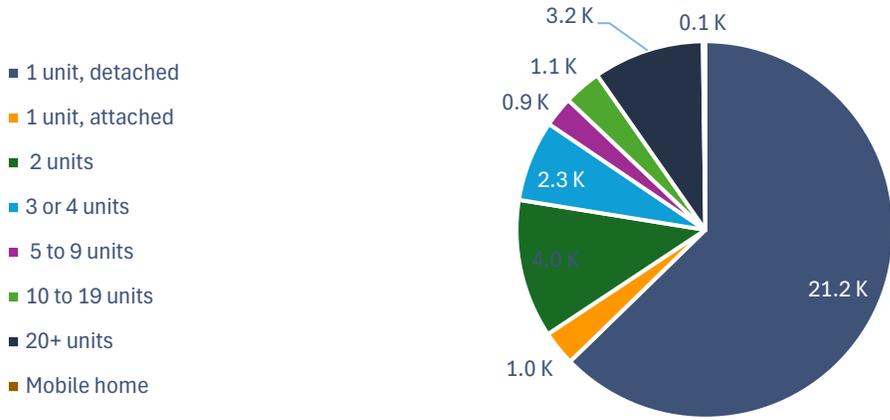
Cranston currently has 466 new units in the planning or development phase. Some of the larger projects include the following.

- Knights Corner Development Project (160 units): Redevelopment of former church and construction of maximum of 160 multi-family apartments.
- Cranston Print Works (150 units): Redevelop the former mill complex into a maximum of 150 multi-family apartments and self-storage units.
- Legion Bowl (69 units): Mixed-Use residential/commercial redevelopment, 69 residential units, first floor commercial.
- 747 Pontiac Ave Omni Apartment Conversion (18 units): 18-unit multi-family apartment conversion from a pre-existing nonconforming office use 15% of total units (3 out of 18) will be deed restricted as affordable at 80% AMI.
- Champlin Hills (18 units): Multi-family residential - 90 total units (18 new units) and associated amenity clubhouse.
- Residences at Oaklawn Ave (12 units): Two-story, twelve-unit multi-family residential building.

Additionally, there are 68 lot subdivisions in process in the city that can allow for housing development in the future.

MA-10 Figure 1 : Properties by Number of Units

**Total Units (1.5 M)**

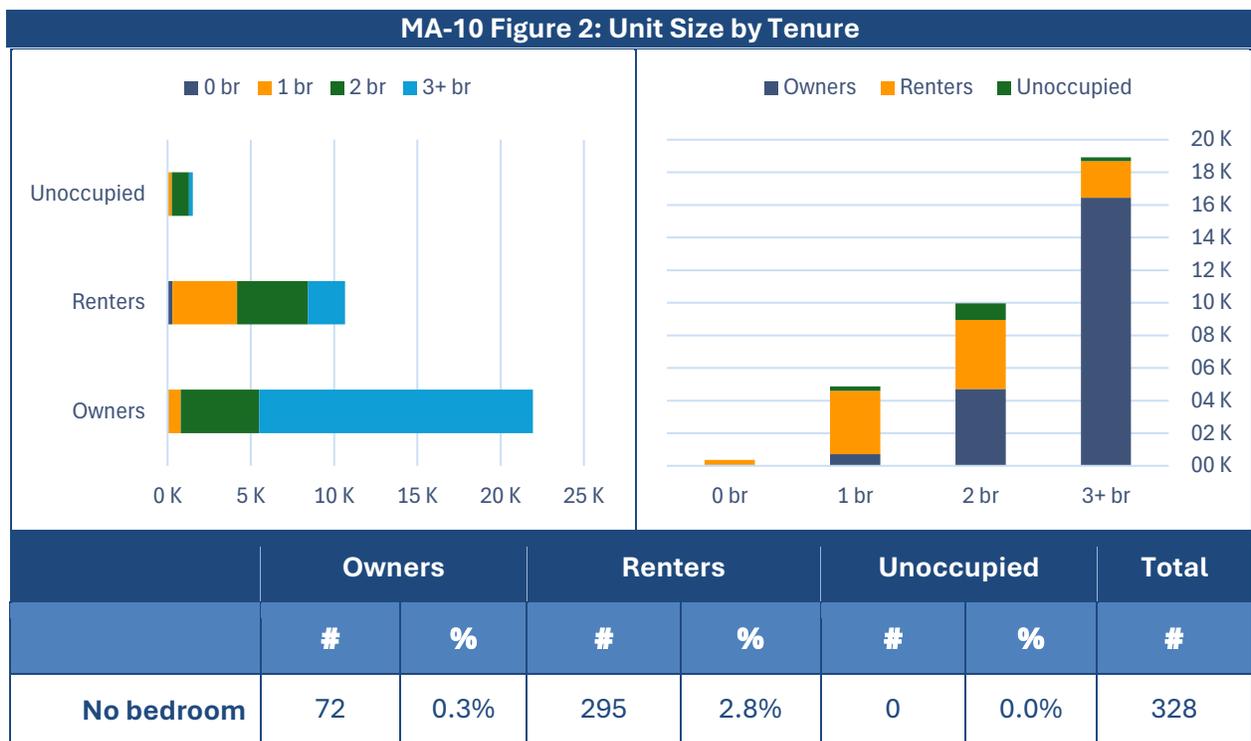


	Owners		Renters		Unoccupied		Total
	#	%	#	%	#	%	#
<b>1 unit, detached</b>	18,868	89.2%	1,873	8.9%	410	1.9%	21,152
<b>1 unit, attached</b>	595	59.1%	322	32.0%	89	8.8%	1,006
<b>2 units</b>	1,546	38.6%	2,262	56.5%	194	4.8%	4,002

	Owners		Renters		Unoccupied		Total
<b>3 or 4 units</b>	407	17.4%	1,729	74.0%	202	8.6%	2,338
<b>5 to 9 units</b>	207	23.7%	580	66.4%	87	10.0%	874
<b>10 to 19 units</b>	71	6.5%	949	87.3%	67	6.2%	1,087
<b>20+ units</b>	212	6.6%	2,945	92.0%	45	1.4%	3,202
<b>Mobile home</b>	30	41.7%	0	0.0%	42	58.3%	72
<b>Boat, RV, van, etc.</b>	0	n/a	0	n/a	0	n/a	0
<b>Total</b>	21,936	65.0%	10,660	31.6%	1,136	3.4%	33,733

Data Source: 2018-2022 ACS - B25032, DP04

In total, 67.3% of the housing units in Cranston are homeownership units, while 32.7% of units are rental units. Homeownership units are larger than rental units, with 74.9% of all owner units having three or more bedrooms, and another 21.5% having two bedrooms. There are very limited numbers of studios and one-bedroom units that are homeownership units. Comparatively, 36.4% of renter units are one-bedroom units, and another 2.8% are studio apartments. Another 39.7% of rental units are two-bedroom units, and 21.1% of rental units are larger homes with three or more bedrooms.



	Owners		Renters		Unoccupied		Total
<b>1 bedroom</b>	722	3.3%	3,885	36.4%	265	17.9%	4,872
<b>2 bedrooms</b>	4,708	21.5%	4,233	39.7%	1,023	68.9%	9,964
<b>3 or more bedrooms</b>	16,434	74.9%	2,247	21.1%	235	15.8%	18,916
<b>Total</b>	21,936		10,660		1,484		34,080

Data Source: 2018-2022 ACS - B25042, DP04

The vacancy rate for 2023 stood at 3.4%, which is down from 2010 where the vacancy rate stood at 6.7%. Low vacancy rates are typically interpreted as a sign of a tight housing market, with lower vacancy rates signaling a potential housing shortage. The low vacancy rates in Cranston signal a deeper supply-demand imbalance that is manifest across much of the state as households have been seeking homes to purchase across Rhode Island.

Data provided in Section NA-10 show that one-person, two-person, and three-person households are driving the majority of growth in households in the city, with growth rates of 12.8%, 4.6%, and 9.9% respectively. Four-person and larger households also grew but at a much slower pace of 1.7% over the 2010-2023 period. Given the predominance of these one-person and two-person households, there is likely an unmet market demand to provide housing options for individuals and couples who are interested in owning a smaller home rather than renting an apartment, especially as younger professionals are seeking housing units requiring less regular maintenance that comes with larger homes set on large single-family lots. Given the limited opportunities of smaller homeowner units (studios and one-bedroom), this could be an unmet market need to provide housing options for individuals and couples who are interested in owning a smaller home rather than renting an apartment.

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

There are 1,805 subsidized affordable housing units in Cranston. These units target low- and moderate-income individuals earning less than 80% of the Area Median Income. The majority of the units are reserved for elderly individuals aged 62 or older. There are 1,600 units reserved for the elderly and/or those with special needs. Another 205 units that are family units not targeted to any specific population.

MA-10 Figure 3: Subsidized Units		
Project Name	# Units	Population
<b>Cranston Commons</b>	19	Family
<b>Conetta Mobile Home Park</b>	0	Family
<b>Auburn Street</b>	0	Special Needs

<b>Project Name</b>	<b># Units</b>	<b>Population</b>
<b>Northup Street</b>	1	Family
<b>Scattered sites</b>	17	Family
<b>315 Park Ave</b>	71	Elderly
<b>Seven Mile Road</b>	0	Special Needs
<b>East Street</b>	0	Special Needs
<b>Group Home Beds</b>	229	Special Needs
<b>New Life Estates</b>	8	Special Needs
<b>Arlington Manor</b>	120	Elderly
<b>Budlong Manor</b>	71	Elderly
<b>D'Evan Manor Apartments</b>	127	Elderly
<b>Fellowship House</b>	7	Elderly
<b>Hall Manor</b>	79	Elderly
<b>Harris House Apartments</b>	133	Elderly
<b>Jennings Manor</b>	51	Elderly
<b>Knightsville Manor</b>	186	Elderly
<b>Meshanticut Vista</b>	140	Elderly
<b>Presidential Place</b>	51	Elderly
<b>Randall Manor</b>	80	Elderly
<b>Riverbend Apartments</b>	168	Family
<b>Scituate Vista Apartments</b>	232	Elderly
<b>Wentworth Apartments</b>	15	Special Needs

Data Source: RI Housing

The Cranston Housing Authority owns, manages, and maintains 602 units of public housing in the city, located in six different properties.

- Arlington Manor: 50 Birch Street
- Budlong Manor: 100 Arthur Street
- Hall Manor: 70 Warwick Avenue
- Jennings Manor: 125 Harris Avenue
- Knightsville Manor: 85 Briggs Street
- Randall Manor: 75 Mathewson Street

The Cranston Housing Authority has a total of 262 Housing Choice Vouchers available with a current utilization of 252 vouchers as of November 2024, resulting in a leasing percentage of 98.85%.

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

There are no units expected to be lost from Cranston’s affordable housing industry during the duration of this Consolidated Plan (2025-07-01 through 2030-06-30).

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

In a general sense, yes, there are adequate units of various sizes to meet the housing needs of different household types. However, the largest challenge is housing affordability. There is and has been a dire need for additional affordable housing option for individuals, families, seniors, and persons with disabilities. This is more fully discussed in the next section.

Additionally, there are many fewer smaller units (studio and 1-bedroom units) for the large number of one-person households in Cranston.

*Describe the need for specific types of housing:*

The most profound need in Cranston, and most other places, is an increase in housing that is affordable at all income levels. As discussed in NA-10, the most pronounced housing problems are Cost Burden and Severe Cost Burden. Housing cost burden, as either greater than 30% or 50% of total income spent on housing, is the most significant housing problem in Cranston as with most other municipalities throughout the state.

The Cranston Housing Authority manages its own waiting list and does not participate in the centralized waiting list managed by Rhode Island Housing for public housing units. As of March 2025, the total unduplicated number of applicants on the waitlist was 683 for Public Housing units and another 225 households for Section 8 Vouchers. Given the limited turnover of public housing units, the demand for units is extreme and it often takes years for individuals and families to finally gain access to an affordable unit through a Housing Choice Voucher or housing development.

As discussed in the Needs Assessment, there is a need for housing that is truly accessible for those with mobility challenges. Due to the nature of the city’s housing stock with many multi-level and ranch-style homes, one primary concern is providing housing options for the 4,173 Cranston residents (5.2%) that experience difficulty with walking or climbing stairs and the 3,357 – 5,105 residents (4.2% – 6.4%) with self-care and/or independent living difficulties. While the city is not fully aware of the total population that struggles living in housing units that do not have all the elements and amenities required for those with mobility challenges, given the size of the population and the anecdotal information from the citizen participation and consultation process,

it is estimated to be several hundred. To keep people living in their own homes longer, there is a need to make appropriate in-home modifications.

As described above, 65.7% of all homes in Cranston are single-family homes. Another 11.9% are two-unit homes, and 6.9% are homes with 3-4 units. This accounts for over three-quarters of all housing units in the city. While there are options for smaller-sized rental units, studio and one-bedroom apartments, there are very limited homebuyer opportunities for these smaller sized units. There could be a significant demand for these types of units considering that they would be less expensive units to purchase for new homebuyers, younger adults, seniors, and smaller families.

## Discussion

The city offers a range of housing options from single-family dwellings located in traditional residential neighborhoods to multi-family dwellings located along or near commercial corridors. Most residential neighborhoods were developed prior to 1960 and prioritize automobiles over pedestrians with a significant presence of single-family homes built for families with children. There are few remaining large tracts of land available to be subdivided and developed. This limits potential diversity unless some housing stock is converted. Affordable, decent, and safe housing options will be compromised unless the existing stock is physically stabilized in a way that limits additional debt. Use of federal funds for the Home Improvement Program is one way to achieve this; however, the level of need greatly outmatches the resources of the city.

Based on the review of existing research, data analysis, and through conversations with community residents, there is a demand for non-traditional types of housing in the city. A large part of the existing housing stock was built to accommodate a car-dependent workforce and traditional family living. This has resulted in many residential neighborhoods throughout the city characterized by single-family homes on relatively large lots, with a driveway and a yard. While this type of housing will continue to be important for traditional families, there are more and more city residents that are interested in more diverse housing types to standalone single-family homes. These include homes with two or more bedrooms accessible to families and multi-generational households.

The growing senior population living alone will require housing that is smaller and easier to maintain. Shared housing alternatives for non-related cohabitation and more affordable rental and ownership options for working adults either living alone, or with a partner, will be important additions to the city's housing stock. More young adults are living with their parents, grandparents, siblings, aunts and uncles, etc. More diverse housing is needed to allow families and friends to live together but have their own private living and working space. There is also a greater demand among younger adults to have a smaller home with less maintenance located in an area within walking distance of shops, restaurants, schools, parks, transit, and other amenities.

# MA-15 Housing Market Analysis: Cost of Housing - 91.210(a)

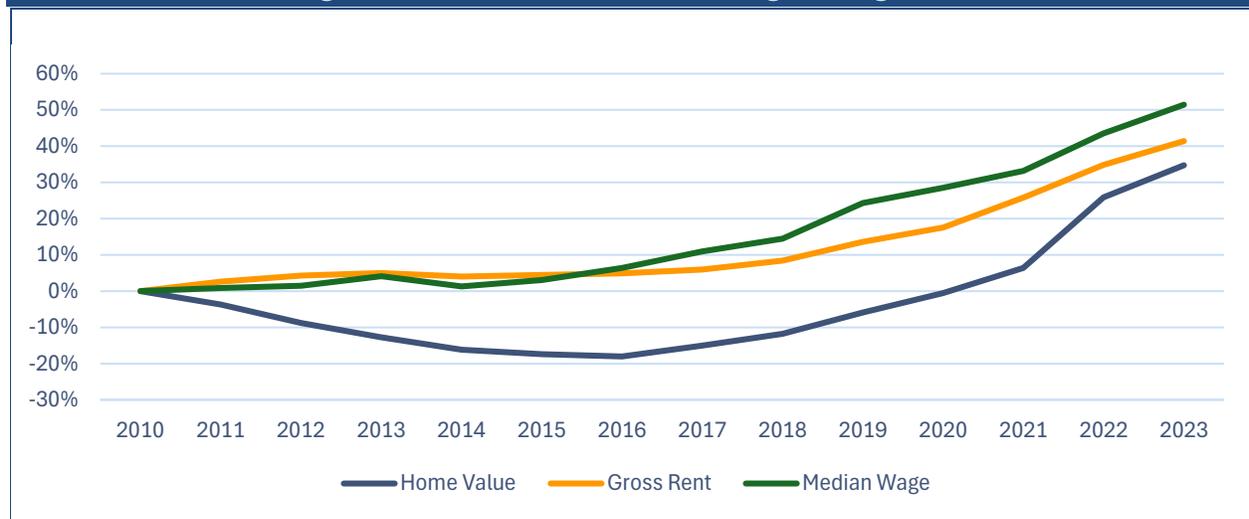
## Introduction

While safe and affordable housing is a basic human need, it also represents the single largest expenditure for most households. The following section provides information on the cost of rental and owner-occupied housing in the City of Cranston, focusing specifically on housing affordability for low- and moderate- income households.

Looking at home prices, gross rent, and median wages since 2010, we see that wage and rent growth are nearly identical until 2016, at which point wages begin growing faster than rents. Over the same period, the fallout from the financial crisis of 2008 caused home prices to decile until the middle of the last decade, when they began rebounding. As of 2023 median wages are 51.4% higher than they were in 2010, home prices are 37.4% higher and gross rents are 41.4% higher. Thus, for households earning the median income or above, Cranston is slightly more affordable now than it was 15 years ago.

As of the 2023 ACS5, 28.4% of rental units are under \$1,000 per month, 59.6% are between \$1,000 and \$2,000 per month, and the remaining 3.4% of units rent for more than \$2,000 per month.

MA-15 Figure 1: Home Price, Rent, and Wage Change Since 2010

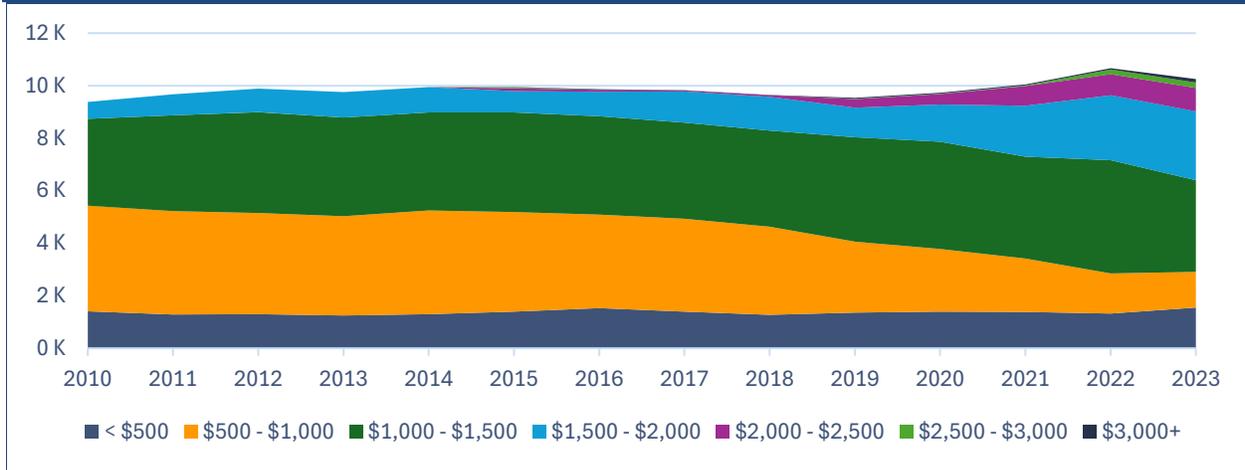


	Home Value		Gross Rent		Median Wage	
	\$	% change from 2010	\$	% change from 2010	\$	% change from 2010
2010	\$258,900	n/a	\$942	n/a	\$57,922	n/a
2011	\$249,300	-3.7%	\$967	2.7%	\$58,442	0.9%
2012	\$236,200	-8.8%	\$982	4.2%	\$58,772	1.5%
2013	\$225,800	-12.8%	\$989	5.0%	\$60,283	4.1%

	Home Value		Gross Rent		Median Wage	
2014	\$217,100	-16.1%	\$980	4.0%	\$58,684	1.3%
2015	\$213,800	-17.4%	\$984	4.5%	\$59,701	3.1%
2016	\$212,200	-18.0%	\$988	4.9%	\$61,646	6.4%
2017	\$219,900	-15.1%	\$998	5.9%	\$64,282	11.0%
2018	\$228,300	-11.8%	\$1,021	8.4%	\$66,283	14.4%
2019	\$243,500	-5.9%	\$1,070	13.6%	\$72,017	24.3%
2020	\$257,400	-0.6%	\$1,107	17.5%	\$74,425	28.5%
2021	\$275,400	6.4%	\$1,185	25.8%	\$77,145	33.2%
2022	\$326,000	25.9%	\$1,270	34.8%	\$83,123	43.5%
2023	\$348,800	34.7%	\$1,332	41.4%	\$87,716	51.4%

Data Source: 2010-2023 ACS5 - DP03, DP04

MA-15 Figure 2: # of Units by Rent Over Time



	2010		2015		2020		2023	
	#	%	#	%	#	%	#	%
< \$500	1,408	15.0%	14,082	26.7%	1,397	14.4%	1,549	15.1%
\$500 - \$1,000	4,027	43.0%	32,733	62.1%	2,380	24.5%	1,361	13.3%

	2010		2015		2020		2023	
<b>\$1,000 - \$1,500</b>	3,306	35.3%	5,261	10.0%	4,089	42.0%	3,489	34.0%
<b>\$1,500 - \$2,000</b>	633	6.8%	459	0.9%	1,423	14.6%	2,625	25.6%
<b>\$2,000 - \$2,500</b>	n/a	n/a	65	0.1%	397	4.1%	884	8.6%
<b>\$2,500 - \$3,000</b>	n/a	n/a	14	0.0%	15	0.2%	207	2.0%
<b>\$3,000+</b>	n/a	n/a	57	0.1%	26	0.3%	143	1.4%

Data Source: 2010-2023 AC5 - DP02

Whether people choose to or are forced by circumstances to spend more than 30% of their incomes on housing, they have less disposable income to spend on other necessities such as food, utilities, transportation, childcare, healthcare, etc. They also have limited disposable income to spend at local shops, restaurants, and service providers. The more income a household spends on housing, the less money gets circulated in the local economy. The lower a household's income, the more likely they experience housing cost burden. LMI households (making less than 80% of the Area Median Income) have much higher rates of cost burden than the average household. Over 60% are cost burdened, and nearly one third are severely cost burdened, significantly limiting the amount of income they have available for other expenses. Further, 45% of cost burdened LMI households are homeowners, likely reflecting retirees on a fixed income or people who choose to live where they do in spite of the burden on their incomes.

MA-15 Figure 3: Housing Affordability - Number of Affordable Units by Household Income		
	Renter	Owner
<b>&lt; 30% HAMFI</b>	1,985	No Data
<b>30 - 50% HAMFI</b>	1,870	1,425
<b>50 - 80% HAMFI</b>	5,000	8,250
<b>80 - 100% HAMFI</b>	1,790	4,840
<b>100+% HAMFI</b>	No Data	6,940

Data Source: 2018-2021 CHAS - Tables 14A, 14B, 15A, 15B, 15C

MA-15 Figure 4: Monthly Fair Market Rent					
	0 br	1 br	2 br	3 br	4 br
<b>Fair Market Rent</b>	\$1,289	\$1,398	\$1,693	\$2,047	\$2,536
<b>High HOME Rent</b>	\$1,259	\$1,350	\$1,622	\$1,865	\$2,061
<b>Low HOME Rent</b>	\$983	\$1,054	\$1,265	\$1,461	\$1,630
<b>Median Rent</b>	n/a	\$1,032	\$1,438	\$1,688	n/a

Data Source: HUD FMR and HOME Rents

*Is there sufficient housing for households at all income levels?*

No. Cranston is slightly more affordable than several neighboring communities; however, it is becoming increasingly more expensive to live in the city. The increases in housing costs put increasing pressure on households. There is a dire need for more affordable housing units, rental units and homeownership units for all household sizes. Housing costs have skyrocketed throughout Rhode Island, and while Cranston has increased its supply of housing units, there is still a great need for additional affordable units.

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

After a rapid escalation of home prices and rental increases over the past 10-12 years, it is unlikely that prices will decrease anytime soon unless there is another housing market crash. However, the economic conditions today are different from 2008, although high mortgage rates and the threat of a recession are worrisome. It does seem that home prices have peaked, and the inventory of homes to be purchased remains limited. In the current environment, more homeowners have solid credit, large amounts of home equity, and mortgage rates that are fixed rather than adjustable. This is stabilizing the prices and values of homes and keeping housing costs elevated.

There is insufficient new construction of market rate and subsidized units to offset the elevated housing costs. The city and the state do not have the adequate resources to invest in deeply subsidized construction of new affordable housing units. While Rhode Island Housing manages many different types of programs for new housing construction, the level of need far outweighs the resources available for investments into new construction. The city and the state will need tens of millions of dollars every year over the course of a generation to be able to properly address the affordability crisis. Moreover, the naturally occurring affordable housing is slowly disappearing as older homeowners take advantage of high home values to sell their homes.

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

Cranston is not a recipient of HOME funds. HUD Fair Market Rents (FMRs) are higher than Area Median Rents for apartments in Cranston. This suggests that HUD’s Section 8 rental benchmarks exceed what the typical household in the area pays for rent on average. This allows holders of housing choice vouchers to have a wide availability of units to choose from within the cap placed on the voucher. Importantly, the FMR Rent for a 1-bedroom apartment is \$1,400, which would require a monthly income of \$4,200 for it to be considered affordable, or an annual household of

\$50,400. While the median household income in Cranston is \$87,716 according to the 2023 ACS 5-Year estimate, between 15% (4,970) and 21% (6,704) of households in Cranston would be cost burdened.

MA-15 Figure 5: Households by Income Level		
	#	%
Less than \$10,000	1,137	3.5%
\$10,000 to \$14,999	1,659	5.1%
\$15,000 to \$24,999	2,174	6.7%
\$25,000 to \$34,999	1,734	5.3%
\$35,000 to \$49,999	2,566	7.9%
\$50,000 to \$74,999	4,640	14.2%
\$75,000 to \$99,999	4,526	13.9%
\$100,000 to \$149,999	6,867	21.1%
\$150,000 to \$199,999	3,219	9.9%
\$200,000 or more	4,074	12.5%

Data Source: 2019-2023 ACS - DP03

*Discussion*

The primary takeaway from data research and analysis, community feedback, and the consultation process is that the city is in critically short supply of affordable housing. Home values and rental prices have grown considerably over the past several years since the housing market decline of the late 2000s and early 2010s. This escalation in housing costs came without a corresponding increase in income levels for most residents and households of Cranston. Household incomes for many families remain far below what the median or average owner or renter can afford.

High home sale prices and a lack of available inventory at all income levels have kept many entry-level buyers out of the market or forcing them to buy homes that create a housing cost burden for them. Housing affordability is still the major concern in Cranston and throughout the state. Furthermore, as the city’s housing stock continues to age and deteriorate, housing costs rise due to ongoing maintenance costs. Federal funds can be leveraged to address housing deterioration and neighborhood revitalization concerns. The city must also pursue a strategy of preserving long-term affordable housing that already exists and supporting the production of new affordable housing units to increase the supply for low- to moderate-income families to help reduce housing cost burdens for Cranston households.

# MA-20 Housing Market Analysis: Condition of Housing - 91.210(a)

## Introduction

Almost seventy-eight percent (77.7%) of Cranston existing housing stock was built before 1980. Only 7% of the total housing units have been built since 2000, excluding the new developments that are currently occurring in the city (see Section MA-10). The city’s housing stock is significantly aged, and the construction of new multi-family units has only recently resumed after many years of stagnant new housing production.

This section describes the significant characteristics of the existing housing supply, including age and condition, the number of vacant and abandoned units, and the risk posed by lead-based paint.

## Definitions

For this Consolidated Plan, the City of Cranston uses the following definitions for this section:

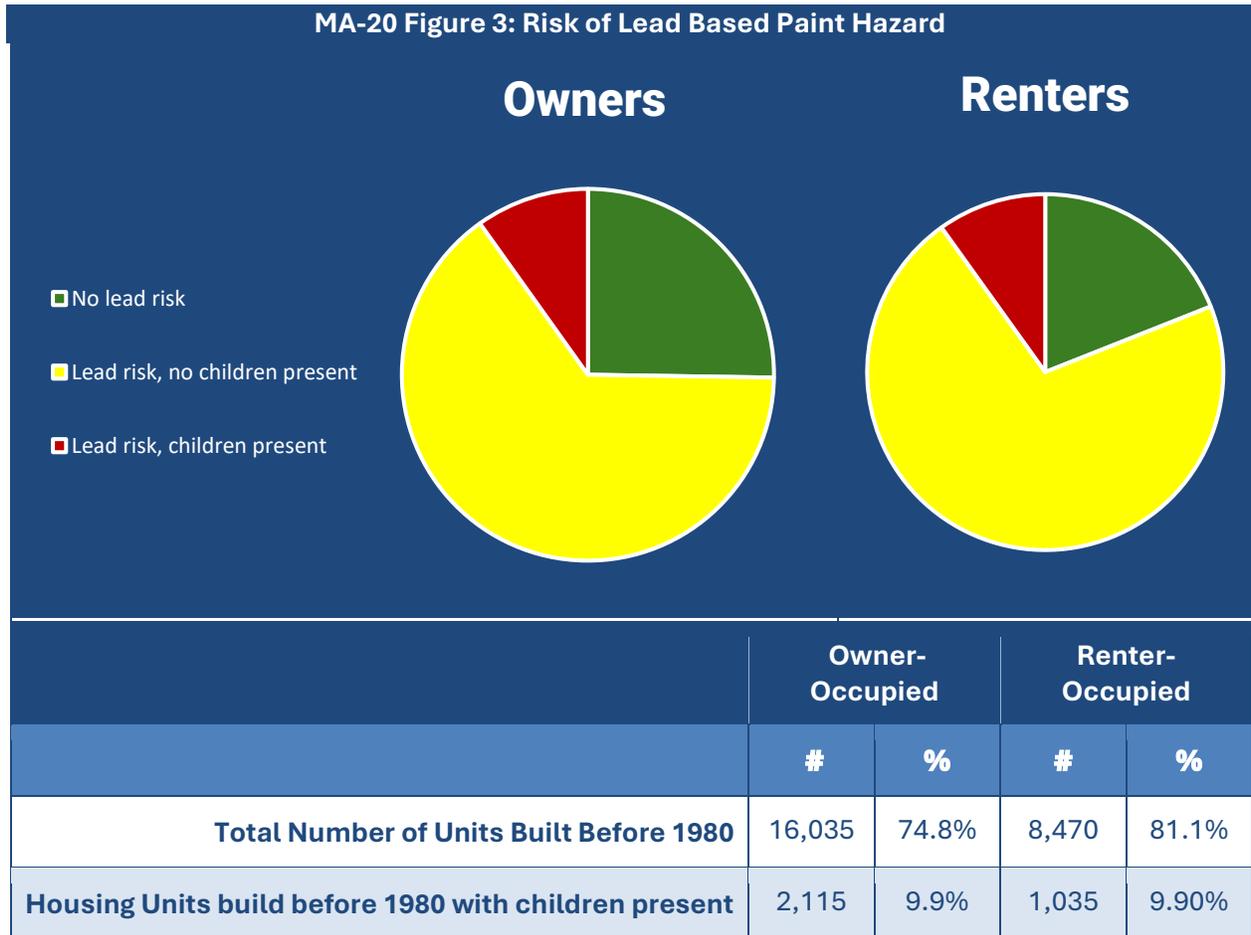
- “Standard condition” – A housing unit that meets HUD Housing Quality Standards (HQS) and all applicable state and local building codes.
- “Substandard condition but suitable for rehabilitation” – A housing unit that contains one or more housing conditions as described in NA-10, contains a lead-based paint hazard, is potentially endangering the health and safety of the occupant, and/or is condemned as unfit for human habitation but is both structurally and financially feasible to rehabilitate.
- “Substandard condition not suitable for rehabilitation” – A housing unit that contains one or more housing conditions as described in NA-10, contains a lead-based paint hazard, is potentially endangering the health and safety of the occupant, and/or is condemned as unfit for human habitation and is not structurally or financially feasible to rehabilitate.

	Owner-Occupied		Renter-Occupied	
	#	%	#	%
<b>With one selected Condition</b>	6,037	27.5%	4,489	42.1%
<b>With two selected Conditions</b>	66	0.3%	99	0.9%
<b>With three selected Conditions</b>	0	0.0%	70	0.7%
<b>With four selected Conditions</b>	0	0.0%	0	0.0%
<b>No selected Conditions</b>	15,833	72.2%	6,002	56.3%
<b>Total</b>	21,936	100.0%	10,660	100.0%

Data Source: 2019-2023 ACS - B25123

MA-20 Figure 2: Year Unit Built				
	Owner-Occupied		Renter-Occupied	
	#	%	#	%
2000 or later	1,768	8.1%	615	5.8%
1980-1999	3,604	16.4%	1,271	11.9%
1950-1979	8,443	38.5%	5,082	47.7%
Before 1950	8,121	37.0%	3,692	34.6%
<b>Total</b>	<b>21,936</b>	<b>100.0%</b>	<b>10,660</b>	<b>100.0%</b>

Data Source: 2019-2023 ACS - B25036



Data Source: 2017-2021 CHAS - Table 13

MA-20 Figure 4: Vacant Units			
	Suitable for Rehabilitation	Not Suitable for Rehabilitation	Total
Vacant Units			1,137
Abandoned Vacant Units			681
REO Properties			88
Abandoned REO Properties			

Data Source: 2019-2023 ACS, Foreclosure.com

### Need for Owner and Rental Rehabilitation

There is a direct correlation between the age of a home and the need for maintenance and rehabilitation. Typically, after a home reaches 30 or 40 years old it begins to require significant repairs and/or major rehabilitation. This becomes even more problematic if the home wasn't well-maintained throughout. Further, homes in the northeastern United States suffer from additional weather-related problems due to icy weather, heavy snow, and frigid temperatures.

The city has a significant stock of older housing units. The median year that Cranston's housing structures were built is 1957, and 74.8% of owner-occupied and 81.1% of renter-occupied housing was built prior to 1980. Because of the age of the housing stock, there is an ongoing need for housing rehabilitation throughout the city. The City's Community Development Office manages a housing rehabilitation program directly utilizing CDBG funds to rehabilitate owner-occupied residential units owned by low- and moderate-income people to preserve the housing stock, to ensure that the properties conform to minimum housing codes and thus revitalize and stabilize local neighborhoods.

The city does not maintain a comprehensive dataset of vacant or abandoned housing units; however, with the significant demand for housing in the city, there are no noticeable concentrations of abandoned residential properties in any areas of the City. In conversations with city staff, the most significant home repair need is roofing, especially considering that roof repairs are not easily or practically deferred when the house could receive continued damage if not repaired. Additional repair needs include window replacement, and exterior siding or painting, and plumbing issues. Notably, this does not necessarily account for additional interior rehabilitation needs which are often invisible from the street.

While these types of repairs are universal for owner-occupied and rental housing, the city's home improvement program is focused on owner-occupied rehabilitation. Of particular concern are the homes occupied by the city's older population who can no longer maintain their homes themselves and have limited income to make basic repairs on their homes. The city has been effective at using CDBG funds for a home rehabilitation program to ensure these repairs can be made while also preserving the affordability of these homes.

Other potential indicators of the need for renovation are the general age of the population, income, and housing cost burden. Those 62 years of age and older represent over 21.8% of the population. That could mean they are less likely or able to keep up with maintenance or repairs that they may

have done before such as painting the exterior of the home. 8.7% of the senior population are below the poverty level. Cranston has a significant number of households that are housing cost burdened. These factors can have a direct impact on the potential need for renovation due to limiting the ability to keep up with the structure's need because of limited finances and ability to do so.

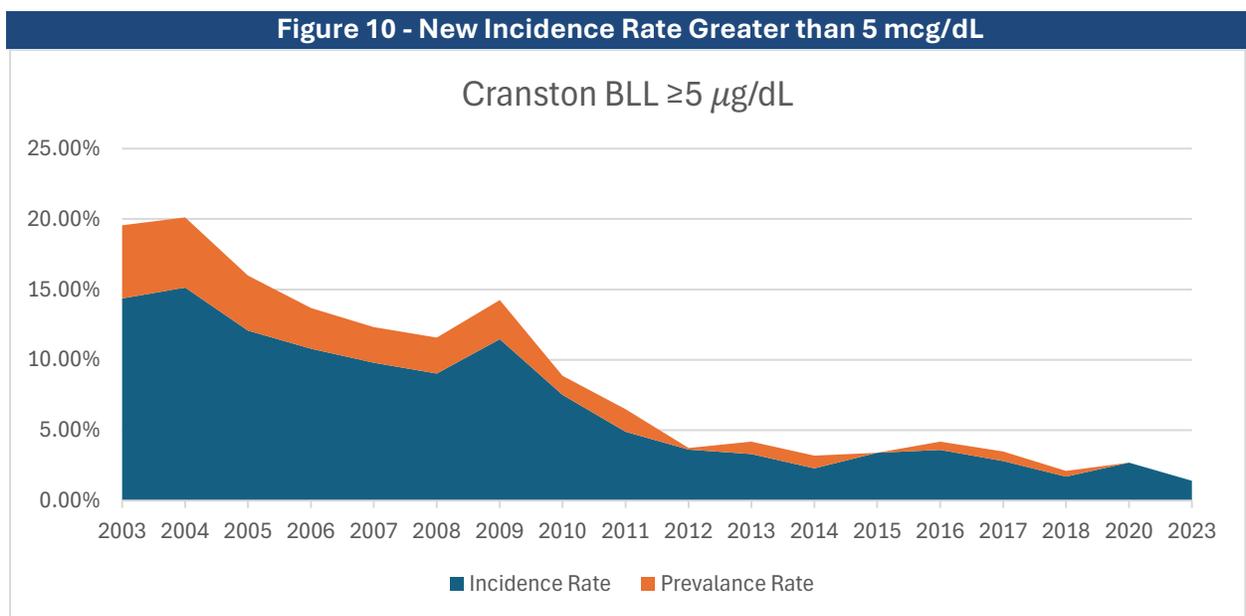
*Estimated Number of Housing Units Occupied by Low or Moderate Income Families with LBP Hazards*

The age of the City's housing stock places its housing units at a greater risk of potential lead exposure. Lead-based paint was banned for residential use in the United States in 1978 by the U.S. Consumer Product Safety Commission. Infants, toddlers, and preschool-age children are most susceptible to the toxic effects of lead poisoning because they absorb lead more readily than adults and have inherent vulnerability due to developing central nervous systems. Lead exposure, even at very low levels, can cause irreversible damage, including slowed growth and development, learning disabilities, behavioral problems, and neurological damage.

According to the 2017-2021 CHAS data, 88.1% of Low or Moderate Income Households (14,030 total households) live in units built before 1980, putting them at risk for lead-based paint exposure. Of these households, 1,580, or 9.9% of all LMI households in Cranston have children present.

In Cranston, both the incidence rate (new cases) and prevalence rate (all cases) of lead poisoning among children have been declining over the past twenty years with spikes in 2009 and 2020. Prevalence data is not available from RIDOH after 2018.

The most current data provided by Rhode Island Kids Count shows there are currently 26 children with a blood lead level (BLL) greater than or equal to 5 mg/dL expected to enter Kindergarten in Cranston in 2025. This gives the city a prevalence rate of 3.1%. Rhode Island data still reports the  $\geq 5$  mg/dL standard and is moving to the  $\geq 3.5$  mg/dL standard. We expect the rates to go up when the transition to the new standard is complete.



Data Source: Rhode Island Department of Health

*Discussion*

The city will continue to run a comprehensive home improvement program that incorporates lead-based paint certificates of safety, energy efficiency and sustainability, building & health code violation remediation, aging in place, and access issues. If feasible, the city will apply for abatement funding or braid funding with RI Housing's lead abatement program when feasible.

# MA-25 Public and Assisted Housing

91.210(b)

## Introduction

The city and the Cranston Housing Authority (CHA) have a good working relationship as the housing authority works to provide affordable housing for low- and moderate-income families. Most of the units managed by the CHA are for older persons while their Housing Choice Vouchers Program are typically used by younger families and individuals. The city reviews the Housing Authority’s 5-Year Plan for consistency with the City’s Consolidated Plan.

MA-25 Figure 1: Total Number of Units 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	587	262	0	262	0	0	0
# of accessible units			40						

Data Source: PIC (PIH Information Center)

*Describe the supply of public housing developments*

The Cranston Housing Authority owns, manages, and maintains 587 units of public housing in the city, located in six different properties.

- Arlington Manor: 50 Birch Street
- Budlong Manor: 100 Arthur Street
- Hall Manor: 70 Warwick Avenue
- Jennings Manor: 125 Harris Avenue
- Knightsville Manor: 85 Briggs Street
- Randall Manor: 75 Mathewson Street

Development	# Units	Population
Arlington Manor	120	Elderly or Disabled
Budlong Manor	71	Elderly
Hall Manor	79	Elderly or Disabled

Development	# Units	Population
Jennings Manor	51	Elderly
Knightsville Manor	186	Elderly or Disabled
Randall Manor	80	Elderly or Disabled

The Cranston Housing Authority has a total of 262 Housing Choice Vouchers available with a current utilization of 252 vouchers as of November 2024, resulting in a leasing percentage of 98.85%. The total budgetary authority for 2024 was \$3,005,584.

*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:*

MA-25 Figure 2: Public Housing Condition				
Development	UPCS Inspection		NSPIRE Inspection	
	Date	Score	Date	Score
HALL MANOR	6/15/22	98b		
RANDALL MANOR	2/22/23	90b		
ARLINGTON MANOR	7/7/22	83b		
KNIGHTSVILLE MANOR	7/12/22	90b		
CRANSTON HA Scattered Site Developments	10/4/22	78c*	1/4/24	98

Data Source: HUD - REAC

Cranston is served by 6 public housing complexes with 587 units serving elderly and disabled residents. The physical inspection scores for public housing developments are part of HUD’s Real Estate Assessment Center’s (REAC) system to ensure that properties are maintained in a decent, safe, sanitary, and in good repair condition. These scores range from 0 to 100 points and are used to assess a property’s overall physical condition.

- 90 to 100 points: Properties with scores in this range are considered to be in excellent condition. They are inspected every third year.
- 80 to 89 points: Properties with scores in this range are in good condition but may have some minor issues. They are inspected every second year.
- Below 80 points: Properties with scores below 80 might have more significant issues and are subject to more frequent inspections to ensure that the conditions improve.

The physical inspection generates comprehensive results for each of five physical inspectable areas: Sites; Common Areas; Building Systems; Building Exteriors; and Units, as applicable. A sample of units in the Asset Management Project (AMP) are scored, resulting in a Public Housing Agency (PHA) composite score. The higher the score, the better the physical condition of the property.

According to the most recent inspection scores, all of CHA's developments are in excellent condition.

*Describe the restoration and revitalization needs of public housing units in the jurisdiction*

Restoration and revitalization needs for the next five years consist primarily of the following:

- **Structural Repairs & Waterproofing:** Major restorations for exterior building envelopes at Knightsville and Arlington Manor.
- **Mechanical Upgrades:** Air handling unit replacements at Randall and Knightsville; energy recovery ventilation at Randall and Arlington.
- **Interior & Common Area Improvements:** Flooring, lobby, and corridor upgrades at multiple properties.
- **Infrastructure & Accessibility:** Elevator modernization at Jennings Manor and paving repairs at Hall Manor.

There may be specific room modification or rehabilitation needs when units are vacated by tenants and rehabilitated prior to a new tenant moving in.

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

CHA addresses the quality of life of its residents in a variety of ways, which include proper maintenance of infrastructure and facilities through regular and thorough maintenance and consistent attention to capital improvements, use of state-of-the art technology and close cooperation with local law enforcement to enhance safety and security, close coordination with the Comprehensive Community Action Program, the R.I. Office of Healthy Aging, and non-profit healthcare agencies to bring on-site medical, dental, and mental health services to our residents, and works with the Cranston Senior Enrichment Center. CHA also provides spacious and comfortable community gathering facilities and equipment to promote positive interaction among wits residents.

**Discussion**

With a portfolio of 602 units among the developments the CHA owns and operates, CHA supports the housing needs of some of the most vulnerable low-income families in the city. However, the need for more affordable housing units far surpasses the ability of the housing authority. The CHA also has a total of 262 Housing Choice Vouchers available, of which 252 vouchers have been leased as of November 2024, resulting in a leasing percentage of 98.85%.

# MA-30 Homeless Facilities and Services – 91.210(c)

## Introduction

According to the 2024 HIC, there are two facilities with a total of 149 beds in Cranston targeted at providing shelter and housing for homeless households and individuals. However, it should be noted that the rapid rehousing provided by Crossroads through the RI Department of Corrections is aimed at those leaving the correctional institutions housed in Cranston and may house people in other parts of the State.

Facility	Type	VSP	Family Beds	Adult Only Beds	UA Youth Beds	Chronic Homeless Beds	Veteran Beds	Total Beds
<b>Crossroads Rhode Island: Harrington Hall (CHF)</b>	ES	No	0	112	0	0	0	112
<b>Crossroads Rhode Island: Department of Corrections Discharge Planning</b>	RRH	No	0	37	0	0	2	37

Data Source: 2024 HIC; CoC RI-500

**Table 1 - Facilities and Housing Targeted to Homeless Households**

	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)	0	0	0	0	
Households with Only Adults	112	0	37	0	
Chronically Homeless Households	0	0	0	0	
Veterans	0	0	2	0	
Unaccompanied Youth	0	0	0	0	

**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**

There are a significant number of medical offices in and around Cranston that provide comprehensive primary and specialty healthcare. These include CCAP, Garden City Treatment Center, Cranston Medical, Brown Health Medical Group, Providence Community Health Centers, Eleanor Slater Hospital, CODAC Behavioral Health, Garden City Psychiatry, Thrive Behavioral Health, and Bridgemark Addiction Services.

CCAP is a Federally Qualified Community Health Center in Cranston. Services are available for uninsured or underinsured and are offered on a sliding fee scale based on income and family size. They provide family medicine, chronic condition management, dental services, social work, nutrition.

CODAC Behavioral Healthcare has a location in Cranston and provides treatment, recovery and prevention services to individuals and families within the city including Substance Use Treatment, Mental Health and Medical Services.

Thrive Behavioral Health is a Certified Community Behavioral Health Clinic that offers mental health and substance use services including crisis services, adult mental health services, children and teen services, and substance use services.

Bridgemark Addiction Recovery Services provides mental health services by a licensed clinical social worker and other mental health professionals and is one of the few agencies that provide a residential substance use treatment program. Additionally, they offer treatment programs for the deaf and hard of hearing and all services are available in Spanish.

Employment services are available through the public workforce system, Workforce Solutions of Providence/Cranston. There are also several staffing agencies located in Cranston which offer career development, assessments, training, and education programs and provide a range of job opportunities and placement for contract or direct placements in administrative, clerical, accounting, light industrial, call center, distribution, and third-party logistics positions. These include CoWorx Staffing Services, Manpower, and Willmott & Associates.

**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.**

There are multiple organizations that provide assessment, support services and shelter to the City's general homeless population. Additional programs provide housing assistance to veterans and to homeless families. The VA Supportive Housing and Treatment (VASH) program provides services and housing vouchers to homeless veterans. This program is run through the Veterans Administration Healthcare System and operates out of the Providence, Rhode Island Office.

Harrington Hall, operated by Crossroads Rhode Island, is a 112-bed emergency shelter serving homeless adults in Cranston.

The Department of Corrections Discharge Planning office is also located in Cranston, serving those discharged from the ACI. It has a 37 bed capacity, but those being discharged may be from any community in Rhode Island.

# MA-35 Special Needs Facilities and Services - 91.210(d)

## Introduction

There are households throughout the City of Cranston that may have special housing and supportive service needs unrelated to homelessness. Some of these population groups include the elderly and frail elderly; those living with some type of physical or cognitive disability; those living with HIV/AIDS and their families; persons with substance use disorders; and victims of domestic violence, dating violence, sexual assault, and stalking. These groups typically face greater housing challenges than the general population due to their specific circumstances and the city's housing stock may not be suitable for households with particular special needs. These groups may also require special attention due to additional social services required. These population groups are discussed in NA-45.

*Including the elderly, frail elderly, persons with disabilities (mental, physical, developmental), persons with alcohol or other drug addictions, persons with HIV/AIDS and their families, public housing residents and any other categories the jurisdiction may specify, and describe their supportive housing needs*

## Elderly and Frail Elderly

The City of Cranston has 14,133 older residents, aged 65 or older living in a total of 9,057 households – including those living in institutionalized settings (i.e., assisted living and nursing care facilities). This represents 17.1% of the total population and 27.8% of all households in the City. Among these seniors, 60.5% live in family households, 32.9% live alone, and the remaining 5% live in non-family (not alone) households or group quarters.

Generally, the senior population has more limited fixed incomes than the population as a whole, primarily Social Security and other retirement income. While 86% of Cranston seniors aged 65 and older are at or above the Federal Poverty Level, there are 4,165 elderly households that experience housing cost burdens of over 30% (2,810 owner-occupied households and 1,355 renter-occupied households). Further, as discussed in NA-10, there are 725 elderly renters and 1,430 elderly homeowners of all income categories that spend more than 50% of their income on housing. Additionally, limited incomes inhibit the ability to make the necessary home improvements to ensure their homes are in compliance with the City's building and property maintenance codes that ensures the home meets minimum health and safety standards. It is not uncommon in the city to see homes occupied by seniors to in need of repairs to major building components, primarily roof and heating system replacements, but also exterior paint and siding deterioration.

## Persons with Disabilities (Mental, Physical, Developmental)

For people with disabilities, there are many barriers to housing. Ambulatory difficulty inhibits an individual's ability to walk or climb stairs. Due to the physical characteristics of the city's housing stock, with many split-level ranch-style homes and multi-story two- to four-unit homes, a primary concern is providing accessible housing options for the 4,173 Cranston residents (5.2%) that experience ambulatory difficulty, and the 5,105 residents (6.4%) with self-care and independent living difficulties. Specific construction features and accessibility modifications are often required for those with mobility challenges, depending on the type and severity of these challenges (i.e., handrails, ramps, wider doorways, lowered kitchen counters and sinks, wheel-in showers, grab-bars, etc.). For people who use mobility devices, finding housing with even basic accessibility features can be daunting, if not entirely impossible or unaffordable.

Income levels for the disabled (mentally, physically or developmentally) tend to be lower than median area income, resulting in profound affordability concerns. While newly constructed multi-family units are required to have accessibility for such populations, older units tend to be lacking such features. Stable housing for persons with mental illness is hugely beneficial regarding their mental health care because the primary location of a support network is directly linked to their residence. Those living with a mental or developmental disability can find it difficult to retain housing and often their disability prevents them from finding suitable employment or earning an adequate wage that allows for independent living. Many individuals with mental illness are dependent solely on Supplemental Security Income as their primary source of income. Affordability issues become even more challenging for this population as there are few options in the private housing market and their disability leaves them at greater risk of homelessness and ill-equipped to navigate the public support system without substantial assistance. Without affordable, accessible housing in the community, many are at risk of institutionalization or homelessness.

The Ocean State Center for Independent Living (OSCIL) was established in 1988 and provides a range of independent living services to enhance, through self-direction, the quality of life for persons with disability and to promote integration into the community. OSCIL offers comprehensive independent living assessment services to recommend specialized equipment, home modifications and/or independent living services to achieve independence in the home and community. OSCIL assists individuals with disabilities to address personal barriers to independence in the home. If there are physical barriers in the home that need to be addressed, OSCIL's Home Access/Home Modification team can provide complete assessment to find the right solution for increased access. OSCIL staff assists consumers in setting goals for self-sufficiency in the home, which may involve basic everyday life skills training including social and communication skills, self-empowerment, mobility and transportation, personal resource management, and self-care. For the city of Cranston, OSCIL has completed 17 home modifications from September 2022 to February 2024.

### **Persons with alcohol or other drug addictions**

Supportive housing for individuals living with alcohol or drug addiction plays a crucial role in their recovery process. For their recovery to be successful, they need a stable environment which can help minimize substance misuse and relapse, improve medical and mental health status, enhance overall quality of life, and sustain recovery. The types of supportive housing can include peer-run recovery residences to more structured sober living homes and residential treatment housing, depending on the individual's needs. Supportive housing often includes access to counseling services, therapy, and peer support, which are essential for maintaining sobriety and building a foundation for long-term recovery. Often, they need to be removed from the previous environment in order to remain committed to their recovery.

### **Persons with HIV/AIDS and their families**

According to data from the RI Department of Health, Cranston is one of the top three communities in the state identified as primary sources of new HIV/AIDS infections. As with any other population group, affordable housing options are of urgent concern for persons living with HIV/AIDS. Stable housing is required to maintain a consistent medication regime. Individuals need a place to take care of hygiene and their immune system. No one who lives on the street can be compliant with their medication treatment or care. When people have stable housing, they are able to get the services they need.

## Victims of Domestic Violence

Supportive housing for victims of domestic violence is a critical aspect of their recovery and transition to a safer economically independent life. These needs often include: (1) Emergency Shelter for the immediate, short-term accommodation for safety and crisis intervention; (2) Transitional Housing for the longer-term housing needs that provide victims with support services for 6-24 months as they rebuild their lives; and (3) Support Services that include crisis counseling, childcare, transportation, life skills, educational and job training to support victims in becoming independent. Each case is unique, but supportive housing and services are essential to help victims of domestic violence move forward and establish a stable, secure environment free from abuse.

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

Households with mental or physical health issues face barriers to safe, decent and affordable housing. Persons with mental or physical health issues can be discharged from institutions but are then unable to find independent housing that they can afford or reasonably maintain. Those who are homeless can also be discharged from institutions with no other housing options. In most areas of the state housing affordability is in crisis. There is a limited supply of supportive housing and affordable housing options in Cranston for persons returning from mental and physical health institutions.

Whenever possible, supportive services for the elderly, persons with HIV/AIDS, mental health issues, etc. are provided within their living environment. Often these services are needed by persons that are vulnerable to being marginalized by mainstream society and economics unless they have a strong support network in place that advocates for them. Those that are aging in place, as an example may, become extremely isolated and disconnected to any support network. Mental health, poverty, mobility for elderly and handicapped persons, are issues that can have significant supportive housing needs. Ramps, live-in help, medical and social visits, food services such as Meals on Wheels, and other socialization and support activities are needed by all these populations.

*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)*

See Action Plan.

*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))*

Cranston is not part of a Consortium and has not planned any activities other than those listed above.

## **MA-40 Barriers to Affordable Housing - 91.210(e)**

### *Negative Effects of Public Policies on Affordable Housing and Residential Investment*

In general, public policies affecting the cost and production of affordable housing are governed by specific zoning by-laws. Cranston does not have inclusionary zoning, in which a percentage of housing developed in the marketplace is set aside for affordable use and is usually placed within mixed income developments. Cranston does allow accessory apartments which are particularly effective in enabling low-income elderly owners to generate income and continue living in the community, subject to strict limitations on the square footage of the main living area. Variances in the size of the area are subject to approval by the zoning board.

Western Cranston, where most available land is located, has zoning for larger lots due to the absence of sewers and/or public water service. Since larger lots are expensive, the associated development costs are higher and larger homes are usually built on large lots. The resultant high cost of the home effectively precludes the average first time homebuyer from purchasing the property to conform to affordability.

Sewer impact fees and sewer user fees have remained relatively constant over the last five years, after the sewer user fees had increased 10% during the previous five year period to finance wastewater treatment facility upgrades mandated by the State, which were completed in 2019.

Areas in Cranston are zoned to allow multi-family housing, and there has been significant multi-family development through the years.

It must be stated, however, that the foremost primary barriers to affordable housing are economic in nature. The generally accepted definition of affordability is for a household to pay no more than 30% of its annual income on housing, including utilities. The cost of housing is influenced by interest rates, land and construction costs, the real estate market, and regulatory costs. Recent studies over the past few years by the National Low Income Housing Coalition have indicated that the average hourly wage for the average renter in Rhode Island results in a cost burden in excess of the 30% definition of affordability. Moreover, similar recent studies by the Rhode Island Association of Realtors have indicated that the average renter's hourly wage would result in moderate to severe cost burdens if these renters were to purchase a house. The recent surge in real estate prices and rents has also adversely affected the ability not only to rent but also to buy a house. The unavoidable conclusion is that the average renter's hourly wage is insufficient to result in affordable housing, either by renting or by home ownership. Moreover, recent studies have also indicated that the wages of current homeowners have not kept pace with the sales prices of existing or new homes, resulting in potential cost burdens if current homeowners wish to buy and move into a different home, especially evident in today's housing market.

# **MA-45 Non-Housing Community Development Assets – 91.215 (f)**

## **Introduction**

The City of Cranston places a high priority on economic development initiatives to secure new businesses in the city, to support the improvement of the city's existing businesses, and to improve the City's tax base and employment opportunities for its residents. The city has successfully implemented aggressive business recruitment and expansion programs and has reinvested in its urban business corridors. Through a variety of forward-thinking legislative initiatives, the city offers investment incentives to increase the financial viability of the City's new and existing development areas. In 2015 the City passed two new tax incentives for industrial properties. A business expanding or buying a new building spending \$12 million to \$0 million will be eligible for a 15 year tax phase-in incentive on their improvements. In addition, a business expanding or buying a new building spending over \$20 million will be eligible for a 20 year tax phase-in incentive on their improvements.

The city has a commitment to the economic development of all of its available areas and strives to achieve a balance between appropriate land use and bringing higher quality jobs and living standards to its residents. With the assistance of the Department of Economic Development, the city has been a leader in bringing industrial and commercial development to its numerous sites over the past decade. Convenient highway access, ample water and sewer services, and a tradition of excellent municipal services combine to provide the type of environment that the business community seeks when considering expansion or relocation.

## **Industrial Park**

The Western Cranston Industrial Area is one of the fastest developing industrial parks in the city and state, located centrally at the interchange of Interstate 295 and Route 14. This area continues to develop as one of the most important parts of the city's industrial tax base. Nationally recognized companies like Penske and Cadence Science complement regional business leaders like Con-Way Trucking, Electro Standards, MPC Corp, Design Fabricators, Jewelry Concepts, TASC Automotive Parts Warehouse and Bay State Florist in this growing industrial area.

## **Garden City Center**

Garden City Center is Rhode Island's premiere outdoor shopping venue that has been a high traffic shopping destination in the state. The Center opened in 1948 and was the first suburban shopping center in the state with 500,000 square feet of retail and office space. Its well-manicured landscapes and enhanced gardens frame the architecturally unique shops and restaurants. The Center has national retailers such as LL Bean, Fat Face, Pottery Barn, Crate & Barrel, J Crew, LA Fitness, New Balance, Banana Republic's new concept store, William Sonoma, Ann Taylor Co, Chico's, Jos A Banks, Talbots, The Container Store, GAP, Anthropologie, Destination Maternity, Soma-Intimates, The Loft, Mel and Me, Clarkes Shoes, L'Occitane, Sephora, White House/Black Market, and Anthony's Coal Fired Pizza. The Center also has regional and local retailers and restaurants such as Providence Diamond Company, Applebee's, Barrington Books, Edible Arrangements, Ethan Allan Design Center, Bistro 22, Starbucks, B. Goode, Pinkberry, Legal Sea Bar, Tavern in the Square, Tropical Smoothie, The Simple Greek and Whole Foods Market. Garden City has completed construction of two new buildings under its Phase Four development, consisting of 37,000 square feet of additional commercial space.

## Chapel View Center

Chapel View is directly across from Garden City in the heart of Cranston and provides an upscale mixed use shopping center. Chapel View is coupled with many quality stores that complement Garden City. Chapel View sits on the former site of the State's Youth Training and Reform School. The developers have used several former historic structures to develop a European Village atmosphere that encompasses upscale condominiums, office space and retail components. Current tenants include First Comp, which is a division of Market Insurance Company, Recreational Equipment Inc. (REI), Residential Mortgage Services, the Champlain Foundation, Staples, the Chapel Grille, Panera Bread, Massage Envy, Bling Eyewear, Qdoba Mexican Grill, Shaw's Supermarket, T.J. Maxx, Koch Eye Associates, Omaha Steaks, Johnny Rockets, and Topgolf.

## Recent Development Initiatives

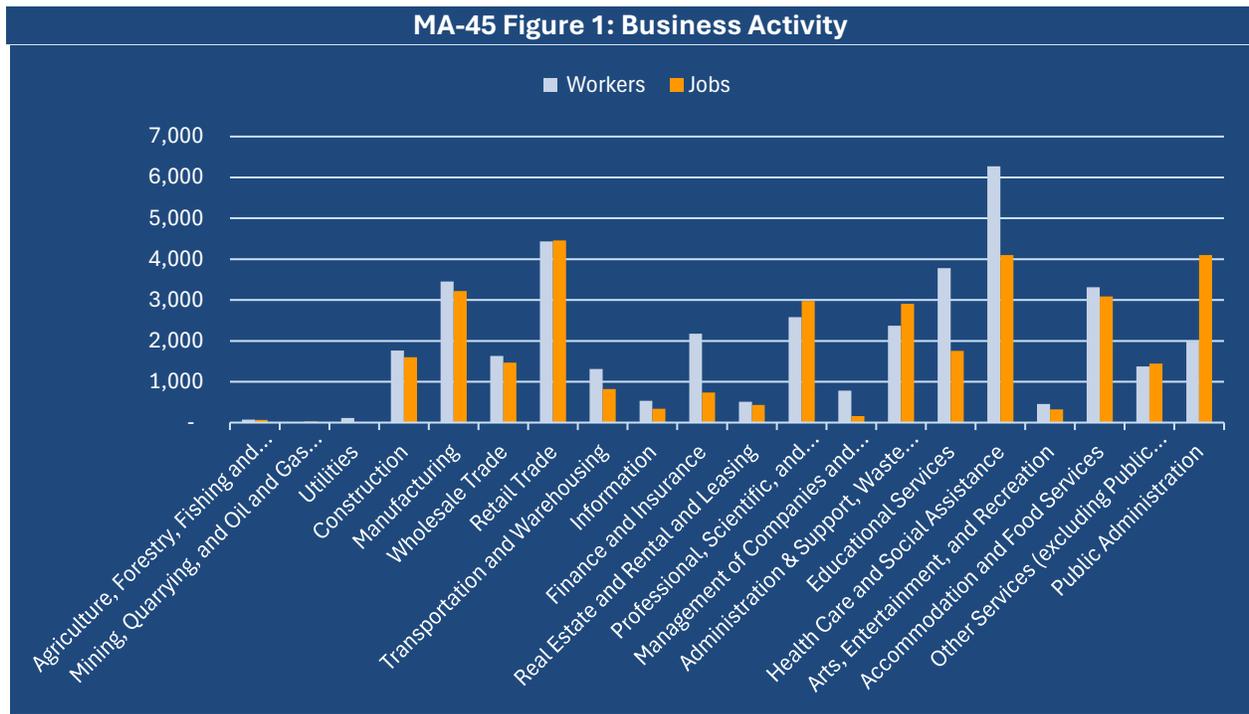
- Cube Smart 950 Phenix Avenue in western Cranston: Mixed use development at the corner of Phenix and Natick has opened. In addition to traditional storage space, this development has a multi-use component that includes the new home of Little Learners Academy of Cranston.
- Ocean State Job Lot: Opened on Atwood Avenue and replaced an abandoned Benny's location, a Rhode Island landmark that went out of business.
- Carpionato Properties: Re-developed the former Cranston Police property on Atwood Avenue. Two new buildings have been constructed and are now homes for a Dairy Queen and Enterprise Car Rental. A Pizza Hut location will be coming in the future.
- Dollar General: Re-developed the former vacant gas station site on the corner of Dyer and Park Avenues.
- Ocean State Kidz Club: Important after-school day care for middle school children restored the former Blockbuster Video on Park Avenue in the eastern side of the city and are now in full operations.
- Speedway Car Wash: Re-developed the site of General Oil on the corners of Park and Gansett Avenues and are now open as a self-service car wash operation.
- Sako's Pizza: Opened on 823 Reservoir Avenue at the former site of Donut Bazaar after major renovations.
- Bay Coast Bank: Opened a branch at the former Citizens Bank site on Sockanossett Crossroads.
- Iannucilli's Restaurant: Opened on Cranston Street in Knightsville to add another dining establishment to that landscape.

## Revolving Loan Fund

The Revolving Loan Fund (RLF) is a fixed asset loan program that was established with Federal and matching City Funds approximately 25 years ago. The City's RLF program offers low interest loans to new as well as expanding businesses located in the City of Cranston. Additionally, the RFL provides gap financing for companies seeking to purchase equipment, finance renovations, job training and working capital. The fund has distributed over \$4 million to companies that have located or expanded. The loans have leveraged over \$26 million in additional investments.

- Over 18,000 jobs have been created or retained as a result of the program.
- The loan portfolio has an average loan amount of \$110,000.
- Seventy percent of the loans have been made to companies with 25 or fewer employees.
- There are 13 current loans in the portfolio.

# Economic Development Market Analysis



	Workers		Jobs		Δ
	#	%	#	%	
<b>Agriculture, Forestry, Fishing and Hunting</b>	72	0.2%	69	0.2%	-3
<b>Mining, Quarrying, and Oil and Gas Extraction</b>	13	0.0%	26	0.1%	13
<b>Utilities</b>	109	0.3%	0	0.0%	-109
<b>Construction</b>	1,767	4.5%	1,601	4.7%	-166
<b>Manufacturing</b>	3,452	8.9%	3,221	9.5%	-231
<b>Wholesale Trade</b>	1,629	4.2%	1,468	4.3%	-161
<b>Retail Trade</b>	4,431	11.4%	4,454	13.1%	23
<b>Transportation and Warehousing</b>	1,308	3.4%	823	2.4%	-485
<b>Information</b>	535	1.4%	340	1.0%	-195

	Workers		Jobs		
Finance and Insurance	2,173	5.6%	737	2.2%	-1,436
Real Estate and Rental and Leasing	508	1.3%	428	1.3%	-80
Professional, Scientific, and Technical Services	2,580	6.6%	2,977	8.8%	397
Management of Companies and Enterprises	782	2.0%	162	0.5%	-620
Administration & Support, Waste Management and Remediation	2,374	6.1%	2,909	8.6%	535
Educational Services	3,780	9.7%	1,754	5.2%	-2,026
Health Care and Social Assistance	6,274	16.1%	4,097	12.0%	-2,177
Arts, Entertainment, and Recreation	453	1.2%	321	0.9%	-132
Accommodation and Food Services	3,314	8.5%	3,090	9.1%	-224
Other Services (excluding Public Administration)	1,373	3.5%	1,446	4.3%	73
Public Administration	1,979	5.1%	4,098	12.0%	2,119
<b>Total</b>	<b>38,906</b>		<b>34,021</b>		

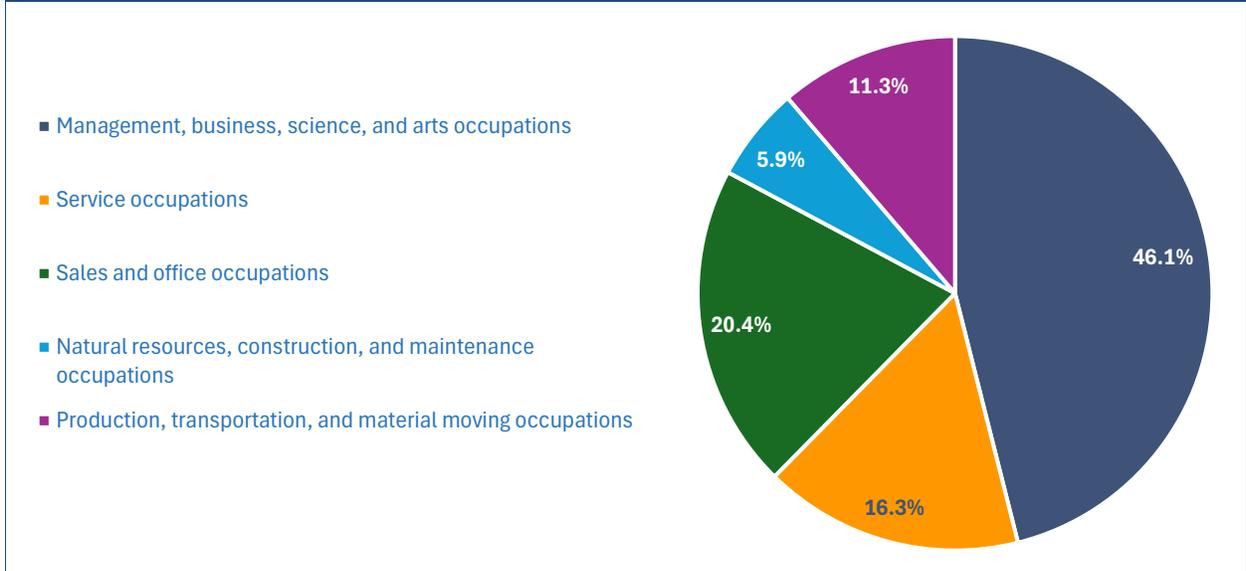
Data Source: LEHD

MA-45 Figure 2: Labor Force	
Total Working-Age Population (16-64)	
Civilian Labor Force	41,162
Civilian Employed Population	38,790
Unemployment Rate	5.8%
16-24	
Civilian Labor Force	4,471
Civilian Employed Population	3,919

<b>Total Working-Age Population (16-64)</b>	
<b>Unemployment Rate</b>	12.3%
<b>25-64</b>	
<b>Civilian Labor Force</b>	36,691
<b>Civilian Employed Population</b>	34,871
<b>Unemployment Rate</b>	5.0%

Data Source: 2018-2022 ACS - B23001

**MA-45 Figure 3: Occupations by Sector**



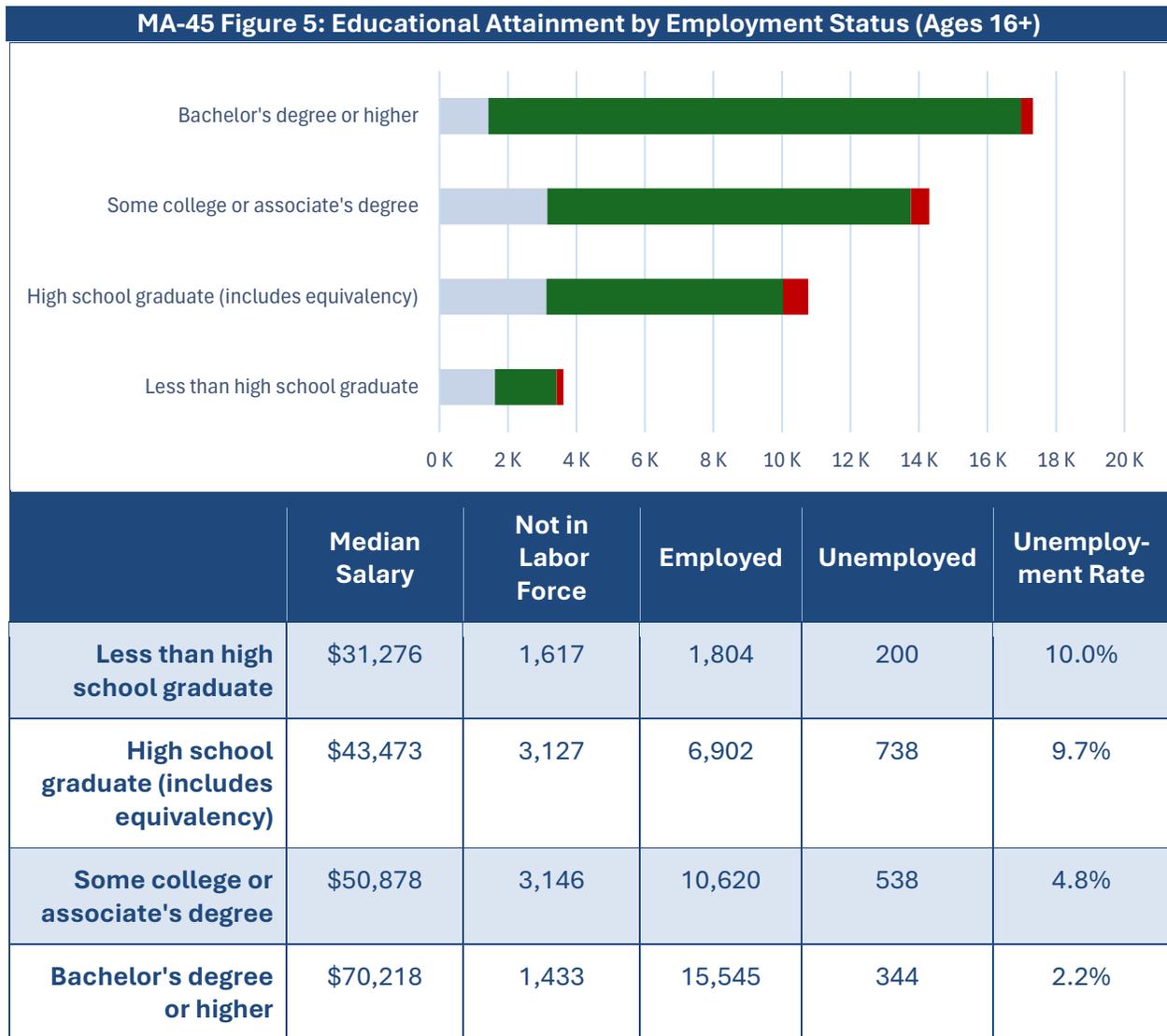
	#	%
<b>Management, business, science, and arts occupations</b>	18,962	46.1%
<b>Service occupations</b>	6,712	16.3%
<b>Sales and office occupations</b>	8,407	20.4%
<b>Natural resources, construction, and maintenance occupations</b>	2,442	5.9%
<b>Production, transportation, and material moving occupations</b>	4,637	11.3%

Data Source: 2019-2023 ACS – DP03

<b>MA-45 Figure 4: Travel Time</b>		
	<b>22,743</b>	<b>64.4%</b>
<b>&lt; 30 Minutes</b>	26,358	72.6%
<b>30-59 Minutes</b>	7,664	21.1%
<b>60 or More Minutes</b>	2,284	6.3%
<b>Total</b>	<b>36,306</b>	<b>100.0%</b>

Data Source: 2019-2023 ACS - B08303

## Education



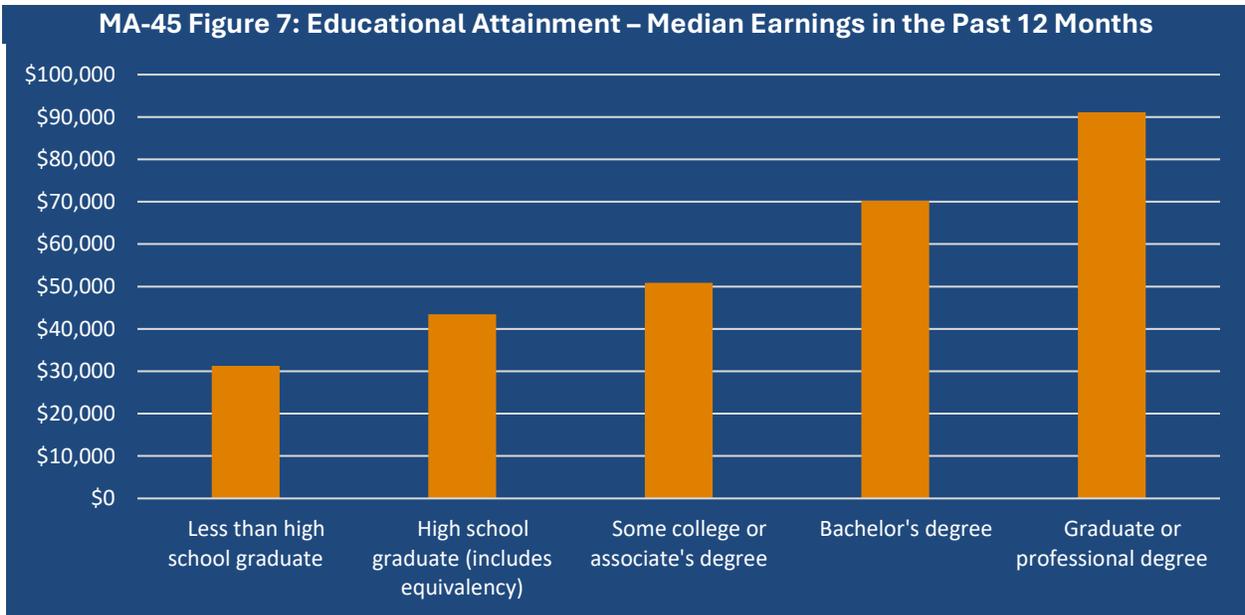
Data Source: 2019-2023 ACS - B23006

**MA-45 Figure 6: Educational Attainment by Age**

	18-24 yrs	25-34 yrs	35-44 yrs	45-65 yrs	65+ yrs
<b>Less than 9th grade</b>	118	136	246	881	1,195
<b>9th to 12th grade, no diploma</b>	401	387	639	1,332	835
<b>High school graduate, GED, or alternative</b>	2,131	2,541	2,855	5,371	4,745
<b>Some college, no degree</b>	1,923	3,281	2,058	4,267	2,132

	18–24 yrs	25–34 yrs	35–44 yrs	45–65 yrs	65+ yrs
<b>Associate's degree</b>	93	1,059	1,135	2,527	1,027
<b>Bachelor's degree</b>	967	3,329	3,188	4,227	2,247
<b>Graduate or professional degree</b>	158	1,573	2,330	2,684	1,952

Data Source: 2018-2022 ACS - B15001



	Earnings
<b>Less than high school graduate</b>	\$31,276
<b>High school graduate (includes equivalency)</b>	\$43,473
<b>Some college or associate's degree</b>	\$50,878
<b>Bachelor's degree</b>	\$70,218
<b>Graduate or professional degree</b>	\$91,100

Data Source: 2018-2022 ACS - B20004

*Based on the Business Activity table above, what are the major employment sectors within your jurisdiction?*

In descending order, the major occupational sectors in Cranston are Management, business, science, and arts (46.1%), Sales and office (20.4%), Service Occupations (16.3%), and Production, transportation, and material moving (11.3%). Additionally, 5.9% of Cranston workers have Natural resources, construction, and maintenance occupations.

Drilling down to industry level using 2022 LEHD data, we find that over half the jobs are in Retail Trade (13.1%), Public Administration (12%), Health Care and Social Assistance (12%), Manufacturing (9.5%), and Accommodation and Food Services (9.1%). The remaining 44% of jobs in Cranston are split between several industries, with only Professional, Scientific, and Technical Services (8.8%), Administration & Support, Waste Management and Remediation (8.8%) and Educational Services (5.2%) accounting for more than 5% of jobs.

We note that the location of several State offices at the Pastore center likely accounts for the high percentage of Public Administration jobs in the city. Public administration is the only one of the top industries that draws a significant number (2,119) of workers from outside of the city. Health Care and Social Assistance, on the other hand, sees a similar net **outflow** of workers to jobs in other cities. These may indicate potential workforce development strategies to train Cranston residents for Public Administration jobs, or to attract Health Care and Social Assistance businesses to take advantage of the skilled workforce in Cranston. However, given the incredibly compact size of Rhode Island cities, it is not unusual for works to commute one or two towns away for their jobs.

Finally, by the ACS, the median yearly income in Public Administration (\$74,418) is above the median worker income of \$54,193 in Cranston, and the median yearly incomes in Manufacturing (\$51,471) and Health Care and Social Assistance (\$50,280) are just below it. Meanwhile the median earnings in Retail Trade (\$26,641), and Accommodation and Food Services (\$41,700), are far below the median income. This would again indicate a strategy for good jobs in Cranston would focus on workforce development in Public Administration and attracting/expanding employment in Health Care and Social Assistance and Manufacturing.

	Inflow	Outflow	Interior
<b>Jobs</b>	27,663	32,548	6,358
<b>Age</b>			
<b>&lt; 30</b>	5,968	6,969	1,342
<b>30 - 54</b>	13,782	17,136	3,015
<b>55+</b>	7,913	8,443	2,001
<b>Earnings per month</b>			
<b>&lt; \$1,250</b>	3,874	4,042	1,185
<b>\$1,251 - \$3,333</b>	7,828	8,190	1,913
<b>\$3,333</b>	15,961	20,316	3,260

	Inflow	Outflow	Interior
Industry Class			
Goods Producing	4,079	4,466	838
Trade, Transport, Utilities	5,675	6,407	1,070
All Other Services	17,909	21,675	4,450

Data Source: LEHD

*Describe the workforce and infrastructure needs of the business community:*

### **Workforce Needs**

Of the working age population in Cranston (18-64 years old), 67.1% have some college or an Associate’s degree or Bachelor’s degree or higher. Among them, 35.6% have a Bachelor’s degree or higher. In the city, there are more workers (38,906) than there are jobs (34,021), a difference of 4,885.

The employment sectors with the largest concentration of jobs in Cranston include Retail Trade; Public Administration; and Health Care and Social Assistance. These three sectors account for 37.1% of all the jobs in the city and 32.6% of workers in the city are employed in these sectors. However, there are 2,177 more workers than jobs in Health Care and Social Assistance representing a significant outflow of workers to the Providence area healthcare institutions. Conversely, there are 2,119 more jobs in Public Administration than there are workers in the city, due to many state offices located in Cranston. There is almost an identical number of jobs and workers in Retail Trade.

Other sectors that have a surplus of jobs than workers in Cranston include Administration & Support, Waste Management and Remediation (535 more jobs than workers) and Professional, Scientific, and Technical Services (397 more jobs than workers).

Educational Services has a surplus of 2,026 workers in Cranston than jobs, and Finance and Insurance has a surplus of 1,436 workers than jobs. Both of these employment sectors are more concentrated in Providence which helps explain the surplus in workers since Cranston shares a border with Providence and its housing costs are less than Providence.

### **Infrastructure Needs**

The city has two main active industrial parks, one in the southeastern part, and the other in the northwestern part of the city. In addition, there are three main business parks: Garden City, essentially an outdoor shopping mall, and Chapel View, both located south centrally; and the Brewery Parkade, located north centrally on the site of the former Narragansett Brewery. These existing business and industrial areas need street and utility infrastructure maintenance and landscaping in order to improve “curb appeal,” and productivity capabilities to attract development and other professional industries.

Streets are re-paved and improved on a prioritized basis. The RI Dept. of Transportation inspects and repairs bridges also on a priority basis. Waste treatment facilities and sewers are managed and maintained by an independent organization.

*Describe any major changes that may have an economic impact, such as planned local or regional 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.*

There is very limited vacant land available in Cranston for new commercial/industrial development, for the only vacant land that is undeveloped is protected Open Spaces not subject to development. However, the city strives to retain its existing businesses and help them expand and create additional jobs. The city also incentivizes reuse of commercial and industrial property when they become vacant. Chapel View and Garden City commercial developments continue to attract new tenants to available facilities. The City of Cranston is experiencing significant development across multiple sectors, including commercial, residential, and industrial development. The major projects that may have an economic impact include:

### **Industrial & Commercial Developments**

- **Western Industrial Drive & Daniels Way:** Construction of new industrial buildings will increase business activity and may attract manufacturing and logistics companies.
- **20 Goddard Drive Warehouse (210,000 sq. ft.):** A large warehouse development, likely to create substantial employment opportunities in logistics and distribution.
- **Milton CAT (42,000 sq. ft.):** Expansion of construction equipment sales and service, supporting the local construction industry.
- **Trolley Barn Plaza Redevelopment:** Includes 4 new retail/restaurant buildings, a gas station, drive-thru fast food, and a car wash, expanding retail and service options.

### **2. Education & Institutional Expansions**

- **Achievement First Illuminar School Expansion:** Supports increasing student enrollment.
- **Garden City & Gladstone Elementary School Rebuilds:** Enhances educational infrastructure.
- **Early Foundation Academy Expansion:** Addresses the growing need for early childhood education facilities.

### **3. Retail, Hospitality & Business Expansions**

- **Chapel View & Garden City Center Expansions:** Further growth in Cranston's premier shopping and dining districts.
- **Brewed Awakenings Drive-Thru & Other Restaurant Developments:** Increased convenience and economic activity in the food service sector.
- **JP Morgan Chase Expansions:** Two new bank locations enhancing financial services accessibility.
- **New Cannabis Dispensaries:** The **New Leaf Compassion Center** and **Winding Rhode Compassion Center** capitalize on Rhode Island's evolving cannabis industry.

### **4. Renewable Energy & Sustainability Projects**

- **Natick Avenue Solar Farm (8MW) & Sharpe Drive Solar Project (0.4MW):** Investment in renewable energy supports sustainability goals.

- **Hope Solar & Seven Mile Solar Projects:** Large-scale solar installations reducing reliance on nonrenewable energy.

The scale of these developments may have substantial effects on job creation and business growth in the city. Warehouse, industrial, and manufacturing projects will create positions in logistics, warehousing, and skilled trades. Commercial and mixed-use developments will drive demand for retail, restaurant, and service-based employment. Educational expansions will require additional teachers, administrators, and support staff. The workforce needs of the business community are served by Providence/Cranston Workforce Solutions, the Rhode Island Department of Labor and Training, and the Community College of RI. In addition, some training grants are available.

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

Workforce readiness and employment training that targets the city’s low-skilled, and low- and moderate-income populations to connect them to employment opportunities is of critical importance to improving the economic conditions of the city’s most economically vulnerable. Job training programs must align with the market realities in the city and state and must be intentionally focused on connecting economically marginalized populations to entry-level positions with a pathway for career advancement and wage enhancement. Leveraging the market demand of the largest economic sectors and employers in the city, the hospitality and food service, health care, and educational sectors, will position Cranston to connect low-skilled and LMI workers to job opportunities as the economy continues to improve. Cranston, on average, has a higher skilled workforce than the state overall. And as discussed above, the education levels and skill requirements for projected employment opportunities likely include entry-level, low-skilled, and primarily low-wage jobs, mid-level occupations, and higher-skilled employment requiring bachelor’s degrees or above.

Traditional workforce development programs are available through the network of American Job Centers in Rhode Island, the nearest are located in Providence and West Warwick. These centers can assist unemployed and underemployed individuals in accessing new job opportunities through job search assistance, labor market information, career planning, and elevating occupational skills through relevant training programs. These services are available for free at any of the American Job Center locations. CCRI, with its main campus located in Warwick, also has a wealth of educational programs that correspond to employment opportunities in the city and state.

*Describe any current workforce training initiatives, including those supported by Workforce Investment Boards, community colleges and other organizations. Describe how these efforts will support the jurisdiction's Consolidated Plan.*

The Providence/Cranston Workforce Development Board is one of two local Workforce Development Boards in Rhode Island and collaborates with businesses, educational institutions, and community-based organizations to provide employment and training resources. Their goal is to offer market-based solutions that align with the needs of both employers and potential workers.

The Cranston Skills Center, a program of the Comprehensive Community Action Program, offers job skills and GED classes to youths and adults. In the most recent three-year period, 1384 Cranston residents have participated in the program, of whom 201 have earned their GED.

The State Department of Labor and Training has developed the Real Jobs RI program. Real Jobs RI is a demand-driven, workforce and economic development initiative that is collaborative, flexible and business-led. It is designed to ensure that Rhode Island employers have the talent they need to

compete and grow while providing targeted education and skills training for Rhode Island workers. There are a total of 44 partnerships statewide in a wide range of industries and sectors. The goal of Real Jobs RI is to develop Real Jobs Partnerships that convene industry employers, key stakeholders and groups in partnerships that build alliances to address business workforce demands. These Partnerships operate uniquely, based on the needs of the employers and partners, and work to place new employees into immediate job openings, upskill current employees to advance skills or remain competitive, help business owners and entrepreneurs advance their ventures, or create pipelines of talent for the future. The Real Jobs RI program is best practice in workforce development and the State of RI provides resources for these programs through a blending of WIOA funds, state Job Development Fund, and other federal grants in an effort to develop a skilled workforce.

The Real Jobs RI program supports the Consolidated Plan by providing Cranston job seekers with the skills, training, access and support needed to be successful in the workplace, for free. Additionally, the Partnerships create long-term pipelines of skilled, job-ready talent to meet the demand of the employer base throughout the state.

Two campuses of the Community College of Rhode Island (CCRI) are located in the cities of Warwick and Providence, to the south and north of Cranston respectively. CCRI is the only community college system in the State and currently serves approximately 18,000 students annually in academic and vocational-technical programs for full-time and part-time students, recent high school graduates, and for older, adult learners. CCRI's Division of Workforce Partnerships works in close collaboration with industry and business leaders to ensure the college's offerings meet both current and future workforce needs. The division provides Workforce, Adult Education, and Transportation Education programs as well as Career Service and Employer Solutions offerings in service to the Rhode Island community and beyond.

Neighboring Warwick is also home to two of three campuses for the New England Institute of Technology (NEIT), a nationally known career and technical education and academic institution. Its enrollment is approximately 3,000 students with over undergraduate and graduate degree programs in such diverse fields as automotive technology, business management, criminal justice, information technology, electrical engineering technology, mechanical engineering technology, nursing, occupational therapy, surgical technology, and digital media production.

*Does your jurisdiction participate in a Comprehensive Economic Development Strategy (CEDS)?*

No.

*If so, what economic development initiatives are you undertaking that may be coordinated with the Consolidated Plan? If not, describe other local/regional plans or initiatives that impact economic growth.*

N/A.

*Discussion*

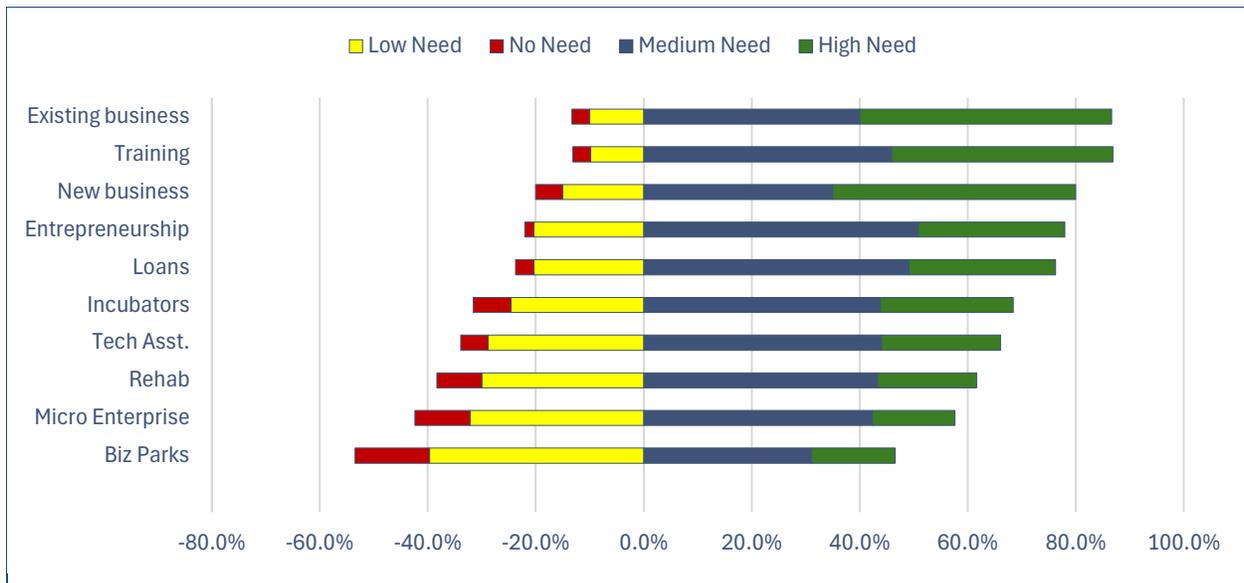
Geographically, the city is well positioned to attract industry to enhance economic growth and provide ongoing employment opportunities to city residents. Education and health services; retail trade; arts, entertainment and accommodations; information services; and professional, scientific, and management services sectors provide the most jobs in the City. Each sector does require either post-secondary education and/or the requisite skills and experience. Many jobs go unfilled because employers are unable to find individuals who have the necessary skills to fill them. At the

same time, individuals who need jobs are not able to take advantage of the open positions because they do not have the requisite skills or experience. In many situations, where an unskilled person can find a job, that job may not pay a sustainable wage to support a family. Without additional skill training there is little opportunity to break this cycle.

The city will continue to partner with the American Job Center, the CCAP GED Center, and other institutions that focus on workforce development, skill training, and adult education.

In addition to consultation with the business community, participants in the CEW Housing & Community Development Survey were asked to prioritize economic development needs. The top needs identified in this survey were:

- **Retention / expansion of existing businesses** (86.7% medium or high need).
- **Workforce training programs** (86.9% medium or high need).
- **Attraction of new businesses** (80.0% medium or high need).
- **Entrepreneurship programs** (78.0% medium or high need).
- **Working capital loans for businesses** (76.3% medium or high need).



	Definition	No Need	Low Need	Medium Need	High Need
<b>Existing business</b>	Retention / expansion of existing businesses	3.3%	10.0%	40.0%	46.7%
<b>Training</b>	Workforce training programs	3.3%	9.8%	45.9%	41.0%
<b>New business</b>	Attraction of new businesses	5.0%	15.0%	35.0%	45.0%
<b>Entrepreneurship</b>	Entrepreneurship programs	1.7%	20.3%	50.8%	27.1%
<b>Loans</b>	Working capital loans for businesses	3.4%	20.3%	49.2%	27.1%

	<b>Definition</b>	<b>No Need</b>	<b>Low Need</b>	<b>Medium Need</b>	<b>High Need</b>
<b>Incubators</b>	Business incubators / coworking space	7.0%	24.6%	43.9%	24.6%
<b>Tech Asst.</b>	Small business technical assistance programs and workshops	5.1%	28.8%	44.1%	22.0%
<b>Rehab</b>	Façade improvement / building rehabilitation / signage	8.3%	30.0%	43.3%	18.3%
<b>Micro Enterprise</b>	Assistance for micro-enterprises (5 or fewer employees)	10.2%	32.2%	42.4%	15.3%
<b>Biz Parks</b>	Development of business parks	13.8%	39.7%	31.0%	15.5%

**Data Source:** CEW Advisors, Inc. Housing & Community Development Survey

# MA-50 Needs and Market Analysis Discussion

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

For this section, the city is defining concentration to mean any area of the city where residents experience any housing problem(s) at a rate of 10 percentage points or more than the rate of the city as a whole. Also, to clarify, among the 32,596 households in the city, there are 180 households with substandard housing, 275 households that are overcrowded, and 30 households that are severely overcrowded, around two percent of all households. However, there are 8,835 households that have a housing cost burden or a severe housing cost burden. When “housing problems” are discussed, housing “affordability” is the chief concern.

The following census tracts show disproportionately high percentages of housing problems compared to the city as a whole:

- 44007013500: high proportion of owners experiencing 1 or more housing problems.
- 44007013701: high proportion of renters experiencing 1 or more housing problems.
- 44007014300: high proportion of renters experiencing 1 or more housing problems.
- 44007014501: high proportion of renters experiencing 1 or more housing problems.
- 44007014502: high proportion of owners experiencing 1 or more housing problems.

MA-50 Figure 1: Housing Problems by Census Tract								
	Owners				Renters			
# conditions:	1	2	3	4	1	2	3	4
Cranston	27.5%	0.3%	0.0%	0.0%	42.1%	0.9%	0.7%	0.0%
44007013400	18.3%	0.0%	0.0%	0.0%	40.1%	7.0%	0.0%	0.0%
44007013500	<b>41.1%</b>	0.0%	0.0%	0.0%	43.1%	0.0%	2.3%	0.0%
44007013600	26.7%	0.0%	0.0%	0.0%	26.9%	0.0%	0.0%	0.0%
44007013701	13.7%	0.0%	0.0%	0.0%	<b>60.7%</b>	4.2%	0.0%	0.0%
44007013702	35.8%	0.0%	0.0%	0.0%	36.4%	0.0%	0.0%	0.0%
44007013800	25.8%	1.8%	0.0%	0.0%	35.0%	0.0%	8.2%	0.0%
44007013900	18.3%	0.0%	0.0%	0.0%	47.8%	0.0%	0.0%	0.0%
44007014000	23.0%	0.0%	0.0%	0.0%	45.5%	2.1%	0.0%	0.0%
44007014100	36.4%	0.0%	0.0%	0.0%	41.9%	0.0%	0.0%	0.0%
44007014200	28.1%	1.1%	0.0%	0.0%	25.6%	0.0%	0.0%	0.0%
44007014300	15.6%	0.0%	0.0%	0.0%	<b>55.5%</b>	0.0%	0.0%	0.0%
44007014400	21.2%	0.6%	0.0%	0.0%	45.8%	0.0%	0.0%	0.0%
44007014501	15.6%	0.6%	0.0%	0.0%	<b>100.0%</b>	0.0%	0.0%	0.0%

44007014502	49.7%	0.0%	0.0%	0.0%	23.4%	1.5%	0.0%	0.0%
44007014600	32.0%	0.4%	0.0%	0.0%	21.3%	0.0%	0.0%	0.0%
44007014700	34.1%	0.0%	0.0%	0.0%	49.2%	0.0%	0.0%	0.0%
44007014800	32.5%	0.0%	0.0%	0.0%	32.0%	0.0%	0.0%	0.0%

Data Source: 2019-2023 ACS – B25123

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

As shown in NA-30, the following census tracts have a disproportionate population of certain racial or ethnic groups as defined by HUD (being more than 10 percentage points greater than the population of the city at large).

- 44007013600: high proportion of Hispanic/Latino residents and those identifying as “other” race/ethnicity.
- 44007014100: high proportion of Hispanic/Latino residents.
- 44007014200: high proportion of White residents.
- 44007014400: high proportion of White residents.
- 44007014501: high proportion of White residents.
- 44007014600: high proportion of White residents.
- 44007014700: high proportion of Hispanic/Latino residents and those identifying as two or more races.

Using CHAS census-tract level data, a definition of low-income as less than 50% HAMFI, and a definition of concentration as being 10 percentage points higher than the jurisdiction at large, we see the following two census tracts have a concentration of low-income households.

- 44003021002
- 44003021502
- 44003021902
- 44003022000

Combining these three metrics, we get the following table showing which census tracts have a concentration of housing problems, a disproportionate population of one or more racial or ethnic groups, or a concentration of households earning less than half the area median household income.

Thus, we see tracts 44007013400, 44007013702, 44007013800, 44007013900, 44007014000, and 44007014800 meet none of these descriptions.

Tracts 44007013600 44007014100, 44007014200, 44007014400, 44007014600, 44007014700 have either a concentration of one or more racial/ethnic groups or low-income households, but no housing problems.

Of the census tracts with concentrations of housing problems, 44007013500 has a concentration of low-income households, 44007014501 has a concentration of White households, and tracts 44007014300 and 44007014300 have a racial/ethnic makeup and percentage of low-income households in line with the city as a whole.

	Concentration of Housing Conditions	Disp. White	Disp. Latino	Disp. Multiracial or Other	Disp. Low Income
44007013400					
44007013500	x				x
44007013600			x	x	
44007013701	x				
44007013702					
44007013800					
44007013900					
44007014000					
44007014100			x		x
44007014200		x			
44007014300	x				
44007014400		x			
44007014501	x	x			
44007014502	x				
44007014600		x			x
44007014700			x	x	x
44007014800					

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

There is not a strong correlation between housing problems and racial/ethnic minorities, or low-income households.

*Are there any community assets in these areas/neighborhoods?*

These neighborhoods are primarily residential.

*Are there other strategic opportunities in any of these areas?*

These neighborhoods are primarily residential.

# 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.



Data Source: 2019-2023 ACS – B28004

Broadband internet is increasingly necessary to fully participate in the 21st century. It enables access to education and employment, healthcare, news and entertainment, facilitates economic

development, and allows people to better connect with family and friends. More and more essential services are transitioning to exclusively online enrollment portals. Without access to the internet, individuals are not able to fully participate in society.

According to the 2023 ACS 5-Year Estimates, 90.4% of households in Cranston have a broadband internet subscription. There are 94 households that are still using dial-up internet, and 3,049 households do not have an internet subscription.

The State of Rhode Island released its Digital Equity Plan in March of 2024. It is receiving \$108.7 million dollars to improve broadband infrastructure. The Rhode Island Commerce Corporation is charged with implementing the Broadband Equity, Access, and Deployment (BEAD) program. The funding will be used to support equitable broadband infrastructure deployment and digital equity throughout the state. There is a commitment to realizing the goals of universal access, affordability, and digital inclusion, as set forth by the federal government.

In May 2024, ConnectRI released its broadband maps for the state so all Rhode Islanders can view their locations and confirm the quality of service as described in these draft maps. If residents or businesses have any broadband service issues, this map allows them to report those issues for Commerce RI to compile the data and identify areas of the state with the highest level of need. At the end of the process, the locations that are unserved or underserved on the broadband map will be eligible for broadband infrastructure investment.

Based on the available information to date, Cranston has nearly 100% coverage, with download speeds of at least 100 Mbps and upload speeds of at least 20 Mbps.

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

The city of Cranston is served by multiple broadband service providers. There is virtually 100% coverage of broadband throughout the entire City, primarily by three providers:

- Cox Communications offers high-speed cable internet
- Verizon offers high-speed fiber internet and wireless internet
- AT&T offers wireless internet

While there appears to be almost universal coverage of broadband internet throughout the city, not all households are accessing broadband service, either through lack of interest or need, or because of the cost associated with accessing broadband internet service.

The Affordable Connectivity Program stopped accepting new applications and enrollments on February 8, 2024 and barring additional funding from Congress, April 2024 is expected to be the last month enrolled households will receive the full benefit. It is likely that many of these households that were enrolled in the Affordable Connectivity Program may need to discontinue their broadband internet service due to the increase in cost. There is another program called Lifeline that is offered through the Federal Communications Commission. However, the program only offers a discount of \$9.25 per month to qualifying families earning below 200% of the Federal Poverty Level.

More competition may be important to put downward pressure on the cost of broadband internet, particularly now that the Affordable Connectivity Program has ended.

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

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

Based on the 2022 Hazard Mitigation Plan for the City of Cranston, the city faces several significant increased natural hazard risks due to climate change. The plan explicitly addresses climate change as an ongoing amplifier to identified natural hazards rather than as an independent hazard. According to the plan, "extreme weather events have become more frequent during the past half-century, and this trend is projected to continue" (p. 55).

The specific increased risks associated with climate change include:

1. More frequent and intense precipitation events, which are likely to cause more frequent flooding episodes, including riverine flooding, street/urban flooding, and flash flooding. The plan notes that rain events may intensify and cause additional stress to the city's stormwater systems and natural floodplains (pp. 30, 55).
2. Longer periods of drought, which may affect water availability to residents and increase the threat of brushfires. The plan cites studies indicating that "although precipitation is projected to increase throughout this century, it will be in the form of short duration, intense, and less frequent events," potentially leading to more frequent and intense droughts (p. 45).
3. More frequent extreme heat days and heat waves. The plan references studies projecting that "extremely hot days (over 90 degrees F) is projected to increase in New England" over the coming century (p. 37).
4. Increased intensity of hurricanes and nor'easters due to warming global air and water temperatures (pp. 25, 33).
5. Changes to winter weather patterns, with potentially fewer snowstorms but more intense blizzards when they do occur, as well as more ice events as warming temperatures may cause precipitation to fall as freezing rain rather than snow (pp. 31, 33).

The plan recognizes that "changing climate patterns globally and in Rhode Island will worsen the effects of natural hazards and affect future planning and mitigation efforts" (p. 55). It also acknowledges that while the timing of these changes is debatable, "there is certainty within the state that municipalities need to be prepared" (p. 56).

The city has already begun to incorporate climate change considerations into its planning through various mitigation actions, including elevating pump station generators, improving stormwater management, promoting wetland restoration, and enhancing public education about hazard preparedness.

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

The vulnerability of housing occupied by low- and moderate-income households to climate change risks in Cranston can be assessed through examination of demographic data, housing locations, and infrastructure conditions presented in the Hazard Mitigation Plan.

### **Demographic and Housing Vulnerability Factors:**

1. **Aging Housing Stock:** About 30% of Cranston's housing units were built before 1939 (p. 5). Older housing is typically less resilient to extreme weather events and often occupied by lower-income residents due to affordability.
2. **Public/Assisted Housing Locations:** The plan identifies several public/assisted senior housing facilities and private housing developments that serve vulnerable populations, including: Randall Manor, Jennings Building, Arlington Manor, Knightsville Manor, Hall Manor, Budlong Manor, and Park Avenue Apartments.
3. **High Density Residential Properties in Floodplains:** The plan specifically identifies multiple apartment complexes located within floodplains, including:
  - Willow Brook Apartments (252 units)
  - Riverbend Apartments (168 units)
  - Pocasset Apartments (120 units)
  - Garden Village Apartments (95 units)
  - Several other multi-unit developments (pp. 74-75)

#### **Geographic and Infrastructure Analysis:**

The plan provides a geographic analysis of flood-prone areas that can be correlated with housing patterns:

1. **Flood-Prone Neighborhoods:** Several densely populated areas are identified as flood-prone, including Lower Eden Park Neighborhood, Meshanticut Area, Parkview Area, and Auburn Area.
2. **Infrastructure Vulnerabilities:** The plan notes that eastern Cranston is more densely developed and urban in nature compared to western Cranston (p. 4). This eastern section has more impervious surfaces which "intensify the flood risk" (p. 67) and is where the "greatest concentration of residential housing units is located" (p. 5).
3. **Stormwater Management Issues:** Areas with inadequate stormwater infrastructure are identified, which disproportionately impact residents who lack resources to implement personal flood mitigation measures (pp. 69-72).
4. **Property Values at Risk:** The plan estimates that residential properties worth approximately \$132,947,500 are located within Special Flood Hazard Areas (p. 61), representing 586 parcels.
5. **Transportation Vulnerabilities:** The plan notes that during flooding, "access to private properties is severely limited, pedestrian access through the public way is impossible" (p. 93), which particularly impacts residents without personal vehicles.

# Strategic Plan

## SP-05 Overview

### Strategic Plan Overview

The Strategic Plan section identifies priorities, objectives, strategies, and projected outcomes that the city will seek to accomplish over the next five years. The strategies developed within this Plan focus on housing, homelessness, special needs populations, community development, and economic development. The Community Development Block Grant program was established by Congress with three specific statutory objectives to create viable urban communities:

- (1) Provide Decent Housing
- (2) Create a Suitable Living Environment
- (3) Expand Economic Opportunities.

There is a great amount of flexibility within each of these objectives for the city to identify eligible activities that are most relevant to the specific conditions and needs that exist in Cranston. In addition to the eligibility requirement, all activities must meet at least one of three national objectives:

- (1) Benefit to low- to moderate-income individuals
- (2) Elimination of slums or blight
- (3) Responding to an urgent need

The primary goal of the CDBG program is to benefit low- to moderate-income individuals. As such, the City of Cranston focuses its annual allocations to improving the lives and living conditions of the city's low- and moderate-income residents. Through the broad-based consultation and citizen participation process described above, key themes emerged which were notable areas of almost universal agreement. The primary areas of community needs articulated in the Needs Assessment above are as follows:

- **Housing Affordability:** inclusive of affordable homeownership and affordable rental housing
- **Housing Rehabilitation:** including roof repairs, peeling paint, damaged siding, boiler replacements, etc.
- **Supportive Housing Needs:** particularly for seniors, individuals with disabilities, and victims of domestic violence
- **Homelessness:** with the dramatic increase in rental costs, the city and state has seen homelessness increase 121% over 4 years. There were 110 sheltered persons and another 16 unsheltered persons as of the 2024 PIT count in and around the Cranston area as of the 2024 PIT Count.
- **Facility Improvements:** improvements to facilities that provide services to the city's low- and moderate-income residents, renovations for aging public buildings, expanded recreational facilities, development of inpatient substance use treatment facilities, and affordable childcare facilities.
- **Infrastructure Improvements:** street and sidewalk repairs, sewer and stormwater drainage improvements, public parks and recreation facilities
- **Public Services:** including programs and services for seniors, afterschool and summer recreation programs for children and youth, affordable childcare, healthcare, mental health

and behavioral health programs, emergency food assistance, homelessness services, and transportation support

Over the next five years the City of Cranston, in partnership with other key community partners, plans to allocate resources to preserve and expand affordable housing options, improve public facilities and public infrastructure, increase income opportunities, and provide critical supportive services to Cranston low- and moderate-income residents and targeted priority populations based on the most significant demonstrated needs. Given the limited resources that the city receives annually through the Community Development Block Grant program, the Community Development Department will seek to develop and expand partnerships whenever possible to maximize the funding available and leverage additional funding to support the city's goals.

# SP-10 Geographic Priorities – 91.215 (a)(1)

## Geographic Area

Table 2 - Geographic Priority Areas	
<b>Area Name:</b>	Citywide
<b>Area Type:</b>	Local Target Area
<b>Other Target Area Description:</b>	
<b>HUD Approval Date:</b>	
<b>% of Low/ Mod:</b>	
<b>Revital Type:</b>	Comprehensive
<b>Other Revital Description:</b>	
<b>Identify the neighborhood boundaries for this target area.</b>	This area encompasses all CDBG-eligible areas of the city.
<b>Include specific housing and commercial characteristics of this target area.</b>	Low- and moderate-income areas are located throughout the city. The housing and commercial characteristics represent the city as a whole as described above.
<b>How did your consultation and citizen participation process help you to identify this neighborhood as a target area?</b>	Many agencies and the community were consulted as part of the Consolidated Plan process. It was clear through these discussions that the community needs described above were not limited to specific areas of the city but are prevalent throughout the city.
<b>Identify the needs in this target area.</b>	The needs of the city are identified in the Needs Assessment section of the Consolidated Plan.
<b>What are the opportunities for improvement in this target area?</b>	Immediate opportunities for improvements are defined in the projects included in Section AP-38 of the Annual Action Plan.
<b>Are there barriers to improvement in this target area?</b>	Barriers to improvements include insufficient funds, barriers to affordable housing (including the high cost of real estate) and others described throughout the Plan.

## General Allocation Priorities

*Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA)*

The City of Cranston will take a holistic citywide view as it allocates CDBG investments. This is due to the city's LMI households being dispersed throughout the city. The city is committed to community development investments throughout the city as required, subject to funding limitations and CDBG program requirements. Public service activities are eligible to all low- and moderate-income Cranston residents served through partnerships with non-profit organizations. Housing rehabilitation funds are expended throughout the City, based on the qualification of low- and moderate-income applicants, and subject to deed restrictions specifying affordability requirements. Similarly, funds to support the development of affordable housing will serve low- and moderate-income persons throughout the City, based on real estate opportunities and partnership agreements with non-profit housing developers. Finally, any public facility and infrastructure improvements will be based on evaluation of LMI area benefits.

# SP-25 Priority Needs - 91.215(a)(2)

## Priority Needs

<b>1</b>	<b>Priority Need Name</b>	Affordable Housing Options
	<b>Priority Level</b>	High
	<b>Population</b>	<p>Income Level:</p> <ul style="list-style-type: none"> <li>• Extremely Low</li> <li>• Low</li> <li>• Moderate</li> </ul> <p>Family Types:</p> <ul style="list-style-type: none"> <li>• Large Families</li> <li>• Families with Children</li> <li>• Elderly</li> <li>• Public Housing Residents</li> </ul> <p>Homeless:</p> <ul style="list-style-type: none"> <li>• Chronic Homeless</li> <li>• Individuals</li> <li>• Families with Children</li> <li>• Veterans</li> <li>• Victims of Domestic Violence</li> </ul> <p>Non-Homeless Special Needs:</p> <ul style="list-style-type: none"> <li>• Elderly</li> <li>• Frail Elderly</li> <li>• Persons with Physical Disabilities</li> </ul>
	<b>Geographic Areas Affected</b>	Citywide
	<b>Associated Goals</b>	<p>Housing Rehabilitation</p> <p>Acquisition for Rehabilitation</p> <p>First Time Homebuyers Assistance</p>
<b>Description</b>	<p>Cranston’s Low- and Moderate-Income households need access to high quality, affordable housing options through the creation of new affordable housing units, conversion of existing market rate units to affordable units, the preservation of existing affordable housing, and the rehabilitation of owner-occupied and rental housing. As discussed in the Needs Assessment sections, nearly one-third of all households in Cranston are cost burdened and residents struggle with finding affordable units. The high percentage of older housing in Cranston is a contributing factor in the ability of many homeowners to be able to continue to afford to remain in their homes. Residential rehabilitation and the addition of new affordable units will help address these needs. There is also the need to make in-home modification to assist residents with mobility challenges to ensure they can live in their homes longer. These modifications can include handrails, ramps, wider doorways, grab-bars, etc.</p>	

	<b>Basis for Relative Priority</b>	Needs Assessment and Market Analysis both demonstrate that housing cost burden is of primary concern in the city. The increasing cost of housing and the limited supply of affordable housing units was a nearly universal concern in conversations with Cranston residents. Additionally, consultation with community organization, service providers, neighborhood associations, and online survey results all demonstrate that additional affordable housing is a priority.
2	<b>Priority Need Name</b>	Public Services
	<b>Priority Level</b>	High
	<b>Population</b>	Income Level: <ul style="list-style-type: none"> <li>• Extremely Low</li> <li>• Low</li> <li>• Moderate</li> </ul> Family Types: <ul style="list-style-type: none"> <li>• Large Families</li> <li>• Families with Children</li> <li>• Elderly</li> <li>• Public Housing Residents</li> </ul> Homeless: <ul style="list-style-type: none"> <li>• Chronic Homeless</li> <li>• Individuals</li> <li>• Families with Children</li> <li>• Chronic Substance Abuse</li> <li>• Veterans</li> </ul> Non-Homeless Special Needs: <ul style="list-style-type: none"> <li>• Elderly</li> <li>• Frail Elderly</li> <li>• Victims of Domestic Violence</li> <li>• Limited English Proficiency</li> </ul>
	<b>Geographic Areas Affected</b>	Citywide
	<b>Associated Goals</b>	Public Services

	<b>Description</b>	Cranston has a strong, capable network of providers serving the city's low- and moderate-income population and those who are homeless or at risk of homelessness. The city aims to provide comprehensive community services to meet the basic subsistence, health and wellness, recreational, artistic, cultural, and developmental needs of individuals and families to improve and enrich their lives, move them out of economically vulnerable situations, and promote self-sufficiency. The public services offered by the network of provider organizations supports the basic needs of low- and moderate-income Cranston residents and the special needs populations. The spectrum of services that are needed in the City is broad and includes emergency basic needs for those in crisis, services for individuals suffering from drug or alcohol addiction or mental health or behavioral health issues, childcare, senior services, youth services, programs for victims of domestic violence, persons with disabilities, homeless individuals and families, and others.
	<b>Basis for Relative Priority</b>	Comments from citizen participation community meetings and focus groups and consultation with community-based organizations and public services agencies are the basis for relative priority and for the selection of specific public services. The provision of public services to Cranston's most vulnerable population is a core tenet of the city's Community Development Program. The funding for public services is maximized with every annual allocation. Public service agencies occasionally have a waitlist for services, and several have seen a considerable increase in the demand for their services over the past several years. Although the demand for these services is increasing, providers are challenged by decreasing state, federal and local funding. The investment of CDBG resources plays an important role in leveraging additional funding sources to maximize the number of beneficiaries served by each program.
<b>3</b>	<b>Priority Need Name</b>	Economic Development
	<b>Priority Level</b>	High
	<b>Population</b>	Income Level <ul style="list-style-type: none"> <li>• Extremely Low</li> <li>• Low</li> <li>• Moderate</li> </ul> Non-Housing Community Development
	<b>Geographic Areas Affected</b>	Citywide
	<b>Associated Goals</b>	Economic Development

	<b>Description</b>	The City is committed to ensuring that Cranston residents benefit from expanded economic opportunities and works to increase the local economy's capacity to generate income and wealth for residents, particularly for low- and moderate-income individuals and families. There is need amongst the city's small business community and microenterprises for low-interest financial assistance and business counseling to ensure they can access new markets, grow their businesses, and provide employment opportunities to city residents. This can strengthen locally owned businesses, keeping dollars in the local economy.
	<b>Basis for Relative Priority</b>	The city wants to create a desirable place to do business and provide the resources and support to ensure that small businesses can flourish in the city. Through consultation, ongoing support for current and new microenterprises and small businesses is warranted and will be a valuable contribution to the city's tax base. The city's encouragement of entrepreneurship and of the city's role in building opportunities that support entrepreneurs and their small businesses is crucial for ongoing business development.
4	<b>Priority Need Name</b>	Public Facility and Infrastructure Improvements
	<b>Priority Level</b>	High
	<b>Population</b>	Income Level <ul style="list-style-type: none"> <li>• Extremely Low</li> <li>• Low</li> <li>• Moderate</li> </ul> Non-Housing Community Development
	<b>Geographic Areas Affected</b>	Citywide
	<b>Associated Goals</b>	Public Facility and Infrastructure Improvements
	<b>Description</b>	Cranston has a strong, capable network of providers serving the City's low- and moderate-income population and those who are homeless or at risk of homelessness. Municipal services, public library, senior center, and public service agencies help meet the educational, recreational, health, and nutritional needs of Cranston youth, families and seniors. The physical condition of some of the structures which house community organizations and social service agencies need upgrades or modernization to better serve Cranston residents. Additionally, there is a desire to make public buildings more accessible for individuals with disabilities. City investments in maintaining well-used and aging infrastructure is also necessary to improve the living environment of Cranston residents. Repairs to streets, roads, sidewalks, bridges, sewers, stormwater systems are essential for high quality city services and can assist in expanding economic development opportunities.

<p><b>Basis for Relative Priority</b></p>	<p>High quality public services require high quality public facilities. Consultation with provider agencies and community residents, and online survey results showed that public facility improvements and increased capacity at existing facilities is a priority for the community. Many types of facilities were identified as important for Cranston residents, including the senior center, childcare facilities, recreation centers, and healthcare facilities, etc. The online survey results rank street and sidewalk improvements as one of the most important community development needs in the city. Surveys of business owners also ranked infrastructure improvements as a critical need. Many local roads and pedestrian facilities are not in compliance with accessibility requirements for persons with disabilities. Cranston’s Comprehensive Plan lists investments in infrastructure as a priority initiative as well</p>
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**Table 3 – Priority Needs Summary**

**Narrative (Optional)**

During the development of the 2025-2029 Consolidated Plan, CEW Advisors, Inc., on behalf of the City of Cranston, facilitated several community meetings and focus groups, conducted one-on-one consultation interviews and, and solicited input from the community, stakeholder organizations, and community groups to identify priority needs. The Priority Needs for Cranston’s Consolidated Plan are based on the preceding Needs Assessment and Market Analysis, as well as information gleaned from the Housing and Community Development Survey, public input, and stakeholder input. This input served as the foundation for the development of the Consolidated Plan and guides the Strategic Plan. These priority needs are integrated into the Goals of this Consolidated Plan and will be addressed systematically through a series of projects and actions over the next five years.

The City of Cranston defines “high priority need” to include activities, projects, and programs that will be funded with federal funds, either alone or in combination with other public or private investments, to address the described needs during the Strategic Plan program years. Regarding “low priority needs,” these are activities, projects, or programs that may be funded with federal funds, either alone or in combination with other public or private investments, if additional federal funding becomes available during the strategic plan program years.

# SP-30 Influence of Market Conditions – 91.215 (b)

## Influence of Market Conditions

Table 4 – 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 City of Cranston only receives CDBG funds which cannot be used for Tenant-Based Rental Assistance. The City of Cranston will not use funds for this housing type; however, there is a significant need for Cranston residents to reduce their housing costs.
TBRA for Non-Homeless Special Needs	The City of Cranston only receives CDBG funds which cannot be used for Tenant-Based Rental Assistance. The City of Cranston will not use funds for this housing type; however, there is a significant need for Cranston residents to reduce their housing costs.
New Unit Production	In Rhode Island, there has been a legacy of underinvestment in new housing production. This has led to the lowest-income renters being forced to rent homes beyond what they can afford. Nearly one-third of all households in Cranston are cost burdened. The city only receives CDBG funds which can only be used by a Community Based Development Organization for new unit production, and only under certain circumstances per CDBG regulations. There are no existing CBDOs that operate in Cranston. The city will not use CDBG funds for this housing type; however, will invest CDBG for acquisition, demolition, clearance, and remediation to prepare housing and/or parcels for new housing development in partnership with an affordable housing developer.
Rehabilitation	The age and physical condition of the city’s housing stock are the primary influencing factors for unit rehabilitation. Almost 78% of Cranston existing housing stock was built before 1980, and only 7% of the total housing units have been built since 2000. The age of the housing stock has implications on the need for rehabilitation and lead abatement. As the City of Cranston is fairly built-out, there is only limited available land for new construction.
Acquisition, including preservation	The acquisition cost is the primary market factor for the viability of converting existing market-rate units to affordable housing units. The rising cost of housing requires strategic intervention by the city and state to maintain and increase high quality, affordable housing in Cranston. There is an insufficient amount of affordable housing to meet the demands of Cranston’s LMI households. Acquiring market-rate housing to convert to affordable units is largely cost prohibitive in the current real estate market. When feasible, the city will use CDBG funds for acquisition of a property or lot for redevelopment, preservation, and/or conversion. While there is a market for historical properties, their renovation or re-purposing costs are prohibitive.

# SP-35 Anticipated Resources - 91.215(a)(4), 91.220(c)(1,2)

## Introduction

CDBG is the only formula grant received by the City of Cranston. The city’s allocation for FY 2024 was \$1,086,719. Over the next five years, the City of Cranston anticipates receiving approximately \$5,398,197 in CDBG funds. This estimate is based on the actual amount of CDBG funds received over the previous 5 years. An additional \$100,000 in Program Income is estimated to be utilized for the 2025 Program Year to address priority needs and goals, resulting in a total 5-year budget of \$5,498,197.

The 2025-2026 program year for the City of Cranston’s Community Development Block Grant program starts on 7/1/2025 and ends on 6/30/2026. It is the first Annual Action Plan related to the goals outlined in the City's 2025-2029 Consolidated Plan.

The City has not yet received its allocation for the 2025-2026 Program Year. As such, the information contained in this section is an estimate. If the actual amount awarded differs from this estimate, the city will use the following methodology to adjust the project amounts from these estimates to actual amounts. For any change in funding, the awarded amount will be prorated in the same ratios based on the difference between expected amount and actual amounts.

## Anticipated Resources

**Table 5 - 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	Public – Federal	Admin and Planning Acquisition Economic Development Housing Public Improvements Public Services	\$1,084,352	\$100,000		\$1,184,352	4,313,845	CDBG funds will be used for a variety of projects, including administration, housing rehabilitation, acquisition, economic development, public facility, infrastructure improvements and public services.

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

There are no matching requirements for CDBG funds. CDBG funds will be used to support public service agencies and supplement additional federal and philanthropic funds received by the agencies to provide critical services to the city’s low- and moderate-income population. Public facility projects for non-profits are generally subsidized by the non-profit’s resources. The City’s funds available for infrastructure, from bonds and taxes, vary annually.

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

The building that houses the Hope Alzheimer's Center, a subrecipient agency, is owned by the City.

The City has previously acquired, and intends to acquire, vacant houses to rehabilitate them for subsequent sale to an income eligible household, as part of the goal of creating and providing affordable housing.

**Discussion**

The resources available to the city to meet its residents’ needs is always insufficient. Funding subsidies for the range of categories of affordable housing, public services, infrastructure, public facilities, and economic development have few other resources. This dependence on the “usual funding sources” creates a vulnerability for those agencies and organizations that rely on them. The city is no exception. The bulk of community development funding for the city is from CDBG funds. The city’s funding sources will need to become more diversified for it to continue to support these types of community activities to be available for its citizens.

## SP-40 Institutional Delivery Structure – 91.215(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 6 - Institutional Delivery Structure			
Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
City of Cranston	Government	Non-homeless special needs neighborhood improvements public facilities	Jurisdiction
AIDS Care Ocean State	Nonprofit Organization	Affordable Housing: Rental Non-Homeless Special Needs Community Development: Public Services	State
RI Coalition to End Homelessness	Non-profit organizations	Homelessness Planning	State
Crossroads RI	Nonprofit Organization	Affordable Housing: Rental Homelessness Non-Homeless Special Needs Community Development: Public Services	State
Comprehensive Community Action Program	Non-profit organizations	Non-homeless special needs public services	Region
Day One	Subrecipient	Non-homeless special needs public services	Region
Hope Alzheimer's Center	Subrecipient	Non-homeless special needs public services	Region
Cranston Housing Authority	PHA	Public Housing	Jurisdiction
Cranston Senior Services	Government	Non-homeless special needs public facilities public services	Jurisdiction
Elizabeth Buffum Chace Center	Subrecipient	Non-homeless special needs public services	Region

<b>Responsible Entity</b>	<b>Responsible Entity Type</b>	<b>Role</b>	<b>Geographic Area Served</b>
Cranston Public Schools	Government	Non-homeless special needs public services	Jurisdiction
Blessed Mother Mary Food Pantry, Inc.	Subrecipient	Non-homeless special needs public services	Region
Sstarbirth	Subrecipient	Non-homeless special needs public services	Region
Cranston YMCA	Subrecipient	Non-homeless special needs public services	Jurisdiction
Ocean State Center for Independent Living	Nonprofit Organization	Non-Homeless Special Needs Community Development: Public Services	State
RI Continuum of Care	Other: Continuum of Care	Homelessness Planning	State
Rhode Island Housing and Mortgage Finance Corporation	Government	Affordable Housing: Ownership Affordable Housing: Rental	State

### **Assess of Strengths and Gaps in the Institutional Delivery System**

**Strengths:** The City of Cranston manages the institutional delivery structure surrounding the acceptance and allocation of federal entitlement grant funds for Consolidated Programs. The City conducts public outreach with various institutions in the city and its residents. The goals and objectives of the Strategic Plan could not have been formulated without their input. Generally, subrecipients comply with CDBG regulations, and cooperate in the monitoring and administration of the program.

**Gaps:** The amount of funds available to meet the needs of subrecipients is always insufficient. Most subrecipients are not awarded the amount they initially request. Subrecipients new to the CDBG program need to be made aware of the program requirements at the beginning of the year and monitored more extensively during the year to ensure compliance. In addition, the City’s institutional structure ensures that no one or more agency is involved in fulfilling each institutional role. Public housing is provided through the Cranston Housing Authority; the needs of the homeless are addressed by the RI Continuum of Care; non-homeless special needs are addressed primarily by the local community-based organizations which receive CDBG funds to carry out eligible activities; planning and administration are provided by the City. Affordable housing is addressed by the City’s housing programs.

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

**Table 7 - Homeless Prevention Services Summary**

<b>Homelessness Prevention Services</b>	<b>Available in the Community</b>	<b>Targeted to Homeless</b>	<b>Targeted to People with HIV</b>
<b>Homelessness Prevention Services</b>			
Counseling/Advocacy	X	X	X
Legal Assistance	X		
Mortgage Assistance	X		
Rental Assistance	X		
Utilities Assistance	X		
<b>Street Outreach Services</b>			
Law Enforcement	X		
Mobile Clinics			
Other Street Outreach Services	X		
<b>Supportive Services</b>			
Alcohol & Drug Abuse	X		
Child Care	X		
Education	X	X	
Employment and Employment Training	X		X
Healthcare	X		X
HIV/AIDS	X		X
Life Skills	X		
Mental Health Counseling	X		X
Transportation	X		
<b>Other</b>			
Other: Food & Shelter	X	X	

**Describe how the service delivery system including, but not limited to, the services listed above meet the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth)**

Much direct work is done through the State’s CoC. The homeless are registered with the CoC and their needs are determined. The State proposes to increase the supply of and access to permanent housing that is affordable to very low income households; to create or subsidize affordable housing for households with little or no income; to partner with PHAs and the VA for homeless veterans. Crossroads Rhode Island, part of the state's Continuum of Care, offers essential programs such as housing, emergency shelter, and education and employment training.

Food assistance through the Supplemental Nutritional Assistance Program (SNAP) is one of the most widely utilized services in the state. There were 142,270 SNAP Benefit recipients in Rhode Island (13% of the total population) as of 2022, helping families with their basic nutritional needs, including families with children and seniors.

The Comprehensive Community Action Program offers numerous programs including emergency food assistance, housing support, emergency financial assistance, and referral services; income-based rental housing and participates in home renovation projects for low-income families; low-cost furniture to low-income individuals; medical care, including mental health and behavioral health services; and support for unemployed and underemployed TANF recipients with job training, work readiness, and supportive services.

Education and employment training programs are available through the public workforce system, accessible at the American Job Centers located in Providence and West Warwick.

**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**

The strengths of the service delivery system are detailed above. The network of service providers in and around Cranston include a variety of agencies that meet many needs of special needs populations. The current delivery structure has the resources to meet many of the needs of the community and is strengthened by the dynamic and committed service providers in the city.

The gaps in service are primarily related to the lack of resources to scale programs to meet the growing need of special needs populations, especially the growing homeless population, seniors, and individuals with disabilities. The City of Cranston and local service providers achieve a comprehensive approach to homeless prevention, street outreach, and supportive services. However, day programming that engages homeless individuals in workforce development and job preparation, GED and literacy training, substance abuse recovery programs, and mental health services, while available, has been cited as inadequate and inefficient. This may also be emblematic of the resistance to treatment exhibited by many chronically homeless individuals more than program design. As the homeless prevention system moves further into permanent supportive housing, additional resources for rental assistance will likely be required. Better coordination of street outreach is necessary to avoid duplication.

Additionally, organizations that provide health services and mental health services that are reimbursed by Medicaid and/or Medicare are often challenged due to reimbursement rates being inadequate to cover the full cost of providing services. Securing funding for supportive services is cited as one of the greatest organizational challenges by the state's homeless providers. Although there are transportation services available in the community, organizations serving seniors, persons with disabilities, and individuals recovering from substance abuse note that the current demand exceeds the available capacity, and the current provider of medical transportation for the state is "abysmally inefficient."

While the service delivery system in Cranston is robust and services are coordinated through the collaboration of service providers, the city recognizes the need for more deeply subsidized affordable housing and Permanent Supportive Housing in order to end homelessness. In recent years, the State has more fully embraced the Housing First model to address homelessness, providing permanent housing as quickly as possible along with the appropriate wraparound services for them to maintain their housing. As such, the number of permanent supportive housing beds has grown over the past several years. As the homeless prevention system moves further into permanent supportive housing, additional resources for rental assistance will likely be required.

Further, the COVID-19 pandemic-era supports and increases to SNAP assistance ended and that has created additional burdens for low-income individuals and families as inflation has

dramatically increased food prices over the past two to three years. Many seniors have stated that Social Security COLA increases are not keeping pace with the inflationary price increases for food and basic household items. The utilization of the various food pantries and meal sites across the city has increased as a result.

**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**

The city's strategy for overcoming gaps in the institutional structure and service delivery system focuses on developing relationships with community-based non-profits with a proven track record of public service delivery within our jurisdiction and providing resources to those agencies that have demonstrated capacity to expand their services to meet the needs of Cranston LMI residents. Coordinating services is one of the most efficient ways to use resources. Referrals by one local community-based organization for services provided only by another can efficiently utilize the resources of the community. As a strategy to overcome gaps in the service delivery system for the homeless population, the City supports the state's plan to end chronic homelessness. This plan's vision, in conjunction with the RI CoC, is to provide the City's residents with access to resources and support services needed to prevent and break the cycle of chronic homelessness.

# SP-45 Goals Summary – 91.215(a)(4)

## Goals Summary Information

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	Housing Rehabilitation	2025	2029	Affordable Housing	Citywide	Affordable Housing Options	CDBG: \$1,224,683	Homeowner Housing Rehabilitated: 125 Household Housing Unit
2	Acquisition for Rehabilitation	2025	2029	Affordable Housing	Citywide	Affordable Housing Options	CDBG: \$1,000,000	Homeowner Housing Rehabilitated: 5 Household Housing Unit
3	First Time Homebuyers Assistance	2025	2029	Affordable Housing	Citywide	Affordable Housing Options	CDBG: \$120,000	Direct Financial Assistance to Homebuyers: 50 Households Assisted
4	Public Services	2025	2029	Non-Homeless Special Needs	Citywide	Public Services	CDBG: \$824,730	Public service activities other than Low/Moderate Income Housing Benefit: 5,000 Persons Assisted
5	Public Facility and Infrastructure Improvements	2025	2029	Non-Housing Community Development	Citywide	Public Facility and Infrastructure Improvements	CDBG: \$1,000,000	Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit: 2,500 Persons Assisted

**Table 8 – Goals Summary**

## Goal Descriptions

1	<b>Goal Name</b>	Housing Rehabilitation
	<b>Goal Description</b>	Provide funding for rehabilitation and preservation of the existing housing stock in Cranston.
2	<b>Goal Name</b>	Acquisition for Rehabilitation
	<b>Goal Description</b>	Provide funding for the purchase of a vacant abandoned house for rehabilitation and subsequent sale to an income eligible household.
3	<b>Goal Name</b>	First Time Homebuyers Assistance
	<b>Goal Description</b>	Provide funding for either closing cost assistance or down payment assistance to income eligible first time homebuyers in Cranston.
4	<b>Goal Name</b>	Public Services
	<b>Goal Description</b>	Provide funding for non-homeless special needs and community development needs such as, but not limited to, health care, mental health services, youth programs, services for the elderly and/or disabled, heating assistance, food banks, transitional housing, and educational programs.
5	<b>Goal Name</b>	Public Facility and Infrastructure Improvements
	<b>Goal Description</b>	Provide funding for public facilities, infrastructure, or neighborhood revitalization that benefits low/moderate income people or low/moderate income areas, or to rehabilitate historical properties to prevent the spread of blight.

### **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)**

The demand for affordable housing in the city is significant, with almost one-third of all households being cost burdened. Through the city's renovation program, the city expects to assist up to 130 extremely low to moderate income families to maintain their homes or apartments. It is anticipated that 125 of these will be very low to moderate income homeowners with the balance of 5 assisted units representing very low to moderate income tenants within rental apartments.

The city works collaboratively with affordable housing developers to facilitate the production of new affordable housing units in the city or through conversion of existing market rate units to affordable housing. Approximately 30 new affordable housing units are anticipated to be developed through partnerships with affordable housing developers by providing funding and tax incentives and providing supporting documentation to help them leverage additional state affordable housing subsidies.

## **SP-50 Public Housing Accessibility and Involvement – 91.215(c)**

### **Need to Increase the Number of Accessible Units (if Required by a Section 504 Voluntary Compliance Agreement)**

The CHA is not under any Section 504 Compliance Agreement and does not need to increase the number of accessible units.

### **Activities to Increase Resident Involvements**

Residents are encouraged to become members of the Resident Advisory Board, which assists the housing authority in developing its PHA Plan. CHA convenes an annual meeting of the Resident Advisory Board to provide input and feedback from residents concerning its Public Housing Agency Plan.

### **Is the public housing agency designated as troubled under 24 CFR part 902?**

No.

### **Plan to remove the ‘troubled’ designation**

Not applicable.

# **SP-55 Barriers to affordable housing – 91.215(h)**

## **Barriers to Affordable Housing**

In general, public policies affecting the cost and production of affordable housing are governed by specific zoning by-laws. Cranston does not have inclusionary zoning, in which a percentage of housing developed in the marketplace is set aside for affordable use and is usually placed within mixed income developments. Cranston does allow accessory apartments which are particularly effective in enabling low-income elderly owners to generate income and continue living in the community, subject to strict limitations on the square footage of the main living area. Variances in the size of the area are subject to approval by the zoning board.

Western Cranston, where most available land is located, has zoning for larger lots due to the absence of sewers and/or public water service. Since larger lots are expensive, the associated development costs are higher and larger homes are usually built on large lots. The resultant high cost of the home effectively precludes the average first time homebuyer from purchasing the property to conform to affordability.

Sewer impact fees and sewer user fees have remained relatively constant over the last five years, after the sewer user fees had increased 10% during the previous five year period to finance wastewater treatment facility upgrades mandated by the State, which were completed in 2019.

Areas in Cranston are zoned to allow multi-family housing, and there has been significant multi-family development through the years.

It must be stated, however, that the foremost primary barriers to affordable housing are economic in nature. The generally accepted definition of affordability is for a household to pay no more than 30% of its annual income on housing, including utilities. The cost of housing is influenced by interest rates, land and construction costs, the real estate market, and regulatory costs. Recent studies over the past few years by the National Low Income Housing Coalition have indicated that the average hourly wage for the average renter in Rhode Island results in a cost burden in excess of the 30% definition of affordability. Moreover, similar recent studies by the Rhode Island Association of Realtors have indicated that the average renter's hourly wage would result in moderate to severe cost burdens if these renters were to purchase a house. The recent surge in real estate prices and rents has also adversely affected the ability not only to rent but also to buy a house. The unavoidable conclusion is that the average renter's hourly wage is insufficient to result in affordable housing, either by renting or by home ownership. Moreover, recent studies have also indicated that the wages of current homeowners have not kept pace with the sales prices of existing or new homes, resulting in potential cost burdens if current homeowners wish to buy and move into a different home, especially evident in today's housing market.

## **Strategy to Remove or Ameliorate the Barriers to Affordable Housing**

Cranston has no growth limitations, no tax policies affecting land, no zoning ordinances (other than those specifying lot sizes for lots that do not have public water service and/or public sewers), and no policies affecting the return on residential investment that are barriers to affordable housing.

The requirement for large lots in western Cranston is not going to change because of the absence of sewer connections and/or public water. Consequently, housing in this area will continue to be unaffordable for many households. Either wages must increase substantially enough, or rents or costs of homes must decrease in order for housing to become more affordable. Neither is likely to happen in today's housing market. The reality is that the economics of the real estate market will continue to result in high cost burdens and housing will remain unaffordable to a significant percentage of households.

In an effort to ameliorate some economic barriers to affordable housing, Cranston, through its CDBG funding, will continue to offer a housing rehabilitation program and first-time homebuyers' assistance to income eligible households. Additionally, the city can undertake the following actions to address barriers to affordable housing:

- Rehabilitate housing, upgrade infrastructure, and improve services necessary to increase the supply of safe, decent, and affordable housing for low-income households, including minority, persons with disabilities and large family households. The City of Cranston will continue to fund its Housing Rehabilitation Program, Public Infrastructure, Closing Cost and Down Payment Assistance Programs, and Emergency Rehabilitation Program.
- Continue to promote diversity of composition on all appointed Boards, Committees, Task Forces and Commissions that reflect the cultural, social, racial, economic, gender, health, disabilities, age, and other characteristics of the population. Continue to promote volunteerism and participation in community activities affecting housing.
- Improve City codes and ordinances in a manner that enhances affordability and accessibility; reasonably accommodates all who seek housing; and decrease unnecessary housing costs or construction delays by streamlining bureaucratic processes.
- Improve and increase enforcement and permitting processes to ensure all local, state and federal laws and other construction regulations related to accessibility are fully implemented, and that designers and builders of single-family homes and remodels are aware of programs of including accessibility features in projects that are not required to include them.
- Document, investigate, and monitor complaints of housing discrimination. Increase community awareness and knowledge of fair housing rights and responsibilities.
- Improve services and increase opportunities for the homeless and those threatened with homelessness, including minorities, the disabled and large family households.

## **SP-60 Homelessness Strategy – 91.215(d)**

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

As previously discussed, Cranston and the state have seen a dramatic increase in homelessness over the past several years, predicated on a rapid escalation of rental costs, a lack of rental assistance programs, and an insufficient supply of affordable housing options to meet the needs of the city and state.

While the city does not receive a direct allocation of ESG funds, Cranston seeks to address homelessness through a collaborative effort among all participants of the state's Continuum of Care, including Rhode Island Housing, the RI Coalition to End Homelessness, and the various agencies that provide housing and services to the state's homeless population. The small area of the state enables Rhode Islanders, including the homeless, to move readily between cities and towns to accomplish activities of daily living. Services tend to be centralized and most agencies have statewide or regional service delivery areas. Due to the unique geography and close relationship among service providers in Rhode Island, a coordinated statewide approach organized by the Continuum of Care is the best system for addressing homelessness in the state.

Additionally, the city of Cranston supports the development of transitional housing and permanent supportive housing. The city will also continue to support the agencies that performed the Point-in-Time count and support connecting homeless persons and families to the larger network of homeless providers and facilities across the state.

### **Addressing the emergency and transitional housing needs of homeless persons**

The City of Cranston is not a recipient of HOME, ESG, HOPWA or other similar funds. The city continues to rely on regional facilities for addressing the emergency and transitional housing needs of homeless persons. CDBG funds are used in part to support these efforts. The primary focus is to maintain the safety and energy efficiency of the existing transitional housing units within the city.

Under the requirements of the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), over the past several years the system of programs and services for homeless individuals and families in RI has been organized around a more cohesive statewide Coordinated Entry System that has helped better target the most vulnerable population with the highest need for services. The Coalition to End Homelessness operates the Coordinated Entry Hotline and manages entry into the emergency shelter system. Individuals and families identified in the city through street outreach activities are aligned with the Coordinated Entry System.

The State of Rhode Island's plan to end homelessness, renamed 'Opening Doors Rhode Island', addresses the needs of Rhode Island residents in five main areas: more affordable housing, sufficient income, service and treatment alongside housing, homelessness prevention strategies, and greater political will and community involvement.

**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.**

Much direct work is done through the State's CoC.

The SSTARBIRTH program, with the support of CDBG funding this fiscal year, will provide housing and supportive services to approximately 20 families, all of whom will be Cranston residents while they are at SSTARBIRTH. SSTARBIRTH is the only residential substance abuse treatment program in the State of Rhode Island specifically designed for pregnant and postpartum women and their children. The program allows for 6 to 9 months of treatment in a home environment with a capacity for 14 women and 26 children. By providing treatment in a safe and caring environment, SSTARBIRTH allows clients to strengthen their health, find recovery, and nurture their children.

1. CCAP's NOH (New Opportunity Homes) Program operates the Bradford House in Cranston, which is a pregnancy and parenting residential family home with 24/7 supervision and counseling.
2. The Cranston Housing Authority offers homeless people a place on the HCV (Section 8) housing list.

**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 city will continue to coordinate its housing and economic development funds with those agencies and organizations involved with this population. Networks exist that provide referrals to the types of services and facilities that address this need. When this need manifests itself within the city of Cranston, the city relies on the existing service delivery system within and outside of its borders and supports the system that is located within the city with CDBG funding. Some examples of this support are mental and physical health, dental hygiene, substance abuse treatment and evaluations, and counseling. However, a lack of available affordable housing that meets the needs of this population still remains a significant challenge.

Community-based organizations and service and housing providers in Cranston collaborate effectively through localized efforts, and through larger scale state-led efforts to integrate homelessness and prevention services through the Rhode Island Continuum of Care and the RI Coalition to End Homelessness. Full implementation of the Coordinated Entry System in the State has led to homeless service providers being more thoughtful and proactive at diversion strategies to prevent homelessness. Diversion is a frequently used tool to prevent homelessness by helping at-risk individuals and families identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. The State's diversion programs help reduce the number of families becoming homeless, the demand for shelter beds, and the size of program wait lists.

A Discharge Planning service is administered by Crossroads RI. This program assists minimum security male and female inmates make the transition back to home and community. The OpenDoors Resource Center also offers discharge planning. Their program works with participants up to six months prior to release from prison. OpenDoors is contracted through the Rhode Island Department of Corrections to provide discharge plans to inmates in the Men's Minimum Security

Facility at the DOC in both individual and group formats in order to reach as many as possible of the over 1,200 discharges per year from that facility.

The City does provide funding for health and behavioral services administered by CCAP, which also operates a GED center for youths and adults so they may obtain the education and skills for better employment.

## **SP-65 Lead based paint Hazards – 91.215(i)**

### **Actions to address LBP hazards and increase access to housing without LBP hazards**

The age of the City's housing stock places its housing units at a greater risk of potential lead exposure. According to the 2017-2021 CHAS data, 88.1% of Low or Moderate Income Households (14,030 total households) live in units built before 1980, putting them at risk for lead-based paint exposure. Of these households, 1,580, or 9.9% of all LMI households in Cranston have children present. In Cranston, both the incidence rate (new cases) and prevalence rate (all cases) of lead poisoning among children have been declining over the past twenty years with spikes in 2009 and 2020.

Cranston places a high priority on the reduction of lead-based paint hazards. The department's Closing Cost Assistance and Down Payment Assistance programs require a lead clearance certificate in order for funds to be released to qualified applicants. The department's Housing Rehabilitation program requires lead inspections before any work begins, remediation to be performed as needed in accordance with the Lead Safe Rule, and a lead clearance certificate at the end of the work. In addition, CCAP and the Cranston Housing Authority all complete environmental assessments before funds are committed.

Rhode Island requires all children younger than six years of age to be screened for lead poisoning. Childcare providers and elementary schools are asked to document that children are screened prior to enrollment. Health insurers based in Rhode Island are required to cover lead screening analysis, the results of which are reported to the Dept. of Health and maintained in a database. Rhode Island also requires healthcare providers to report results of all blood lead levels tests for children younger than six years old who live in Rhode Island.

### **How are the actions listed above related to the extent of lead poisoning and hazards?**

The actions of the above are seen as a direct way of limiting the exposure of lead paint hazards in the city's aging housing stock thus reducing the extent of lead poisoning and hazards in general. The combination of education regarding lead paint hazards, building officials enforcing lead paint laws, and reporting violations to the state health department, along with the availability of both state and CDBG funds to address existing lead poisoning potentials.

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

The actions above have lead paint abatement and compliance as an integral part of the housing policies and procedures. Lead paint poisoning and hazards are seen by the city as a high priority to be addressed because the consequences of lead paint poisoning in children under six years of age is devastating and completely avoidable. Regardless of these compliances being required by HUD and building codes, the city sees lead paint safety and prevention of lead paint poisoning paramount in its housing policies and procedures.

# SP-70 Anti-Poverty Strategy – 91.215(j)

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

Since most households being provided housing assistance end up with a reduced level of housing costs, they are more able to allocate their scarce resources to other needs such as nutrition, education and other activities which can help lead them out of poverty. According to the 2019-2023 American Community Survey, 8.7% of the total population of Cranston lives below the Federal Poverty Level, approximately 6,900 people. While there are individuals and families living in poverty throughout the city, there are three Census tracts with the highest levels of poverty

- 44007013500 (Eastern Cranston, to the east of Roger Williams Park): Poverty Rate of 18.99%
- 44007014100 (Northern Cranston, Cranston St. and Garfield St. area): Poverty Rate of 14.98%
- 44007014502 (Central Cranston, Phenix Ave. and Cranston St. area): Poverty Rate of 14.12%
- 44007014700 (Northern Cranston, Dyer Ave. area): Poverty Rate of 12.26%

Through implementation of this plan, the City hopes to make an impact on the reduction of the number of families with incomes at or below the area's poverty level. To the extent that the city can support the creation of affordable housing - especially for extremely low income households - that will lessen the housing cost burdens on these households and will enable those households to have resources to meet other pressing needs. The creation of ownership housing for very low income households can also enable those families to build assets. Finally, the city will support all efforts in the region to protect low income households in deed restricted ownership units from losing their assets through foreclosure.

While the City's programs and resources can have some, albeit a very limited, impact on moving households out of poverty, there are other agencies in the region that have more impact and resources to address this issue. The Cranston Housing Authority has 587 units of public housing and another 262 Housing Choice Vouchers which enable very low income households to limit their housing expense to 30% of their income. Further, voucher holders can use the Family Self Sufficiency program and the mobility feature and the homeownership feature to encourage them to increase their economic self-sufficiency.

The City of Cranston will continue to address the needs of the homeless by supporting the efforts of the state's Continuum of Care and local and regional agencies providing services and housing to the city's homeless individuals. The City will continue to support the food assistance programs, employment counseling services, health care services, and CCAP's programs designed to help ward off the possibility of homelessness. The City recognizes that reducing the number of people with incomes below the poverty level can best be achieved through supportive services and counseling provided by the Cranston Housing Authority and by CCAP, such as CCAP's 'Learn to Earn' which is a GED and jobs program for youths and adults.

The high number of elderly below the poverty level (14%) demonstrates the continuing need for financial relief. Property taxes and maintenance costs severely burden the elderly, even those with no mortgage on their property. The City will continue to provide tax relief in the form of exemptions for the elderly, and low or no cost rehabilitation financing to eligible homeowners. These programs are intended to help the elderly live independently for as long as possible.

Employment opportunities are also a part of any anti-poverty strategy. The City of Cranston has services in place to meet this need. The RI Department of Human Services is a source for information concerning employment, training services, childcare, transportation and housing that are provided by other organizations. The American Job Center located in neighboring Providence, provides testing, employment counseling and job referral as well as special assistance for veterans, youth, older workers and persons with disabilities.

The CCAP GED Center not only offers youths and adults the opportunity to obtain their GED but also provides training in fields such as medical billing. This combination provides the participants with a chance to improve their economic and social condition.

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

The City allocates funding for housing, including rehabilitation, closing cost and down payment assistance, and acquisition for rehabilitation for subsequent sale to an income-eligible household; and funding to agencies and organizations that provide programs to assist the homeless and those at-risk of becoming homeless. Services and activities provided offset household costs so that low-income persons can use their income for other expenses. Some examples follow.

Cranston Senior Services provides seniors low cost or free meals at the Senior Center and the Meals-on-Wheels Program, as well as Transvan transportation to the Center.

The Blessed Mother Mary Food Pantry provides a food basket for those in need.

CCAP provides health care and counseling services, and dental services to low-income persons, as well as case management and referrals to other services and programs.

The City's scholarship program helps low-income households defray the cost of post-secondary education.

The city remains committed to supporting the creation of long-term affordable housing and improvements in housing conditions. The City will continue to fund public service programs that support emergency needs, education, and skill building to allow for individuals to better access pathways to economic prosperity.

## **SP-80 Monitoring – 91.230**

**Describe the standards and procedures that the jurisdiction 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**

The city is committed to undertaking onsite monitoring of each CDBG funded activity once every year. Activities are prioritized based on being a new recipient of CDBG funds, untimely reporting, and/or lack of achieving goals. Correspondence and technical assistance style monitoring occurs throughout the program year. A monitoring of goals and objectives of agency programs, assessment of financial and record-keeping systems, discussion of program performance, and provision of technical assistance also occurs. The goal is to ensure compliance with federal regulations. The city requires that progress reports are submitted quarterly and are up to date prior to the processing of an invoice for payment. This will identify monthly program participation and the status of meeting program goals.

All CDBG funded projects that fall within stipulated guidelines/regulations are monitored for compliance with the applicable regulation or law. All CDBG-funded projects involving the City's public facilities are overseen by the City's Department of engineering, which must approve all requisitions for payment.

Prior to entering into an agreement or contract the City will review the project to determine what laws and regulations apply to the individual project and incorporate language into the contract regarding applicable requirements. The City will then monitor the project as it proceeds to ensure compliance. The following are major areas the City focuses on when reviewing or considering potential projects.

### Housing Rehabilitation

Housing rehabilitation projects funded with CDBG funds are intensely monitored, sometimes daily. Inspections are calculated to coincide with the near completion of stages so that code compliance and/or compliance with contract specifications is ensured. A contractor cannot be paid until such time as a satisfactory final inspection has been completed.

### Subrecipients

A typical monitoring not having to do with housing rehab will usually include a visit to a site or an address at which the monitored activity is taking place. For some activities as many as two visits per year are made. These visits are conducted primarily for the purpose of confirming that the project being paid for or supplemented actually exists. Close attention is paid to the number of staff on duty. Before such a visit, the Department staff person making the visit will have prepared him or herself by reviewing the "scope of work" submitted by the sub-recipient at the time that the contract with the City was executed.

If there is a deviation from the sub-recipient's scope of work and/or the means by which the sub-recipient stated in its application how it intended to accomplish its stated goals, the sub-recipient will be made aware of such and be cautioned to address the underlying cause of its noncompliance. A sub-recipient is always dealt with respectfully and is always given sufficient time to correct a default.

### Davis Bacon Compliance

Community Development staff oversee federally funded projects which require Davis Bacon compliance for prevailing wage. The City's agreements include all necessary language and the appropriate wage determination which must be included in a contract for construction-related projects. The staff conducts site visits, conducts employee interviews, and checks the weekly payroll forms for accuracy and compliance.

#### Section 3 and MBE/WBE Compliance

Community Development staff make contractors aware of Federal Section 3 and MBE/WBE compliance issues and work with contractors to ensure low and moderate income residents and minority and women owned businesses are given due consideration under their contracts, which contain specific language addressing these issues.

Please refer to 'Additional Content' for the continuation of the monitoring narrative: Section 504 and ADA compliance, Relocation/Displacement and 104d, Fair Housing, Leases, Occupancy and Property Standards, Lead Paint., and Performance Measurement.

# Expected Resources

# AP-15 Expected Resources – 91.220(c)(1,2)

## Introduction

CDBG is the only formula grant received by the City of Cranston. The city’s allocation for FY 2024 was \$1,086,719. Over the next five years, the City of Cranston anticipates receiving approximately \$5,398,197 in CDBG funds. This estimate is based on the actual amount of CDBG funds received over the previous 5 years. An additional \$100,000 in Program Income is estimated to be utilized for the 2025 Program Year to address priority needs and goals, resulting in a total 5-year budget of \$5,498,197.

The 2025-2026 program year for the City of Cranston’s Community Development Block Grant program starts on 7/1/2025 and ends on 6/30/2026. It is the first Annual Action Plan related to the goals outlined in the City's 2025-2029 Consolidated Plan.

The City has not yet received its allocation for the 2025-2026 Program Year. As such, the information contained in this section is an estimate. If the actual amount awarded differs from this estimate, the city will use the following methodology to adjust the project amounts from these estimates to actual amounts. For any change in funding, the awarded amount will be prorated in the same ratios based on the difference between expected amount and actual amounts.

## Anticipated Resources

**Table 9 - 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	Public – Federal	Admin and Planning Acquisition Economic Development Housing Public Improvements Public Services	\$1,084,352	\$100,000		\$1,184,352	4,313,845	CDBG funds will be used for a variety of projects, including administration, housing rehabilitation, acquisition, economic development, public facility, infrastructure improvements and public services.

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

There are no matching requirements for CDBG funds. CDBG funds will be used to support public service agencies and supplement additional federal and philanthropic funds received by the agencies to provide critical services to the city’s low- and moderate-income population. Public facility projects for non-profits are generally subsidized by the non-profit’s resources. The City’s funds available for infrastructure, from bonds and taxes, vary annually.

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

The building that houses the Hope Alzheimer's Center, a subrecipient agency, is owned by the City.

The City has previously acquired, and intends to acquire, vacant houses to rehabilitate them for subsequent sale to an income eligible household, as part of the goal of creating and providing affordable housing.

**Discussion**

The resources available to the city to meet its residents’ needs is always insufficient. Funding subsidies for the range of categories of affordable housing, public services, infrastructure, public facilities, and economic development have few other resources. This dependence on the “usual funding sources” creates a vulnerability for those agencies and organizations that rely on them. The city is no exception. The bulk of community development funding for the city is from CDBG funds. The city’s funding sources will need to become more diversified for it to continue to support these types of community activities to be available for its citizens.

# Annual Goals and Objectives

# AP-20 Annual Goals and Objectives

## Goals Summary Information

**Table 10 – Goals Summary**

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	Housing Rehabilitation	2025	2029	Affordable Housing	Citywide	Affordable Housing Options	CDBG: \$525,000.00	Homeowner Housing Rehabilitated: 20 Household Housing Unit
2	Acquisition for Rehabilitation	2025	2029	Affordable Housing	Citywide	Affordable Housing Options	CDBG: \$350,000.00	Homeowner Housing Rehabilitated: 1 Household Housing Unit
3	First Time Homebuyers Assistance	2025	2029	Affordable Housing	Citywide	Affordable Housing Options	CDBG: \$24,000.00	Direct Financial Assistance to Homebuyers: 3 Households Assisted
4	Public Services	2025	2029	Non-Homeless Special Needs	Citywide	Public Services	CDBG: \$182,000.00	Other: 1200 Other
5	Public Facility and Infrastructure Improvements	2025	2029	Non-Housing Community Development	Citywide	Public Facility and Infrastructure Improvements	CDBG: \$174,371.00	Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit: 1000 Persons Assisted

### Goal Descriptions

1	<b>Goal Name</b>	Housing Rehabilitation
	<b>Goal Description</b>	Provide funding for rehabilitation and preservation of the existing housing stock in Cranston.

2	<b>Goal Name</b>	Acquisition for Rehabilitation
	<b>Goal Description</b>	Provide funding for the purchase of a vacant abandoned house for rehabilitation and subsequent sale to an income eligible household.
3	<b>Goal Name</b>	First Time Homebuyers Assistance
	<b>Goal Description</b>	Provide funding for either closing cost assistance or down payment assistance to income eligible first time homebuyers in Cranston.
4	<b>Goal Name</b>	Public Services
	<b>Goal Description</b>	Provide funding for non-homeless special needs and community development needs such as, but not limited to, health care, mental health services, youth programs, services for the elderly and/or disabled, heating assistance, food banks, transitional housing, and educational programs.
5	<b>Goal Name</b>	Public Facility and Infrastructure Improvements
	<b>Goal Description</b>	Provide funding for public facilities, infrastructure, or neighborhood revitalization that benefits low/moderate income people or low/moderate income areas, or to rehabilitate historical properties to prevent the spread of blight.

# Projects

# AP-35 Projects – 91.220(d)

## Introduction

The City of Cranston recognizes the critical importance on affordable housing programs for its residents. Accordingly, 71% of the funds available for the 2025-2026 program year, excluding program administration and reserved funds, have been allocated to housing projects. In addition, 37% of all public service funds have been allocated to projects that benefit the elderly/disabled. The balance of the funds addresses projects that benefit low/mod programs for youths, educational programs, victims of domestic violence, the needy, and public facilities. When this plan is considered in its entirety, it is apparent that it is citywide in scope. As in the past, the primary beneficiaries of the CDBG program will be low/moderate income personas and households.

## Projects

Table 11 – Project Information	
#	Project Name
1	Program Administration
2	Hope Alzheimer's Center
3	Senior Services - ADS
4	Family Life Resources
5	Family Health/Minority Outreach
6	Housing Rehabilitation
7	Heating Assistance
8	Blessed Mother Mary Food Bank
9	Sr. Svcs. - Nursing Supportive Services
10	Day One
11	Scholarship Program
12	Chace Center
13	Sstarbirth
14	Clothes to Kids
15	Rental Assistance
16	YMCA
17	Closing Cost Assistance
18	Down Payment Assistance
19	Affordable Housing Acquisition
20	Street Improvements
21	Contingency

## Describe the reasons for allocation priorities and any obstacles to addressing underserved needs

The biggest obstacle to addressing the needs of the city’s low and moderate income population is the limited availability of funds. Historically the City receives about \$1 million per year. Given the needs for affordable housing; for services to address the health and wellness of the elderly and the disabled, youths, and the increased minority population; and for public facilities and infrastructure, the City believes the best use of CDBG funds is toward these areas.

# AP-38 Project Summary

## Project Summary Information

1	<b>Project Name</b>	Program Administration
	<b>Target Area</b>	
	<b>Goals Supported</b>	
	<b>Needs Addressed</b>	
	<b>Funding</b>	CDBG: \$217,343.00
	<b>Description</b>	To provide funding for program administrative expenses, such as, but not limited to, salaries and payroll expenses, and office expenses.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	N/A
	<b>Location Description</b>	35 Sockanosset Cross Road, Cranston, RI 02920
	<b>Planned Activities</b>	To provide funding for program administrative expenses, such as, but not limited to, salaries and payroll expenses, and office expenses.
2	<b>Project Name</b>	Hope Alzheimer's Center
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$27,000.00
	<b>Description</b>	To provide financial assistance to support an organization that serves as a day care for those suffering from Alzheimer's disease or dementia
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	70 LMC
	<b>Location Description</b>	25 Brayton Ave., Cranston, RI 02920
	<b>Planned Activities</b>	A day care for those suffering from Alzheimer's disease or dementia.
3	<b>Project Name</b>	Senior Services - ADS
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$18,000.00
	<b>Description</b>	To provide financial assistance to support senior programs that meet the social, nutritional, and recreational needs of our seniors suffering from the initial stages of dementia or Alzheimer's disease, or from the effects of strokes.
	<b>Target Date</b>	6/30/2026

	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	50 LMC
	<b>Location Description</b>	1070 Cranston St., Cranston RI 02920
	<b>Planned Activities</b>	A day care for those suffering from the initial stages of dementia or Alzheimer's disease, or from the effects of strokes.
<b>4</b>	<b>Project Name</b>	Family Life Resources
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$9,000.00
	<b>Description</b>	To provide funding for professional counseling to families in need of assistance to improve their social and economic situations.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	100 LMC
	<b>Location Description</b>	1090 Cranston St., Cranston, RI
	<b>Planned Activities</b>	Professional counseling to families in need of assistance to improve their social and economic situations.
<b>5</b>	<b>Project Name</b>	Family Health/Minority Outreach
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$11,000.00
	<b>Description</b>	To provide financial assistance to a program that provides health care services to disadvantaged minority and low income people.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	100 LMC
	<b>Location Description</b>	1090 Cranston St., Cranston, RI
	<b>Planned Activities</b>	Health care services to disadvantaged minority and low income people.
<b>6</b>	<b>Project Name</b>	Housing Rehabilitation
	<b>Target Area</b>	
	<b>Goals Supported</b>	Housing Rehabilitation
	<b>Needs Addressed</b>	Owner Occupied Housing
	<b>Funding</b>	CDBG: \$525,000.00

	<b>Description</b>	To provide funding for the rehabilitation of owner-occupied residential units owned by low/moderate income people to preserve the housing stock, to ensure that the properties conform to minimum housing codes, thus revitalizing and stabilizing the neighborhood, and for related rehabilitation administration expenses.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	20 LMH
	<b>Location Description</b>	35 Sockanosset Cross Road, Ste. 6, Cranston, RI 02920
	<b>Planned Activities</b>	Housing rehabilitation such as roofing, siding, gutters, and related administrative expenses
7	<b>Project Name</b>	Heating Assistance
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$16,000.00
	<b>Description</b>	To provide financial assistance to eligible households to help them heat their homes during the winter season.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	30 LMC
	<b>Location Description</b>	35 Sockanosset Cross Rd., Suite 6, Cranston, RI
	<b>Planned Activities</b>	To provide financial assistance to eligible households to help them heat their homes during the winter season.
8	<b>Project Name</b>	Blessed Mother Mary Food Bank
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$36,000.00
	<b>Description</b>	To provide financial assistance to a non-profit food bank serving hundreds of low/mod people, to address their basic nutritional needs and to help to improve their economic or social situations.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	400 LMC
		<b>Location Description</b>
	<b>Planned Activities</b>	A non-profit emergency food bank serving hundreds of low/mod people
9	<b>Project Name</b>	Sr. Svcs. - Nursing Supportive Services

	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$18,000.00
	<b>Description</b>	To provide financial assistance for a nursing program at a facility that serves as a senior center and an emergency shelter.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	100 LMC
	<b>Location Description</b>	1070 Cranston St., Cranston, RI
	<b>Planned Activities</b>	A nursing program at a facility that serves as a senior center and an emergency shelter.
<b>10</b>	<b>Project Name</b>	Day One
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$6,000.00
	<b>Description</b>	To provide financial assistance for a center for crisis intervention and counseling for victims of sexual assault.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	50 LMC
	<b>Location Description</b>	100 Medway St., Providence, RI
	<b>Planned Activities</b>	A center for crisis intervention and counseling for victims of sexual assault.
<b>11</b>	<b>Project Name</b>	Scholarship Program
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$10,000.00
	<b>Description</b>	To provide financial assistance for students from low/moderate households for post-secondary education.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	10 LMC
	<b>Location Description</b>	35 Sockanosset Cross Rd., Suite 6, Cranston, RI
	<b>Planned Activities</b>	Financial assistance for students from low/moderate households for post-secondary education.

12	<b>Project Name</b>	Chace Center
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$7,000.00
	<b>Description</b>	To provide financial assistance to an organization that provides counseling and safe houses to individuals and families suffering from the repercussions of domestic violence.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	70 presumed benefit LMC
	<b>Location Description</b>	Domestic violence shelter
	<b>Planned Activities</b>	Provide financial assistance to an organization that provides counseling and safe houses to individuals and families suffering from the repercussions of domestic violence.
13	<b>Project Name</b>	Sstarbirth
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$6,000.00
	<b>Description</b>	To provide funding for counselors at a facility that serves as transitional housing for women/women with children recovering from substance abuse.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	20 LMC
	<b>Location Description</b>	80 East St., Cranston, RI
	<b>Planned Activities</b>	To provide funding for counselors at a facility that serves as transitional housing for women/women with children recovering from substance abuse.
14	<b>Project Name</b>	Clothes to Kids
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$6,000.00
	<b>Description</b>	Provide funding to subsidize operating expenses in an organization that supplies clothes to children in need attending Cranston schools.
	<b>Target Date</b>	6/30/2026

	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	100 LMC
	<b>Location Description</b>	
	<b>Planned Activities</b>	Provide funding to subsidize operating expenses in an organization that supplies clothes to children in need attending Cranston schools.
<b>15</b>	<b>Project Name</b>	Rental Assistance
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$7,000.00
	<b>Description</b>	Provide funding to assist needy renters in paying their monthly rent.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	7 LMC
	<b>Location Description</b>	311 Doric Avenue, Cranston, RI
	<b>Planned Activities</b>	Provide funding to assist needy renters in paying their monthly rent.
<b>16</b>	<b>Project Name</b>	YMCA
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Services
	<b>Needs Addressed</b>	Public Services
	<b>Funding</b>	CDBG: \$5,000.00
	<b>Description</b>	Provide financial assistance to subsidize the payroll expenses of trainers who assist disabled people.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	10 LMC disabled
	<b>Location Description</b>	1225 Park Avenue, Cranston, RI
	<b>Planned Activities</b>	Provide financial assistance to subsidize the payroll expenses of trainers who assist disabled people.
<b>17</b>	<b>Project Name</b>	Closing Cost Assistance
	<b>Target Area</b>	
	<b>Goals Supported</b>	First Time Homebuyers Assistance
	<b>Needs Addressed</b>	Owner Occupied Housing
	<b>Funding</b>	CDBG: \$9,000.00
	<b>Description</b>	To provide closing cost assistance to income eligible first time homebuyers in Cranston.
	<b>Target Date</b>	6/30/2026

	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	2 LMH
	<b>Location Description</b>	35 Sockanosset Cross Rd., Cranston, RI
	<b>Planned Activities</b>	To provide closing cost assistance to income eligible first time homebuyers in Cranston.
<b>18</b>	<b>Project Name</b>	Down Payment Assistance
	<b>Target Area</b>	
	<b>Goals Supported</b>	First Time Homebuyers Assistance
	<b>Needs Addressed</b>	Owner Occupied Housing
	<b>Funding</b>	CDBG: \$15,000.00
	<b>Description</b>	To provide down payment assistance to income eligible first time homebuyers in Cranston.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	1 LMH
	<b>Location Description</b>	35 Sockanosset Cross Rd., Cranston, RI
	<b>Planned Activities</b>	To provide down payment assistance to income eligible first time homebuyers in Cranston.
<b>19</b>	<b>Project Name</b>	Affordable Housing Acquisition
	<b>Target Area</b>	
	<b>Goals Supported</b>	Acquisition for Rehabilitation
	<b>Needs Addressed</b>	Owner Occupied Housing
	<b>Funding</b>	CDBG: \$350,000.00
	<b>Description</b>	Provide funding to purchase a vacant foreclosed house to be rehabilitated and subsequently sold to an income eligible household.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	1 LMH
	<b>Location Description</b>	Citywide
	<b>Planned Activities</b>	Provide funding to purchase a vacant foreclosed house to be rehabilitated and subsequently sold to an income eligible household.
<b>20</b>	<b>Project Name</b>	Street Improvements
	<b>Target Area</b>	
	<b>Goals Supported</b>	Public Facilities/Infrastructure/Revitalization
	<b>Needs Addressed</b>	Public Facilities
	<b>Funding</b>	CDBG: \$174,371.00
	<b>Description</b>	Provide funding for street improvements such as repaving, curbing, sidewalks in a low/mod area.

	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	1000, census data LMA
	<b>Location Description</b>	
	<b>Planned Activities</b>	Provide funding for street improvements such as repaving, curbing, sidewalks in a low/mod area.
21	<b>Project Name</b>	Contingency
	<b>Target Area</b>	
	<b>Goals Supported</b>	
	<b>Needs Addressed</b>	
	<b>Funding</b>	CDBG: \$54,335.00
	<b>Description</b>	Reserve funds to be allocated as needed.
	<b>Target Date</b>	6/30/2026
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	N/A
	<b>Location Description</b>	Citywide
	<b>Planned Activities</b>	Reserve funds to be allocated as needed.

## AP-50 Geographic Distribution – 91.220(f)

### Description of the geographic areas of the entitlement (including areas of low-income and minority concentration) where assistance will be directed

The City of Cranston will take a holistic citywide view as it allocates CDBG investments. This is due to the city’s LMI households being dispersed throughout the city. The city is committed to community development investments throughout the city as required, subject to funding limitations and CDBG program requirements. Public service activities are eligible to all low- and moderate-income Cranston residents served through partnerships with non-profit organizations. Housing rehabilitation funds are expended throughout the City, based on the qualification of low- and moderate-income applicants. Similarly, funds to support the development of affordable housing will serve low- and moderate-income persons throughout the City, based on real estate opportunities and partnership agreements with non-profit housing developers. Finally, any public facility and infrastructure improvements will be based on evaluation of LMI area benefits.

### Geographic Distribution

Target Area	Percentage of Funds
Citywide	100%

Table 12 - Geographic Distribution

### Rationale for the priorities for allocating investments geographically

As previously stated, CDBG funds will not be directed to a specific geographic area, but will be available city-wide to income eligible beneficiaries and in eligible low/moderate income areas as determined by HUD. The City believes that this is the best way to serve the residents of the City.

### Discussion

The City remains committed to supporting many of the City’s public service organizations that provide services to people of low-to-moderate income and/or with special needs throughout the City. Some examples are the Blessed Mother Mary Food Pantry, a non-profit organization that serves hundreds of individuals living in the northwestern section of Cranston, to address their basic nutritional needs; and the Cranston Senior Center Adult Day Care Service and the Hope Alzheimer’s Center, which provide supportive programs to Cranston’s elderly and disabled and those suffering from early to advanced stages of Alzheimer’s disease, thus keeping these individuals in the community as opposed to living in a long term care facility.

The City is also committed to improve and enhance the quality of life for households by supporting such programs as the Emergency Fuel Assistance Program which assists households that might not qualify for LIHEAP funding, but which are in urgent need of heating oil; and the Scholarship Program, which is available to students of qualified households citywide.

In addition, the Department of Community Development continues its goal to revitalize neighborhoods by allocating \$525,000 to a Residential Rehabilitation Program. The department also offers low interest loans to make necessary structural renovations and correct code violations to their homes. Down payment and closing cost programs are also available, to eligible beneficiaries.

# Affordable Housing

# AP-55 Affordable Housing – 91.220(g)

## Introduction

Programs for homelessness in Cranston, and for all of the state, are maintained by the State of Rhode Island's Continuum of Care.

In addition to the 20 households estimated to be supported by the City's housing rehabilitation program, five households are expected to be supported by the City's first time homebuyers assistance program. One house is projected to be acquired for rehabilitation and subsequent sale to an income eligible household.

One Year Goals for the Number of Households to be Supported	
Homeless	0
Non-Homeless	25
Special-Needs	0
Total	25

**Table 13 - One Year Goals for Affordable Housing by Support Requirement**

One Year Goals for the Number of Households Supported Through	
Rental Assistance	7
The Production of New Units	0
Rehab of Existing Units	25
Acquisition of Existing Units	1
Total	28

**Table 14 - One Year Goals for Affordable Housing by Support Type**

## Discussion

In order to foster and maintain affordable housing, and to preserve the existing housing stock, the City will continue to offer a low-interest-loan housing rehabilitation program to low to moderate income homeowners in Cranston. This program is designed to help income eligible homeowners keep and maintain their homes.

To encourage income eligible first-time homebuyers to purchase a home in Cranston, the Department of Community Development will again offer its Closing Cost Assistance and Down Payment Assistance programs. A maximum of \$4,500 will be provided for eligible closing costs; and the Department will match the homebuyer's personal down payment up to a maximum of \$15,000.

In conjunction with CCAP, the City in prior years acquired 15 abandoned houses for rehabilitation and subsequent sale to a low/moderate income household. For fiscal year ending June 30, 2025, the Department of Community Development has allocated \$350,000 for the purchase of one house for rehabilitation and sale to an eligible homebuyer.

The City does not receive HOME funds, nor can CDBG funds be used for new construction. Other than the completed United Cerebral Palsy 8-unit complex and the acquisition and rehabilitation of vacant houses for subsequent sale, affordable housing units are being planned by for-profit and not-for-profit developers in the renovation/conversion of a former mill complex. Additional

affordable units are also proposed for a transit-oriented development in the Wellington/Elmwood area. Both of these projects, however, are currently in the earliest stages of discussion.

CCAP owns a 19-unit residence facility at 1303 Elmwood Avenue, for low/moderate income persons.

# **AP-60 Public Housing – 91.220(h)**

## **Introduction**

In the area of public housing the Mayor confers with and relies on the five (5) privately owned elderly/disabled housing complexes located throughout the city as well as on the Cranston Housing Authority (CHA), which oversees the administration of six (6) high rise “Manors”. In the past, the City has addressed any need for maintenance and/or improvements to the existing CHA public housing stock with a comprehensive grant from HUD that is awarded directly to the CHA. The Cranston Housing Authority currently receives an annualized amount of \$2,322,177 in Section 8 (Housing Choice Voucher) funds but no Low Income Housing Tax Credits and no McKinney-Vento Homeless Assistance Funds.

## **Actions planned during the next year to address the needs to public housing**

The Cranston Housing Authority continues to address annually the maintenance needs of its senior manors, and to upgrade the facilities.

## **Actions to encourage public housing residents to become more involved in management and participate in homeownership**

The Cranston Housing Authority has no vehicle, other than participation in public meetings, to encourage residents of public housing to become involved in the management of the Authority-owned property, nor is it involved in any activities for the homeless. It does, however, offer homeless people a place on the Section 8 housing list. The Authority does contract with a Resident Services Coordinator to coordinate supportive services for the elderly, frail, and disabled.

## **If the PHA is designated as troubled, describe the manner in which financial assistance will be provided or other assistance**

Not applicable. The Cranston Housing Authority is not designated as troubled.

## **Discussion**

The Cranston Housing Authority and the Community Development Department will continue to work collaboratively together to address the current and future affordable housing needs for the City. The Housing Authority and Community Development Director will continue to meet regularly to discuss strategies and opportunities to achieve the affordable housing goals within the City and the Cranston Housing Authority strives to meet the needs of its residents and to provide affordable, decent, safe, and sanitary housing.

# **AP-65 Homeless and Other Special Needs**

## **Activities – 91.220(i)**

### **Introduction**

Cranston does not receive HOME, HOPWA, or ESG funds. The city, however, supports and consults with the Rhode Island Continuum of Care and ‘Opening Doors Rhode Island’, the state’s strategic plan to prevent and end homelessness and its programs for street outreach, emergency shelter and transitional housing, rapid rehousing, and prevention to assist the homeless and other special needs populations. The State of Rhode Island is a member of ‘Built for Zero’, a rigorous national change effort working to help a core group of committed communities end veteran and chronic homelessness. Coordinated by Community Solutions, the national effort supports participants in developing real time data on homelessness, optimizing local housing resources, tracking progress against monthly goals, and accelerating the spread of proven strategies.

### **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**

As previously discussed, Cranston and the state have seen a dramatic increase in homelessness over the past several years, predicated on a rapid escalation of rental costs, a lack of rental assistance programs, and an insufficient supply of affordable housing options to meet the needs of the city and state.

While the city does not receive a direct allocation of ESG funds, Cranston seeks to address homelessness through a collaborative effort among all participants of the state’s Continuum of Care, including Rhode Island Housing, the RI Coalition to End Homelessness, and the various agencies that provide housing and services to the state’s homeless population. The small area of the state enables Rhode Islanders, including the homeless, to move readily between cities and towns to accomplish activities of daily living. Services tend to be centralized and most agencies have statewide or regional service delivery areas. Due to the unique geography and close relationship among service providers in Rhode Island, a coordinated statewide approach organized by the Continuum of Care is the best system for addressing homelessness in the state.

Additionally, the city of Cranston supports the development of transitional housing and permanent supportive housing. The city will also continue to support the agencies that performed the Point-in-Time count and support connecting homeless persons and families to the larger network of homeless providers and facilities across the state.

#### **Addressing the emergency shelter and transitional housing needs of homeless persons**

The City of Cranston is not a recipient of HOME, ESG, HOPWA or other similar funds. The city continues to rely on regional facilities for addressing the emergency and transitional housing needs of homeless persons. CDBG funds are used in part to support these efforts. The primary focus is to maintain the safety and energy efficiency of the existing transitional housing units within the city.

Under the requirements of the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), over the past several years the system of programs and services for homeless individuals and families in RI has been organized around a more cohesive statewide Coordinated

Entry System that has helped better target the most vulnerable population with the highest need for services. The Coalition to End Homelessness operates the Coordinated Entry Hotline and manages entry into the emergency shelter system. Individuals and families identified in the city through street outreach activities are aligned with the Coordinated Entry System.

The State of Rhode Island's plan to end homelessness, renamed 'Opening Doors Rhode Island', addresses the needs of Rhode Island residents in five main areas: more affordable housing, sufficient income, service and treatment alongside housing, homelessness prevention strategies, and greater political will and community involvement.

**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**

Much direct work is done through the State's CoC.

The SSTARBIRTH program, with the support of CDBG funding this fiscal year, will provide housing and supportive services to approximately 20 families, all of whom will be Cranston residents while they are at SSTARBIRTH. SSTARBIRTH is the only residential substance abuse treatment program in the State of Rhode Island specifically designed for pregnant and postpartum women and their children. The program allows for 6 to 9 months of treatment in a home environment with a capacity for 14 women and 26 children. By providing treatment in a safe and caring environment, SSTARBIRTH allows clients to strengthen their health, find recovery, and nurture their children.

1. CCAP's NOH (New Opportunity Homes) Program operates the Bradford House in Cranston, which is a pregnancy and parenting residential family home with 24/7 supervision and counseling.
2. The Cranston Housing Authority offers homeless people a place on the HCV (Section 8) housing list.

**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 city will continue to coordinate its housing and economic development funds with those agencies and organizations involved with this population. Networks exist that provide referrals to the types of services and facilities that address this need. When this need manifests itself within the city of Cranston, the city relies on the existing service delivery system within and outside of its borders and supports the system that is located within the city with CDBG funding. Some examples of this support are mental and physical health, dental hygiene, substance abuse treatment and evaluations, and counseling. However, a lack of available affordable housing that meets the needs of this population still remains a significant challenge.

Community-based organizations and service and housing providers in Cranston collaborate effectively through localized efforts, and through larger scale state-led efforts to integrate

homelessness and prevention services through the Rhode Island Continuum of Care and the RI Coalition to End Homelessness. Full implementation of the Coordinated Entry System in the State has led to homeless service providers being more thoughtful and proactive at diversion strategies to prevent homelessness. Diversion is a frequently used tool to prevent homelessness by helping at-risk individuals and families identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. The State's diversion programs help reduce the number of families becoming homeless, the demand for shelter beds, and the size of program wait lists.

A Discharge Planning service is administered by Crossroads RI. This program assists minimum security male and female inmates make the transition back to home and community. The OpenDoors Resource Center also offers discharge planning. Their program works with participants up to six months prior to release from prison. OpenDoors is contracted through the Rhode Island Department of Corrections to provide discharge plans to inmates in the Men's Minimum Security Facility at the DOC in both individual and group formats in order to reach as many as possible of the over 1,200 discharges per year from that facility.

The City does provide funding for health and behavioral services administered by CCAP, which also operates a GED center for youths and adults so they may obtain the education and skills for better employment.

## **Discussion**

Homelessness has been primarily addressed on the state level through the Continuum of Care developed by the State's Interagency Council on Homelessness and Affordable Housing. The State of Rhode Island believes that, due to the unique geography and close relationships among service providers within the state, community providers should continue to promote a coordinated statewide Continuum of Care as the best system for addressing homelessness in the state.

Harrington Hall, located in Cranston, is an emergency homeless shelter operated by Crossroads RI. In addition, SSTARBIRTH operates a program for pregnant women and mothers with substance abuse problems. All of these have excellent programs that both outreach and assess individual needs. Homeless persons are tied into the State program that links homeless individuals with assistance. Crossroads RI conducts street outreach, provides supportive services, and maintains a statewide hotline of information on shelter and human services.

## **AP-75 Barriers to affordable housing – 91.220(j)**

### **Introduction:**

In general, public policies affecting the cost and production of affordable housing are governed by specific zoning by-laws. Cranston does not have inclusionary zoning, in which a percentage of housing developed in the marketplace is set aside for affordable use and is usually placed within mixed income developments. Cranston does allow accessory apartments which are particularly effective in enabling low income elderly owners to generate income and continue living in the community, subject to strict limitations on the square footage of the main living area. Variances in the size of the area are subject to the approval by the zoning board.

Western Cranston, where most available land is located, has zoning for larger lots due to the absence of sewers and/or public water service. Since larger lots are expensive, the associated development costs are higher and larger homes are usually built on large lots. The resultant high cost of the home effectively precludes the average first time homebuyer from purchasing the property to conform to affordability.

Sewer impact fees and sewer user fees have remained relatively constant over the last five years, after the sewer user fees had increased 10% during the previous five year period to finance wastewater treatment facility upgrades mandated by the State, which were completed in 2019.

Areas in Cranston are zoned to allow multi-family housing, and there has been significant multi-family development through the years. Cranston is exempt from the Rhode Island Low and Moderate Income Housing Act due to its percentage of rental housing (34% per the 2013-2017 CHAS data from HUD) and/or its current affordable housing inventory.

It must be stated, however, that the foremost primary barriers to affordable housing are of an economic nature. The generally accepted definition of affordability is for a household to pay no more than 30% of its annual income on housing, including utilities. The cost of housing is influenced by interest rates, land and construction costs, the real estate market, and regulatory costs. Recent studies over the past few years by the National Low Income Housing Coalition have indicated that the average hourly wage for the average renter in Rhode Island results in a cost burden in excess of the 30% definition of affordability. Moreover, similar recent studies by the Rhode Island Association of realtors have indicated that the average renter's hourly wage would result in moderate to severe cost burdens if these renters were to purchase a house. The recent surge in real estate prices and rents has also adversely affected the ability not only to rent but also to buy a house. The unavoidable conclusion is that the average renter's hourly wage is insufficient to result in affordable housing, either by renting or by home ownership. Moreover, recent studies have also indicated that the wages of current homeowners have not kept pace with the sales prices of existing or new homes, resulting in potential cost burdens if current homeowners wish to buy and move into a different home, especially evident in today's housing market.

### **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**

Cranston has no growth limitations, no tax policies affecting land, no zoning ordinances (other than those specifying lot sizes for lots that do not have public water service and/or public sewers), and no policies affecting the return on residential investment that are barriers to affordable housing.

**Discussion:**

The requirement for large lots in western Cranston is not going to change, due to the absence of sewer connections and/or public water. Consequently, housing in this area will continue to be unaffordable to many households. Either wages must increase substantially enough, or rents or costs of homes must decrease equally as dramatically, in order for housing to become affordable. Neither is likely to happen, nor is it happening in today's housing market. The reality is that the economics of the real estate market will continue to result in cost burdens and/or housing remaining unaffordable to a significant percentage of households.

In an effort to ameliorate some economic barriers to affordable housing, Cranston, through its CDBG funding, will continue to offer a housing rehabilitation program and first-time homebuyers' assistance to income eligible households.

## **AP-85 Other Actions – 91.220(k)**

### **Introduction:**

The City will take other actions to address obstacles to underserved needs, foster and maintain affordable housing, reduce lead based paint hazards, reduce the number of poverty-level families, develop institutional structure, and enhance coordination among agencies.

### **Actions planned to address obstacles to meeting underserved needs**

The greatest obstacle to meeting underserved needs is the limited availability of funds. Given the approximately one million dollars of CDBG funds available to Cranston annually, the City believes that the best way to conform to the objectives of promoting a suitable living environment, providing decent housing, and economic development, primarily for low to moderate income beneficiaries is via its housing rehabilitation and homebuyers' assistance programs; its public services for health and wellness, neighborhood food bank, youth and educational services, a day care for the elderly/disabled and those suffering from dementia and Alzheimer's disease, heating assistance, battered and abused spouses and children; and public facilities such as street improvements, tot parks, and rehabilitation of facilities serving the elderly and/or disabled.

### **Actions planned to foster and maintain affordable housing**

In order to foster and maintain affordable housing, and to preserve the existing housing stock, the City will continue to offer a low-interest-loan housing rehabilitation program to low to moderate income homeowners in Cranston. This program is designed to help income eligible homeowners keep and maintain their homes.

To encourage income eligible first-time homebuyers to purchase a home in Cranston, the Department of Community Development will again offer its Closing Cost Assistance and Down Payment Assistance programs. A maximum of \$4,500 will be provided for eligible closing costs; and the Department will match the homebuyer's personal down payment up to a maximum of \$15,000.

In conjunction with CCAP, the City in prior years acquired 15 abandoned houses for rehabilitation and subsequent sale to a low/moderate income household. For fiscal year ending June 30, 2025, the Department of Community Development has allocated \$350,000 for the purchase of one house for rehabilitation and subsequent sale to an eligible homebuyer.

The City does not receive HOME funds, nor can CDBG funds be used for new construction. Other than the completed United Cerebral Palsy 8-unit complex and the acquisition and rehabilitation of vacant houses for subsequent sale, affordable housing units are being planned by for-profit and not-for-profit developers in the renovation/conversion of a former mill complex.

CCAP owns a 19-unit residence facility at 1303 Elmwood Avenue and two 2-unit houses, which benefit low to moderate income people.

At the time of the preparation of the Action Plan for 2024-2025, 100% of the funds projected to be available as of June 30, 2024 were allocated for fiscal year 2024-2025.

### **Actions planned to reduce lead-based paint hazards**

The City conforms to the Lead Safe Rule as part of the Housing Rehabilitation program and the Homebuyers' Assistance program. For each project, a lead clearance certificate is required. Also, a

lead safe certificate is required for any house purchased, rehabbed, and subsequently sold to an income eligible household.

The State of Rhode Island requires testing for lead for children enrolling in elementary schools and subsequent actions and treatments.

### **Actions planned to reduce the number of poverty-level families**

Education and job training are instrumental in helping reduce the number of poverty-level families. NetworkRI, part of the Workforce Investment Act, serves the entire state, and has a facility staffed by Providence and Cranston employees in the Providence office. This agency offers services such as, but not limited to, workshops, training programs, and apprenticeships. Their programs deliver services to adults, displaced workers, and youths.

CCAP's Skills Center offers GED classes and work readiness training for youths and adults.

The City's housing rehabilitation program offers low interest loans to eligible households, to maintain and preserve the housing stock. For those under 50% of the median income, the loans may be 0% deferred, thus enabling the rehab to be done at no cost to the owner-occupant.

The City's homebuyers' assistance program subsidizes closing costs and down-payments, thus reducing the purchase costs of housing for low/moderate income households.

### **Actions planned to develop institutional structure**

None needed. There are organizations - whether public, private, non-profit, or local government - which provide the services necessary to carry out our consolidated plan such as but not limited to CCAP, Hope Alzheimer's Center, Cranston Senior Services, Neighborhood Food Bank, and the programs offered by the Cranston Department of Community Development, to name a few.

### **Actions planned to enhance coordination between public and private housing and social service agencies**

The Director of the Cranston Department of Community Development is a member of the Cranston Affordable Housing Commission. Other members include Cranston's Director of Planning and representatives from Housing Works RI, RI Housing, Cranston Community Action Program (a social service agency), the Cranston Housing Authority, realtors, attorneys, and the general public. The Commission meets monthly to discuss, examine, and review regional and local housing trends consistent with economic and income levels throughout the City.

### **Discussion:**

The many and various agencies, such as but not limited to those mentioned above, in addition to those subrecipients and projects proposed in this Action Plan and programs and services offered by the State, comprise the institutional structure to carry out our consolidated plan. Moreover, other organizations involved in the delivery of housing, homeless, non-homeless special needs, and community development activities include many of the agencies consulted during the Consolidated Planning process. Their fields of interest include but are not limited to social services, youth services, elderly services, disability services, HIV/AIDS services, abused children services, health services, homeless services, and domestic violence assistance. Each agency contributes valuable resources and expertise to benefit low and moderate income people.

# Program Specific Requirements

# AP-90 Program Specific Requirements – 91.220(l)(1,2,4)

## Introduction:

### Community Development Block Grant Program (CDBG) Reference 24 CFR 91.220(l)(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	\$100,000
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
<b>Total Program Income</b>	<b>\$100,000</b>

Program income varies considerably depending on when housing loans are paid off, and how many business loans are provided. It can range from \$20,000 to \$45,000. All program income is used for current activities prior to using funds drawn from the line of credit.

### 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.	70.00%

# Appendix - Alternate/Local Data Sources

1	<b>Data Source Name</b> ACS 2019-2023 5-Year Estimates
	<b>List the name of the organization or individual who originated the data set.</b> ACS 2019-2023 5-Year Estimates
	<b>Provide a brief summary of the data set.</b> American Community Survey data
	<b>What was the purpose for developing this data set?</b> Data available through the U.S. Census Bureau to provide information for Needs Assessment and Market Analysis
	<b>How comprehensive is the coverage of this administrative data? Is data collection concentrated in one geographic area or among a certain population?</b> Data gathered for City of Cranston, RI
	<b>What time period (provide the year, and optionally month, or month and day) is covered by this data set?</b> 2019-2023
	<b>What is the status of the data set (complete, in progress, or planned)?</b> Completed
2	<b>Data Source Name</b> CHAS 2017-2021 5-Year Estimates
	<b>List the name of the organization or individual who originated the data set.</b> Comprehensive Housing Affordability Strategy
	<b>Provide a brief summary of the data set.</b> The CHAS special tabulation is a count of the number of households (or housing units) that have certain combinations of HUD-specified characteristics, summarized for HUD-specified geographies.
	<b>What was the purpose for developing this data set?</b> Data is used to provide information for the Needs Assessment.
	<b>How comprehensive is the coverage of this administrative data? Is data collection concentrated in one geographic area or among a certain population?</b> City of Cranston, RI
	<b>What time period (provide the year, and optionally month, or month and day) is covered by this data set?</b> 2017-2021
	<b>What is the status of the data set (complete, in progress, or planned)?</b> Complete
3	<b>Data Source Name</b> 2024 Community Needs Assessment Survey
	<b>List the name of the organization or individual who originated the data set.</b> CEW Advisors, Inc.
	<b>Provide a brief summary of the data set.</b> Online housing and community needs survey.
	<b>What was the purpose for developing this data set?</b> Data used to provide information for the Needs Assessment.
	<b>How comprehensive is the coverage of this administrative data? Is data collection concentrated in one geographic area or among a certain population?</b> City of Cranston, RI
	<b>What time period (provide the year, and optionally month, or month and day) is covered by this data set?</b> 2024

	<b>What is the status of the data set (complete, in progress, or planned)?</b> Complete
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