Central Oregon 10 Year Plan to End Homelessness

November 2011

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Whose issue is homelessness? Is it a national issue, a state issue, a county issue, a city issue or one that can be tackled by dedicated neighbors? What should be the role of the non-profit sector and the faith-based community? Should the individual that is experiencing homelessness be expected to find a home? If we are truly going to make progress toward ending homelessness, the answer is "all of the above."

Homelessness is a complex problem that will take all of us working together to solve. Like hundreds of communities across the United States, Central Oregon can no longer wait for "someone else" to end homelessness in our region.

Previously, advocates for the homeless have compelled others to join the cause based on moral principles and compassion. In addition to the moral imperative, however, research has shown that homelessness is also an economic issue. Homelessness results in a tremendous cost to our community in terms of resources utilized for emergency shelter, medical care and law enforcement. By concentrating on the root causes, focusing on prevention, and addressing chronic social problems, our community can end homelessness in a cost-effective manner.

I am very pleased to present Central Oregon's 10-Year Plan to End Homelessness. This effort is part of a national movement that emphasizes a results-oriented, business planning approach to ending homelessness. The enclosed Plan is the result of many months of work carried out by a dedicated group of community leaders and citizens led by Bruce Abernethy, my co-chair on this project. I would like to personally thank Bruce and the committees for their tremendous effort in developing this Plan. I would also like to thank all of the members of the public who provided valuable input about the plan during the seven community "Town Hall" meetings held in July 2010.

This Plan is written to address homelessness from both a regional and community perspective. It is not something that can be implemented overnight, but it does lay out numerous strategies that can be adopted by "champions" in the region. I look forward to working with elected officials, non-profit organizations, the faith-based community, businesses, and all residents of Central Oregon to put it into action.

In Partnership,

Tammy Baney
Deschutes County Commissioner
Co-Chair, Central Oregon 10 Year Plan to End Homelessness

Central Oregon 10 Year Plan to End Homelesness

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Overview of the 10 Year Plan Concept

Background

Recognizing that homelessness has both a high social and economic cost, more than 350 cities and counties across the United States (including 15 others in Oregon) have come together to create business-like, results-oriented "10 Year Plans to End Homelessness" that incorporate a Housing First approach whenever possible, cost benefit analysis, best practices, and a focus on prevention.

Causes of Homelessness

There's typically no single reason individuals or families become homeless, nor is there only one pathway to a life on the streets. Rather, homelessness appears to be the result of a cumulative series of risk factors that trigger events combined with several underlying systemic and environmental conditions that increase the probability of homelessness. Some of these risk factors include:

- Poverty
- Physical disability or mental illness or addiction
- Difficult childhood history like fetal alcohol syndrome and abuse
- Time in foster care
- Family conflict
- Lack of supportive relationships
- Lack of education

None of these factors by themselves or in combination means certain homelessness. However, the higher presence of risk factors increases the probability of homelessness when they are met with a triggering event. Triggering events are those events that cause the loss of housing. These can include:

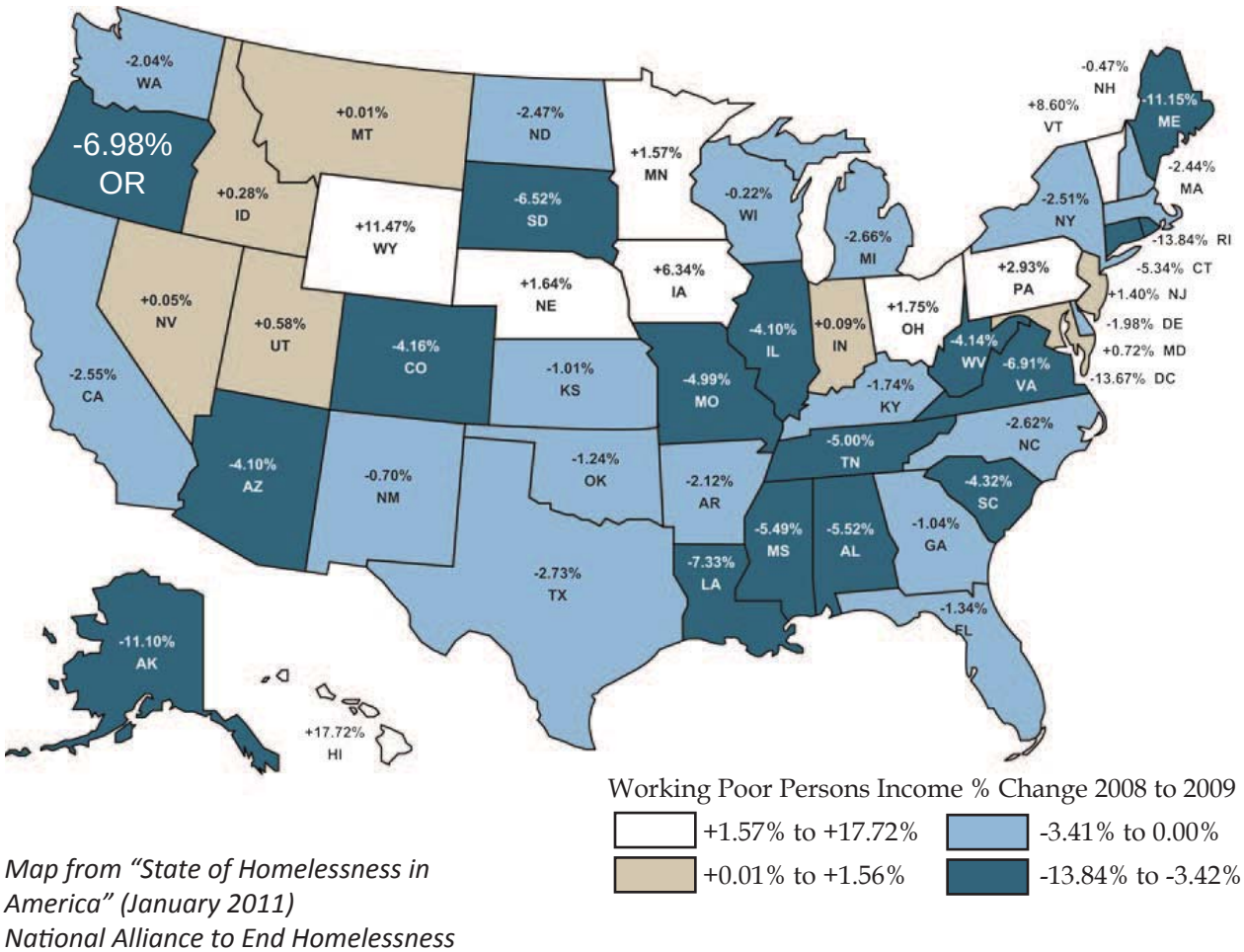
- Financial crisis, particularly job loss or layoff
- Moving for economic or social opportunity
- Health crisis or emergency
- Family conflict (domestic violence)
- Landlord/roommate conflict
- Unchecked addiction and/or mental illness
- Crime (either as a victim or perpetrator)

Once people lose their housing, they can quickly become trapped in a system of multiple, cumulative barriers that make regaining housing extremely difficult. Research shows that 65% of people do find their own way out of homelessness. But the most vulnerable - those with the greater combination of risk factors - can get trapped and become chronically homeless.

Faltering Economy Has a Disproportionate Impact on the Poor

Despite frequent characterization as a psychosocial problem, the issue of homelessness is largely economic. People who become homeless - individuals as well as families - simply do not have enough financial resources to obtain or maintain their housing. This is especially true of the majority of the homeless population that experiences episodic, transitional, or temporary periods of homelessness. The measure most frequently used to quantify financial resources available to working poor people for housing and other needs is the average income earned by people in poor households (from U.S. Census Bureau's 2008 and 2009 American Community Survey, which include information on individual income, number of hours worked, and household poverty status).

The Map below shows the change in average income for poor workers from 2008 to 2009 for each of the 50 states, plus the District of Columbia. The average real income for poor workers decreased from $9,353 in 2008 to $9,151 in 2009, a decrease of 2 percent. Average real income for all workers decreased by 1 percent from $48,134 in 2008 to $47,614 in 2009, reflecting a disproportionate impact of decreasing income on poor workers. The data show that 37 of 51 states had decreases in the real income of poor workers from 2008 to 2009. These decreases may be due to stagnant or reduced hourly wages, decreased hours, or both.



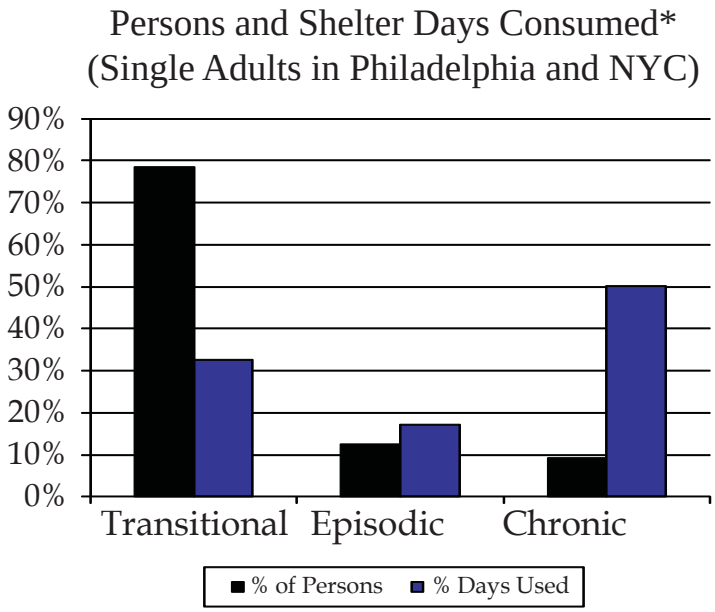
Map from "State of Homelessness in America" (January 2011)
National Alliance to End Homelessness

New Research on the Cost of Chronic Homelessness

Fortunately, one thing we have learned over the years is that the term "homeless" is not a one-size-fits-all label. In fact, new research shows that different types of homelessness have markedly different impacts in terms of the cost of providing shelter, medical care and law enforcement services.

Because they have no regular place to stay, people who are homeless use a variety of public systems in an inefficient and costly way (e.g. visit to the emergency room rather than getting a regular checkup). Recent research by Dr. Dennis Culhane from the University of Pennsylvania shows that the chronic homeless - who comprise only a small portion of the total homeless population - consume a significantly larger portion of community resources.

Preventing a homeless episode or ensuring a speedy transition into stable permanent housing can often result in a significant cost savings to the community as well as for the individual.



* The findings of Dr. Culhane's study demonstrate that roughly 80% of the people who enter the homelessness service delivery system (shelters, for example) receive one or two service events, exit homelessness, and do not return. These are identified as Transitional homeless. The remaining individuals are designated as either Episodic (i.e. reoccurring bouts of homelessness) or Chronic (long-term) homeless. They use more than half the resources in the homelessness service delivery system. Research is based on longitudinal data from NYC and Philadelphia.

"a chronically homeless person is an unaccompanied disabled individual who has been continuously homeless for over one year."

- working definition from HUD (US Dept of Housing and Urban Development)

Developing a Regional 10 Year Plan

Why a Regional Approach?

In May 2009, the Central Oregon 10 Year Plan to End Homelessness was officially launched with participation by **Crook**, **Deschutes** and **Jefferson** County, the cities within those jurisdictions (**Bend**, **Redmond**, **Madras**, **Prineville**, **Sisters**, **La Pine**, **Metolius** and **Culver**), and some representatives from the Confederated Tribes of Warm Springs. There are many reasons why the effort is being tackled using a regional approach:

- There is a lot of movement and spillover effects between the Central Oregon communities - one observation was, "we need to move beyond simply providing a bus ticket to Bend" as a way for many of the outlying communities to address homelessness
- There are many examples where the region has worked well together on homelessness:
  - Homeless Leadership Coalition - expanded from Deschutes County to tri-county
  - Project (Homeless) Connect - tri-county effort with 4 years experience
  - One Night Shelter Count (ONSC) - tri-county effort with 4 years of data
  - McKinney-Vento federal grant to assist homeless outreach in our public schools
- Many local non-profits already operate at a regional level to provide services and housing assistance (e.g. NeighborImpact, Housing Works, Partnership to End Poverty)
- Because of the wide range of communities in Central Oregon, state and federal officials are hoping we can create a template that can be replicated in other parts of Oregon and across the country

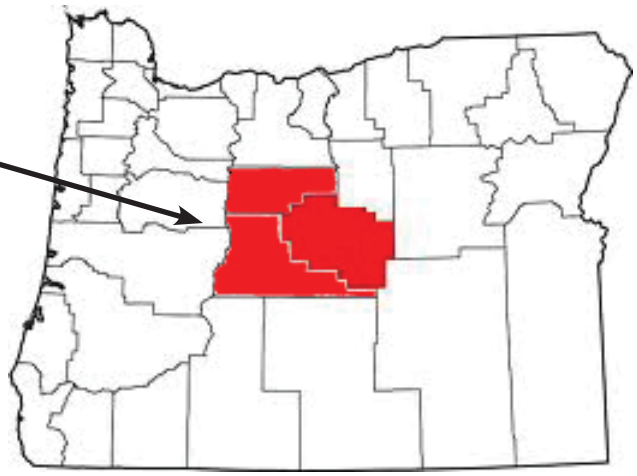
A single "10-Year Plan" for the entire region has been developed, but it recognizes that the individual communities may have very different resources and/or political pressures. Homelessness looks quite different in rural communities like Culver and La Pine than it does in more urban settings such as Bend and Redmond. The 10-Year Plan is viewed as a "living document" that will evolve and change with conditions and participant commitment in Central Oregon. Our goal is to identify and support new resources (such as the faith community) and to create synergy from different communities working together on the issue so all communities will want to participate and learn from one another.

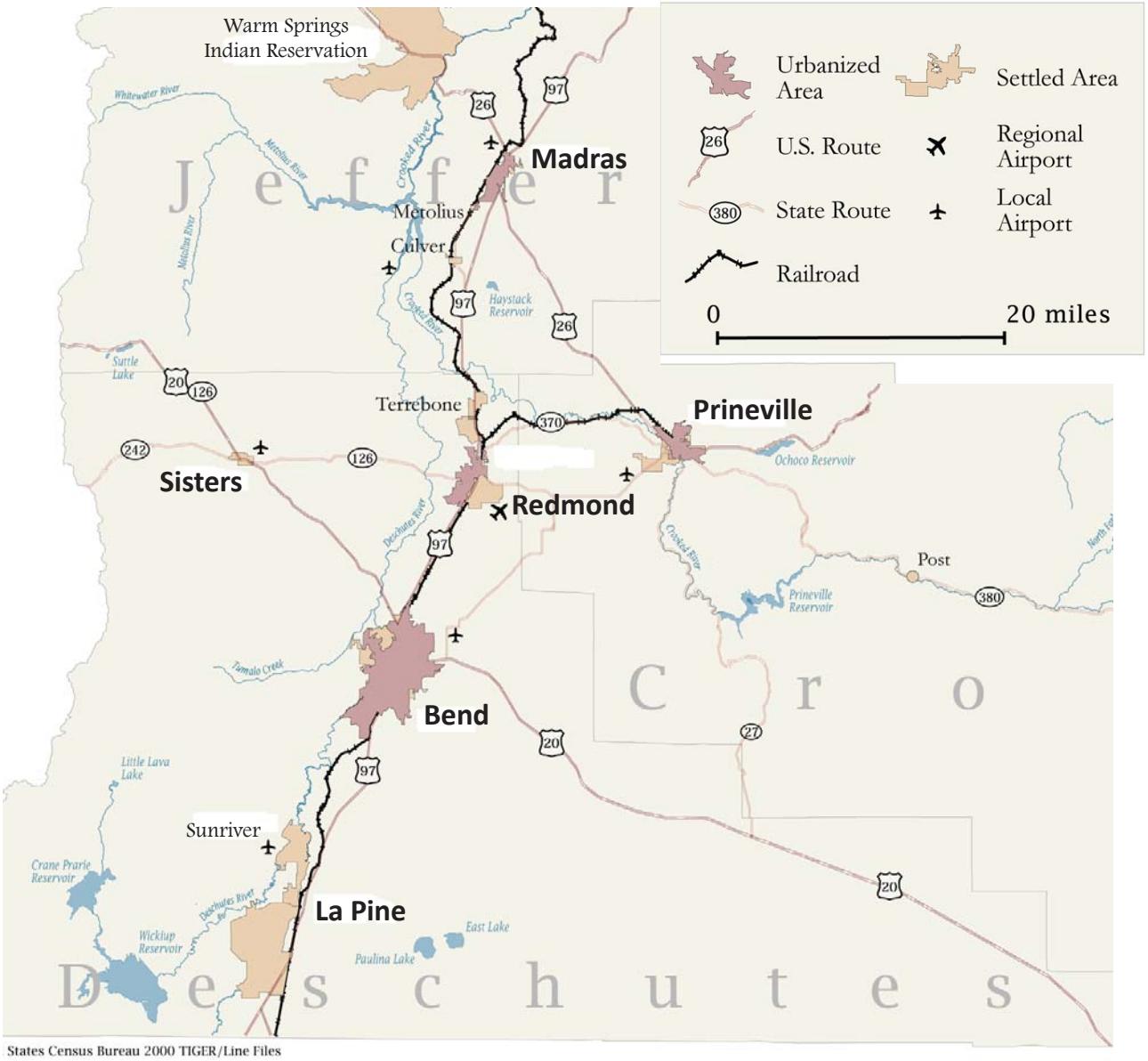
New Resources and New Thinking Needed

Tackling this problem will require a combination of both increased resources and changes in how we currently function as a system. Some changes will be relatively easy to implement while others may be quite expensive or are beyond our direct control. Key elements of the Plan include:

1. $$$ - some elements of the 10 Year Plan will require new sources of funding
2. Policy Changes - to increase flexibility
3. System Improvements - to increase efficiencies
4. Perception Shifts - we need to change stereotypes around the homeless

Central Oregon Tri-County Area





States Census Bureau 2000 TIGER/Line Files

Who is Involved in Developing the 10 Year Plan?

The Central Oregon 10 Year Plan was developed by many volunteers who put in literally thousands of hours in conducting research, meeting with constituents and drafting and reviewing the document. There were several committees who provided particular leadership in this effort.

Working Group - comprised of a wide range of key staff and community members who collected data and community input, researched other successful models from around the country, and drafted the formal 10 Year Plan. The Working Group was headed up by Bruce Abernethy (former Bend Mayor) and Cindy Pasko (Director of Community Services with Partnership to End Poverty) and included representatives from federal, state and local government, non-profits, service providers, law enforcement, the medical community, schools and the homeless population (see complete list below).

Steering Committee - comprised primarily of local elected officials, headed up by Tammy Baney (Deschutes County Commissioner). See complete list below.

Technical Support Committee - comprised of key people who gave additional support and assistance, but were not able to attend regular meetings. This includes Oregon Housing and Community Services (OHCS) Deputy Director, Rick Crager, HUD Regional Manager Paul Carlson and many other state and local representatives who were called upon to provide valuable information and feedback.

"My fifteen year old son is getting depressed, I think. He's so embarrassed by our situation. He doesn't seem to talk much about anything anymore."

10 Year Plan Working Group Members

Name	Organization/Affiliation
Bruce Abernethy	Bend - La Pine School District
Marty Betsch	St Charles
Gary Buss	Living Hope Church
Chris Clouart	Bethlehem Inn
Brenda Comini	Crook County Commission on Children & Families
Scott Cooper	Partnership to End Poverty
Marcella Edmonds	St Vincent de Paul (Prineville)
Sarah Elliot	Deschutes Mental Health/Homeless Leadership Coalition
Lt. Mike Espinoza	Deschutes County Sheriff's Office
Karen Friend	Central Oregon Intergovernmental Council (COIC)
Lin Gardner	Dept. of Human Services (DHS)
Jefferson Greene	Warm Springs
Chuck Hemingway	Central Oregon Veterans Outreach (COVO)
Deborah Henderson-Norton	BLM (Prineville District)
Dennis Kostelecky	Crook County School District
Erik Kropp	Deschutes County
Kenny LaPoint	Housing Works

Yvette Leecy	Warm Springs
Jim Long	City of Bend
Sharon Miller	NeighborImpact
Ron Parsons	Dept. of Human Services (DHS)
Cindy Pasko	Partnership to End Poverty
Anne Philiben	Central Oregon Veterans Outreach (COVO)
Eric Porter	City of Sisters
Deb Price	OR Housing and Community Services
Corky Senecal	NeighborImpact (ret.)
Julie Tapia	Grandma's House

10 Year Plan Steering Committee Members

Name	Organization
Tammy Baney	Deschutes County Commission
Jodie Barram	Bend City Council
Walt Chamberlain	Madras City Council
Jeff Eager	Bend City Council
Gordon Gillespie	Prineville City Council
Mike McCabe	Crook County Court Judge
Ed Onimus	Redmond City Council
Sharlene Weed	Sisters City Council

"I would have never thought I would ever be in the position to need services. I thought they were only for the needy people with no education."

A Return on our Investment

A major motivation for developing a Central Oregon 10 Year Plan is avoidance of the fiscal expenses that accumulate for our cities and counties when homelessness persists. Homelessness is both a moral and social problem with significant economic costs. Fortunately, the upfront investment proposed in this plan will likely more than pay for itself as the number of people experiencing homelessness declines and the costs related to homelessness are reduced. We estimate a full payout on the direct costs of the plan could be achieved by 2021 and a cumulative direct and indirect cost savings of over $40 million achieved by the end of 10 years.

Virtually every goal of the 10-Year Plan assumes/requires the continuity and growth of the shelter and referral services provided by the emergency shelters in the region. Unfortunately, when the need is greatest, we see our regional emergency shelters facing severe funding difficulties, cutting back on services, reducing staff, and even threatened with closure. The current deep recession is forecasted to last until 2015-16 or longer and it is definitely impacting private donors and foundations. Public-sector monies will be needed more than ever, and federal funding is likely to be constricted.

The $40 million return on investment (ROI) will not happen without a supplemental, targeted, and incremental up-front investment from and through regional governments. We estimate that an investment of approximately $10 million (25% of the aforementioned $40 million) will be sufficient to leverage other funds and help the region achieve the 4-fold payback of $40 million ROI. Each major participating governmental entity is strongly encouraged to appoint a representative to a decision-making, high-level blue-ribbon panel to determine where and how to invest to achieve the greatest payback.

This plan was written and will go into effect in one of the most severe economic downturns in history. Our region has the highest unemployment in Oregon, with Crook County having roughly twice the national average (18% vs 9%) Funding and donations are down by approximately 47%. State and local services are having to be cut back drastically. In relief, we are an area rich in volunteerism and generosity. By leveraging our efforts through partnerships, collaborative decision making, and out-of-the-box problem solving, we can create new solutions in an environment of limited financial resources.

"I am trying to get services, but it's hard when you are on foot and my wife's SSI doesn't even cover a month at the motel."

Guiding Principles

When dealing with the homeless and emergency housing sites, there are 4 key criteria that must guide the Plan. For those making use of the services, there must be:

- Safety and security
- Accountability
- Access to resources - housing can't be located out in the middle of nowhere
- Recognition that this is only a bridge - the ultimate goal is to increase self-sufficiency

With that in mind, Central Oregon's 10 Year Plan to End Homelessness is built on the following 12 principles:

1. Ending homelessness is a collective responsibility. This includes those experiencing homelessness who must take personal ownership and accountability in ending their homelessness
2. Our plan will aim to help people become more self-reliant and develop independence.
3. All people experiencing homelessness are ready for permanent housing, with supports as necessary
4. The first objective of homeless-serving systems, agencies, programs and funding must be to help people experiencing homelessness gain and maintain permanent housing (i.e. Housing First)
5. We will target the entire homeless population including the chronically homeless
6. The selection of affordable housing and the provision of services should be guided by consumer choice
7. Resources will be concentrated on programs that offer measurable results
8. Affordable housing is safe, decent and readily attainable. Diverse, integrated, scattered site affordable housing, close to services, is preferred

9. 10 Year Plan funding must be diverse and sustainable
10. The use of markets will be maximized by involving the private sector in the implementation of our 10 Year Plan
11. The economic cost of homelessness must be reduced
12. A well educated, well trained and adequately funded non-profit sector is central to the success of our 10 Year Plan

Next Steps - 8 Things You and Your Community Can Do to Help

Much like the experience of many other communities, developing and drafting a 10 Year Plan took close to 30 months. Now comes the hard part - implementing the Plan!

8 Things You and Your Community Can Do to Help

1. Educate friends and family of the facts surrounding homelessness, including the reasons for homelessness, numbers, etc. The "One-Night Shelter Count" is an excellent resource
2. Join current efforts in your community to serve meals or hand out food boxes to people experiencing homelessness. If these efforts do not exist, consider starting one up
3. Volunteer with a non-profit agency that addresses homelessness or poverty
4. Make sure your community has a homeless shelter or transportation options to the closest shelter
5. Volunteer with local faith-based organizations that are working to reduce homelessness or poverty
6. Work with non-profit agencies and the faith-based organizations in your community to ensure that there is a "community portal" (i.e. intake system or centralized resources) for people and families experiencing homelessness or in danger of becoming homeless
7. Volunteer at Project Connect (or one of the Mobile Connects)
8. Engage community leaders and elected officials in discussions around the availability of affordable housing

Want to learn more? Help out? Provide input or feedback?
Please contact any of the 10 Year Plan representatives below:

Tammy Baney, Deschutes County Commissioner
541-388-6567 or tammyb@deschutes.org

Bruce Abernethy, Grant Writer, Bend-La Pine Schools
541-355-1024 or abernethy9@aol.com

Scott Cooper, Executive Director, Partnership to End Poverty
541-504-1389 or scott@partnershiptoendpoverty.org

Erik Kropp, Deschutes County Deputy Administrator
541-388-6584 or erikk@deschutes.org

Kenny LaPoint, Director Housing and Resident Services, Housing Works
541-323-7419 or klapoint@housing-works.org

What does Homelessness Look Like in our Communities?

Community Profiles

Bend – The City of Bend, with a population of just over 80,000, is the economic, recreational and social center of the tri-county region. Driven by a timber-based economy (i.e. mills, secondary wood products industries, etc.) for much of the 20th century, the economy has diversified over the past three decades to include tourism, development/construction and light manufacturing. In 2005, Bend was the 6th fastest growing City in the entire country in terms of single family housing permits issued. This growth, coupled with an urban growth boundary (UGB) that limited the supply of land, shot housing prices skyward and made the lack of affordable housing a real concern.

Ironically, the collapse of the real estate market in 2007 has made housing much more affordable, but at the cost of significant unemployment and a loss of jobs upon which many homeless depend - construction, landscaping, retail/service positions. Bend is home to the largest shelter in the region (Bethlehem Inn), the bulk of the area's transitional housing units and most of rental housing stock. The City has reached a size where it now receives CDBG funds directly as opposed to having to compete for them. In addition, the City has implemented several affordable housing initiatives including a list of developer incentives, a mobile home park ordinance and an affordable housing fee.

Redmond – The City of Redmond is centrally located within the tri-county area which helps explain why it is home to the region's commercial airport, the Deschutes County Fairgrounds, and three of the largest regional nonprofits - NeighborImpact, Housing Works and Partnership to End Poverty. At 26,000, Redmond is the 2nd largest city in the region and has been Oregon's fastest growing city over the past decade, benefitting from Bend's growth to the south, and a significant investment in transportation (Hwy 97 Bypass), medical services (St Charles – Redmond expansion) and education (built new K-12 schools).

In the 1940s, Redmond was selected as a U.S. Army Air Base and commercial air service was established at Roberts Field after World War II. Much of Redmond's economic history is based in agriculture although it too has undergone significant diversification in the last two decades. At its COCC campus, Redmond boasts of the region's Manufacturing and Applied Technology Center (MATC) which serves as a technical training center for many of the area's manufacturers.

Madras/Jefferson County – The City of Madras (pop. 6,650) is the County seat of Jefferson County (pop. 22,865). Incorporated in 1910, Madras and the nearby towns of Culver (pop. 1,200) and Metolius (pop. 750) were all communities built originally as service centers for a growing agricultural sector and the booming railroad industry. Later in the century, Madras experienced another economic boom with the establishment of a US Army Air Base during World War II.

Unlike its more urban communities to the south (Bend and Redmond), Jefferson County is the agricultural hub of the region featuring vegetable, grass and flower seeds, garlic, mint and sugar beets including holding down the title of world leader in carrot seed production. The community has extensive industrial land and is home to one of the region's largest employers (Brightwood Industries). Diversity can also be found in the cultural mix of residents with significant populations of both Hispanic and Native American residents. Madras has recently passed a zoning ordinance which makes it easier for community partners to respond to short-term homeless needs that are related to inclement weather (a "cold-weather shelter").

Prineville/Crook County – The City of Prineville was established in 1868 which makes it the oldest community in Central Oregon. For many years, the economy was tied to the land – agriculture, timber and farming – but the strong presence of Les Schwab Tires (founded in Prineville in 1952) has helped anchor an ongoing effort to grow and diversify the economy.

Prineville has been especially hard hit by the economic downturn which has led to the highest unemployment rates in the state (peaking above 20%) and caused significant hardship throughout the community. Fortunately, spirits have been buoyed by the recent arrival of Facebook and the decision to build its first company-owned data center in Prineville. In addition, federal jobs with the Bureau of Land Management and Forest Service and a growing tourism industry have helped diversify the area.

Sisters – The City of Sisters maintains a "Western style" façade (and an annual rodeo) that belies its image as one of the most picturesque backdrops in the state. Much like the community of La Pine (see below), the official population of Sisters (pop. 1,935) is not fully representative of the much larger "Sisters community" which extends in all directions into stands of Ponderosa Pines.

With a limited economic base, Sisters utilizes several nonprofits and service clubs to deliver most of its housing/poverty-related services. Tamarack Village, a 33-unit affordable housing community, was built in 2003, but it only makes a small dent in the overall need. A new group – the Sisters Homeless Coalition – has recently formed and is taking the lead on identifying needs and prioritizing responses.

La Pine – In 2006, La Pine became Oregon's newest city, incorporating a 7 sq mile swath (pop. 1,635 people) of the downtown. For most people, however, the La Pine community is a much larger footprint and is comprised of close to 20,000 people who live in a loose collection of homes and businesses along US Hwy 97 about 30 miles south of Bend. The area is rural in nature with most of the residential development concealed from the highway itself and significant arid desert and forest lands in close proximity. An estimated 13.4% of La Pine residents live below the poverty line and the percentage of homeless students is estimated in the double digits. In 2010, a 26-unit affordable, independent living community (Little Deschutes Lodge) was built which provides quality housing for low-income seniors.

Information on the Region

Central Oregon is facing many significant challenges as a result of the recent economic downturn. These challenges include higher unemployment, increased foreclosures, and additional demands on social services at a time of decreased financial support for non-profits. The region was particularly hard hit by the collapse of the housing markets and construction industry decline that cut construction employment in Deschutes County and the surrounding area by almost 2/3 since December 2007. Before the recession, the construction boom generated all kinds of economic activity and jobs at building-supply stores, restaurants, outdoor stores and other businesses where people in construction and real estate development were spending money.

When the construction economy crashed, it reverberated throughout the economy. Businesses of all kinds had to lay off employees and many closed their doors. As mentioned above, the types of jobs that are often available to the homeless or those in transition - landscaping and construction positions - are not doing well in this economy which is making it that much more difficult for them to earn a living.

The Associated Press Economic Stress Index ranks counties from 1 to 25^{+} based on their unemployment, bankruptcy and foreclosure data with 1 denoting the least economic stress and 25^{+} denoting the highest level of stress. As of December 2010, Central Oregon had the highest Economic Stress Index rates in the state (Crook County #1, Deschutes County #2 and Jefferson County #3).

	Crook County		**Deschutes County**		**Jefferson County**	
	Dec. 2010	Oct. 2007	Dec. 2010	Oct. 2007	Dec. 2010	Oct. 2007
Stress Index	22.53	6.44	20.64	5.78	18.37	6.94
Unemployment	18.0%	5.8%	14.7%	4.8%	15.1%	6.2%
Foreclosure	3.07	.05	4.53	.50	2.42	.13
Bankruptcy	2.54	.63	2.55	.54	1.47	.65

One Night Shelter Count (ONSC)

Each year, under the auspices of the federal Department of Housing and Urban Development (HUD), thousands of individual volunteers and agencies across the country participate in conducting confidential and anonymous surveys to identify the number of people dealing with homelessness. For many communities, this count provides the most up-to-date information about the number of individuals who are struggling to find adequate housing. Through this data, local agencies and programs are then able to qualify for increased funding, better target critical support services, direct public policy planning and development, and ultimately develop comprehensive plans to address poverty and homelessness.

In 2006, the Homeless Leadership Council (HLC) assumed lead responsibility for starting such a count in Central Oregon. Held each year in late January, the One Night Shelter Count (ONSC) provides an invaluable snapshot of Central Oregon's homeless population in a 24-hour time frame. From soup kitchens and food stamp agencies to schools and homeless camps on the outskirts of town, hundreds of volunteers canvas the region, identifying people who are considered homeless (including those who are doubled up or living in unsafe conditions) while distributing critical supplies and equipment. Oregon Housing and Community Services (OHCS) provides the count instructions and surveys so data can be standardized across the state. Respondents are asked to provide information about their age, family composition, housing situation (in a shelter? motel? on the streets or in the woods?) occupation? and many more.

In spite of the many challenges of trying to count a population that, by definition, does not have a mailing address or phone, the local ONSC has been very successful in identifying the homeless and providing them with supplies and referrals to community resources. Community awareness has also risen as evidenced by an increase in the total number of ONSC volunteers.

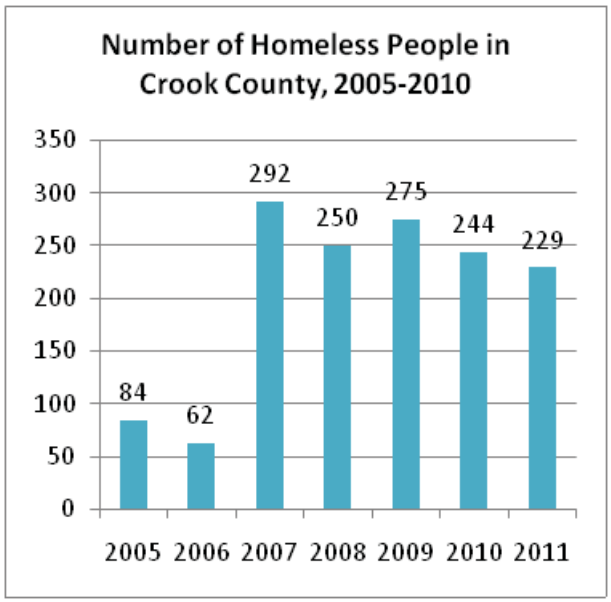
Total Homeless in the Tri-County Region - One Night Shelter Count (ONSC)

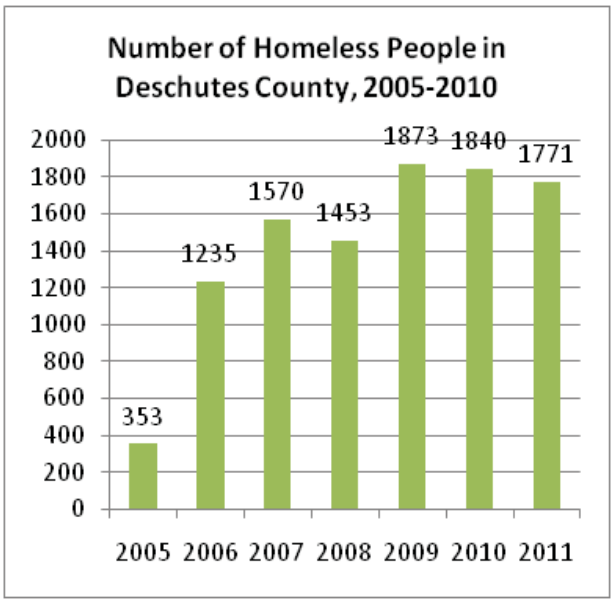
One Night Shelter Count categories	Adult Male	Adult Female	Children (<17)	Total Individuals	Total Households
Date of Count - January 27, 2011	664	575	1,032	2,271	1,165
Date of Count - January 28, 2010	741	663	989	2,402	1,179
Date of Count - January 29, 2009	733	628	876	2,237	1,154
Date of Count - January 31, 2008	514	473	749	1,736	875

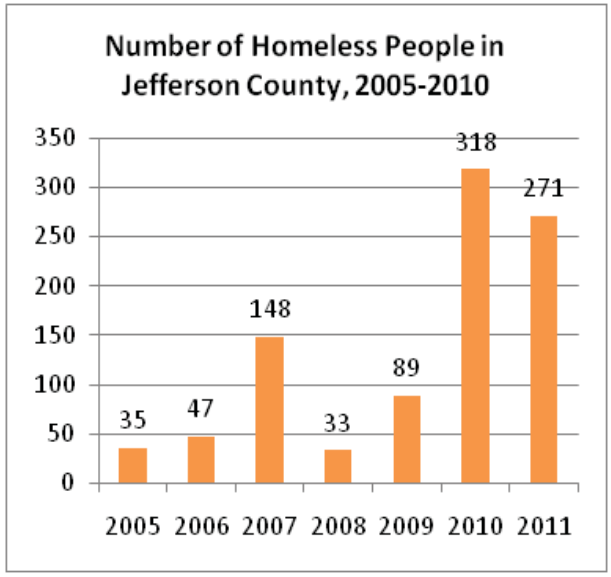
Households surveyed identified inability to afford rent, unemployment, and being kicked out as major causes of homelessness. A significant number of homeless persons were children and/or were homeless persons self-identifying that they suffered from a psychiatric disability.

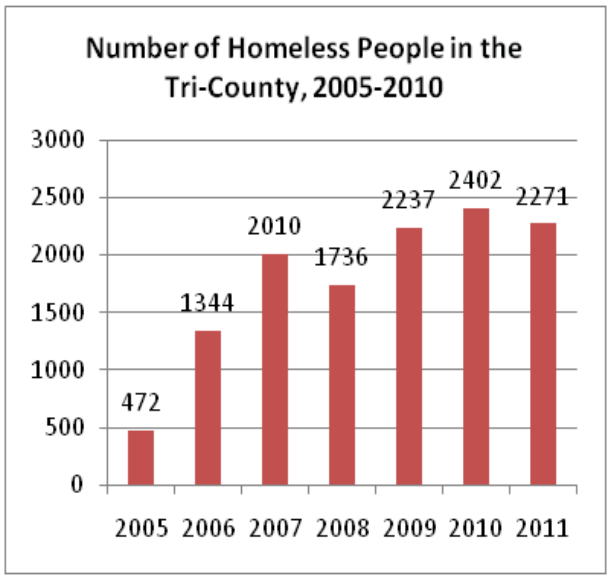
"Homeless people live in cardboard boxes, don't they? That's what some kid said to me today.
Then he laughed. I laughed too.
Then I went back to the shelter and cried."

-Jamie, 13

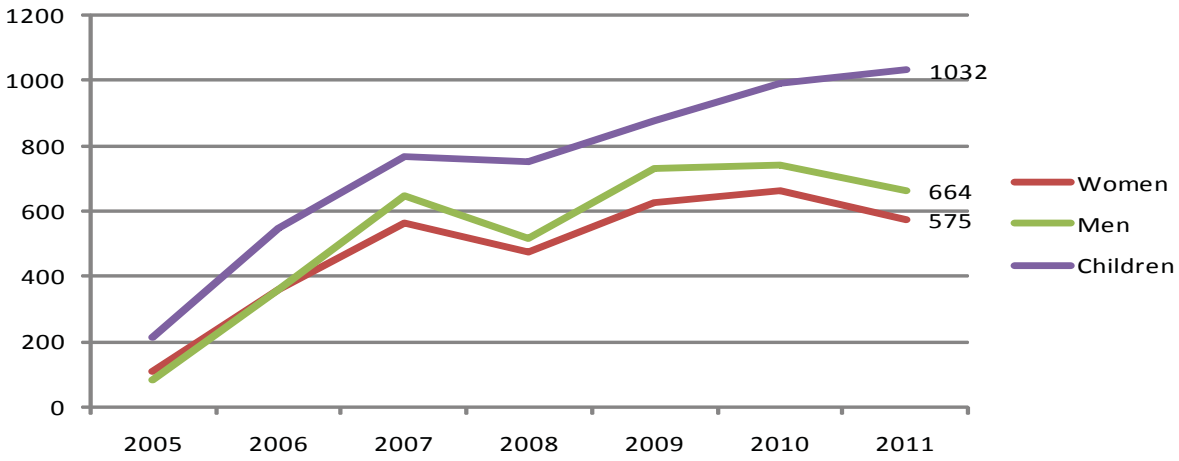








Central Oregon Homeless - by Gender and Age



Runaway and Homeless Youth

On any given day, Central Oregon has an estimated 90-130 documented unaccompanied homeless youth between the ages of 12-17. However, all local agencies working with youth believe the actual count to be much higher. The count for accompanied homeless youth in this age group has been documented at well over 350 and may be as high as 600 (the discrepancy is due to One Night Shelter Count limitations). According to the National Runaway Switchboard, over 50% of youth in shelters and on the streets reported that their parents either told them to leave or knew they were leaving but did not care. An estimated 80% of runaway and homeless girls reported having been sexually or physically abused. 43% of runaway youth (girls and boys) reported physical abuse before leaving home.

Many youth who are either homeless or are on the verge of becoming homeless lack access to and awareness of the assistance they need. Because unaccompanied homelessness is fraught with danger, children and youth are ill prepared to manage even the basics of survival. Within the first 72 hours on the street, most homeless youth are approached by at least one human trafficker. Because so many of kids have experienced adults who have hurt them emotionally and/or physically, and they are so mobile, street kids are especially difficult to reach out to.

Homelessness in the Schools

In 2009, in an effort to better address the needs of homeless students throughout the region (and to jointly apply for a federal McKinney-Vento grant), six Central Oregon school districts and one educational service district came together as the "Central Oregon Consortium." Members include: Bend – La Pine, Redmond, Sisters, Jefferson County, Crook County and Culver School Districts and High Desert ESD (Black Butte School District was added in 2011). Altogether, these seven districts serve over 30,500 students in the tri-county region. As can be seen in the table below, the number of homeless students in the region has increased rapidly in just the past few years.

Number of Homeless Students in Consortium Partner Districts

School District	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	% of student population
Bend – La Pine	391	518	624	709	799	726	4.6%
Crook County	53	75	98	58	48	40	1.4%
Culver	15	8	7	11	43	47	7.4%
Jefferson County	40	21	43	19	67	94	3.4%
Redmond	141	203	222	275	313	235	3.4%
Sisters	2	14	25	8	36	35	2.7%
Total	642	839	1,019	1,080	1,306	1,136	3.7%

While sharing a common purpose to address the needs of these at-risk students, the districts are quite different in size, available resources and experience with running comprehensive homeless student support programs. The two largeest school districts - Bend–La Pine (Project HELP) and Redmond (Redmond Homeless Education Program) - each have well established programs that provide not only identification and enrollment services, but also a variety of academic and social programs to increase academic performance and school connection. Both programs feature a dedicated staff person (Homeless Liaison) whose sole or primary focus is to address the basic needs of homeless students including all related educational support. The Homeless Liaisons also spend a great deal of time out in the community attending related meetings, giving presentations, fundraising, and generally developing partnerships and additional resources to help homeless students.

In contrast, the smaller school districts, while remaining compliant with federal and state regulations, face daunting capacity constraints. Fortunately, due to the previous 2-year McKinney-Vento subgrant, they all have a dedicated part-time staff person (i.e. Homeless Liaison) who has this as the sole or primary purpose of their position. (As proposed, Black Butte School District will rely upon Sisters School District for services). Unfortunately, because of significant budget cutbacks, and the lack of staff time to generate resources, many of the smaller school districts have typically not been able to provide additional programming options nor develop much in the way of community support.

Fortunately, the Consortium was approved for another two year McKinney-Vento grant in June 2011. Consortium activities will include training/mentoring, district staff training and assistance with networking in the community to increase resources for homeless students. In addition, there are several efforts around homelessness that have increased community awareness of the issue, mobilized resources and helped improve overall coordination of services. These efforts include the Homeless Leadership Coalition expanding from Deschutes County to tri-county, Project Homeless Connect, and the numerous initiatives spawned from the 10 Year Plan to End Homelessness.

"I feel sad and lonely. When you ask for help, your friends say, 'I have something else to do.' It's like you've been kicked down and are a third class person."

-Nickolas, 18

Veterans

Central Oregon has a relatively large population of veterans who are experiencing homelessness or are on the cusp of being homeless. Figures from the 2010 One-Night Shelter Count document that there were 85 individuals who identified themselves as veterans and homeless. In the 2011 count, this number rose to 105. Perhaps reflecting the increasing number of women in the military, there has been growth in the number of homeless female veterans. In January 2010, figures gathered by Central Oregon Veterans Outreach documented 3 homeless female veterans and in January 2011 this number had risen to 14.

Ancedotal information from Central Oregon National Guard officials and military recruiters indicate that many young men and women are choosing to enter the military to enhance their income and that many who are deployed opt to re-deploy upon their return because of the lack of private sector jobs in Central Oregon.

If trends from previous wars are any indication, Central Oregon will likely experience a significant rise in veteran homelessness beginning in the next 5 to 10 years. With the graying of the Vietnam and post-Vietnam era veteran population, coupled with the number of young veterans who have returned from Iraq/Afghanistan deployments, there are two bubbles in the pipeline. As older veterans reach retirement age and long-suppressed emotional issues surface, they face an of increased risk of homelessness. As younger veterans move through the pipeline and age, many emotional (and physical) issues related to their deployments will surface and they too will become increasingly at risk for becoming homeless.

Homeless Housing Inventory in Central Oregon

*Emergency Shelter Beds/Units**

	Family Beds	Family Units	Individual Beds	Total Year Round Beds
Bethlehem Inn - Bend	13	3	40	84
Safe Homes (Cascade Youth and Family Center) - Regional	0	0	12	12
Deschutes County Parole and Probation	0	0	18	18
Grandma's House (pregnant/parenting teens) - Bend	20	10	0	20
Nancy's House (NeighborImpact) - Bend	14	5	0	14
Saving Grace (Domestic Violence) - Bend	15	5	3	27
The Shepherd's House - Bend	0	0	35	35
Madras Gospel Mission - Madras	5	1	9	14

*Transitional Housing Beds/Units**

	Family Beds	Family Units	Individual Beds	Total Year Round Beds
Stepping Stones (Housing Works/Best Care) - Redmond	0	0	5	5
The Loft (Cascade Youth and Family Center) - Bend	0	0	17	17
Horizon House (Housing Works/DC MH) - Bend	0	0	13	13
Transitional Housing Program (NeighborImpact) - Bend	120	39	0	120
Jericho Road - Redmond	6	2	0	6
Home of the Brave (Central Oregon Veterans Outreach) - Bend	0	0	6	6
Emma's Place (Housing Works) - Bend	0	0	11	11
Prairie House (Housing Works) - Prineville	0	0	7	7

** Total capacity may be higher as some locations limit length of stay (i.e. greater turnover will permit more people to use the service, albeit for shorter periods of time) - check with the provider*

Town Halls on Homelessness

On July 22, 2010 six Central Oregon communities joined forces to concurrently hold a special "Town Hall on Homelessness" in a unique effort to bring the community together to talk about this issue, review current thinking around a regional 10 year Plan to End Homelessness and identify new ideas for reducing homelessness in their own community and throughout the tri-county area. Town Halls were held in Bend, Redmond, Sisters, La Pine, Madras and Prineville and the feedback from both participants and facilitators was very positive. Attendance ranged from 8 to over 30 people with most reporting 18-25 people. In addition to strong turnout by nonprofits, most town halls had community leaders such as elected officials/City administrators and members of the faith community in attendance. Groups with lower than hoped for attendance included the business and medical community, law enforcement as well as the homeless themselves.

In each Town Hall, a facilitator presented data about homelessness in the region (e.g. One Night Shelter Count statistics), gathered information about the need and resources within that community, and walked people through the Planning Update which listed more than 30 potential strategies for the Regional 10 Year Plan. As a whole, the participants were quite supportive of the identified strategies, recognizing that many of them would not likely happen without additional federal or state funding. Overall, the groups agreed that a regional problem-solving approach is particularly good in some areas such as coordinating resources, but that each community has its own characteristics and needs. They stresses that the 10 Year Plan needs to be flexible - it should not be a "one size fits all" plan - and several communities expressed an interest in also developing their own local plan on homelessness.

Priority items/feedback included:

- The need for improved communication – not only for the homeless about available services, but also between agencies/organizations (i.e. coordinated intake system)
- The need to educate the public around homelessness – reducing the stigma associated with homelessness will increase the number of people seeking assistance and increase volunteers and funding
- The need to reduce regulatory barriers at all levels – government, financial, insurance, etc.
- We need to collect better data at the individual community level (not just at the County level)
- We need to engage the faith community which is an underutilized resource in many communities
- Most of our ideas focus on "financial capital" (assets). We might also want to look at strategies that enhance "social capital" (friends, networks) and "human capital" (skills)
- We need to develop a consortium of professional services for the homeless (much like the Kemple Dental Clinic for dental care, and Volunteers in Medicine for medical care, etc.)
- Make mentoring a very high priority – it is relatively low cost and high impact

- Classes on managing household/budgeting need to be developed for youth and should be included in high school curriculum
- Establish Leadership Committees (of business and community leaders) in every community because they are the people who understand how to take the money and make it work
- We need to have a better mechanism in place to get input from the homeless themselves

Local Efforts/Local 10 Year Plans are Critical

The regional 10 Year Plan to End Homelessness is intended to provide a broad framework of ideas that can be incorporated at a regional, county, community and even neighborhood level. We recognize that in many instances, it will be at these more local levels that the "rubber hits the road" and new units are built, families receive the support they need, and homelessness is ended (or prevented in the first place).

Recognizing that the communities will face different situations with diverse needs and varying levels of resources, it is our hope that these regional ideas can be applied to local communities or spur new initiatives – several Central Oregon communities are even taking this idea to heart and developing their own 10 Year Plan. For example, a Sisters Homeless Coalition has recently formed and produced a School Liaison and a Veteran's Outreach Liaison. The Sisters Coalition is in the process of creating a local 10 Year Plan to End Homelessness, and are developing goals and strategies that will make the plan sustainable and meaningful for the community. The Sisters Plan mirrors the goals of the regional plan, albeit at a much smaller scale, and identifies resources and opportunities that are unique to Sisters.

"I worked for a medical clinic doing medical transcripts and I started having trouble focusing and remembering things. My problem progressed, so I finally sought medical treatment for myself and discovered that I had a thyroid dysfunction. I have had to take leave from work but my condition worsened to the point of needing surgery and trials of medications."

Components of the Central Oregon 10 Year Plan to End Homelessness

Tackling this problem will require a combination of both increased resources and changes in how we currently function as a system. Some changes will be relatively easy to implement while other may be quite expensive or are beyond our direct control. Our community's 10 Year Plan goals have been drawn from the needs of those experiencing homelessness in Central Oregon as well as from examples of other 10 Year Plan communities in Oregon and nationwide.

Some of these strategies can be implemented immediately and call only for implementing new policies or practices that will, in and of themselves, better our impact on homelessness without requiring new funding. Others will come about by shifting the existing resources in our community and investing in "pilot" initiatives that, when proven, will invite funding from outside partners. Others are new initiatives requiring resourceful pursuit of federal and state resources as well as investments from private contributors. The Plan also calls for major policy changes by all levels of government as well as long-term investments that will take several years to show results. Key elements will include:

1. $$$ - some elements of the 10 Year Plan will require new sources of funding
2. Policy Changes - to increase flexibility
3. System Improvements - to increase efficiencies
4. Perception Shifts - we need to change/eliminate stereotypes around the homeless

There are six broad Goal categories which contain the various strategies for ending homelessness. All of the Goals and Strategies in the Central Oregon 10 Year Plan were chosen for their proven track record, their cost effectiveness, and their likelihood of addressing the root causes of homelessness. Taken together, these Strategies will significantly amplify our communities' commitment to reducing homelessness.

Note: An ONGOING Strategy is essentially one that is already happening somewhere in Central Oregon and we seek to maintain and/or expand it to other communities and to more residents. A NEW Strategy is one that has not been tried or is not currently happening in Central Oregon and we must find the "local champions" to help develop the structure to make it happen over the next 10 Years.

6 Goals and 35 Strategies

Goal 1 Homelessness Prevention
Goal 2 Increase the Supply of Affordable Housing
Goal 3 Appropriate Support Services
Goal 4 System Improvements
Goal 5 Education and Outreach
Goal 6 Improved Data

Goal 1 Homelessness Prevention

Prevent and divert people from becoming homeless by working with them directly to obtain and/or keep their housing. The primary strategy is to provide additional resources (or reduce expenses) so people can continue to pay for their housing (this applies to both rental and mortgage). Current efforts need to be continued and/or expanded and new programs developed.

- Provide rental/utility assistance to low income households - ONGOING
- Provide foreclosure prevention assistance - ONGOING
- Assist low income families to remove barriers to housing - ONGOING
- Provide landlord-tenant mediation and assistance - ONGOING
- Develop classes on budgeting/managing household finances that are offered to youth - NEW
- Develop a Centralized Emergency Assistance Center (a "One stop") in every community - NEW

Goal 2 Increase the Supply of Affordable Housing

Expand, develop, and coordinate the supply of affordable housing/supportive services to prevent and end homelessness, and shorten stays in emergency shelter. This goal is all about adding "physical capacity" to the system. It focuses on building additional housing units and/or making existing units accessible to the formerly homeless. This goal will require the greatest amount of direct financial support which will come from federal, state and local government as well as the development of new sources of funding.

- Add additional transitional housing units and shelter beds in all communities - ONGOING
- Promote and support Cooperative Housing models - ONGOING
- Develop creative, inexpensive, and more flexible housing units - NEW
- Build Permanent Supportive Housing (PSH) units using the Housing First model - NEW

Goal 3 Appropriate Support Services

Build the capacity of homeless persons for self-support through strategies that identify their risk of homelessness, document their specific needs, and help them access housing with appropriate supportive services. This includes not only developing new services/ resources, but also making sure that everybody knows about them.

- Provide substance abuse treatment services - ONGOING
- Provide transportation services to shelter - ONGOING
- Provide/expand transportation to employment and services - ONGOING
- Ensure access to job training and employment - ONGOING
- Develop Homeless Courts that can resolve issues in a single day event - NEW
- Develop new strategies that enhance "social capital" and "human capital" - NEW
- Develop a service bank of professional services for the homeless - NEW
- Securing identification (ID) and mail services for the homeless - NEW
- Develop Social Security Benefit Advocate position - NEW

Goal 4 System Improvements

This goal is all about improved communication and coordination among agencies and organizations at the funding and service delivery level. A related strategy is to improve discharge procedures so people are not discharged from jail, hospitals, or the foster care system directly into homelessness.

- Implement model ordinances and policies to ensure that homeless shelters and transitional housing can be located in all Central Oregon communities - NEW
- Ensure appropriate discharge from the foster care system - NEW
- Improve discharge from the corrections system - NEW
- Improve discharge from the ER - NEW
- Develop a coordinated intake system that can be used by all service providers - NEW
- Create a Youth "drop in" center based on a Maslow Youth Center model - NEW

Goal 5 Education and Outreach

Implement education and public awareness campaigns to remove societal stigma about homelessness and to build community support and coordinated responses

- Expand and support the regional and local Project Connect model - ONGOING
- Coordinate the community education/resource information system - ONGOING
- Develop information materials and training on community resources for law enforcement and other stakeholders - NEW
- Establish ongoing advocacy in all communities while ensuring increased collaboration and accountability - NEW
- Establish a "Leadership Committee" of business and community leaders on this issue - NEW
- Develop a Report Card or similar mechanism to show progress - NEW

Goal 6 Better Data

Improve data collection technology and methodology to better track homeless program outcomes

- Expand One Night Shelter Count to get better regional and community-specific information - ONGOING
- Fill the gaps in the local Continuum of Care - ONGOING
- Continue the McKinney-Vento regional effort with local schools - ONGOING
- Track first responder and emergency room care statistics - NEW

Goals and Strategies Approach and Timeline

A Phased Approach
Central Oregon's 10 Year Plan to End Homelessness will be executed in three phases:

Phase One (roughly 6-24 months, running from 2011 to the end of 2013) - we aim to create rapid, visible and meaningful change by focusing our attention on "low hanging fruit" - those projects that are already in progress or quickly achievable, and the formation of task groups charged with obtaining necessary funding, policy change, or resources. This Phase also lays the ground work for the following tasks in Phase Two and Three.

Phase Two (24 months to 5 years, from 2014 to the end of 2017) - will be focused on the deeper systemic changes, filling in critical gaps and making adjustments to our plan based on the effectiveness of Phase One and a better understanding of the system.

Phase Three (5 to 10 years, from 2017 to 2022) - is the fine-tuning phase, where we will make the final adjustments necessary to complete and sustain our success.

A Living Document
Central Oregon's 10 Year Plan is a living document that incorporates feed-back loops along with accountability to the Goals. As we progress through the implementation process, we expect additional gaps and barriers to surface. We also know that the Goals we have listed are not complete in and of themselves. Rather than a static "piece of paper." we can adjust the Goals and processes as we go. By incorporating and leveraging the expertise of many organizations and individuals over the next ten years, we can adjust to the changing demands and resources in our communities.

Alignment with State and Federal Planning Efforts
At the outset of the planning process, planners in Central Oregon recognized the importance of matching local efforts with those underway at the state level. Accordingly, they aligned their local intentions to the Goals set out in the Action Plan to End Homelessness in Oregon developed by the Oregon Ending Homelessness Advisory Council. Reviewed were specifics of the state's vision, mission, parameters, values, and action plan goals. This process ensured that the Plan Strategies developed in Central Oregon included the state's intentions such as the goal of using data and outcome based models to end homelessness and that of improving cross-system planning and policies that end homelessness.

Homeless Leadership Coalition Will Assume Lead Role in Plan Implementation
We are extremely fortunate that the Homeless Leadership Coalition (HLC) has agreed to assume the lead role in monitoring and implementing the various components of the 10 Year Plan. This umbrella organization is well positioned with representatives in all communities and a network that can bring in expertise and funding as needed. Their role will look different with the different strategies - from forming and convening task forces to identifying new partners, leveraging resources and raising community awareness, etc.

Appendix A

Goals and Strategies

1.1 Provide rental/utility assistance to low-income households - ONGOING

Description of the strategy: Providing rental assistance through subsidized payments or below market rent is a proven, highly effective way to help low-income households make ends meet and keep a roof over their heads. Providing utility assistance is another way of reducing overall household expenses so limited funds can be freed up to cover shelter and/or other basic needs.

Current status of the strategy: Every local rental and utility assistance program has far more applicants than available funds. The vast majority of general rental and utility assistance in the region is currently provided by Housing Works (HW) and NeighborImpact (NI) who receive federal and state funding to run distinct programs. The Department of Human Services and Veterans Services also provide limited assistance to those who fall within very narrow guidelines. In addition, various nonprofits and churches provide assistance on an as needed (and funds available) basis. Agency waiting lists for assistance can be from between four months to almost two years. Several area churches and faith-based non-profits provide cash assistance for a portion of rental and/or utility payments. The assistance is often partial and dependent upon the applicant finding the additional funds elsewhere. These funds are limited and dependent on donations. Obviously, many people will go homeless before they can receive help.

LIEAP (Low Income Energy Assistance Program) is a federal program that provides funds to help low-income households with their utility expenses. These funds are available on a priority basis - 1) Seniors and People with Disabilities, and 2) Low income families with children <6. The number of applicants often overwhelms the capacity of agencies to process them in a timely manner.

Barriers to implementation/expansion: All programs mentioned above currently exist, but 1) they are oversubscribed and dependent upon federal and state allocations or donations from the public; 2) the amounts available and when funds are released are beyond our control (National and State advocacy groups are working on getting the appropriate resolutions through Congress); and 3) each program or source of assistance has varying application qualifications. Those requesting assistance may not qualify, may be referred for other services or may be placed on a waiting list.

Key Stakeholders: Housing Works (lead), NeighborImpact (lead), faith-based groups (lead), local nonprofits, FAN (Family Access Network)

Outcome Measures:

- # of vouchers and total $ spent in the community

Timeline and Action Steps:

1. Create a regional housing advocacy council for housing policy coordination and advocacy, comprised of representatives of key housing stakeholders (by Jan. 2012)
2. Create a regional policy agenda and explore the potential benefits of hiring a regional lobbyist for human services (by June 2012)
3. Engage elected officials at all levels to support a coordinated agenda of the agencies that serve low income people (by June 2012)

1.2 Provide foreclosure prevention assistance - ONGOING

Description of the strategy: Foreclosure prevention/default mortgage counseling offers in-depth individual counseling to homeowners who anticipate having trouble paying their mortgage or have defaulted on their mortgage and are facing foreclosure. Clients better understand their options, and if appropriate, are helped to submit a loan modification application. Over the last few years, this program has assisted hundreds of households.

Current status of the strategy: NeighborImpact is a HUD-approved housing counseling agency that offers free foreclosure prevention workshops and one-on-one counseling to homeowners in Crook, Deschutes and Jefferson counties. The class is open to anyone who wants to learn more about foreclosure, rights of homeowners, options available to work with their lenders and prevent foreclosure, and how to avoid foreclosure rescue scams. After attending the workshop, individuals who are at risk of losing their primary residence may seek one-on-one counseling with a NeighborImpact housing counselor.

After submission of the loan modification packet, the client and the counselor continue to follow up on the application until the lender makes a determination. During counseling sessions, every aspect of default and delinquency are addressed including ways to maximize income and reduce expenses. NeighborImpact is part of the state's SafeNet initiative, and receives funding from the OR Housing and Community Services National Foreclosure Mitigation Counseling Program grant. Unfortunately, NeighborImpact cannot work with clients who wish to file for bankruptcy. Clients who want to pursue this option are encouraged to contact an attorney.

Some individuals may not want or need education and counseling for foreclosure prevention. They should go to the Making Home Affordable website (www.makinghomeaffordable.gov) to determine whether they qualify for the Home Affordable Refinance Program (HARP) or the Home Affordable Modification Program (HAMP). Applications can be downloaded from the website and submitted to your loan servicer. Individuals who want to navigate the refinance or loan modification process on their own can also do so by contacting their loan servicer directly.

Barriers to implementation/expansion: The biggest challenge is that the program is currently grant funded so it's entirely possible that unless additional funding can be secured, these services may not be available in the future.

Key Stakeholders: NeighborImpact (lead), Legal Aid Services of Oregon, realtors, local lenders (banks, credit unions, etc.), non profits as a referral

Outcome Measures:

- # of individuals who choose to speak to a foreclosure specialist from NeighborImpact
- # of foreclosures that are prevented through NeighborImpact

Timeline and Action Steps:

1. Monitor and advocate for continued funding of the NeighborImpact program (ongoing)
2. Assist in providing advocacy to obtain future grants, funding or alternatives (ongoing)

1.3 Assist low income families to remove barriers to housing - ONGOING

Description of the strategy: Low-income families often face a wall of obstacles when seeking affordable housing. These barriers can consist of poor credit, poor rental history, criminal history, and lack of available cash for rental deposits. In many cases, these conditions will prevent people from obtaining suitable housing and leave them and/or their families homeless. By assisting an individual or family with repairing poor credit and rental history, they are better able to obtain or retain stable housing. In addition, many individuals with felonies, and the accompanying inability to obtain employment, find it extremely difficult to secure housing.

Current status of the strategy: Families Forward - a non-profit 501(c)3 organization established by Housing Works - offers a 4-6 week class ("Ready to Rent") that can help many households overcome the obstacles listed above. The program educates potential renters on how to be responsible members of the rental community while also providing financial literacy training to those with past credit issues. At the end of the final session, participants receive a Certificate of Completion which can be presented to landlords as proof of their achievement. Families Forward has partnered with many landlords and property managers in the Central Oregon region who are willing to accept the Certificate of Completion in lieu of requiring higher deposits from tenants. A major advantage to landlords who are willing to accept Ready to Rent program participants is that Families Forward has partnered with OR Housing and Community Services to offer a "guarantee" on the tenants who have completed the courses. The guarantee covers damages (beyond normal wear and tear) as well as eviction costs up to $1,000 above the already collected security deposit.

Mid Oregon Credit Union, NeighborImpact and several other entities also provide courses and assistance to help the public learn or improve their budgeting and resource management skills, along with strategies to build a good credit history.

Barriers to implementation/expansion: The biggest challenge is that the Ready to Rent course, despite significant benefits, is not that well known by property managers and area landlords. In addition, there is currently very limited assistance of any kind for those with felony criminal histories who need housing.

Key Stakeholders: Housing Works (lead), landlords, property management companies, banks, credit unions, employers, St. Vincent de Paul, Goodwill Industries, Department of Corrections, Department of Human Services, NeighborImpact, FAN, Homeless Liaisons

Outcome Measures:
To be determined by a stakeholders group

Timeline and Action Steps:
1. Convene local stakeholders to explore strategies to coordinate and strengthen regional efforts to remove barriers for those with damaged credit or rental histories (by Jan. 2012)
2. Continue to establish partnerships with these key stakeholders to expand their knowledge and utilization of the program (ongoing)

1.4 Provide landlord-tenant mediation and assistance – ONGOING

Description of the strategy: Disputes between tenants and landlords/property managers remain an often unresolved issue that can lead to homelessness for many in our community. These issues are frequently caused by lack of education and available advocacy for tenants coupled with unethical, and in some cases illegal, practices by landlords/property managers. Given the situation, tenants typically do not see themselves in a strong bargaining position and generally accept their fate based on information provided by landlords/property managers.

The proposed strategy is to increase overall renter awareness and access to resources like mediation and legal representation that can help them combat any unfair practices and discourage landlords/property managers from taking advantage of low-income individuals and families. One way to do this is to increase the reach capacity of Legal Aid Services of Oregon (LASO). Another way is to establish a Tenant Advocacy and Rights group which would help provide free, easy access to information on tenant rights which may help to prevent many evictions and/or judgements.

Current status of the strategy: Currently, the best available resource to tenants is provided by Legal Aid Services of Oregon which has a local main office in Bend and a presence at Project Connect, Project Mobile Connect(s), and other sites around the region. Spanish-speaking staff are available at most sites and reasonable accommodations are provided (upon request) for persons with disabilities. Interpretative services for nearly all spoken languages and sign languages are available free of charge at all offices, and long distance callers may access services through a toll-free number. Unfortunately, the availability of these services is often restricted. There is currently no Tenant Advocacy and Rights organization.

Barriers to implementation/expansion: The primary barrier is that legal services for housing issues are restricted due to lack of tenant resources. Most low-income residents simply cannot afford to hire an attorney and staff capacity at Legal Aid Services of Oregon is extremely limited (i.e. demand for services far outstrips available supply). There are also some instances where an individual may be in a strong legal position on a housing-related issue, but they may have other outstanding legal issues and so they choose not to contest things.

Key Stakeholders: Legal Aid Services of Oregon (lead), low-income tenants, landlords, Property Management Companies

Outcome Measures:
TBD – in consultation with Legal Aid Services of Oregon

Timeline and Action Steps:
TBD – in consultation with Legal Aid Services of Oregon

1.5 Develop classes on budgeting/managing household finances that are offered to youth - NEW

Description of the strategy: Being able to balance a checkbook, establish and keep good credit, match household revenue with expenses, and create a savings account for future needs (or an emergency) are all critically important skills to have. Unfortunately, for many typically younger individuals or households, the offer of easy credit cards or deferred interest payment plans are often irresistible and they can fall into a spiral of heavy debt which harms their credit and/or forces them to pay higher interest fees (which leads to less discretionary income and a need to borrow even more).

The proposed strategy is to provide substantive budgeting and finance classes in local middle and high schools (or through youth groups) so that when students leave high school they are better prepared to face the real world and not be so susceptible to advertising and the desire to "keep up with the Joneses."

Current status of the strategy: Recent budget cuts for public schools means that the finance classes of previous years are now "add-ons" or at best small portions of a separate course. Household finance/budgeting classes are a regular part of several existing programs, but these are typically for adults. There is very little in the form of "preventive" education for youth to avoid problems down the road.

Barriers to implementation/expansion: 1) It all comes down to funding and whether finance is seen as a priority among all the courses and learning that is taking place in the schools. 2) In addition, for many students who see themselves as invincible, there is some resistance to being told that they can't do things they want to do or they may need to delay gratification.

Key Stakeholders: Local school districts (lead), banks, credit unions, youth programs, non profits, Boys and Girls Club of Central Oregon, COCC

Outcome Measures:

- 10 new financial literacy offerings in school or youth programs by June 2012
- 200 students or youth who complete a financial course by December 2012

Timeline and Action Steps:

1. Explore and identify youth access points for financial literacy, such as after school programs, summer programs, youth groups (ongoing)
2. Recruit financial institutions to convene a collaboration to explore and implement solutions to place financial literacy courses into every middle and high school (by Jan. 2012)

1.6 Develop a Centralized Emergency Assistance Center ("One stop") in every community - NEW

Description of the strategy: For many homeless or those at risk of homelessness, the lack of transportation and knowledge about the various forms and/or required documents can pose a huge barrier to those who need services such as rental and utility assistance, food stamps, identification, employment, child care, etc. Having a Centralized Emergency Assistance Center ("One Stop") where all these services can be accessed in a single location (instead of having to drive all over town) can greatly facilitate the process of obtaining critical services and getting the help they need.

The proposed strategy is to develop and publicize locations where multiple services are available and can be easily accessed - ideally, this can be done utilizing an in person staff member or likely utilizing the phone or internet in the future.

Current status of the strategy: The formal definition of a "One Stop" center may vary among communities as far as number and types of services offered at a single location, but by most accounts, there are currently no such facilities in Central Oregon. There is certainly not a "One Stop" location in every community, and for many members of the outlying communities (i.e. Sisters, La Pine, Culver, Terrebonne, etc.) they must travel to a larger town such as Bend, Redmond or Madras. Although there is a Central Oregon 211 hotline to direct people to certain services, most social services require the applicant to apply in person.

Barriers to implementation/expansion: The primary barriers are 1) funding for the sites and 2) the extensive setup planning and coordination. These centers need representatives from multiple agencies or individuals who are knowledgeable about a wide array of services and programs. There are fixed costs that must be accounted for at each location (i.e. space, staffing, phone, etc.) and these can become expensive in smaller communities because there is no economies of scale. In addition, many organizations and agencies are not used to collaborating in this fashion and still operate in a "silo" mentality.

Key Stakeholders: State agencies (DHS, DMV, Employment Dept.) (lead), local agencies (Health Dept., Mental Health Dept.), Nonprofits who provide social service assistance

Outcome Measures:

- One pilot one stop center established by end of 2012

Timeline and Action Steps:

1. Create a task force to focus on setting up or expanding the current services of a local nonprofit or faith based operations such as a food bank or other social service site (by Jan. 2012)

2.1 Add additional emergency housing units and shelter beds in all communities - ONGOING

Description of the strategy: In the continuum of care model, housing runs across a spectrum from on the streets to emergency shelter to transitional (temporary) housing to subsidized rental units. Different people have different needs and it is important to provide additional capacity in all of our communities so that we can reduce the hardships associated with homelessness. The proposed strategy is to build additional shelter beds and additional transitional housing units in each community. This way, every community can help address the needs of its citizens.

Current status of the strategy: There are a number of shelters and transitional housing locations in the region with most of them located in Bend. These include Bethlehem Inn, Shepherd's House, Saving Grace (domestic violence), Nancy's House (families) and the The Loft (teens). Shelters in the other communities include Madras Gospel Mission, a cold weather shelter at Highland Baptist Church in Redmond, and a new men's shelter in Prineville.

Barriers to implementation/expansion: The primary barriers are 1) Funding (running a shelter is expensive because beneficiaries are often not able to pay for services); 2) Zoning/community and neighborhood opposition; and 3) limiting entrance qualifications that exclude certain populations to particular shelters (e.g. no pets, drug testing, etc.) Of particular concern is the fact that many current emergency shelters are struggling to maintain their current capacity.

Key Stakeholders: Bethlehem Inn (lead), Shepherd's House (lead), Saving Grace (lead), The Loft (lead), NeighborImpact (lead), Madras Gospel Mission (lead), Prineville shelter (lead), Redmond shelter (lead), local municipalities, faith community, nonprofits

Outcome Measures:

- # additional emergency shelter beds in Central Oregon (including # of shelter beds in each community)
- # of individuals who received shelter during the year

Timeline and Action Steps:

1. Convene a meeting of key stakeholders to determine potential and realistic action steps, including a gap analysis (by Jan. 2012)
2. Determination and report to 10 Yr Plan Steering Committee (elected officials) of agreed upon action steps (by March 2012)
3. Action steps accomplished that add 10 more regional shelter beds (by Dec. 2012)
4. Action steps accomplished that add 20 more regional shelter beds (by Dec. 2013)

2.2 Promote and support Cooperative Housing models - ONGOING

Description of the strategy: Cooperative Housing refers to a specific model of housing that takes advantage of economies of scale by providing a modest living space (typically 1-bedroom) with shared facilities such as kitchen, restroom and community space. This model can take many forms ranging from large dormitory style SRO (single-room occupancy) buildings to a single-family house and can serve both subsidized and market rate tenants.

The SRO approach makes housing more affordable to build because each unit doesn't need every amenity, and presumably the savings can then be passed on in the form of lower rents. Oxford House is a model of shared housing that was originally established as a way for those coming out of substance abuse treatment to be in a safe, mutually supportive environment. Utilizing market rate rental housing, Oxford House participants pay rent and there is a resident manager who oversees the program and provides support and counseling as needed. This model is attractive because it has recently been expanded to include victims of domestic violence and other segments of similarly vulnerable populations.

Current status of the strategy: There are limited examples of SROs in Central Oregon and each of the models currently operating target very specific populations (e.g. victims of domestic violence, families with only one child, recovering substance abusers, etc). There are not enough operating facilities to accommodate the need in spite of the restrictions. Several of our region's current homeless shelters also fall into this category (e.g. The Loft, Saving Grace) If you use the homeless count numbers in 2011, compared to our region's housing inventory numbers, there are over 30 people who need shelter/housing for every available bed.

Barriers to implementation/expansion: The primary barriers are 1) funding; 2) capacity issues; and 3) community/neighborhood response – NIMBY (Not In My Backyard). A very real question remains how much additional supervision is required to assist those who are homeless (or transitioning from homelessness). Unfortunately, there is no easy answer as it will vary from individual to individual.

Key Stakeholders: Local municipalities (for zoning), Cooperative Housing entities, non profits including: Oxford House, Nancy's House, House of Hope, Madras Gospel Mission, Saving Grace, etc., faith based groups, potential site property owners

Outcome Measures:

- 6 new units built (or created) through Cooperative Housing models (by Dec. 2012)
- 75 additional people housed in cooperative housing models (by Dec. 2014)
- 120 additional people housed in cooperative housing models (by Dec. 2016)

Timeline and Action Steps:

1. Key stakeholders convene and identify potential solutions that can in phased in for each of the next five years (ongoing)

2.3 Develop creative, inexpensive, and more flexible housing units – NEW

Description of the strategy: Housing/shelter comes in all shapes and sizes. For those in or near homelessness, it can range from sleeping under a bridge or a tent in the woods to an emergency shelter or transitional housing units. It is a continuum which balances the tradeoff between cost and security. Housing/shelter that is larger with more amenities is also more expensive.

The proposed strategy is to encourage new thinking around this idea – to see whether it is possible to respond creatively to the current constraints of very limited funding, restrictive zoning at the city and county level, and neighborhood opposition to large-scale housing projects.

Current status of the strategy: Central Oregon had a "trial run" with this concept in 2009 when an "opportunity" arose to use several donated 14' x 14' cabins at a ranch two hours away. This set in motion planning for identifying what cabins were in shape to make the move, where would they be allowed to go, etc. Ultimately, it was determined not cost-effective to move them, but we discovered that current zoning would have precluded them in a good portion of the region anyway (see Strategy 4.1). Another approach is happening in Sisters where a local coalition is enlisting the support of the faith community to explore the concept of using donated RVs as temporary shelter for families. Where they can be parked and for how long as well as any restrictions on activities while in the RVs are issues that are being discussed.

Barriers to implementation/expansion: There are several barriers to this approach, including 1) funding; 2) land use/zoning issues; and 3) a philosophical dispute among housing advocates. Given that the smaller housing units do not have the typical amenities of standard/traditional housing, there are concerns by neighbors that these types of units may set a precedent and/or drive down property value of adjoining landowners. There are also many in the homeless arena who argue that this is substandard housing relative to more permanent solutions.

Key Stakeholders: Local municipalities (for zoning purposes), housing authorities, faith-community, private landowners

Outcome Measures:

- # of units deployed in Central Oregon
- # of additional alternatives in place that can be can quickly and appropriately utilized
- Regional Complete housing/shelter system that includes emergency, transitional, and permanent housing by December 2013

Timeline and Action Steps:

1. Establish task force to explore options (including visit to Dignity Village in Portland) and offer potential solutions (by Feb. 2012)
2. Prototype solutions are in place in one regional location (by Dec. 2012)
3. Results evaluated and more extensive solutions provided (by Dec. 2013)

2.4 Build Permanent Supportive Housing (PSH) units using the Housing First model - NEW

Description of the strategy: Housing First is a new model that, as its name suggests, places housing at the very top of the list of services provided to those who are homeless. Employment, addiction treatment, fixing credit, etc, are all seen as important, but the most important (and in many instances, the most cost effective) response is to first get the homeless individual into housing with additional services provided afterwards (see more details on Housing First in Appendix C). This is because an individual without access to stable housing also faces many other challenges that can add to or aggravate poverty, including inability to pursue basic hygiene, lack of ability to store and prepare food, lack of reliable address for financial and employment correspondence, lack of ability maintain contact with supportive friends or family networks and lack of ability to store a vehicle.

The Housing First approach assumes that some or all of these subordinate issues can be forestalled, minimized or adequately addressed by moving rapidly to ensure that housing is the first service offered to the homeless. While housing alone is not sufficient to meet the variety of pressing needs that low-income individuals confront, it is understood in the Housing First model that once housing has been addressed, other "wrap around" services are more easily targeted and delivered.

Current status of the strategy: The Housing First model has been remarkably effective in many communities across the country (e.g. Seattle, WA, Denver, CO, Philadelphia, PA, etc.) but it is just getting started here in Central Oregon. Locally, Housing Works now has 6 units of PSH - 4 units in Bend and 2 in Redmond and the preliminary results are promising.

Barriers to implementation/expansion: The primary barriers are 1) funding; 2) zoning/ NIMBY concerns; and 3) philosophical opposition. Many of the people put into Housing First units may have substance abuse issues or other factors in their background that makes them "less deserving" for assistance in the eyes of many in the public. The key for advocates is to focus on cost savings due to lower utilization of public services.

Key Stakeholders: Local municipalities, non profits, private property owners

Outcome Measures:

- # of Housing First units built or converted in Central Oregon
- # of people living in Housing First units

Timeline and Action Steps:

1. Convene a cooperative housing task force or incorporate cooperative housing into local community groups working on solutions to homelessness issues, such as faith based coalitions or housing task forces (by Jan. 2012)

3.1 Provide substance abuse treatment services - ONGOING

Description of the strategy: For many who are homeless or are at risk of homelessness, substance abuse is involved as a contributing factor. The Substance Abuse and Mental Health Services Administration (2003) estimates that 38% of homeless people were dependent on alcohol and 26% abused other drugs. Many are also addicted to tobacco which diverts limited funds. Drug or alcohol abuse is both a cause and a result of homelessness for some. The abuse may sometimes begin after an individual has become homeless, due to the fact that the street life subculture seems to have consumption of alcohol and other drugs as a norm.

The proposed strategy is to provide substance abuse treatment services to all those who need them. This includes in-patient and outpatient care, group therapy and treatment, sobering units; and safe groups such as AA (Alcoholics Anonymous) and NA (Narcotics Anonymous).

Current status of the strategy: There are currently five outpatient options in the region: BestCare Treatment (Bend, Redmond, and Madras), Serenity Lane (Bend), Pfeiffer & Associates (Bend), Deschutes County Behavioral Health (dual diagnosis) and Lutheran Community Services (Crook County). There is one residential facility: BestCare (Redmond) including a detox facility. There are 2 Oxford Houses and many local support groups such as: 12-step (AA, NA) and faith- based recovery support groups.

Barriers to implementation/expansion: There are several barriers to providing substance abuse treatment services to those who need it and they generally revolve around insufficient funding. These include: 1) Without health insurance/OHP, individuals are left with very little resources to access either outpatient or inpatient (i.e. residential) options. There is very limited indigent funding; 2) Licensing for detox facilities is very difficult, operating costs are high, and there is often significant neighborhood opposition to siting such a facility; 3) AA is not offered onsite at St Charles facilities; 4) There is a comparative lack of advocacy for additional funding for substance abuse services. Related to this, with only limited resources, there is often ongoing tension between putting funds towards treatment vs prevention.

Key Stakeholders: St Charles, Deschutes County (Sheriff's Office, Health and Mental Health Departments, Commission on Children and Families), DHS (OHP, indigent care), local Chambers of Commerce (to establish Drug Free Workplaces), Housing Works, treatment providers, schools

Outcome Measures:

- # of jail days due to A/D (Alcohol/Drug)
- # of law enforcement calls regarding A/D diversion to sobering units vs jail
- # of beds in A/D units increased in all Counties
- # of individuals entering treatment with or without insurance

Timeline and Action Steps:

1. Key stakeholders will convene and create goals and a three year timeline to achieve those cooperative and individual goals (by Feb. 2012)

3.2 Provide transportation services to shelter - ONGOING

Description of the strategy: Many experiencing homelessness or those at risk of homelessness find that they are often stranded without the ability to get to shelter or to assistance. This is particularly true of those who are in the outlying areas around Bend. There is not currently a shelter in La Pine or Sisters or any of the smaller communities – or even in the larger communities, the local shelter is often full or only accepts guests with specific characteristics (e.g. male or a victim of domestic violence).

The proposed strategy is to increase the availability of transportation to available shelters, particularly during off-peak hours (i.e. evenings and on weekends) when traditional transportation methods may be limited.

Current status of the strategy: Bend is the only town within the three counties that has a public transportation system, but even this has limitations since it only operates during daylight hours. Currently, some faith based organizations offer bus tokens (tickets) or cab fare to get to the local shelter, if there are openings.

Barriers to implementation/expansion: The primary barriers are 1) Cost to those trying to assist with transportation (this is both financial and labor/time expense as volunteers may play this role); 2) liability issues associated with transporting people who may or may not pose a risk to the driver and other passengers; and 3) lack of knowledge of where to send someone experiencing homelessness (there isn't a real-time, shared information system).

Key Stakeholders: COIC (Cascades East Transit and Bend Area Transit), cab companies, faith community, law enforcement officers, shelter providers

Outcome Measures:

- # of people transported and accepted into shelter

Timeline and Action Steps:

1. Creation of a task force to coordinate and devise immediate, midrange and long term transportation solutions (by June 2012)
2. Plan revised with updated solutions (by June 2014)

3.3 Provide/expand transportation to employment and services – ONGOING

Description of the strategy: Lack of reliable, affordable and accessible transportation is one of the biggest barriers to local employment. For many, this may be due to loss of their drivers license (often suspended due to excessive citations or unpaid fines). For those in this situation who choose to drive anyway, they run the risk of adding more tickets and fines. A related issue is even if they did get their driver's license, at the wages they earn, it is often difficult to afford car maintenance, insurance, and gas, etc.

The proposed strategy is to expand available transportation services to employment by having a system that provides reliable transportation both between cities and within cities. It also means developing programs that can make owning and operating a car less expensive for low-income residents.

Current status of the strategy: The Central Oregon public transportation system is slowly taking shape, but the demand still far outstrips available supply. Public transit is currently provided by COIC who operates the BAT (Bend Area Transit) system within Bend and Cascades East Transit which provides transportation between all Central Oregon cities. Residents of communities outside of Bend have no intra-city public transportation of any kind, outside of private taxis. Unfortunately, the bus systems typically stop running after 6:00 or 7:00 pm during the week, run only a limited schedule on Saturdays, and do not operate on Sundays or holidays. For many homeless who must work multiple jobs or non-traditional hours, this can be a real hardship. Several agencies currently gift bus tickets to their clients so they can retain or obtain employment, apply for public services, or get to medical appointments.

There are a number of nonprofit organizations around the country who operate programs dedicated to increasing private automobile ownership for low wage working families.

Barriers to implementation/expansion: The primary barriers are 1) funding and 2) liability/abuse. Public transportation is quite expensive on a per-ride basis and it typically "competes" with other government-funded services such as public safety and road maintenance. In addition, secondary systems (e.g. gas vouchers) tend to have high levels of abuse where people take advantage of the system.

Key Stakeholders: COIC, local municipalities (cities and counties), nonprofits, BAT, faith community, DHS, Health Departments

Outcome Measures:

- # of rides provided to homeless or at-risk of homeless because of lack of transportation

Timeline and Action Steps:

1. Set up a transportation task force to create a token system to be used by the homeless to get to/from work, gain housing, or receive public services (by March 2012)
2. Conduct research on establishing a car ownership program in Central Oregon (by June 2012)
3. Set up a gas voucher system that addresses liability/recipient abuse issues (by June 2012)
4. Set up a task force to address all of the critical transportation issues facing those who are homeless or at risk of homelessness because of transportation barriers (by Dec. 2012)

3.4 Ensure access to job training and employment - ONGOING

Description of the strategy: Many people who are homeless or at risk of homelessness do not have good job skills. This statement includes both a lack of "hard" skills (i.e. technical expertise) as well as a lack of "soft" skills (i.e. interpersonal, motivational, work ethic, etc.). This gap may be due to being a displaced worker or training in a new field. Often a history of incarceration, substance abuse/mental health issues, difficulty with the English language or even the lack of a high school degree can compound the barriers to obtaining a living wage job.

The proposed strategy is to increase access to job training and placement in living wage jobs.

Current status of the strategy: There are a wide range of programs in Central Oregon which provide job training, English as a Second Language (ESL), and General Education Diploma (GED) preparation. WorkSource Oregon is a network of public and private partners that connects businesses and workers with the resources they need to succeed. Consortium members include: Central Oregon Intergovernmental Council (COIC), Oregon Employment Department, Economic Development of Central Oregon (EDCO), Oregon Vocational Rehabilitation Services, Central Oregon Community College (COCC), Oregon Economic and Community Development Department and the Oregon Department of Human Services (DHS).

COCC has facilities in Crook, Deschutes and Jefferson counties, as well as portions of Wasco, Klamath and Lake Counties. In 2009-10, approximately 66 percent of certificate/degree seeking students received financial aid (depending on their enrollment status) via national program or COCC Foundation scholarships/loans. COCC courses can lead to a certificate or a degree with many short-term, skill-development courses are designed to help improve competitiveness and become better qualified to gain employment.

Barriers to implementation/expansion: The primary barriers to gaining a job or employment training are 1) lack of transportation; 2) cost and availability of of child care (i.e. COCC has no on-site child care facilities); 3) cost of tuition, books and testing; and 4) lack of locally available employment after graduation.

Key Stakeholders: WorkSource Centers, nonprofits, EDCO, employers, Goodwill, St. Vincent de Paul, faith based groups, high schools navigators

Outcome Measures:

- # of additional workers who obtained employment through job training programs (contact COCC and COIC to establish possible evaluation measures)
- # who graduate from certification courses or GED with the added support provided by addressing the current barriers or gaps

Timeline and Action Steps:

1. Convene appropriate stakeholders to determine what coordination and/or funding is necessary to improve access to training and the supports necessary for graduation, promotion, or certification (ongoing)
2. Identify potential action steps, target goals and any funding/staff barriers (by March 2012)
3. Report to Steering Committee recommendations (by June 2012)

3.5 Develop Homeless Courts that can resolve issues in a single day event – NEW

Description of the strategy: Homelessness, by its very nature, creates "criminals" since it is illegal to sleep on or occupy public or private land (without permission). Loitering, having a dog with no license, and even relieving yourself outside can all lead to misdemeanor offenses. Unfortunately, not showing up in court to attend to the misdemeanor ticket can often lead to a bench warrant being issued. Many homeless individuals have outstanding court cases and/or warrants that, left unresolved, can result in jail time or pose a significant barrier to employment, housing and receiving critical benefits and services. Many of these offenses are simple misdemeanor or relatively minor transgressions. But for the homeless, a lack of resources, inadequate documentation, a fear of the unknown, and a focus on day-to-day survival have meant that they are not addressed.

The proposed strategy is to develop a "Homeless Court" - a new expedited process with alternative sentencing that allows these cases to be resolved in a single day (or relatively short time period) and the homeless to start a new chapter in their life.

Current status of the strategy: There is not currently a Homeless Court in Central Oregon. Through research into other successful Homeless Courts nationwide (e.g. San Diego, CA, Ann Arbor, MI, Houston, TX), it was determined that creating a local Veterans Court system would be the first step toward creating a comprehensive Homeless Court. The Veteran's Court planning process began in 2010 in Deschutes County with projections that it will be functional in late 2011 or early 2012.

Barriers to implementation/expansion: The primary barriers are 1) lack of a "champion" to take this project forward, and 2) funding. This is a process that requires significant buy-in from local attorneys and the judicial system.

Key Stakeholders: Court systems (e.g. judges, prosecutors, defense attorneys, law enforcement, etc.), nonprofits and agencies that work with the homeless

Outcome Measures:

- # of Homeless Courts (or expedited procedure events) held in Central Oregon
- # of cases resolved through Homeless Courts
- # of dollars saved by the court system because of the addition of the creating of this court or procedure

Timeline and Action Steps:

1. "Champion" or group identified/formed to take this concept forward (by January 2012)
2. Homeless court or expedited procedures in place in Deschutes County (by Dec. 2013)
3. Homeless court or expedited procedures in place in four additional communities (by Dec. 2014)

3.6 Develop new strategies that enhance "social capital" and "human capital" – NEW

Description of the strategy: Financial, Human and Social Capital are three valuable components of a framework to view potential causes (and solutions) to homelessness:

Financial Capital - the money, property, and other assets which collectively represent the wealth of an individual. "If I have enough money (i.e. financial capital), I will not be homeless."

Human Capital – the sum total of skills embodied within an individual: education, intelligence, charisma, creativity, work experience, and entrepreneurial vigor. "If I have marketable skills, health, knowledge, character, experience and "vigor" (i.e. human capital), I will not be homeless."

Social Capital - anything that facilitates individual or collective action, generated by networks of relationships, reciprocity, trust, and social norms. "If I have the right social contacts, relationships and networks (i.e. social capital), I will have access to resources and will not be homeless."

Money may forestall the inevitable, or resolve an immediate crisis, but people are homeless only if they have insufficient levels of all three forms of capital listed above. A lack of financial capital is most likely to determine whether or not a person will be at risk of homelessness. But a lack of social and human capital is often the primary cause of homelessness and is certainly a major factor associated with long-term and chronic homelessness. The proposed strategy is to better determine which kind of capital will be of the most benefit to a specific person and develop programs and opportunities. Will volunteering build social capital? Will the social capital they are building lead to finding permanent housing and work? Should they go back to school to build human capital? Are they misusing their human capital with drugs and alcohol? Do they need more marketable skills?

Current status of the strategy: To date, most approaches to homelessness have focused on financial capital. However, all three forms of capital are vital. Connections to friends, family, and community help build resiliency, the quality that determines the ability to withstand and recover from ill fortune or from repercussions from poor choices. Mentoring will be critical.

Barriers to implementation/expansion: **Increasing social capital is a complex issue. Those who** are at risk of (or are already) homeless are highly mobile so survival is a primary focus and taking time to make or maintain connections is not seen as a priority. Time and the ability to connect are also barriers as is finding appropriate/useful people or groups to connect with.

Key Stakeholders: Those in poverty or who are experiencing homelessness, nonprofits, faith community, service clubs, Links for Health, FAN, school districts (Homeless Liaisons)

Outcome Measures:

- # of created support groups or social capital opportunities created or in place
- # of individuals who access the opportunities

Timeline and Action Steps:

1. Request that tenants of shelters and transitional houses develop key goals and strategies that engage the community (e.g. local faith based or nonprofits) (by March 2012)
2. Recruit individuals, agencies and nonprofits to work with the homeless (by June 2012)

3.7 Develop a "service bank" of professional services for the homeless – NEW

Description of the strategy: The needs of the homeless are as varied as their circumstances. One thing we do know is that homelessness will exacerbate any conditions that may exist so it is best to provide supportive services to alleviate and end homelessness as soon as possible. Fortunately, Central Oregon is a very generous and caring community with many individuals and organizations committed to addressing the needs of those less fortunate.

The proposed strategy is to expand current programs and add additional programs to ultimately develop and coordinate a "service bank" of professional services (e.g. health, legal, veterinary, employment, etc.) that can provide services for the homeless for free or at a discounted rate.

Current status of the strategy: Several nonprofits have already been created using different service delivery models to address some of the basic needs of low-income residents. This includes Volunteers in Medicine (provides health and mental health care for low-income, uninsured families in Deschutes County), Kemple Clinic (provides free dental care for youth), Legal Aid Services of Oregon (provides legal assistance), and Links for Health through Health Matters (provides support services to children aged birth to 18 years with special health care needs). In all instances, the demand for services outstrips available supply and the capacity of the coordinating agency staff. Most of these programs do not currently provide services for the homeless per se although there may be other factors that allow them to qualify for services.

Barriers to implementation/expansion: The primary barriers are 1) cost of services (this includes staffing, supplies, facility expenses, etc.); 2) overall capacity of the "professional" community to provide free or reduced services; 3) the need for a system to screen potential clients so this burden does not fall on the donating provider; and 4) how to ensure that the homeless actually show up for appointments/service (this is a huge problem without any easy answers). There are real challenges in the current economy about if/how to augment or expand current services without hurting the existing organizations that are already heavily dependent upon grants and donations.

Key Stakeholders: Volunteers in Medicine, Kemple Clinic, Legal Aid Services of Oregon, FAN, Central Oregon Veterans Outreach (COVO), Links for Health/Health Matters

Outcome Measures:

- # of professional service banks established (types of service)
- # of individuals served by service banks

Timeline and Action Steps:

1. Track the success and barriers of the currently listed agencies (ongoing)
2. Determine how many people are turned away or fall away because the wait time for services caused a crisis (ongoing)
3. Develop a task force that will explore potential service areas/occupations that can be approached with this concept (by June 2012)

3.8 Secure id and mail services for the homeless - NEW

Description of the strategy: For many who are homeless, a lack of identification is a huge barrier to reintegrating back into society. Because of new laws, without identification you cannot be legally employed, open a checking account, cash checks, obtain a driver's license, SSI, or food stamps, or receive other benefits to which you may be eligible. Renting a home or going to the doctor also often requires identification. Even getting a prescription filled can require identification. Those in poverty, and certainly those who are homeless, are often very mobile and subject to losing or having their identification stolen.

The proposed strategy is to assist individuals with obtaining their birth certificates, social security cards (if they already have a number) and procuring some form of government ID, often a replacement driver's license or state ID card. Replacing ID is very difficult and time consuming as each agency has different and stringent requirements in order to issue their particular piece of identification. If an individual is homeless or in an unstable living environment the barriers can be insurmountable without assistance.

This strategy is based on creating mailing reception sites in each community, as ID cannot be delivered to a "general delivery." address. Staff must be trained in receiving and safely storing ID until the owner comes to pick it up. Individuals must know what state they were born in if they are getting birth certificates. This process also requires a notary public to notarize current partial ID to order the birth certificate.

Current status of the strategy: Project Connect and Project Mobile Connect currently have a program that assists in obtaining identification. Unfortunately, those programs only operate a total of nine times a year. Some local shelters also have ID procurement procedures set up for their residents.

Barriers to implementation/expansion: Locating mailing sites in each community, a coordinator or coalition to set up and monitor the simple process. Sites and staff to do the intake. Money for the ID. System to prevent abuse will need to be designed.

Key Stakeholders: Non profits or faith based entities already offering food or other social services, Notary Publics provided by businesses

Outcome Measures:

- # of IDs obtained
- Resources spent on ID program (Dollars and staff hours)

Timeline and Action Steps:

1. HLC or a local advisory group will ensure an ID system is in place in every county (by Dec. 2012)
2. Review of system, report, and any adjustments/expansion made by end of each year (ongoing)

3.9 Develop Social Security Benefit Advocate position - NEW

Description of the strategy: The application process for SSI/SSDI is complicated and often difficult to navigate. Nationally, only about 37% of individuals who apply for these benefits are approved on initial application and appeals take an average of two years to complete. For people who are homeless or who are returning to the community from institutions (i.e. jails, prisons or hospitals), access to these programs can be even more challenging. Approval on initial application for people who are homeless and who have no one to assist them drops to about 10-15%. For those who have a mental illness, substance use issues, or co-occurring disorders that impair cognition, the application process is even more difficult – yet accessing these benefits is often a critical first step in recovery. (see http://www.prainc.com/SOAR/soar101/what_is_soar.asp)

When a Social Security Benefit Advocate is involved in assistance with SS applications, the allowance or approval rate on initial applications increased to 73% in an average of only 91 days (from date of application submission to date of decision). The proposed strategy is to create a position of Social Security Benefit Advocate who will assist clients of various community and government agencies to apply for Social Security benefits (SSDI & SSI). The Benefit Advocate will help with initial applications to Social Security and continue assistance if necessary, through the appeal process.

Current status of the strategy: Currently there is no Social Security Benefit Advocates in Central Oregon. Stakeholder meetings are currently being held to facilitate an appropriate timeline and action steps.

Barriers to implementation/expansion: Funding for a position will be required in order to hire someone to serve as a regional Social Security Benefit Advocate in Central Oregon. There are identified funding sources available, which will be explored.

Key Stakeholders: Department of Human Services, non-profits who provide social services; Central Oregon Veterans Outreach (COVO), SCMC, Bethlehem Inn, Shepherd's House

Outcome Measures:

Generally, when a Social Security Benefit Advocate is involved in assistance with SS applications:

- The allowance or approval rate on initial SS/SSDI applications
- The length of time for approval to be determined (including appeals)

Timeline and Action Steps:

1. Convene local stakeholders to determine potential and realistic action steps (ongoing)
2. Secure funding to hire a Social Security Benefit Advocate (by Winter 2012)
3. Hire Social Security Benefit Advocate (by Spring 2012)

4.1 Implement model ordinances and policies to ensure that homeless shelters and transitional housing can be located in all Central Oregon communities – NEW

Description of the strategy: People are often not aware of the highly restrictive nature of city and county codes and state law relevant to homeless shelters and transitional housing until a specific project has been identified and starts working its way through the system. Frequently, when the project requires a change to local land use laws, there is notable opposition from the neighbors of the project putting the elected body in a difficult position of supporting the housing project/homeless residents or supporting the neighbors. Local and state regulations have hampered or prevented shelters from opening, shelters from expanding, and temporary housing from being used. These barriers include land use laws, building codes, and zoning regulations.

The proposed strategy is to conduct research in Central Oregon (and across the state) to identify a number of ordinances that have been successfully implemented that facilitate the siting of homeless shelters and transitional housing. New ordinances and policies can then be drafted and approved for communities, tailored to their particular needs and desires.

Current status of the strategy: As mentioned above, local governmental regulations in Central Oregon relating to homeless shelters and transitional housing vary widely.

Barriers to implementation/expansion: The barriers include 1) staff time to review and change city/county ordinances and 2) lack of political will coupled with potential community opposition. To review, update and/or change city/county planning and zoning codes will take support from the respective elected body as well as significant staff time which may prove challenging during a time of staff reductions and decreased revenue for government planning and building departments. Also, a recent expansion of a shelter (e.g. The Shepherd's House) and the siting of homes for people with mental illness in residential areas demonstrate the type of neighborhood opposition that can develop.

Key Stakeholders: Deschutes, Crook, and Jefferson County Commission; the cities of Bend, La Pine, Redmond, Sisters, Prineville, Madras; non-profit organizations that serve people who are homeless; homeless advocates from the various communities

Outcome Measures:

- Adoption of model ordinances by Central Oregon cities and counties

Timeline and Action Steps:

1. City councilors and county commissioners ask respective staffs to review current ordinances to determine the length of the process to site and/or expand homeless shelters/transitional housing and the number of steps required (by February 2012)
2. Develop housing advocates in every community to support the proposed changes (ongoing)
3. Propose changes to current ordinances (by May 2012)
4. Model ordinances adopted in at least 3 communities (by August 2012)
5. Model ordinances adopted in all Central Oregon communities (by Dec. 2013)

4.2 Ensure appropriate discharge from the foster care system – NEW

Description of the strategy: Nationwide, an estimated 30,000 adolescents "age out" and are discharged from the foster care system each year. According to the Child Welfare League of America, 25% become homeless, 56% are unemployed, and 27% of male children end up in jail. In fact, the next big wave of homeless people might be foster kids aging out. Numerous studies have shown that children in foster care have a higher probability of having Attention Deficit Hyperactivity Disorder (ADHD), and deficits in executive functioning, anxiety as well other developmental problems. These children experience higher degrees of incarceration, poverty, homelessness, and suicide. Individuals who were in foster care experience higher rates of physical and psychiatric morbidity than the general population. In a study of adults who were in foster care in Oregon and Washington, they were found to have double the incidence of depression (20% vs 10%) and were found to have a higher rate of post-traumatic stress disorder (PTSD) than even combat veterans (25% of those studied had PTSD).

Unfortunately, federal funding guidelines often contribute to the crisis since they encourage state-run foster care programs to emphasize short-term, crisis-management services, leaving nongovernment players to concentrate on longer-range, skill-development programs. Youngsters leaving foster-care ill-equipped for life on their own often end up homeless or permanently dependent on welfare services.

The proposed strategy is to improve discharge from foster care by ensuring that all children who are released from foster care will receive a notarized or official copy of their birth certificate, any record of medical history, and a resource guide to connect them with ongoing services.

Current status of the strategy: At the end of 2010, a redesigned release protocol was put in place by Pat Carey, District 10 Manager for the Oregon Department of Human Services which stipulates that all children released from foster care will receive an official copy of their birth certificate, any record of medical history, and a resource guide to connect them with necessary support services.

Barriers to implementation/expansion: The biggest barriers are staffing and time. With extremely high caseloads, it is often difficult for caseworkers to spend the necessary amount of time working with foster care participants to ensure that they have a safe and stable place to go when they leave the system and they have been connected to services.

Key Stakeholders: DHS (lead)

Outcome Measures:

- # of homeless youth and adults identified as former foster care placements

Timeline and Actions Steps:

1. Conduct a review to determine if the release protocol (state law and best practices in other counties is being followed (by Jan. 2012)
2. Ensure that foster care caseworkers receive up-to-date resource information (ongoing)

4.3 Improve discharge from the corrections system – NEW

Description of the strategy: Central Oregon Corrections agencies receive and manage offenders from both local and state corrections facilities. Often these offenders are released into the community with little to no resources. Individuals released from the prison system receive limited resources from the local Parole and Probation (P&P) offices. Individuals released from jail may or may not receive support services depending on their Court ordered obligations.

The proposed strategy is to provide these offenders with up-to-date information on available resources in the community to obtain stable housing. Providing resource information and facilitating the placement of the offenders into stable housing can reduce the likelihood of recidivism and increase the chances of successful rehabilitation.

Current status of the strategy: When an offender is released from some form of incarceration they leave in one of several ways. They are released to formal supervision, monitored or bench probation, pre-trial release or with no legal obligation. For those released to formal supervision, the community corrections agency completes release plans prior to the offender's release. These provide the officer and offender with information on the individual's needs. For those offenders who leave incarceration without release plans, they receive resource information upon arrival at the Parole and Probation office. A P&P officer will make referrals to the appropriate resources during this initial meeting. P&P officers also work with offenders to change thinking errors which may be restricting the individual from getting into an appropriate program that may lead to stable housing. This is done with routine office/field visits, job search classes, life skills classes, as well as emphasizing pro-social attitudes and activities. P&P works closely with local Oxford Houses, treatment providers, VA services and other housing solutions to provide the offender with a suitable platform to obtain permanent housing.

Offenders released to monitored or bench probation receive no formal services from those prospective agencies due to their limited contact with the offender. Offenders identified by jail staff as needing services receive resource guides upon release. Jail staff will attempt to coordinate with mental health services prior to release on those inmates needing services.

Barriers to implementation/expansion: There are numerous barriers in this arena. These include: 1) limited number of shelters and appropriate residential resources; 2) offenders with poor rental histories; 3) offenders with ongoing drug and alcohol issues; 4) registered sex offenders; and 5) lack of income and difficulty obtaining/maintaining employment

Key Stakeholders: Department of Corrections, Sheriff's Office, Parole and Probation Departments, Police Departments, judicial system, area treatment providers, local shelters

Outcome Measures:

- Reduction in the number of homeless offenders

Timeline and Actions Steps:

1. Identify the number of homeless post incarcerated offenders (by March 2012)
2. Identify and prioritize overall cause of homelessness with this population (by June 2012)

4.4 Improve discharge process from the ER – NEW

Description of the strategy: Most homeless individuals do not have health insurance so they go to the emergency room (ER) for medical care and then are discharged after treatment.

The proposed straegy is to revise ER discharge procedures for homeless patients to better ensure that they have a safe place to go, increasing the likelihood that they will fully recuperate and decreasing the possibility of additional costly emergency room visits.

Current status of the strategy: There is currently no uniform homeless patient discharge procedure in any of the three counties as the local hospitals lack resources (staffing and funding) to review and monitor their homeless patients. Hospitals will use Social Workers if they have them available, and they typically try to find a space in a shelter for homeless patients, but sometimes they are dropped off in front of shelters with no bed reserved. Patients are also occasionally provided a motel room for the evening, but are then back on the streets after that single night. Discharging patients back into homelessness often results in more emergency room visits because patients are not able to fully recover.

Barriers to implementation/expansion: There are several barriers to improving the situation. These include: 1) There is not sufficient space in local shelters to house all of the homeless patients; 2) There is no way to know in advance what beds are available at any given time; 3) There are often rules that restrict the intake of patients to shelters (i.e. patient must be sober and able to vacate shelter premises during the day); 4) There is no standardized hospital discharge procedure for homeless patients that requires the patient has a safe place to go upon discharge from the hospital; and 5) The hospitals do not have a standardized method to review the housing situation of the patient and lack resources to find space for the patient.

Key Stakeholders: All health clinics and hospitals that serve homeless patients, especially those with emergency rooms and urgent care centers: St. Charles Health System, Mosaic Medical, Tri-County Mental Health Crisis Teams, La Pine Community Clinic, Deschutes County Public Health; shelters in each county: Bethlehem Inn, Shepherd's House, Saving Grace, etc.

Outcome Measures:

- # of homeless individuals that utilize the stakeholder services, measured in 1 year increments
- # of homeless that are sent away from the stake holders, with no place to go, measured in 1 year increments
- # of discharged patients that are successful in completing a medical event with follow up and are in treatment or going to get treatment

Timeline and Actions Steps:

1. New discharge policy in place at St. Charles Medical System ERs (by Dec. 2012)
2. New discharge policy in place at all local Clinics and Urgent Care Centers (by Dec. 2013)

4.5 Develop a coordinated intake system that can be used by all service providers - NEW

Description of the strategy: Many agencies use data information systems to track individuals who request and receive social service assistance. These data bases help agencies monitor and coordinate the services and resources they provide to the individual (and see where there are gaps).

The proposed strategy is to develop a coordinated intake system that can be used and shared by all Central Oregon service providers who work with the homeless. Such a system would help eliminate abuse of a community's resources by those individuals who "shop around" and request the same assistance from multiple sources. It also helps a community better track the types and amounts of services needed in a given service area. This information can then be used to apply for grants, further funding, and to determine staffing needs and cost of programs.

Current status of the strategy: Currently there is a lot of information being gathered by a wide range of service providers, but very little coordination or information sharing. The lack of sharing is due to a variety of factors including cost, different software systems, confidentiality concerns, and a fear that an agency will "lose" a client. Current systems being used include: OPUS Homeless Management Information System and the state-maintained Homeless Management Information System (HMIS).

Barriers to implementation/expansion: The primary barriers are 1) Cost of new data base software; 2) time it would take to train people on how to learn the new system; and 3) lack of knowledge among agencies of the value of using a community or region-wide coordinated system (there is no experience with this setup so no one is able to articulate the value).

Key Stakeholders: All local service providers who work directly with the homeless

Outcome Measures:
TBD by advisory committee

Timeline and Action Steps:
1. Hold key stakeholder meeting by the larger providers to determine potential strategies, limitations, costs analysis, and value to the community (by Feb. 2012)
2. Compile report on findings (by April 2012)
3. Funding sources determined and grant or fundraising begun (by June 2012)
4. All social service providers whose services are valued over $500,000 are sharing limited and appropriate client information (by December 2013)
5. Review, evaluation, and new goals set annually (ongoing)

4.6 Create a Youth "Drop In" Center based on a Maslow Youth Center Model - NEW

Description of the strategy: Many youth who are either homeless or are on the verge of becoming homeless lack access to and even awareness of the assistance they need. Because unaccompanied homelessness is fraught with danger, children and youth are ill prepared to manage even the basics of survival.

The proposed strategy is to provide a safe place where youth can "drop in" and come for help, information, and connection to valuable community services onsite. As part of this effort, youth outreach must be expanded on the street, in shelters, in schools, and at other youth gathering sites.

Current status of the strategy: There are currently 17 shelter beds for unaccompanied youth in Central Oregon located at the LOFT, a transitional living program in Bend. There are an additional 4 emergency shelter beds where youth 16-21 can stay for up to 21 days. There is no drop in youth service center and there is only one street outreach worker in all of Central Oregon. A Federal Runaway and Homeless Youth Street Outreach Grant to open two such centers was submitted to the Family and Youth Service Bureau in June 2011.

The Maslow Project based in Medford has delivered strong results as an effective Youth Center. It is a centrally located site that provides basic needs, as well as on-site access to a variety of services from community partners. The Maslow Project helps youth establish educational, employment, and personal development goals while providing wrap-around case-management services to assist youth in attaining those goals. Everything from showers and washing machines, to educational assistance and mentoring, are provided at the Center.

Barriers to implementation/expansion: Primary barriers include 1) resistance from the neighbors and local businesses to place a site in a central location; 2) cost associated with facility, staffing, services, etc.; and 3) extensive planning and community engagement of service providers to provide effective services at the site.

Key Stakeholders: Cascade Youth and Family Center, Legal Aid Services of Oregon, DHS, County Health and Mental Health Departments, neighborhood property and business owners, public schools, United Way, Children and Family Commissions, Partnership to End Poverty, Bend Park and Recreation District, Oregonians Against the Trafficking of Humans (OATH)

Outcome Measures:

- # of youth attaining shelter/housing
- # of youth served and types of service
- # of youth obtaining GED and high school graduation
- Decrease # of homeless youth-related police responses
- Decrease in unaccompanied unsheltered homeless youth per One Night Shelter Count

Timeline and Action Steps:

1. Task force begins research into a centrally located youth center (by Dec. 2011)
2. Fact Finding Report including possible models, sites, and funding (by June 2012)
3. Youth Drop in Center in place and operational (by Dec. 2013)
4. Youth drop in Centers with wrap around services in 2 additional towns (by Dec. 2014)

5.1 Expand and support the regional and local Project Connect model - ONGOING

Description of the strategy: Project Connect is partially based on a national best practice model where homeless and at-risk individuals are connected at one place and time with the services and resources of the community as a whole. This model has a direct impact on the public health of the community as guests receive services during the event (and many are seen by service providers even after the event). The shift in public perception and creating opportunities for community collaboration is invaluable. The proposed strategy is to leverage the volunteer opportunities of Project Connect to incorporate expanded Level 2 Incident disaster mega-shelter exercises for all three counties.

Current status of the strategy: Over 6 years, Project Connect has served more than 12,000 guests who are homeless or struggling to make ends meets with free goods and services valued at over $2 mill. At our most recent event on September 24, 2011, Project Connect utilized over 600 volunteers to serve a record 3,421 people - 150 agencies offered 170 different services including medical, dental, housing, veterinary, financial, and many other services. Smaller "Mobile Connect" events served an additional 2,500 people throughout Central Oregon during 2011. The regional Project Connect model has expanded to Prineville and Madras, with their local versions of the event taking place in May and August. The Partnership to End Poverty has provided the staffing for the regional model and money is raised to cover the costs of the services (e.g. prescriptions, dog licenses, medical supplies, food, dental care, housing assistance, etc.) A Project Mobile Connect program was launched in March 2011 featuring one-day "Mini Connects" providing free services in each of 8 communities over the course of the year.

A Leadership Training program for Project Connect volunteers is being launched for planning and operation of Project Connect, Collaborative Leadership skills, and the Incident Command System for a Level 2 incident. Graduates will receive certification in Federal Emergency Management Agency ICS 100 and will then be able to use these skills for the benefit of themselves, their employers, and all future collaborative endeavors.

Barriers to implementation/expansion: The primary barriers are 1) funds for staffing and 2) funds or donations of supplies. Staffing and an appropriate "home" for the supervision of the entire program will need to be determined by end of 2012.

Key Stakeholders: Partnership to End Poverty (lead), Disaster Preparedness Units, Deschutes, Crook, and Jefferson Counties

Outcome Measures:

- # number of people served
- # of volunteers
- $ cost savings due to providing preventive medical, dental and public health services

Timeline and Action Steps:

1. # of Project Connect Leadership Training graduates by end of the calendar year (ongoing)
2. Project Mobile Connect Pilot program evaluated and report released (by Jan. 2012)
3. Leverage the volunteer opportunities of Project Connect to incorporate expanded Level 2 Incident disaster mega-shelter exercise for all three counties (by Dec. 2012)

5.2 Coordinate the community education/resource information system - ONGOING

Description of the strategy: There are a wide range of providers throughout the region who provide a valuable service (or services) that can help prevent or assist somebody to move out of homelessness. Some of them focus on a particular type of service (e.g. housing, health care, transportation) while others focus on a particular population (e.g. victims of domestic violence, seniors or veterans).

The proposed strategy is to better coordinate all of the social services resource information. Ideally, this means all service web sites are cross-linked to one another, 211 and web-based sites are kept current and the information is checked for accuracy on a regular basis. It also means that there is a consistent message conveyed to the broader community on the needs of the homeless and ways that individuals, businesses, organizations, service clubs and the faith community can help out.

Current status of the strategy: Resource information is currently contained in several documents and sources. The primary ones, in terms of distribution and customers, are the Answer Book (published by NeighborImpact) and 211, a phone and web-based resource that is a joint project of United Way of Deschutes County, Partnership to End Poverty and the Family Resource Center. 211 provides trained information and referral specialists who help callers clarify their needs and direct them to agencies providing appropriate services. The information is also available online at www.co211.info. Both of these resources are tri-county in scope. In addition, Jefferson County has The Community Resource Guide, a joint effort of the Commission on Children and Families and the Public Health Department. There are also three small business card size resource cards published by separate entities, and numerous individual agency or entities that print resource referral guides. See Appendix C for more details.

Barriers to implementation/expansion: The biggest challenge is keeping the information current. This is a function of 1) frequent changes in staffing, hours, services provided, locations, etc. (especially prevalent with the down economy and cuts in funding). It is also a function of the 2) costs associated with staff time spent getting the information, entering or updating the system and the cost of publishing (e.g. larger publications by NeighborImpact are printed one time a year).

Key Stakeholders: NeighborImpact, United Way of Deschutes County, Partnership to End Poverty, Family Resource Center, Jefferson County Commission on Children and Families, Jefferson County Health Department

Outcome Measures:

- To be determined by a stakeholders group

Timeline and Action Steps:

1. Revise as needed “street” cards and larger resource guides for agencies (by Dec. 2011)
2. Convene stakeholders for informational meeting to discuss potential efficiencies associated with increased collaboration (by Feb. 2012)

5.3 Develop information materials and training on community resources for law enforcement and other stakeholders – NEW

Description of the strategy: There are a variety of community stakeholders who come in frequent contact with the homeless who are not established per se to provide direct services to them. This includes law enforcement, public lands agencies (e.g. Bureau of Land Management, US Forest Service) and many government agencies (ODOT). Fortunately, these stakeholders are in a strong position to be a referral resource if they have the right information.

The proposed strategy is to create simple, easy to handle/hand out social service resource referral cards or information sheets for law enforcement officers and their receptionists, USFS, and BLM management officers and field agents along with other high traffic public service areas. The handouts would contain current information on short-term housing options, immediate needs (resources) and long-term housing options. Every category needs a specific "go to" contact person (available 24/7 if possible).

Current status of the strategy: There is not currently a system in place to supply public agents with updated service and resource referral material. Officers are often referring people to 211, but many of the homeless don't have access to a phone and 211 service information is limited.

Barriers to implementation/expansion: The biggest barriers are 1) cost of printing; 2) keeping the information current; and 3) finding the time (and resources) to do the distribution and training with the community stakeholders.

Key Stakeholders: All public services officers and receptionists, nonprofits, public social service agencies, libraries, area Chambers of Commerce, etc.

Outcome Measures:

- 5,000 copies of informational resource material developed printed and disseminated to public service field officers (by March 2012)
- All public services such as police, fire, BLM, Forest Service, Chamber of Commerce, etc. receive copies
- All interested agencies are trained in using the material and/or additional resource referral strategies

Timeline and Action Steps:

1. Gather relevant information (see Strategy 5.2) such as contact numbers, application forms, etc. (ongoing)
2. Recruit an entity or coalition to take the lead on this project (by Dec. 2011)
3. Determine what printed resource referral sources would be most appropriate (by Feb. 2012)
4. Collate the information and print (by March 2012)
5. Tie this project into the 211 and community-wide coordination process including training (ongoing)

5.4 Establish ongoing advocacy in all communities while ensuring increased collaboration and accountability - NEW

Description of the strategy: The Homeless Leadership Coalition (HLC) is comprised of representatives of over 40 agencies, nonprofits, and interested individuals (see Appendix p. 65). The HLC is the only vehicle currently in place that provides an ongoing community forum for sharing information, collective advocacy, and coordination of projects and efforts to prevent and resolve homelessness (e.g. the One Night Shelter Count is currently coordinated through HLC members).

The proposed strategy is to develop and expand the effectiveness of the Homeless Leadership Coalition by increasing its capacity to do advocacy - regionally as well as in individual communities.

Current status of the strategy: Attendance at HLC meetings is as high as it has ever been, but unfortunately representation of some key community stakeholders is irregular and in some cases missing. Because the meetings take place in Bend, attendance from those who live in outlying communities is typically lacking. Because there has been no formal membership qualifications, key agencies are often unrepresented for long periods of time, if at all. The lack of membership criteria limits the leadership to speak for the whole in a timely and effective manner. The HLC Governance Committee is being developed by a group of provider members to address many of these limitations.

Barriers to implementation/expansion: The barriers to greater advocacy are: 1) lack of membership qualifications/requirements and a loose organizational structure (i.e. irregular attendance, no clear goals); 2) some concern of whether advocacy will harm an agency's 501(c)3 nonprofit status; and 3) lack of capacity for individuals and agencies to take on additional roles. The lack of organization limits the HLC from moving forward and being an effective, powerful advocacy voice for those who are at risk of homelessness or who are homeless.

Key Stakeholders: Homeless Leadership Coalition

Outcome Measures:

- Increased membership and participation in HLC meetings

Timeline and Action Steps:

1. Every key agency should be represented on a regular basis at the HLC meetings (ongoing)
2. HLC membership qualifications should be established with annual and long term goals set (by Dec. 2011)
3. Sub committees created to research and bring back information to the whole (ongoing)
4. Key areas of influence and advocacy should be identified and business leaders should be invited to join and participate (see Strategy 5.5) (ongoing)
5. Key stakeholders in every community should be identified and included (by March 2012)
6. The community goals and concerns in the Regional 10 Year Plan (and in local 10 Year Plans) should be examined and reviewed for advocacy roles (ongoing)

5.5 Establish a "Leadership Committee" of business/community leaders on this issue - NEW

Description of the strategy: As homelessness is a community problem, it is important that leadership on this issue come from a wide range of leaders from government, the private sector/businesses, the faith-based community, non-profit organizations, and the community as a whole (i.e. a grassroots initiatives).

Current status of the strategy: There is currently a group called the Homeless Leadership Coalition (HLC) which consists of more than 40 organizations and individuals from Central Oregon who meet monthly to coordinate services and share information around the topics of homelessness and poverty. The HLC is comprised of predominantly housing-related providers and advocates (or government reps from law enforcement), but does not have much private sector or community leader representation.

The "Leadership Committee" concept contained in this strategy is intended to complement and augment the existing Homeless Leadership Coalition. For coordinationn purposes, the "Leadership Committee" should include several members of the HLC.

Barriers to implementation/expansion: One of the main challenges to developing a "Leadership Committee" to address homelessness is that 1) there is already a fairly large number of existing community leadership groups (e.g. Bend 2030, the Deschutes County 1,000 Day Roadmap (sponsored by the Deschutes Economic Alliance) and many others). Another barrier is 2) finding the right people for the committee since many community leaders are often overcommitted with other responsibilities.

Key Stakeholders: Government, the private sector/businesses, the faith-based community, non-profit organizations and grass-roots organizers

Outcome Measures:

- Committee formed
- Work plan developed
- Percent of work plan completed by milestone dates

Timeline and Action Steps:

1. Co-chairs recruited and in place (by Feb. 2012)
2. Committee formed (by March 2012)
3. Work plan developed (by April 2012)
4. 10 Year Plan reviewed and implemented (ongoing)

5.6 Develop a Report Card or similar mechanism to show progress - NEW

Description of the strategy: Although it is often difficult to gather definitive data for such a transient population (e.g. homeless counts are by definition an undercount because without an address, we can't be sure that we are counting every homeless person), it will be critical to develop a Report Card or similar mechanism that is able to gather consistent information at as local a level as possible.

The proposed Report Card must be able to convey information to the communities in a way that is easy to understand, shows progress (or lack thereof) and elicits financial and volunteer support for this effort.

Current status of the strategy: There are a couple of mechanisms and/or activities that directly track the homeless in Central Oregon and identify their needs. These include the One Night Shelter Count, bed counts for the various shelters and transitional housing programs in the region, and the work of the Homeless Liaisons in all our public schools. There are also several mechanisms that may indirectly help us look at homelessness (or homelessness prevention). These include corrections and ER discharge programs, local food kitchens and foreclosure counseling programs.

Barriers to implementation/expansion: The primary barriers are 1) lack of a coordinated method of convening to establish clear goals and outcomes in the face of vastly different resources and capacities in the different communities; and 2) cost to develop the Report Card (both in terms of staffing as well as printing and distribution expenses).

Key Stakeholders: Non-profit organizations that serve people who are homeless; homeless advocates from the various communities; Deschutes, Crook, and Jefferson County Commission; the cities of Bend, La Pine, Redmond, Sisters, Prineville and Madras

Outcome Measures:

- # of identified homeless broken down by community
- others TBD

Timeline and Action Steps:

1. Convene task force of key representatives from around the region to develop a Central Oregon Report Card on Homelessness (conduct research on other reporting methods, determine capacity and constraints in the different communities (by Jan. 2012)
2. Complete and distribute DRAFT Report Card (by June 2012)
3. Make modifications as needed and complete and distribute annual Report Card (ongoing)

6.1 Expand One Night Shelter Count to get better regional and community-specific information – ONGOING

Description of the strategy: The One Night Shelter Count (ONSC) offers a snapshot of Central Oregon's homeless population in a 24-hour time frame, providing the most up-to-date information about the number of individuals in Deschutes, Crook, and Jefferson Counties who are struggling to find adequate housing. Through this data, local agencies and programs are able to qualify for increased funding, better target support services, and develop comprehensive plans to address poverty and homelessness in Central Oregon.

The proposed strategy is to expand the ONSC effort to identify and provide assistance to even more homeless individuals and families. This will be done by increasing the number of volunteers, increasing the number of partner organizations who conduct surveys or hand out supplies, and enhanced publicity to the homeless through various channels so they know that this is a positive event and not something of which to be fearful.

Current status of the strategy: The Central Oregon One Night Shelter Count is one of the most effective efforts in the state both in terms of total volunteers and total number of homeless identified. Occurring each year in late January, the ONSC brings together hundreds of individuals and a wide range of organizations who help to administer anonymous surveys and hand out food, clothing, blankets and outdoor survival equipment along with information about other community resources. It is currently organized by the Homeless Leadership Coalition and a steering committee of key stakeholder representatives.

Barriers to implementation/expansion: The primary barriers are 1) staffing/coordination and 2) funding. Overall coordination of the Central Oregon ONSC is currently provided by a Deschutes County employee which may be difficult to secure in future years. Funding for the ONSC is provided by individual and agency donations and covers printing, supplies/equipment and transportation/distribution.

Key Stakeholders: Homeless Leadership Coalition (lead), faith community, nonprofits, government and business sponsors

Outcome Measures:

- # of ONSC volunteers
- Ability to get community-specific data (at less than the County level)

Timeline and Action Steps:

1. Convene ONSC planning committee to develop multi-year strategic plan with respect to fundraising, volunteer recruitment and community outreach (ongoing)
2. Contact Oregon Housing and Community Services (OHCS) to explore modifications in how data is collected and reported (ongoing)

6.2 Fill the gaps in the local Continuum of Care – ONGOING

Description of the strategy: The Continuum of Care model is most commonly organized around planning for the homeless housing and service system in a community (typically focused at a county level) and prioritizing programs and activities for federal and state grant funding. The model consists of six main coordinated components that include supportive services: 1) outreach, intake and assessment; 2) prevention; 3) emergency shelter; 4) transitional housing; 5) permanent supportive housing; and 6) permanent housing.

The proposed strategy is to fill the gaps in the local Continuum of Care model by increasing awareness of and access to Continuum of Care funding for the many agencies and organizations throughout Central Oregon.

Current status of the strategy: In Central Oregon, the Continuum of Care is administered at a regional/tri-county level through NeighborImpact. The primary groups involved with this ongoing analysis and planning are the many participants of the Homeless Leadership Coalition as well as other interested Crook, Deschutes and Jefferson County organizations.

The region's Continuum of Care vision is to have an economic and social support system which promotes each household's ability to successfully meet basic needs for food, shelter, clothing, health care and long-term stability. This vision recognized that long term solutions to the problems of homelessness and poverty required a comprehensive approach which would address immediate needs, as well as underlying physical, economic and social factors.

Barriers to implementation/expansion: The biggest barriers are 1) funding and 2) lack of awareness of opportunities. Funds for the local Continuum of Care are limited even though they do not come close to meeting the need. Having said that, there are several areas where there are gaps and therefore opportunities for new public-private partnerships if local organizations had a better understanding of funding expectations and requirements.

Key Stakeholders: all agencies and organizations that provide services for the homeless in Central Oregon

Outcome Measures:
- # of housing units developed
- # of persons housed in Continuum of Care-funded projects

Timeline and Action Steps:
TBD

6.3 Continue the McKinney-Vento regional effort with local schools – ONGOING

Description of the strategy: It is estimated that roughly 40% of the region's homeless are under the age of 17 and this statistic is backed up by the high number of homeless students identified in our schools (see page 16). Every public school district is required - by federal law (McKinney-Vento) - to have a staff person assigned to work with homeless students. This includes outreach to staff to train them on how to identify homeless students, working with parents and caretakers to provide transportation to keep them in their school of origin (if desired), and providing assistance with other household needs that may pose a barrier to learning. Unfortunately, with staff cutbacks - and at smaller districts - this role has often been added on to another position.

The proposed strategy is for Central Oregon school districts to continue to work in a collaborative fashion to secure additional McKinney-Vento (MKV) or other funding and share strategies and resources with each other. The hope is that we can close the achievement gap which currently ranges from 20-30% when comparing homeless students vs their peers (in OAKS testing for Reading and Math).

Current status of the strategy: In an effort to address the needs of homeless students, seven Central Oregon School districts and one ESD have come together as the "Central Oregon Consortium." Members include: Bend–La Pine SD, Redmond SD, Sisters SD, Jefferson County SD, Crook County SD, Culver SD, Black Butte SD and High Desert ESD which serves as fiscal agent. Altogether, these seven districts serve over 30,500 students in the tri-county region.

While sharing a common purpose to address the needs of these at-risk students, the districts are quite different in size, resources and experience with running comprehensive homeless student support programs. With resources from the MKV grant, every local school district now has at least a part-time staff dedicated to working directly with homeless students.

Barriers to implementation/expansion: The primary barriers are 1) funding and 2) community capacity. Current work is supported by a federal grant so there is a risk that this funding could go away. There is also the challenge associated with many of the smaller communities - even if they are able to identify homeless students, it may be difficult to access necessary services.

Key Stakeholders: Bend–La Pine School District (lead), Redmond School District (lead), Sisters School District, Jefferson County School District, Crook County School District, Culver School District, Black Butte School District, High Desert ESD, FAN (Family Access Network)

Outcome Measures:

- # of homeless students in every school district
- FTE assigned to work with homeless students in each school district

Timeline and Action Steps:

1. Hold monthly meetings to share information and resources (ongoing)

6.4 Track first responder and emergency room care statistics – NEW

Description of the strategy: As has been identified previously, both first responders (i.e. paramedics) and staff in the Emergency Room (ER) interact with many homeless individuals during the course of a day. But they often do not know if the individual is homeless, and if they are, how to ensure that they are released into a safe, stable housing environment.

The proposed strategy is to develop a system that identifies homeless and/or those without a permanent address that use the services of first responders and the ER. By tracking the cost to the community of providing emergency services to those who are homeless, we can better evaluate the allocation of funds and staff and make adjustments to less expensive and more effective preventive services.

Current status of the strategy: This type of tracking mechanism does not currently exist at any of the regional ERs.

Barriers to implementation/expansion: The primary barriers are 1) funding/personnel to collect data; and 2) not clear on the specific data source to be developed (i.e. how much information can/should be gathered?)

Key Stakeholders: St Charles Health Services (runs the four Central Oregon hospitals in Bend, Redmond, Madras and Princeville), local Fire Departments

Outcome Measures:

- # of homeless using the services of first responders and or the ERs of local hospitals
- # cost to the respective agencies of the use of emergency medical services to those who are homeless or do not have a permanent address
- # determine the cost to the region of emergency medical services for this population

Timeline and Action Steps:

1. Develop and implement a system to track the number of individuals served (by Dec. 2012)
2. A code added to all responders paperwork that identifies the individual as lacking a permanent address (by June 2013)
3. An annual cost to each agency report submitted to the 10 Year Plan Steering Committee (by Dec. 2013)

Appendix B

Featured Activities

Appendix B1- Project Connect (Project Homeless Connect)

Project Homeless Connect is a best practice component of a national and state effort to end homelessness that brings the resources of a community together in one place and time to serve the most fragile populations. It also provides a practical vehicle for community involvement, education, and problem solving around poverty and homelessness service issues.

Central Oregon Project Connect held its first service event on October 13, 2007 at the Redmond Fairgrounds. At that time, it was called Project Homeless Connect and was designed as a regional event to reflect the gaps and absence of many services in our smaller Central Oregon towns. Slightly more than 1,200 Central Oregonians who were experiencing homelessness or struggling to make ends meet accessed free services provided by hundreds of businesses, nonprofits, government agencies, faith based organizations, schools, and individuals. Guests received free medical care (including dental and vision), education referrals, employment, housing, food, haircuts, resumes, children's services, credit, financial services and much more.

By the following year, attendance grew to 1,838 people and 600 volunteers who provided more than 150 services. The 2010 and 2011 events combined drew over 6,000 guests, 1,200 volunteers, 180 partners providing tangible services and over $600,000 in donated services. The result of these efforts has been an explosion in public awareness of the issues that lead to homelessness and what our region has - and doesn't have - in terms of assistance.

Reports have come in each year of lives changed, community relationships built and volunteerism increased. Collaborations created at Project Connect have spun off to create real systems change. An example is that our ID services program showed that a substantial amount of foster children left their foster homes without being given birth certificates or other forms of ID. Without ID, they could not get a job, drive, rent or conduct many other primary self-sustaining functions. That information was taken to the Oregon Department of Human Services (DHS) and the foster care discharge protocols in Central Oregon were changed to make sure each child was given ID when they are discharged from care.

Currently Central Oregon Project Connect is the largest rural regional Project in the United States! We serve the same volume of guests as many large urban Project Connect events. Project Connect staff continues to receive calls from other communities throughout the western states asking for guidance, technical support, and information on how to begin and operate Project Connects. This has created unique challenges for the leadership and sustainability of the effort. As we move forward, our communities will likely be better served by Project Mobile Connects (i.e. street delivery of smaller localized Project Connects) and localized smaller Community Connects. The assumption is that by offering free services throughout Central Oregon on a monthly basis more citizens can be served.

Appendix B2 - Homeless Leadership Coalition (HLC)

The Homeless Leadership Coalition (HLC) was established in 1995 by NeighborImpact to engage a broad cross-section of the community to address immediate homeless issues and Continuum of Care planning. In order to insure a comprehensive process, the HLC included many key and relevant community planning groups to discuss gaps in services, brainstorm possible solutions and determine relative priorities. The HLC has always had a tri-county focus, but since meetings are held in Bend, this has limited participation outside of Deschutes County. The HLC champions the region's Continuum of Care vision of an economic and social support system which would promote each household's ability to successfully meet basic needs for food, shelter, clothing, health care and long-term stability.

This vision recognized that long term solutions to the problems of homelessness and poverty required a comprehensive approach that addressed immediate needs, as well as underlying physical, economic and social factors. The system consists of six main coordinated components that include supportive services: 1) outreach, intake, assessment; 2) prevention; 3) emergency shelter; 4) transitional housing; 5) permanent supportive housing; and 6) permanent housing. This system continues to support the region's efforts to alleviate homelessness, provide access and continuity of services to move persons through the system and provide permanent housing solutions.

The two primary goals of the Homeless Leadership Coalition are to make the community aware of the homeless problem in Central Oregon and to improve networking and sharing of information between service providers and homeless advocates. In order to achieve these goals, the HLC has helped to spearhead several initiatives and projects over the years, including:

- Monthly meetings to share information about current and upcoming events
- Community educational projects that include public events, extensive media coverage, and an advertising campaign
- Continuum of Care Planning Process (ongoing)
- Helped the City of Bend obtain an Oregon Community Development Block Grant Technical Assistance award to fund and complete a Deschutes County study
- Participation on the State's Homeless Task Force
- Overseeing the One Night Shelter Count (ONSC) in the region (annually since 2007)
- Educating the community about homelessness and taking a lead role in implementing strategeies to end it

The Homeless Leadership Coalition meets on a monthly basis and membership is now over 40 groups strong. For more information on HLC meetings and projects, please go to www.cohomeless.org.

Appendix B3 - Involvement of the Faith Community

In each community throughout Central Oregon, there are numerous churches and faith-based non-profits offering critical community services and assistance. From food banks and hot meals to clothing closets, shelter and housing assistance, the services provided are extensive. And well they should be. Faith based organizations are often a "first stop" for those seeking help or referral in order to meet basic needs. Yet, just as the nonprofit arena struggles to share up to-the-date information on their services with the public and peers, the faith community also is struggling to keep up with overwhelming demand, stay informed on local community resources, and to coordinate, leverage, and publicize their services and resources.

Within each of the region's communities, there are a variety of mechanisms for interfaith coordination. Some communities have well-established and well attended ministerial associations. In a few cases, there are multiple associations representing faith based efforts. In other communities, there is no apparent coordination or inter-communication around the services being provided to the community.

In some communities, faith organizations work well and are closely coordinated with other social service agencies. In others, there is little or no interaction with the broader safety-net agencies. To help bridge the inequity in interfaith coordination among Central Oregon's communities, The Partnership to End Poverty launched an initiative in 2010 to encourage interfaith and intercommunity dialogue around the issue of meeting the needs of the region's vulnerable populations. The focus of these specific networks has been on inventorying their collective direct community services (creating "resource maps"), and in taking leadership roles in filling gaps in their local community resources.

Each local faith network group functions independently while determining their local goals and objectives. Most of the groups are working on cooperative projects such as cold weather shelters, resource inventories, emergency shelters, leveraging resources with each other, and other self-directed projects. While targeted at laity and clerical workers, pastoral leadership is also represented. Currently there are faith-based networks meeting in Prineville, Redmond, Bend and Madras with the goal to expand to La Pine and Sisters by the end of 2011.

The faith networks are an excellent step in creating better communication and coordination of community services. All networks are reporting improved ability to cross-refer to services and expanded knowledge of where the "gaps" are in the social services system of their respective communities. However, participation in the groups is not universal as there are differing levels of available time among congregations and theological divisions persist that hamper efforts to attract the entire faith community to the table. Continued recruitment efforts for new participants as well as alternative information delivery systems (i.e. web-based resources lists) will be an essential component of faith coordination in months and years to come.

For more information, please contact the Partnership to End Poverty at (541) 504-1389

Appendix B4 - Family Access Network (FAN)

The concept of a comprehensive network of community partners working closely to support disadvantaged families began in 1993 in Deschutes County. Out of the initial conversations, creative thinking and planning emerged the Family Access Network (FAN), an innovative organization committed to building a healthy community by alleviating the suffering of children in need and ensuring children attend school ready to learn. In fact, FAN's mission is to improve lives by ensuring all children in Deschutes County have access to basic-need services.

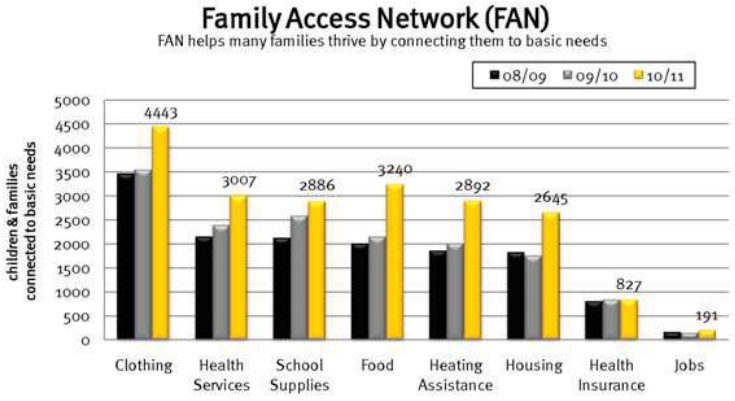
The Family Access Network (FAN) is unique to Deschutes County, but it is such a valuable model that many others are trying to replicate it in their own communities. The most critical aspect of FAN is that it provides full or part-time "Family Advocates" in all Deschutes County public Schools and some pre-school locations (26 advocates cover 48 sites in Deschutes County serving age 0 through grade 12). FAN Advocates act as service brokers who link children and their families to critical social supports with the goal of keeping children in school. FAN's unofficial tag line is "Help with the other kind of home work" which stresses the relationship with the schools – it's critical to take care of other distractions "at home" in order for the student to be able to focus on school.

Working through a dedicated Advocate - and with the support of numerous community partner agencies - a student or parent is referred for dental work, job opportunities, clothing, rental assistance, childcare support, health insurance or whatever the need. FAN's comprehensive approach to the web of services available in Deschutes County makes it extremely effective in helping children and families get the services they need in a cost efficient manner. In SY 2009-10, FAN Advocates served over 7,894 children and family members.

The FAN Steering Committee is made up of representatives from 15 local agencies including NeighborImpact, Oregon Department of Human Services, Deschutes County Human Services and Juvenile Corrections Departments, the Commission on Children and Families, Bend Park and Recreation District, the Family Resource Center, High Desert ESD, and all three Deschutes County school districts.

FAN receives funding from a wide variety of sources including Title 19 Medicaid Administrative Claiming funds, school district general funds, fundraising events, corporate sponsorships and appeals to the community. In 2006, the FAN Foundation, a 501(c)3 organization, was created to support the long-term fiscal stability of FAN.

For more information about FAN, call 541-693-5675 or go to www.familyaccessnetwork.org



Appendix C

Additional Resources

Appendix C1 - Housing First as a Regional Solution

Housing First is a "best practices" approach to addressing homelessness that recognizes that housing is the foundation of social stability. An individual without access to stable housing also faces a host of other challenges that can add to or aggravate poverty, including inability to pursue basic hygiene, lack of ability to store and prepare food, lack of reliable address at which financial and employment correspondence can be received, lack of ability to maintain contact with supportive friends or family networks and lack of ability to store a vehicle. As the pressure created by the absence to meet these basic needs mounts, an all-too-frequent accompanying side effect is an increase in substance abuse or the presentation of mental illness, often as a mask for pain involved in managing such immense daily struggles.

The Housing First approach assumes that some or all of these subordinate issues can be forestalled, minimized or adequately addressed by moving rapidly to ensure that housing is the very first service offered to the homeless. While housing alone is often not sufficient to meet the variety of pressing needs that low-income individuals confront, it is understood in the Housing First model that once housing has been addressed, other "wrap around" services are more easily targeted and delivered.

A "Housing First" model contrasts with an alternative - the "Continuum of Care" approach - where the inability to obtain or loss of stable housing is addressed in a progressive fashion which "adds back" stability while addressing underlying issues such as lack of employment, addiction, criminal background, etc. The "Continuum" approach targets resources to ensure that likelihood of "success" is enhanced as individuals move through a series of "levels" of housing, such as from the street to emergency shelter to transitional housing and finally to permanent (perhaps supportive) housing. In theory, the "Continuum" approach serves an important function by allowing inadequate resources to be targeted to the population most likely to benefit.

To date, Central Oregon's approach to housing for the homeless has largely been based on the "continuum of care" model. Recent economic events, however, have suggested that the Housing First model may hold more promise for the region.

Many individuals and families who are currently at risk of homelessness have arrived at that status due to long-term lack of employment associated with the severe economic downturn or due to foreclosure associated with the collapse of the housing bubble. Many of these individuals/families may be employed, but still lack the resources or credit history to raise the substantial sums required to pay deposits or pass rental screenings. This is particularly true of low-income families whose housing expenses typically consume a much higher percentage of a household budget. Something as simple as an unanticipated car repair bill or abnormally high utility bill can force a diversion of resources, which leads to missing a rent or house payment and starts in motion events which leads to eviction and inability to access replacement housing. Such individuals are not necessarily candidates for "continuum of care" services. All that is needed for these households is a chance for a new start, and intensive wrap-around services may be unwarranted.

And even among those individuals whose prospects of economic stability are not bright, the "continuum of care" approach is increasingly considered an insufficient response. The volume of "continuum of care" services such as shelters and transitional housing has never been and is not currently adequate to meet demand. Nor is the availability of such services uniform throughout the region. For non-profits, faith-based organizations and governments operating such facilities, sustainability is a continuing challenge.

What is needed in the region is an expansion of the "Housing First" approach that works alongside the more traditional "Continuum of Care" model to increase options for individuals in and those at risk of homelessness. A Housing First model would create options for families that need shelter, but do not require additional services, and it would assist providers in being able to locate and service those individuals and families that do need wrap-around supports. Having both housing models would create the broadest array of possibilities for the homeless and for advocates seeking appropriate services to help their clients.

In implementing a Housing First strategy, three principles generally apply:

1) People should be offered housing based on need and need alone. An appropriate response to lack of housing is not extended reflection on the root causes of how and why homelessness occurred. Appropriate response is the immediate provision of housing. Once an individual/family has been stabilized, there will be plenty of time for targeting services necessary to discourage repetition of the homeless or near-homeless experience.
2) Movement into housing should be supported by appropriate "wrap around" services targeted to return individuals/families to self sufficiency a rapidly as possible. It is a basic tenet of American individualism that every person is deserving of respect. Respect for the condition of individuals includes "letting go" and allowing people to pursue their lives--however they choose to live them. The level of wrap-around services should be the minimum required to prevent a return to homelessness. Because the demand for services so far outstrips available supply, any use of services "above and beyond" the minimum required will cost someone else in the community his or her housing.
3) Client choice, respect and empowerment should be paramount considerations. Homelessness prevention services must help people in crisis regain a sense of control and feeling of empowerment to actively overcome obstacles. A constant emphasis on the client's goals, choices, and preferences, an unwavering respect for their strengths, and reinforcement of progress are essential for empowerment. This does not, however, mean clients are protected from the natural consequences of their actions.

To implement a Housing First model in Central Oregon, several steps would be required:

- Build public buy-in for Housing First
- Inventory Regional Housing Needs
- Focus on Comprehensive Plan Updates
- Seek additional housing resources regionally
- Support remedies to prevent further homelessness by forestalling foreclosure/eviction
- Better coordinate discharge planning

Appendix C2 - Key Players in the Field

NeighborImpact

Since 1985, NeighborImpact has been recognized by the Oregon Housing and Community Services Department (OHCS) as a community action agency serving the Central Oregon region of Crook, Deschutes and Jefferson counties. Organized as a 501(c)3 charitable corporation, NeighborImpact employs roughly 200 staff with an annual budget of $14.5 million and serves over 200,000 persons. An Executive Director works with a 15 member volunteer board responsbile for setting policy and direction for the organization. NeighborImpact maintains 13 offices and classroom sites in the communities of Bend, La Pine, Redmond, Sisters, Prineville and Madras.

NeighborImpact is the region's lead agency for homeless services, child care resources, emergency food programs, home ownership, housing rehabilitation and Head Start. For over 25 years, community action programs have focused on building successful families by helping them with basic needs, affordable housing, home ownership and training to increase life skills, work skills and financial literacy. We do this while providing guidance and help with job search, child care, and temporary rent assistance. Our Head Start Program enriches the lives of young children and their families. Through home visits, health and nutrition assistance, literacy programs, parenting classes, and high quality child care, this successful program gets low-income children ready for school and life.

Contact and more information at www.neighborimpact.org

Housing Works

Housing Works is the largest provider of affordable housing in the region. Under contract with the U.S. Department of Housing and Urban Development (HUD), Housing Works administers the "Section 8" Housing Choice Voucher Program, a rental assistance program for eligible individuals and families in Crook, Deschutes and Jefferson counties. This program allows low-income families to choose and lease safe, decent and affordable privately-owned rental housing. The family (or person) selects a rental unit from the open market and they pay approximately 30-49% of their Gross Annual Income towards rent. Housing Works pays the landlord the difference between the Fair Market Rent (FMR) and the amount the person or family is able to pay. Housing Works currently manages 1,105 vouchers and periodically opens a waitlist to the community.

In addition, Housing Works has created 563 units of housing through Low-Income Housing Tax Credit (LIHTC), Oregon Affordable Housing Tax Credit (OAHTC), Neighborhood Stabilization Program (NSP) and other creative financing options. 39 of these units are supportive housing designated for persons with disabilities. Housing Works also provides low-income homeownership options along with a very robust Family Self-Sufficiency program designed to assist with breaking cycles of poverty. Families Forward, a closely held non-profit of Housing Works also provides Ready to Rent classes, Rental Deposit Assistance (Moving Forward Fund), Credit Building programs and a clothing boutique.

Contact and more information at www.housingworks.org

Bethlehem Inn

In 2010, Bethlehem Inn celebrated its 11th anniversary as Central Oregon's largest emergency shelter for homeless families, men and women. The Inn started as a winter-time only homeless shelter, operated at a different local church each weekend, but the increased demand forced it to find a permanent location. Now housed at a former motel property on North Hwy 97 in Bend, the Inn has beds/space for up to 74 individuals and 5 families. In 2010, Bethlehem Inn provided more than 25,300 bednights and 57,000 meals to those experiencing homelessness.

Through the hard work of staff, volunteers, donors and many community organizations, the Inn provides shelter, 3 meals per day, access to personal hygiene products, clothing and haircuts, job skills training, case management services and transportation for its residents. It also provides onsite AA (Alcoholics Anonymous) and NA (Narcotics Anonymous) sessions as well as on site Mental Health services and monthly access to Legal Aid. Recently, it started a Work Experience Program to allow residents to work in various parts of the organization.

Contact and more information at www.bethleheminn.org

Partnership to End Poverty

Living in poverty is like living in an obstacle course - there is very little margin for error. Officially, one out of every nine people in Central Oregon lives in poverty. However, nearly one in three lacks the income needed by most Americans to live decently. Whether living under the official poverty threshold or hovering above it, those with low incomes face a number of barriers that keep them from overcoming their situation and becoming economically stable. Homelessness most often is a result of living too close to the edge. It is an obstacle course to be traversed daily.

The Partnership to End Poverty works with 315 organizations throughout Central Oregon to make permanent changes to systems and policies that affect our most vulnerable populations. We are committed to enhancing partner capacity, and to championing community involvement in prevention and creative solutions.

Contact and more information at www.partnershiptoendpoverty.org

Saving Grace

Saving Grace - formerly Central Oregon Battering and Rape Alliance (COBRA) - is a private, non-profit organization with offices in Bend, Madras, Prineville, Redmond, and Sisters that provides support and services to survivors of domestic violence, sexual assault, dating violence, date rape and stalking. Free and confidential sheltering, support groups, temporary restraining order assistance, therapy, counseling, a 24-hour hotline, and supervised visitation and exchange are some of the services offered to thousands of local residents each year.

Saving Grace partners with volunteers, medical professionals, law enforcement, social service agencies, schools and businesses in order to provide services to survivors as well as trainings for violence prevention.

Contact and more information at www.saving-grace.org

Central Oregon Veterans Outreach (COVO)

Central Oregon Veterans outreach was founded in 2005 by members of Bend-La Pine Vietnam Veterans of America. Initially established to assist veterans living in homeless camps in the area, COVO became a 501(c)(3) organization and expanded its mission and services to include: outreach to the homeless, distribution of food, clothing, camping supplies, fuel, etc. directly from our office, DAV Shuttle Reservation Service to the Portland VA and back, helping file disability claims for vets and fighting to get disability levels increased, mail service for homeless vets, bus passes for homeless vets, and Transitional Housing ("Home of the Brave") for 6 homeless vets. Services have recently expanded to include operations of a medical van that can be set up at various locations around the region.

Contact and more information at www.covo-us.org

The Shepherd's House

The Shepherd's House is a non-profit organization that has been operating for over 5 years to meet the needs of Central Oregon. The purpose of the Shepherd's House is to reach out and serve those in need while sharing God's grace, hope and love, in the name of Jesus. The mission is open for men, women and children during the day and for men only in the evening. The Shepherd's House provides: a long term program of discipleship and habilitation classes, free counseling services, clothing, breakfast, lunch and dinner 6 days a week, mentoring and chapel services and can accommodate up to 60 men overnight, making it the second largest shelter in Bend.

Contact and more information at www.myshepherdshouse.org

iconcity

inconcity was started in 2009 with a team who wanted to use their talents to give back to this community in service. Through the collaborative efforts of local and international musicians, artists, and presenters, iconcity thematically shares stories of struggle and hope to build a stronger community. By putting on free monthly professional-level events that end with action, they provide a neutral place to share ideas, stories, and solutions.

Through free monthly concerts at the Bend Tower Theatre, people of all ages, faiths, creeds and skin tones come together to work for a common goal: to live in culture, love unconditionally and serve our city. iconcity also currently serves free meals each Sunday

at Drake Park in Bend along with clothing, showers, mentoring and other assistance. They provide services to youth as well as solutions through social media. Anyone can text "icon" to "80565" to receive weekly texts about serving real people with real help.

Contact and more information at www.iconcity.us

Bend's Community Center (BCC)

Bend's Community Center (BCC) opened its doors in 2002 as a nonprofit dedicated to meeting the basic needs for the homeless and low income residents in the region. BCC serves as both an event center and a social service provider with nine distinct programs. As a social service provider, BCC currently runs the "Feed The Hungry" program - the largest food kitchen in Central Oregon, serving 1,200 meals per week - as well as being host site for the low-income Senior Congregate Meal Program. BCC operates several other programs that benefit the homeless and low-income in our community by addressing basic needs:

- Thriftstore - provides affordable household items and clothing
- "Keep Them Warm" - provides outdoor clothing and winter survival equipment
- Becca's Closet - provides free formal wear for low-income teens (boys and girls)
- Diaper Bank - provides diapers for infants, people with disabilities and seniors
- Community BikeShed - refurbishes bikes and gives them away to the homeless

Contact and more information at www.bendscommunitycenter.org

Redmond Faith Network

Redmond Faith Network is a working group of roughly 20 representatives from churches, non profits, and organizations that have faith based missions. The group meets with the primary function of working together on community service for those in poverty and homelessness. The group focuses on sharing, and the efficient reallocation of resources such as food, clothing, and volunteers. They also pool resources and information to reduce duplication and leverage the assistance they can provide for the community.

Currently, the Redmond group is working on establishing a family homeless shelter, and ongoing cold weather shelter. They have a blog page for internal use to track all of the services each organization offers so that case management and referral is efficient.

Contact and more information at www.partnershiptoendpoverty.org

La Pine Community Kitchen

The La Pine Community Kitchen is a non-profit organization with a mission to provide the residents of south Deschutes County, north Klamath County and west Lake County (1,800 sq mile total service area) with the basic nutritional, physical, social and spiritual needs in a client centered manner. The La Pine Community Kitchen provides the following services:

- The Kitchen – hot meals five days a week
- The Pantry – food boxes two days a week
- The Produce Stand - fruits, vegetables and perishable items
- The Clothes Closet – clothing, bedding, personal hygiene items, toilet paper and laundry soap, sleeping bags, tents and tarps.
- The Pet Food Stand – dog and cat food (approx. 150 pounds a week)
- Emergency Fire Wood – a winter program only

The La Pine Community Kitchen works with a number of non-profit, faith based and community based organizations who provide volunteers; financial support and assistance with fundraising and annual food drives.

Contact and more information at www.lapinecommunitykitchen.org.org

Cascade Youth and Family Center (CYFC)

Cascade Youth and Family Center (CYFC) provides crisis intervention, family mediation and resolution, and shelter for runaways and homeless youth. CYFC provides emergency shelter, works to reunite youth with their families, strengthens family relationships, encourages stable living conditions for youth, and supports youth in choosing constructive courses of action toward education and employment. Troubled youth can call toll-free (800) 660-0934 24-hours a day to access shelter and basic needs.

CYFC provides a transitional living program, Living Options for Teens (The LOFT), which has 17 beds for youth age 16-20 with a maximum stay of 24 months. It also has 4 emergency shelter beds where youth can stay up to 21 days. CYFC also maintains 15 certified host homes in the tri-county region that provide up to 30 beds available for youth age 11-18 (length of stay TBD by youth/team.

Contact and more information at www.cascadeyouthandfamilycenter.org

Madras Gospel Mission (MGM)

The Madras Gospel Mission (MGM) has been operating since August of 2005 as a 501(c)3 nonprofit and is currently the only shelter in Jefferson County. What started as a simple act of sharing food with people in need of a meal has turned into so much more. MGM serves an adult male population and features 12 beds, daily meals, laundry facilities, showers and a safe day-time environment (unlike many shelters which require residents to vacate the facilities during the day). MGM also provides coats, clothing and other services that are based on individual needs. The Church is a vital part of MGM and its programming. MGM works with all the major social service agencies in the area with funding coming primarily through local citizens and the Church.

Contact and more information at www.madrasgospelmission.org

Appendix C3 - Local Resources and Guides

A few words of caution about local resource guides: Resource guides – it seems almost by definition - rely heavily on community partnerships and proactive agencies to provide accurate, complete and timely information. That is problematic in these lean economic times. Resource guides are often not all-inclusive (e.g. some smaller groups may not wish to be listed in widely distributed resource guides because of their limited capacity to respond to a large volume of inquiries). Those groups may prefer to help only by agency referral or to specific group members. Finally, it's sometimes helpful to refer people to clubs, associations, or churches in which they are already affiliated.

There are several primary Resources/Guides in Central Oregon. These are written/targeted at slightly different audiences (and provided in many different mediums), but may be helpful in finding food, clothing, shelter and many other forms of assistance. These include:

Answer Book (NeighborImpact)
The Answer Book is a printed, widely distributed, quick reference emergency service guide, listing basic tri-county social service and human service organizations. Available in English and Spanish, the guide is updated every two years. The complete document may be picked up at NeighborImpact locations or downloaded and printed from the NeighborImpact website at www.neighborimpact.org.

211
211 is an easy to remember telephone number that connects people to important community services and volunteer opportunities. A joint project of United Way of Deschutes County, Partnership to End Poverty and the Family Resource Center, 211 provides trained information and referral specialists who help callers clarify their needs and direct them to agencies providing appropriate services with a minimum of calls. The information is also available online at www.co211.info. Callers may speak with interpreters through the call center, which increases accessibility.

Jefferson County Community Resource Guide
The Community Resource Guide is a joint effort of the Jefferson County Commission on Children and Families and the Jefferson County Public Health Department. Intended for residents of Madras, Warm Springs, Metolius, Culver and Jefferson County, it features a wide range of services including housing, health care, substance abuse treatment, legal assistance and volunteer opportunities. It can be picked up (or sent to you electronically) by contacting either the Commission on Children and Families or the Public Health Department.

Directions (Central Oregon Council on Aging)
Directions is a tri-county guide that provides up-to-date information on a very wide range of services, products and programs to help the elders in our community increase their quality of life, and promote dignity, well-being, security and independence. It can be picked up at any COCOA location in Bend, Redmond, Crooked River Ranch, Madras, La Pine, Prineville, Sisters and Warm Springs.

Beehive
The Beehive website is an interactive self-help tool providing local and national information about financial services, education, jobs, health care, and more. The website is available in English and Spanish and provides many useful tools on budgeting, resume building, financial aid, and earned income tax calculators. Note: The Beehive website does not list as many local resources as state and national resources.
Go to http://cascades.thebeehive.org

"I tried to do everything I could on my own at first but things just got to where we had no more options. As a last resort, I sold the car so I could make the payment that I arranged in court to keep our housing. It still wasn't enough money. When we came home one day the sheriff had put a lock box on the door."

Self-Sufficiency Matrix

The following matrix provides a good overview of many of the challenges faced by those who are homeless or at risk of homelessness. It also shares some of the characteristics as they receive support to move from left to right and achieve greater self-sufficiency.

Domain	1	2	3	4	5
Income	No income	Inadequate income and/or spontaneous or inappropriate spending	Can meet basic needs with subsidy; appropriate spending habits	Can meet basic needs and manage debt without assistance	Income is sufficient, well managed; has discretionary income and is able to save
Employment	No job	Temporary, part-time or seasonal position; inadequate pay, no benefits	Employed full-time; inadequate pay, few or no benefits	Employed full-time with adequate pay and benefits	Maintains permanent employment with adequate income and benefits
Housing	Homeless or threatened with eviction	In transitional, temporary or substandard housing; and/or current rent or mortgage payment is unaffordable (>30% of income)	In stable housing that is safe, but only marginally adequate	Household is in safe, adequate subsidized housing	Household is in safe, adequate, unsubsidized housing
Food	No food or means to prepare it. Relies to a significant degree on other sources of free or low-cost food.	Household is on food stamps	Can meet basic food needs, but requires occasional assistance	Can meet basic food needs without assistance	Can choose to purchase any food household desires

Childcare	Needs childcare, but none is available or accessible or child is not eligible	Childcare is unreliable or unaffordable; inadequate supervision is a problem for childcare that is available	Affordable, subsidized childcare is available, but limited	Reliable, affordable childcare is available with no need for subsidies	Able to select quality childcare of choice
Children's Education	One or more eligible children not enrolled in school	One or more eligible children enrolled in school, but not attending classes	Enrolled in school, but one or more children only occasionally attending classes	Enrolled in school and attending classes most of the time	All eligible children enrolled and attending on a regular basis
Adult Education	Literacy problems and/or no high school diploma/GED are serious barriers to employment	Enrolled in literacy and/or GED program and/or has sufficient command of English to where language is not a barrier to employment	Has high school diploma or GED	Needs additional education/training to improve employment situation and/ or resolve literacy problems	Has completed education/training needed to become employable. No literacy problems
Legal	Current outstanding tickets or warrants	Current charges/ trial pending, noncompliance with probation/parole	Fully compliant with probation/parole terms	Has successfully completed probation/ parole within past 12 months, no new charges filed	No active criminal justice involvement in more than 12 months and/or no felony criminal history
Health Care	No medical coverage with immediate need	No medical coverage and difficulty accessing medical care. Household members may be in poor health	Some members (i.e. children) on public health plan (OHP)	All household members can get medical care when needed, but may strain budget	All members are covered by affordable, adequate health insurance

Life Skills	Unable to meet basic needs such as hygiene, food, and activities of daily living	Can meet a few, but not all needs of daily living without assistance	Can meet most, but not all daily living needs without assistance	Able to meet all basic needs of daily living without assistance	Able to provide beyond basic needs of daily living for self and family
Mental Health	Danger to self or others; recurring suicidal thoughts, experiencing severe difficulty in day-to-day life due to psychological problems	Recurrent mental health symptoms that may affect behavior, but not a danger to self/others; persistent problems with functioning due to mental health symptoms	Mild symptoms may be present, but are transient; only moderate difficulty in functioning due to mental health problems	Minimal symptoms that are reasonable responses to life stressors; only slight impairment in functioning	Symptoms are absent or rare; good or superior functioning in a wide range of activities; no more than everyday problems or concerns
Substance Abuse	Meets criteria for severe abuse/ dependence; resulting problems so severe that institutional living or hospitalization may be necessary	Meets criteria for dependence; preoccupation with use and/or obtaining drugs/alcohol; withdrawal or withdrawal avoidance behaviors result in neglect of essential life activities	Use within last 6 months; evidence of persistent or recurrent social, occupational, emotional or physical problems related to use; problems have persisted for at least 1 month	Client has used during last 6 months, but no evidence of persistent or recurrent social, occupational, emotional or physical problems related to use	No drug/alcohol abuse in the last 6 months
Safety	Home or residence is not safe; immediate level of lethality is extremely high, possible CPS involvement	Safety is threatened, but temporary protection is available; level of lethality is high	Current level of safety is minimally adequate; ongoing safety planning is essential	Environment is safe, however, the future is uncertain; safety planning is important	Environment is apparently safe and stable

Family Relations	Lack of necessary support from family or friends; abuse (domestic violence, child abuse) is present or there is child neglect	Family/friends may be supportive, but lack ability or resources to help; family members do not relate well with one another; potential for abuse or neglect	Some support from family/friends; family members acknowledge and seek to change negative behaviors and are learning to communicate and support	Strong support from family or friends; household members support each other's efforts	Has healthy/ expanding support network; household is stable and communication is consistently open
Mobility	No access to transportation, public or private; may have car that is inoperable	Transportation is available, but unreliable, unpredictable, unaffordable; may have car, but no insurance or license	Transportation is available and reliable, but limited and/or inconvenient; drivers are licensed and minimally insured	Transportation is generally accessible to meet basic travel needs	Transportation is readily available and affordable; car is adequately insured
Community Involvement	Not applicable due to crisis situation; in "survival" mode	Socially isolated and/ or no social skills and/ or lacks motivation to become involved	Lacks knowledge of ways to become involved	Some community involvement, but has barriers (transportation, childcare, etc.)	Actively involved in the community
Parenting Skills	There are safety concerns regarding parenting skills	Parenting skills are minimal	Parenting skills are apparent, but not adequate	Parenting skills are adequate	Parenting skills are well developed