

## Introduction

We are pleased to share with you the Ionia/Montcalm Ten-Year Plan to End Homelessness. This document is the culmination of a community based effort involving members of the Ionia/Montcalm 10-Year Plan Advisory Board and the Ionia/Montcalm Homeless Resolution Task Force-Ionia/Montcalm Continuum of Care, focus groups of homeless or previously homeless persons and members of the Ionia and Montcalm County communities.

Over the years, the membership of the Ionia/Montcalm Continuum of Care has had representation from non profit agencies, faith based groups, community service agencies, local government, individuals experiencing homelessness, community housing authorities, and other caring community members. This group has developed a Continuum of Care for those experiencing homelessness in Ionia and Montcalm counties. This Continuum of Care offers:

- Emergency shelter to survivors of domestic and sexual violence
- Emergency shelter for homeless women and children
- Motel vouchers for homeless men and families not eligible for shelter
- Transitional housing programs with supportive services
- Information and referral for basic, therapeutic and income needs

This Continuum of Care has been supported by federal, state and local monies. The results and impact of the services under this continuum are substantial. Current services have resulted in many Ionia and Montcalm county residents transitioning from homelessness to stable housing and self-sufficiency. However, we are far from meeting the needs of all homeless people in our communities. In March of 2006 the Ionia/Montcalm Continuum joined many others in the state of Michigan to develop a local Ten-Year Plan to end homelessness. This Plan strives to merge the experience and expertise of members of the Ionia and Montcalm communities with those of the state and nation as we embark on a concerted effort to end homelessness.

This Plan will present broad perspectives and guidelines to coordinate, promote and assist the Ionia and Montcalm community in its efforts to end homelessness. This Plan is intended to be a working plan. It will require the input of hundreds of Ionia and Montcalm county residents and a true community commitment to end homelessness. It has been developed with the spirit that success is predicated on community planning, commitment, cooperation, responsibility, and strength.

The Ten-Year Plan Advisory Board and the membership of the Ionia/Montcalm Homeless Resolution Task Force look forward to seeking the opportunities and meeting the challenges presented in this Plan. We believe Ionia and Montcalm counties are fortunate to have the commitment of caring compassionate citizens, aware and involved local governments, experienced nonprofit providers, and a strong faith-based community. In addition, we have educational and health care systems that provide caring skills and knowledge, and businesses that are willing to be mobilized behind the right ideas. Together, our communities will achieve promising results.

Sincerely,

The Advisory Board for the Development of a Ten Year Plan to End Homelessness-

Vera Beech, Continuum of Care Chairperson, Executive Director RAVE-Ionia/Montcalm, Inc.

John Berchtold, Montcalm County Controller/Administrator

Robert Brown, Executive Director, The Montcalm Center for Behavioral Health

Mark Howe, Ionia County Administrator

Phil Larson, Director, Ionia/Montcalm, Department of Human Services

Robert Lathers, CEO, Community Mental Health Services for Ionia County

Randall Slickers, Manager, Goodwill Industries

## Ionia/Montcalm Joint Plan to End Homelessness

### Vision Statement

Every person has access to safe, decent, affordable housing with the needed resources and support for self-sufficiency and well being.

### **COMMUNITY DATA**

#### Homelessness: Count – Present Shelter System

Point-In-Time count of homeless persons: This methodology involves identifying locations throughout the community where homeless persons are known to congregate or seek services. Surveys are administered in these areas to get a count of the number of person’s experiencing homelessness on one particular day. To ensure that the count is not duplicated each person taking the survey is asked if they have already taken the survey that day. The last Point –In-Time Count for Ionia and Montcalm counties took place on 1/25/05 and involved participants from 21 human service agencies, food pantries, motels, law enforcement, schools, churches, and current homeless individuals.

The following numbers include those counted in HUD’s definition of homelessness, this does not include families or individuals who are living “doubled up” by sleeping on the couches of families, friends or strangers.

#### Homeless

Single females	15
Women head of households	9
Men	13
Children	18

Total Homeless from Point-In-Time count: 55

The homeless count is not academically rigorous. However, the standardized survey provides an objective foundation for the uniform and periodic survey of the homeless in our communities. Additional counts will need to be conducted to provide a more accurately defined homeless population. However, the Point-In-Time count and data from local service providers provides useful data on the number of persons experiencing homelessness in Ionia and Montcalm counties.

Currently, Relief After Violent Encounter-Ionia/Montcalm, Inc. operates the only emergency shelters in the Ionia/Montcalm communities. RAVE-I/M, Inc. serves homeless women and children. They operate the 26-bed IM Hope safehouse in Ionia County and the 8-bed Homeward Bound - Tier II emergency shelter in Montcalm County.

In the 2004-2005 fiscal year, 376 adults and children lived in the emergency shelters operated by RAVE-I/M, Inc. Of those utilizing shelter, 51 percent were children. Of shelter residents, 69 percent report a recent domestic or sexual assault. Approximately 17 percent of the remaining 31 percent report a history of abuse or domestic violence. Approximately 45 percent of those using residential services at RAVE-I/M, Inc. were adults without children and 55 percent were women with children. Approximately 5-7 percent of those seeking emergency shelter are chronically homeless.

This estimate is lower than several studies that indicate that nationally the chronically homeless are about 10% of the homeless population. National studies also indicate that chronically homeless individuals consume approximately 50 percent of resources provided to the homeless. Interestingly, national surveys report higher use of emergency shelter bed nights in winter months as people flee the cold and report to shelters. Local data demonstrates a slightly different picture. The number of shelter bed nights provided in December – February 2004-2005 was 1,687. This accounts for approximately 24 percent of annual bed nights. In the summer months of June-August 2004-2005, 1,922 bed-nights were provided. This is approximately 27 percent of the annual 7,025 bed nights provided. The difference in numbers locally compared to nationally may be due to the lack of data on homeless men in our community, the rural nature of our community and the desire of those who flee domestic and sexual violence to not uproot their children during the school year. This occurs despite the McKinney-Vento Act which requires each school district to identify a homeless liaison. District homeless liaisons and local service providers have worked together to assist children in staying in their school of origin when they become homeless.

The number of homeless men counted in the Point-In-Time survey was 13. Emergency shelter services for homeless men and intact families, is limited to the provision of information and referral, motel vouchers and/or transportation to a shelter outside of the Ionia /Montcalm community. Homeless teens face additional challenges as does the ability to count the number of teens experiencing homelessness locally. Community service providers and educators in the Ionia and Montcalm communities report that it is often difficult to identify homeless children within the school system. They, like many of the homeless in our communities, are often couch surfing, temporarily staying with contacts, precariously housed or living in parks, cars, campgrounds or other places not fit for human habitation.

Although our community must plan to enhance the quality of data available for planning and responding to all homeless populations, we can learn a lot from the practical experience of services providers in our community, those who have experienced homelessness and our community at large. Together we make up a team of experts who have identified multiple problems and opportunities that will drive us toward our vision to end homelessness.

Homelessness occurs in our rural area due to a magnitude of structural and individual factors including poverty, shortage of affordable housing, inadequate access to mental health and substance abuse services and domestic violence. Rural residents must travel greater distances to access social services and public health providers. This increases the burden on households that need services due to poverty, disability, or old age. This coupled with lack of transportation resources, creates additional problems for special needs populations. Local service providers guesstimate that at any point in time there are approximately 350 homeless persons in Ionia and Montcalm County. Further, it is estimated that approximately 35 percent are children. Those

who work with homeless populations in Ionia and Montcalm counties find that those experiencing homelessness most often have jobs that simply don't generate enough income for the individual or family to secure and maintain housing. This is consistent with national data that describes rural homeless as more likely to be employed, less likely to be on public assistance, but more likely to receive cash assistance from friends or family.<sup>1</sup> We know that the fair market rents set by HUD for Ionia and Montcalm counties are as follow:

<sup>1</sup>Housing Assistance Council, Formulas for Success: Housing Plus Services in Rural America page 4.

### **County FY 2005 HUD FMRs By Unit Bedrooms**

	<b>Two-Bedroom</b>	<b>Three-Bedroom</b>	<b>Four-Bedroom</b>
<b>2005 Ionia</b>	\$543.00	\$650.00	\$722.00
<b>2005 Montcalm</b>	\$508.00	\$686.00	\$707.00

If we are to look at the federal standard for affordability, a single parent with two children needing a three-bedroom apartment in Montcalm County would need to make \$14.28/hour in order to afford rent at 30% of income.

#### **WHAT DO WE SEE LOCALLY?**

- ❖ We see that many working individuals and families do not have an income that is sufficient to sustain housing.
- ❖ We see that many have lost their employment.
- ❖ We see that many have low paying jobs or do not earn a living wage.

***Therefore, we believe that poverty and low income jobs contribute to homelessness.***

- ❖ We see families and individuals complete paperwork for subsidized housing only to be placed on a waiting list of one to two years.
- ❖ We see that some in our community live in homes not fit for human habitation; some without proper windows, water, electricity, heating, or structural stability.

***Therefore, we believe that a shortage of affordable housing contributes to homelessness.***

- ❖ We see that mental illness, substance abuse and disabilities increase the risk of displacement for the precariously housed.
- ❖ We see that without proper treatment and on-going evaluation, securing and maintaining housing is increasingly problematic.

***Therefore, we believe that mental illness, substance abuse, and disabilities contribute to homelessness.***

- ❖ We see families go without needed medication because they don't have enough money to follow their doctor's orders.
- ❖ We see serious illnesses devastate individuals and families financially.
- ❖ We see individuals who have untreated medical needs.

*Therefore, we believe that lack of health care coverage contributes to homelessness.*

- ❖ We see lack of education.
- ❖ We see lack of job skills and training.
- ❖ We see individuals who left school to work in a factory for 20 years only to find themselves unemployed and unprepared for today's changed workforce.

*Therefore, we believe that a lack of training and education contributes to homelessness.*

- ❖ We see women and children who are victimized by abuse.
- ❖ We see the long term impact of physical, sexual and psychological abuse.

*Therefore, we believe domestic and sexual violence toward women and youth contributes to homelessness.*

- ❖ We see that institutions such as foster care, hospitals, prisons and mental health facilities discharge their wards without adequate supports in place to ensure housing stability and continuity of care.
- ❖ We see that there are not adequate resources for appropriate discharge planning.

*Therefore, we believe that a lack of discharge planning and resources contributes to homelessness.*

- ❖ We see that homelessness is devastating to families and individuals in our community.
- ❖ We see that homelessness disrupts every aspect of a person's life.
- ❖ We see homelessness separates families.
- ❖ We see homelessness results in lack of food, hygiene, safety and warmth.
- ❖ We see homelessness interferes with children's education.
- ❖ We see that homeless children suffer from poor health twice as often as other children.
- ❖ We see homelessness impact the overall health and well being of our community members.

*Therefore, we believe that all individuals deserve safe affordable housing and that together we must pursue solutions to end homelessness.*

We see a shared vision. A strategic collaborative response will restore the lost potential of those affected by homelessness, and allocate community resources to solve the problem rather than put a 'band-aid' on it. A solution that is community generated, community supported, and within our communities' capabilities. We will merge our local expertise with the best research and data available to ensure that all Ionia and Montcalm county residents have access to safe, decent, affordable housing with the needed resources and support for self-sufficiency and well being.

### **MERGING OUR EXPERTISE- Bringing the vision to life!**

#### **PREVENTION**

“The most economically efficient way to end homelessness is to prevent its occurrence.”  
(National Alliance to End Homelessness, Toolkit)

Prevention is the most humane, practical and effective strategy for addressing homelessness. This includes more systemic strategies that seek to prevent homelessness by ensuring people leaving institutions such as jails, prisons, hospitals, foster care, juvenile justice systems or treatment facilities are not discharged to the street or to the shelter system. Prevention strategies also include strategies such as one-time or short-term rent or mortgage assistance, legal assistance programs, representative payee and direct payment programs, meeting transportation needs, and housing placement services. In addition, strategies to improve educational and job skills, financial management, and a reduction in language barriers are needed. Regardless of the number of housing units available, if we do not offer barrier-free, appropriate supportive services, we will never end homelessness. These services include, but are not limited to, treatment for the mentally ill, recovery programs for addictions, assistance addressing the trauma and impact of domestic and sexual violence, food banks, healthcare safety net and income assistance programs.

Even with the best supportive services many will not access what they need because of their illnesses or other life experiences. We must ensure that access to service is not predicated on meeting strict program rules that will have the effect of barring those households with the greatest needs or excluding those who hold alternative beliefs and values. Outreach and engagement will be critical for access.

Strategies to end chronic homelessness fall into two major categories, the first being prevention, often referred to as “Closing the Front Door”

**Goal #1:**

**Prevention:** To “Close the Front Door to Homelessness” through prevention efforts that assist people in maintaining permanent housing and ensure access to immediate housing when leaving institutions or homeless systems.

**Objectives:**

- Prevent homelessness.
- Expand resources and options.
- Strengthen access to mainstream resources.

**Effective strategies Ionia and Montcalm counties will pursue to close the front door include:**

1. Centralize funding and service delivery to increase coordination.
2. Dedicate resources to house individuals discharged from public institutions.
3. Develop discharge planning protocols.
4. Increase use of emergency shelter grant funding allocations to prevention programs.
5. Incorporate identification of “at risk” or homeless persons into assessment practices.
6. Re-evaluate rental assistance criteria to better help those who are at risk of becoming homeless.
7. Protect victims of domestic violence from unnecessary evictions.
8. Consider former drug offenders on a case-by-case basis for housing assistance.
9. Dedicate resources to proactively assist those who are precariously housed.
10. Provide housing and supportive services to assist people in maintaining their housing.
11. Re-organize programs that require shelter stay or eviction in order for assistance to be accessed.
12. Establish performance measures to evaluate success of prevention strategies.

13. Combine short-term subsidies to defray rent and utility debts with supportive services.
14. Develop mediation programs for landlord/tenant disputes.
15. Secure legal services to prevent eviction.
16. Seek new funding for permanent housing acquisition, construction and rehabilitation.
17. Investigate county and city controlled funding that can be used as match for permanent housing acquisition, construction, or rehabilitation.
18. Investigate master leasing approaches to secure and make affordable housing for chronically homeless individuals and families.
19. Establish a committee to focus on the development of new affordable housing.
20. Increase access to employment services for low income persons.
21. Increase services offered to youth who are at risk for homelessness.
22. Expand utility assistance and weatherization programs.

## **HOUSING FIRST**

Housing is a solution to homelessness. National research and data demonstrates that a housing first approach that puts an immediate and primary focus on keeping people housed and out of the shelter systems is cost effective and results in more responsive intervention and supports once a family or individual is in permanent housing.

(National Alliance to End Homelessness, Housing First Network)

### **Goal #2:**

**Housing First:** To implement a housing first approach to exit people quickly from homelessness and reduce the need for emergency sheltering.

#### **Objectives:**

Quickly re-house the homeless.

Reduce the need and use of emergency shelter as a response to homelessness.

### **Effective strategies Ionia and Montcalm counties will pursue in order to benefit from a housing first approach include:**

1. A shift in the paradigm of service provision to homeless people from our traditional model that provides emergency shelter and case management services as supports only as long as people remain homeless, and shift to interventions that reduce the length of time people are homeless and follow-up with case management and supportive services to the individuals and families once housed.
2. Provide short term emergency shelter to resolve immediate crisis for all homeless persons in our community.
3. Re-evaluate current emergency shelter use and developments with the intent of identifying appropriate populations for housing first services. These services should include an upfront housing assessment to determine the permanent housing strategy that best meets individual and family needs.
4. Provide financial assistance for security deposits, rent and arrears.
5. Develop relationship with local landlords and public housing authorities to maximize community resources.
6. Identify available funding sources.
7. Identify outcome data elements.
8. Identify how follow-up case management services will be provided.

## **AFFORDABLE HOUSING**

The Housing First Approach to ending homelessness identifies housing as the foundation for the other issues individuals experiencing homelessness must tackle if they are to regain stability and self sufficiency. If we are to effectively end homelessness we must “Open the Back Door” and increase placement into supportive housing for people who are currently experiencing homelessness.

### **Goal #3:**

**Affordable Housing:** To expand the supply of safe, decent affordable housing.

#### **Objectives:**

- Ensure proper housing resources are available.
- Reduce the gap between income and the cost of housing.

**Effective strategies Ionia and Montcalm counties will pursue to “Open the Backdoor” and expand affordable housing include:**

1. Work with landlords, management companies, and public housing authorities to increase access to existing housing.
2. Expand permanent housing resources with a mix of rent subsidies; scattered site housing and project based permanent supportive housing units.
3. Expand housing options and resources for targeted populations.
4. Increase the supply of safe affordable housing.
5. Increase availability of public housing.
6. Increase the availability and use of Section 8 vouchers.
7. Expand housing for persons with disabilities.
8. Provide credit repair assistance.
9. Provide home ownership assistance.
10. Expand community knowledge and investment in fair housing programs.
11. Identify and respond to any substandard housing conditions.
12. Evaluate and respond to the needs of families who are utilizing substandard mobil homes for housing.

## **DATA**

The National Alliance to End Homelessness has identified a Homeless Management Information System (HMIS) as an essential element of any communities plan to end homelessness. HMIS systems can be analyzed to assess how long people are homeless, what their needs are, what causes of homelessness are, how people interact with mainstream systems of care, the effectiveness of interventions and the number of homeless people. This system is an essential element of a successful and permanent solution to prevent and end homelessness. Locally, we recognize that improving data collection will give credibility to our efforts and enhance our ability to show the results of our work. We look forward to the collection of additional data that will assist us in the allocation of resources and evaluation of programs.

### **Goal #4:**

**Data:** A housing system that can demonstrate needs and results based on an established data system.

#### **Objectives:**

- Continuum of Care, that is strategic and outcome driven.

Interventions are substantiated by data.  
Resource allocation that is data driven and responsive to consumer needs.

**Effective strategies Ionia and Montcalm counties will pursue to ensure effective use and collection of data include:**

1. Expand the use of the Homeless Management Information System.
2. Develop and expand Point-In-Time survey participation and frequency.
3. Develop a two-county plan detailing the types of data to be collected and the specific purpose for which it is collected.
4. Implement a process to analyze data.
5. Utilize data to re-examine how homeless services are provided and make appropriate action steps that are data driven.
6. Utilize data to evaluate program outcomes.
7. Utilize local data to recognize the type and severity of needs of persons utilizing services.
8. Utilize data to recognize portals of entry into the homeless system so that causes can be diminished. For example, are substance abusers who have utilized services having repeated entries into emergency shelter?
9. Ensure that data collection is consumer friendly and implores the least intrusive approach.
10. Utilize data to identify gaps in the service delivery system and identify priorities.

**SERVICES**

Ionia and Montcalm communities experience specific challenges when providing assistance for special needs populations. Housing plus services strategies offer holistic and healthy options for rural areas designing programs to assist special needs populations. Housing plus supportive services is a framework that provides affordable housing, incorporating various levels of services provided by trained professionals for whom service delivery, not property management is the primary responsibility.<sup>2</sup> Ionia and Montcalm counties have identified the following special needs populations:

1. Elderly
2. Victims of domestic violence
3. Substance abusers
4. Individuals with mental health concerns
5. Individuals with physical disabilities
6. Veterans
7. Unaccompanied youth/teens leaving foster care systems

The Housing Plus Services Committee of the National Low Income Housing Coalition developed a list of 11 core principles for all housing plus service developments. See Table 1 below. These principles emphasize flexibility, adaptability, comprehensive services and self-determination for program recipients.<sup>3</sup>

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<sup>3</sup> Formulas for Success: Housing Plus Services in Rural America pg 6

**TABLE 1. Housing Plus Services Principles**

<i>These principles are based on knowledge gained from the historical and contemporary linkage of housing and services, and are proposed as comprehensive, multifaceted, and interlocking.</i>
1. Housing is a basic need, and all people have a right to safe, decent, affordable, and permanent housing.
2. All people are valuable, and capable of being valuable residents and valuable community members.
3. Housing and services should be integrated to enhance the social and economic well being of residents and to build healthy communities.
4. Residents, owners, property managers, and service providers should work as a team in integrated housing and service initiatives.
5. Programs should be based on assessment of residents’ and community strengths and needs, supported by ongoing monitoring and evaluation.
6. Programs should strengthen and expand resident participation to improve the community’s capacity to create change.
7. Residents’ participation in programs should be voluntary, with an emphasis on outreach to the most vulnerable.
8. Community development activities should be extended to the neighboring area and residents.
9. Assessment, intervention and evaluation should be multilevel, focusing on individual residents, groups, and the community.
10. Services should maximize the use of existing resources, avoid duplication, and expand the economic, social, and political resources available to residents.
11. Residents of Housing Plus Services programs should be integrated into the larger community.

Source: Housing Plus Services Committee of the National Low Income Housing Coalition (2001)

The Ionia and Montcalm communities embrace the above principles and will utilize these principles to guide delivery of homeless services.

**Goal #5:**

**Services:** A community that has appropriate supportive services to ensure our population has the necessary services to remain stable, safe, healthy, and housed.

**Objectives:**

- Holistic and healthy service options made available.
- Reduction in barriers to service accessibility.
- Centralized service delivery processes.

**Effective strategies Ionia and Montcalm counties will pursue to promote prevention and supports through services include:**

1. Increase the number of services that are available to youth who are at risk of homelessness.
2. Increase employment services for low-income persons. These employment services should include temporary employment for immediate needs and preparation for long term employment, as well as job training, literacy, job placement, internships, post-placement supports, life skills training, and mentoring.

3. Strengthen the access to and availability of mainstream health, income assistance and social service programs to ensure that eligible homeless people get the maximum assistance possible.
4. Identify barriers to mainstream resources for homeless and at-risk persons.
5. Target services to meet the unique needs of each family.
6. Develop multi-disciplinary, clinically based teams to engage people experiencing homelessness.
7. Increase the scope and availability of health care treatment for people who are homeless or at risk of homelessness.
8. Increase the scope and timely availability of substance abuse services available to people who are homeless.
9. Provide a system of respite care for those discharged from hospitals so that they do not have to recover on the streets or in the shelter systems.
10. Develop a continuum of housing plus services based on the models provided by the Housing Assistance Council.

### **EXPERTISE IN ACTION-Actions/Target Dates**

The strategies outlined in this document will be utilized to develop detailed action steps accountability, and target dates to put our plan to end homelessness into action. Additional community forums and meetings will be held throughout the implementation process. These forums and meetings will result in prioritized strategies, and the development of subcommittees/teams to ensure each goal area is addressed.

**For additional information please contact Darla DeYoung, Continuum of Care Coordinator at (616) 527-3351.**