

“If we can help one person, ...

# I want in!”

**Shiawassee County's  
10-Year Plan to End Homelessness**

**2007-2017**



**“My kids and grandkids live here and I want it to be  
the best community we can possibly have.**

**If we can help one person, I want in”**

**-Linda Spencer, Coordinator  
Shiawassee County Community Corrections**

## **Acknowledgments**

This plan could not have been written without the cooperation and support of countless individuals. To mention each would take pages as well as raise the fear of missing one or two. Suffice it to say that this county is extremely fortunate to have a committed collection of professionals and volunteers who care deeply for others and who work tirelessly to improve the lives of all persons. In the appendix, is a list of resources including persons who were interviewed or who provided information, ideas, and advice. The belief that change can come from this plan is imbedded in the knowledge that Shiawassee County is blessed with commitment, dedication to serving others, and effective communication and collaboration.

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## INTRODUCTION:

### A Call to Action by our State and County Leaders

*"The State of Michigan is embarking on a ten-year campaign to end homelessness in all of our communities. The Campaign to End Homelessness is founded in our collective concern that no child, family, or adult should be forced to sleep on the streets, in the woods, or in a shelter, anywhere, anytime in Michigan. We urge you, in your role of local leadership, to join with us."*

**August, 2006, Michael DeVos, Director  
Michigan State Housing Development Authority (MSHDA)  
and Marianne Udow, Director  
Michigan Department of Human Services**

*"To be homeless in Michigan in the 21st century is unacceptable. The Homeless Coalition, and all of the people involved with this Coalition, are planning to put an end to Homelessness. Please join with us in any way that you are able. To implement this plan will require the help and involvement of many people. If you are contacted for input, I hope you will seriously consider helping in whatever way you are able to. Developing important community relationships throughout the county, is vital to the development of this plan."*

**Rev. Russell Merrill, Chairperson,  
Shiawassee County Homeless Coalition**

It is clearly an understanding by the political, economic, social, and human services sector of our communities that homelessness must end. Honoring the dignity of people requires this collaborative belief as well as the realization that a stable, affordable, and suitable place to live is clearly necessary in order for improvements in employment, education, and prevention to take root.

## Vision Statement

**Our Vision:  
Shiawassee County  
will assure suitable  
and affordable  
housing for all of its  
residents by 2017**



Homelessness is unacceptable in Shiawassee County. It is a common understanding by the political, economic, social and human sectors of our communities that homelessness must end. Honoring the dignity of people requires collaborative belief, as well as the realization that a stable, affordable and suitable place to live is necessary to effect a positive change in our community.

The solution to homelessness is not easy, nor is it the same for every situation. Some people will need more than housing. It is the responsibility of our community to provide support from various agencies throughout our county to the degree needed by individuals and families. Some will succeed with little to no support.

This vision leads to the creation of a comprehensive, flexible, and individual-based system for persons who are homeless, or at risk of homelessness by maximizing use of existing mainstream resources, improving coordination across service and housing delivery systems, and identifying new resources.

## Executive Summary

Shiawassee County residents recognize that there is homelessness and it is a community-wide problem. It also recognizes that homelessness does not exist in a vacuum, but has a number of other social issues attached to it that must be addressed (i.e., unemployment, addictions, abuse, to name a few).

Ending homelessness is a complex endeavor. While we set our sights high and work to achieve a plan that is doable, ethical and based on successful models, we realize that ending homelessness is not easily accomplished. This is because homelessness is tied to a number of factors that if not addressed as well, then the chances of success are diminished. In addition there are a number of variables that we cannot easily control:

- ❖ Politics and the priorities of elected officials federal, state, county, and city
- ❖ Economy and availability of fiscal resources to support the plan
- ❖ Employment opportunities vs. Layoffs, Plant closings etc.
- ❖ Efforts or lack thereof to curb social addictions; alcohol, drugs, domestic violence
- ❖ Attitudes of citizens, consumers, voters
- ❖ School Dropout rates, poor decision making, mismanagement of resources, education
- ❖ Significant decrease in crime.

To end homelessness, a Plan must be developed and accepted by the political, educational, faith-based, social service agencies/organizations, business, and health sectors of the community. The motivation in Shiawassee County is because we have a moral, ethical, and human responsibility to assist human beings with the most basic of human needs, shelter. We must be cognizant that homelessness is tied to a host of other social agendas and to address one (homelessness) while being blind to the contributing factors, is using poor judgment at the least and poor planning at the most. It is only by using the plan as a guide and as a living document that change can become real and the vision of assuring suitable and affordable housing for all of its residents by 2017 can become the status quo.

## Shiawassee County's Definition of Homeless

For the purpose of this plan, Shiawassee County wishes to expand on the traditional HUD definition of homeless and define "homeless" to encompass both individuals and families; to encompass disabled and non-disabled; and to encompass people who are temporarily living with family or friends. The community further wishes to focus efforts not just on homeless, but those who are precariously housed in an effort to prevent homelessness.

## Who Is Homeless In Shiawassee County?

Reliable statistics are a rarity in the area of homelessness. Systems of care that have developed ongoing methods of counting homeless and emergency shelters are predominantly found in large, populated areas. However, these numbers do not translate well to rural communities. Rural communities find their analysis must depend more on what is inherently known by visual cues within their communities than strict methods of statistical analysis. This information should not be discounted, however. It is vital information that provides direction and vision for rural communities as we strive to serve not the nameless or faceless homeless, but the homeless that our kids go to school with, the

"Ending homelessness is not only the right thing to do, but has much to offer our communities by making them safer, healthier, and in improving our economy."

~Scott Gilman, Director  
Shiawassee County  
Community Mental  
Health Authority

homeless that are staying across the street from us for a couple of weeks, the homeless we see riding bikes and collecting cans on the sides of our roads and the homeless spending their 75 cents on a cup of coffee at a local donut shop so they are inside a safe space that night.

#### National Data:

The national picture of homelessness has changed throughout the 60s, 70s and 80s. Changes made to housing stock meant loss of single-room occupancy units to make way for urban development, condominiums and higher- priced housing. Changes in systems of care with the elimination of institutions that provided care for many and the focus of downtown revitalization resulted in a widespread chronic homeless problem. Changes in housing costs in relationship to changes in our economy that focuses away from low-skilled jobs have resulted in 3.5 million people in America who will experience homelessness. It may last a short period of time, while others experience the problem for months or even years.

Recent shifts of federal focus in the area of homelessness and housing has lead to the creation of new systems of care and new philosophies. Over 200 cities and other jurisdictions have begun campaigns to end homelessness. New systems of care have been tried and evaluated for effectiveness in several metropolitan areas of the county. Supportive Housing has been found to provide the most cost effective alternative to emergency shelters, hospitalization, prison and jail. Supportive housing is cited as a major contributor to the decrease in chronically homeless people in Philadelphia, Denver, San Francisco and Portland, Oregon. *The San Francisco Chronicle* stated May 14, 2006, that "the number of street people in cities across the United States has plummeted for the first time since the 1980s. Further sources indicate that an average of \$16,282 per unit of supportive housing can be saved over other sources of housing including emergency shelters, hospitalization, and incarceration."

This shift in focus has gained the popular term "housing first" and the housing is not tied to specific services, but rather a variety of services designed to help each individual succeed.

#### Sources:

Chronic Homeless Brief, National Alliance to End Homelessness, July, 2006.

Supportive Housing is Cost Effective, National Alliance to End Homelessness, February, 2006.

#### State Data:

In 2005, the State of Michigan reported 4,320 chronically homeless were found during a one-day point-in time street count and those people represented 16.5% of all homeless in Michigan. To be considered chronically homeless, the person must meet the federal definition which is: an unaccompanied individual who has a disabling condition and has been homeless continuously for at least one year or has been homeless four times in the past three years. This would mean there are another 21,861 people who are homeless, but not meeting the definition of chronically homeless that day.

#### Shiawassee County Data:

The population in Shiawassee County is approximately 72,000 with roughly half residing in an urban area and half residing in rural areas. Minorities make up less than 3% of the overall population. (2000 US Census) Nearly 29% report to the US Census Bureau that they have some type of disability (physical, mental, sensory, self-care, employment, or go-outside-the-home).

Current economic conditions in Michigan as well as locally increase the local concern to develop on-going and flexible housing solutions. Michigan's unemployment rate was at 7.1 % in August, 2006, while the rate in Shiawassee County was 7.8 %. In the 2000 Census nearly 65% of households had income from some type of employment. Another 11% had income from Social Security or Supplemental

Security Income. The 2000 Census reports 7.8% of the total population in Shiawassee County has income below the poverty level. However, significant changes in our unemployment rates have most likely driven that number up.

Shiawassee County had 26,896 housing units at the time the US Census was last taken. Of those units, 20% were rental units and the balances were owner-occupied units. In the rental housing units, nearly 13% reported no vehicle compared to 3% of owner-occupied units. One hundred eighty-five of those housing units reported having incomplete plumbing facilities. In households having a mortgage, 19% reported they paid more than 30% of their household income toward housing. In renter-occupied housing, nearly one-third reported their housing costs exceeded 30% of their household incomes.

Prior to changes in October, 2006, in Shiawassee County in order to afford a two bedroom apartment at the fair market rent of \$556, the wage earner earning minimum wage had to work approximately 90 hours a week. With the change in minimum wage, they will "only" have to work 66 hours a week at the initial step increase of \$6.95 to be instituted in October, 2006. However, the impact of this increase in minimum wage will be felt throughout our local economy as everyday items are increased to cover employer's additional wage costs.

"It's going to get worse  
before it gets better."  
~ A homeless gentleman

Over the course of the last seven years, the Shiawassee County Homeless Coalition, our local continuum of care body, has conducted a point-in-time survey of local providers to determine the number of individuals and families seeking prevention against becoming homeless and those seeking services who are homeless. It also seeks to identify the services needed versus services provided. By its nature, this study is limited in the number of people it has identified since it only focuses on people currently seeking services during that point in time. Discussions with providers show that known chronic homeless are often missed since they have not sought services that week or have been avoiding all systems of care and assistance for years, due to mistrust and personal issues.

This said, it is the continuum of care body's contention that on any given night in Shiawassee County there are between 40 and 60 men, women and children who are homeless according to HUD's definition. In addition, there are another 80 to 200 men, women and children who are at imminent risk of losing their current housing for reasons such as by eviction, foreclosure, utility shutoff or the friend or family member they are staying with has asked them to leave to name a few.

In general, the Shiawassee County population of homeless can be divided into 5 groups. They are presented below in the order of priority for further planning and development efforts.

1. Families. Men, women and children experiencing poverty due to unemployment or underemployment, lack of income or resources for shelter. One of the largest barriers for homeless families is finding affordable housing with three or more bedrooms.
2. Chronically Homeless. Often found living in camps, having criminal records, and/or exhibiting obnoxious behavior often as a result of substance use or mental illness. Law enforcement generally sees six to twelve adult men and women who are known to live in camps or on the streets. Since the implementation of the Shelter+Care program in August, 2006, two single men and one single woman have entered the program.
3. Domestic Violence. Men, women and children experiencing abusive relationships. Our current shelter system for domestic violence provided over 1,800 safenights for adults and children. An additional 2,110 crisis calls were answered. Every night our safehouse averages 3 adults and 4 children.

4. Youth. Unaccompanied children under 18, living as street or couch homeless; often having left home by choice and living with friends moving home to home without permanency; or children of persons in jail or of an abusive parent. Our current system offers shelter outside of the County and has provided shelter for three homeless youth in the last year. However, staff estimates at Lincoln High School, our county's alternative high school, that nearly 25% of the students are homeless.
5. Incarcerated. While most who are incarcerated may fall in one or more of the above categories, they are mentioned separately as they have a unique set of barriers.

An Important Consideration:

## Rural v. Urban Homelessness

### Shiawassee County is Basically a Rural County

In being a rural county, the issue of homelessness is different from Michigan's urban settings. How are the urban and rural settings different? To get an answer to this question, it is helpful to learn from the NCH Fact Sheet #11, published by the National Coalition for the Homeless, July 2005. In reviewing their materials we learn that "Homelessness is often assumed to be an urban phenomenon because homeless people are more numerous, more geographically concentrated, and more visible in urban areas. However, many people experience homelessness and housing distress in America's small town and rural area."

#### Definitions and Demographics

Understanding rural homelessness requires a more flexible definition of homelessness. There are far fewer shelters in rural areas; therefore, people experiencing homelessness are less likely to live on the street or in a shelter, and more likely to live in a car or camper, or with relatives in over crowded or substandard housing. Restricting definitions of homelessness to include only those who are literally homeless – that is, on the streets or in shelters – does not fit well with the rural reality, and also may exclude many rural communities for accessing federal dollars to address homelessness.

Studies comparing urban and rural homeless populations have shown that homeless people in rural areas are more likely to be white, female, married, currently working, homeless for the first time, and homeless for a shorter period of time (Fisher, 2002). Other research indicates that families, single mothers, and children make up the largest group of people who are homeless in rural areas (Vissing, 1996).

#### Causes

Rural homelessness, like urban homelessness, is the result of poverty and a lack of affordable housing. In 2005, research shows that the odds of being poor are between 1.2 to 2.3 times higher for people in non-metropolitan areas than in metropolitan areas. One in five non-metro counties is classified as a high poverty county (defined as having a poverty rate of 20% or higher), while only one in twenty metro counties are defined as high poverty (Fisher, 2005). A lack of decent affordable housing underlies both rural and urban homelessness. While housing costs are lower in rural areas, so are rural incomes, leading to similarly high rent burdens.

Problems of housing quality also contribute to rural homelessness: in rural areas, 30% of non-metro households, or 6.2 million households, have at least one major housing problem (Housing Assistance Council, 2002). Rural residential histories reveal that homelessness is often precipitated by a structural or physical housing problem jeopardizing health or safety; when families relocate to safe housing, the rent is often too much to manage and they experience homelessness again while searching for housing that is both safe and affordable. Other trends affecting rural homelessness include the

distance between low-cost housing and employment opportunities, lack of transportation, decline in homeownership, restrictive land-use regulations and housing codes, rising rent burdens, and insecure tenancy resulting from changes in the local real estate market (for example, the displacement of trailer park residents). (Fitchen, 1992).

## Ten Essentials to Ending Homelessness

According to the National Alliance to End Homelessness there are 10 essentials to ending homelessness. The Alliance has created a checklist to serve as a guide to help communities identify the minimum requirements for an effective permanent solution to the problem of homelessness. These 10 essentials are based on the Alliance's Ten-year Plan to End Homelessness and is the result of 20 years of research and experience with communities around the country. No essential is more important than another. All require participation from every sector of the community. The Ten Essentials appear here for future evaluation and we intend to incorporate these essentials into all further planning activities, especially where gaps exist.

1. **PLAN.** The community has a set of strategies focused on ending homelessness. A wide range of players (government programs, elected officials, homeless providers, etc.) has made funding and implementation commitments to these strategies.
2. **DATA.** The community has a homelessness management information system that can be analyzed to assess how long people are homeless, what their needs are, what the causes of homelessness are, how people interact with mainstream systems of care, the effectiveness of intervention, and the number of homeless people.
3. **EMERGENCY PREVENTION.** The community has in place an emergency homelessness prevention program that includes rent/mortgage/utility assistance, case management, landlord/lender intervention, and other strategies to prevent eviction and homelessness.
4. **SYSTEMS PREVENTION.**
  - a. Mainstream programs (Mental health, substance abuse, TANF, child welfare, etc.) that provide care and services to low-income people and consistently assess and respond to their housing needs.
  - b. There is placement in stable housing for all people being released from public institutions.
5. **OUTREACH.** The community has an outreach and engagement system designed to reduce barriers and encourage homeless people so that they enter appropriate housing (including safe havens) linked with appropriate services.
6. **SHORTEN HOMELESSNESS.** The shelter and transitional housing system in the community is organized to reduce or minimize the length of time people remain homeless, and the number of times they become homeless. Outcome measures will be key to this effort.
7. **RAPID RE-HOUSING.** The community has skilled housing research and housing placement services available to rapidly re-house all people losing their housing or who are homeless and who want permanent housing.
8. **SERVICES.** When households are re-housed, they have rapid access to funded services, and mainstream programs provide the bulk of these services.
9. **PERMANENT HOUSING.**
  - a. The community has a sufficient supply of permanent supportive housing to meet the needs of all chronically homeless people.
  - b. The community is implementing a plan to fully address the permanent housing needs of extremely low-income people.
10. **INCOME.** When it is necessary in order to obtain housing, the community assists homeless people to secure enough income to afford rent, by rapidly linking them with employment and/or benefits. It

"We cannot direct  
the wind, but we  
can adjust the sail"  
~Unknown

also connects them to opportunities for increasing their incomes after housing placement (opportunities provided primarily by mainstream programs).

## Human Service Collaboration Structures

### THE SHIAWASSEE COUNTY HOMELESS COALITION

Initiated fifteen to twenty years ago, a number of persons representing a variety of agencies and organizations in Shiawassee County began to meet to address the issue of homelessness. With the requirement for each county to have a Continuum of Care Committee to work toward adequate and affordable housing for all, it was this group, initially called the Shiawassee County Homeless Resolution Task Force that responded to this requirement. Over the past six years the organization has evolved and solidified its membership and position in the community. The Homeless Coalition has its own governing structure, has bylaws, elects officers, and functions independently of any agency or organization. The current chair person is the Rev. Russ Merrill. The coordinator is Linda Schonberg. The Coalition recently became a workgroup of the community collaborative to foster communication and collaboration.

One of the more recent initiatives of the Coalition is the development of the Shiawassee County Eviction/Foreclosure Prevention Resources Flow Chart. Five stages are presented along with definitions and resources. This item will be most helpful to those who are assisting people facing eviction from their housing.

### THE COMMUNITY COLLABORATIVE

Commonly known as the Shiawassee County Health and Human Services Council, this group of health and human services leaders meet monthly to address issues of importance to the health and well-being of the citizens of Shiawassee County. The Council has a steering Committee, operates under a set of bylaws and oversees initiatives in the county that work to improve the lives of people. The Council is composed of representatives from approximately 40 agencies/organizations. The current chair is Jody Smith, Executive Director of Relief After Violent Encounter (RAVE).

"The Community Collaborative is committed to working together to carry out the plan to end homelessness."

~Cynthia Mayhew  
Past Chair  
Health & Human  
Services Council

### ADVISORY COMMITTEE FOR THE 10-YEAR END TO HOMELESSNESS INITIATIVE

The advisory committee is made up of the signatories of the grant application for funds to develop a 10-year plan and interested members of the Steering Committee of the Health and Human Services Council and the Homeless Coalition. The signatories are Susan Fulton, Director of the Shiawassee and Livingston Counties Department of Human Services; Scott Gilman, Direction of Shiawassee County Community Mental Health Authority; Russ Merrill, 2006 Chairperson of the Shiawassee County Homeless Coalition; and Cynthia Mayhew, 2005-2006 Chairperson of the Shiawassee County Health and Human Services Council. Additional members are Rebecca Zemla of Capital Area Community Services; Jody Smith of Relief After Violent Encounter (RAVE); Linda Schonberg, Continuum of Care Coordinator; and Rich Baldwin. The advisory committee meets monthly to oversee the efforts to write and carry out this plan.

## Current Services for Homeless Persons

**American Red Cross:** The American Red Cross Shiawassee County Service Center is a part of the Mid-Michigan Chapter based in Lansing. The Red Cross – Lansing office, if budget allows, can assist a Shiawassee County agency in seeking funds for a motel stay for a homeless person. The local American Red Cross has an area disaster team that will respond to house fires and will assist the homeowner or the displaced person with clothing, food, or temporarily house them till other housing arrangements can be made. The local American Red Cross maintains a food pantry and people can receive food from this program. Finally, if a homeless person comes to the Red Cross and can find transportation to the Red Cross facility in Lansing, the Lansing office will work with them to find shelter.

**Arc Shiawassee:** This office provides services and advocacy for persons with developmental disabilities. People with significant disabilities often need subsidized housing for when they are faced with an emergency of some sort, their fiscal resources may go for this basic need rather than paying rent. If a job is lost, an even greater crisis occurs. This agency notes that there are not enough quality and affordable housing units for individuals with developmental disabilities. Services could be improved with attention to systems problems, i.e., time frames for transitioning.

"Our programs do a phenomenal amount with very limited resources."  
 ~Linda Schonberg  
 Housing Rehab Program

**Baker College – Bentley Campus:** On occasion someone will indicate that they need work but they also need housing. Efforts are made with Salvation Army, CACS, and DHS to find some help. This situation, when it occurs, relates to a client in the WIA (Workforce Investment Act). There are several youth in Pathways, an alternative and adult education program for high school completion, who are couch/street homeless as they may be staying with friends or relatives. An estimate of an average year would be 10-15% of the population. This year they have had about 5. In past years they've had as many as 13-15.

**BECKA Management:** This organization currently serves as a provider of MSDHA Housing Choice Vouchers. This program pays a portion of the recipient's rent with the recipient paying 30% of their income. It was noted by ARC Shiawassee that this program is very helpful for persons with disabilities.

**Capital Area Community Services, Inc. (CACS):** offers prevention services that include assistance with utilities, evictions, mortgages and first month's rent, emergency home repairs and back property taxes. Their Expanded Homeless Services Program is designed to provide case management to homeless individuals and/or families located in Shiawassee County. Other services offered are home weatherization, two U.S.D.A. food programs, Christmas Wishes and income tax preparation and e-filing. Educational workshops are also offered: Energy Smart and Energy Smart II teach energy conservation with electric, heat, and water as well as what program participants can do to make their homes more energy efficient. Money Management I and II provide techniques for budgeting, credit repair and goal setting. Life Skills prepares people to problem solve. CACS also provides advocacy, information and referral services.

**Catholic Charities:** There are a number of services/programs offered for all persons in the county as well as the homeless. Some of the programs that may be beneficial to persons identified as homeless include, recovery from substance abuse, anger therapy, and parenting. Catholic Charities also provides a sack lunch on Tuesdays when The Salvation Army's Community Kitchen is closed and has a personal needs bank.

**Faith-Based Services:** A series of workshops entitled, *The Poor At Your Door* have been ongoing for a year. This program is sponsored by LOVE Inc., RAVE, and the United Way. This is an attempt to open up two way communication between the public and faith-based sector to learn of available services and to coordinate services for people in a state of poverty.

**Love, Inc.** serves as a clearing house for services available in the County.

**Harvest Ministries** – Corunna.

**Saint Vincent DePaul services are available in three Catholic Churches in Shiawassee County:** St. Paul's in Owosso, St. Mary in Durand, and St. Mary's in Morrice. In addition, St. Joseph's Catholic Church in Owosso provides some services and money for utilities on occasion.

**St. John's United Church of Christ** in Owosso provides a Saturday morning breakfast and sends each guest away with a sack lunch. In the winter time, caps and scarves are knitted and given to guests.

**Memorial Healthcare:** Previously in cases where a person is being discharged without a place to go, the American Red Cross in Lansing would be contacted and they would handle the matter. When this resource was no longer an option, the Owosso Salvation Army was helpful as a social worker at that agency would receive the homeless, discharged patient and provide a service. At this point in time, the process to be used is unclear to Memorial Healthcare. The Discharge Plan Director plans to meet with local service providers to understand the process and procedures. However, if a homeless person comes to Memorial Healthcare with a medical condition that requires treatment, treatment will be provided. Overnight hospitalization will depend on patient's diagnosis. If a homeless person comes into the hospital on the weekend and has no place to go, the sheriff is called and takes the person to a place. If a homeless person comes during the week, there is current confusion about what the process or procedure is in the county.

**Owosso Police Department:** This department's typical with the homeless are with those who are chronic homeless, who probably have police records, who live in camps, and whose behavior is inappropriate in society. Substance abuse is a problem. Approximately a half-dozen persons (usually middle-aged men) live in one or more camps in wooded areas near railroad tracks. Their behavior is inappropriate due mostly to alcohol consumption which is obtained from collecting cans for money or purchasing beer for youth to earn money. Police receive numerous citizen complaints.

**Probate Court – Family Services:** Last year approximately three families received assistance with short term rent. Funds are taken from the Family Court budget to assist those in the court system in need of emergency housing.

**Relief After Violent Encounter (RAVE):** RAVE began in 1983 to fill a local need for persons encountering domestic violence or sexual assault. RAVE provides a shelter for women and children, outreach counseling, and they operate a Transitional Housing Program. Housing is the biggest issue for clients to maintain safety. RAVE does allow people to stay in their shelter who are not victims of domestic violence or substance abuse but there has to be available space, i.e., eligible clients do not fill the facility. RAVE contracts with CACS for case management services. Currently there are 5 full-time counselors at the Owosso office. RAVE has sheltered 436 individuals in its shelter during the last fiscal year.

**REACH:** Reach provides a shelter (Flint) for Shiawassee County youth from age 10 through 17. They have served 3 youth from Shiawassee County since January 1, 2006. The service is free and lasts for 15 days. Youth receive counseling while at the shelter and family counseling is available as well. Homeless youth are also eligible for Traverse Place in Flint. This is a transition program and requires an application.

**Shiawassee Area Transportation Agency (SATA):** SATA serves anyone who asks for a ride, whose ride is within service zones and who pays the appropriate fare. Most calls to serve homeless persons come from agencies, i.e., Community Mental Health, Red Cross, Capital Area Community Services,

Salvation Army, Memorial Healthcare Emergency Room/Stress Unit, Department of Human Services, DOT Caring Center, etc. Most of the time the agencies pay for rides either through a contractual relationship or by purchasing several tickets to have on hand to distribute to those needing transportation.

**Shiawassee County Corrections Program:** The county has one jail and it is located in Corunna. Persons who are incarcerated with an expected release date are referred to the Corrections Coordinator who conducts an initial assessment of the person's needs upon release. Once determined, the Community Corrections Coordinator contacts the various service agencies and requests services so that when the inmate is released, there is immediate assistance designed to assist the person into society.

**Shiawassee County Community Mental Health:** Consumers (assigned to a case worker) of CMH, after all community resources have been exhausted, can receive short-term shelter at a local motel and on a case by case basis, can assist with housing start up costs. Those who are not consumers must fill out an application and go through an intake interview process. Anyone in the community can receive services from the Emergency Services Staff who will ascertain needs and recommend programs and services. The ESS acts as a clearing house for available community programs and services.

**Shiawassee County Department of Human Services (DHS):** DHS has limited, highly restricted funding for the prevention of homelessness. Three programs specifically address potential and actual homelessness. These include State Emergency Relief (SER), Emergency Services, and Family Reunification funds. DHS generally provides initial screening for needy individuals who are then referred to community resources. This process does not facilitate a seamless process for the prevention of homelessness in our community.

**Shiawassee County Housing Rehabilitation Program:** This office provides loans to very low to moderate-income families who live in Shiawassee County to improve their standard of living by providing access to federal and state housing programs. The program promotes safe, decent, and sanitary housing for county residents and helps maintain and improve the older homes in Shiawassee County. Prevention activities are also a feature of this office. The program provides home improvement loans and emergency home repair loans. Funds are available in the event the home is determined to be unsafe or in need of repair.

**Shiawassee Regional Education Services District (SRES):** There is legislation that assures services to homeless children in school. The legislation is titled the McKinney-Vento Law. Shiawassee County is a part of a region that includes Lapeer and Genesee Counties. The Shiawassee County Liaison is Dave Draggoo of Looking Glass Community Services. Each school district has its own person who is responsible for the requirements of McKinney-Vento. Data is compiled and school personnel are familiar with locally available services.

**Shiawassee Regional Education Services District (SRES) Social Workers:** The social workers encounter many instances of homelessness. Most are with children who are moved from school to school by their caregivers moving from setting to setting. Approximately 25% of those at the Alternative High School – Lincoln School are couch homeless, living with friends or relatives.

**Shiawassee Rehabilitation Program:** In the new 1201 Plan Initiative, job training services are provided for recently released persons from the county jail who are candidates for the Workforce Investment Act. Since July, five (5) homeless persons have been served. The SRP is part of the wraparound services provided by this innovative program. In addition, if one of the clients of the Rehabilitation Program becomes homeless or is experience housing problems, SRP will work with community resources to address the problem.

**Shiawassee United Way:** On occasion someone will stop in and request assistance. If money is available the United Way will work with the Salvation Army and CACS to provide a night or two at a local

motel. In 2005, approximately 10 persons/families received overnight assistance. In 2006, only 3 have requested assistance; however, the United Way has no emergency funds currently available.

**The Salvation Army:** Programs and services provided by the Salvation Army include the provision of occasional rent money for one month, a motel voucher program (3 nights maximum) which is only given with the client providing a copy of the writ provided on their door. This motel voucher program opens the door to services from the Department of Human Services and CACS. When a client has no connection to Shiawassee County (i.e., children in school, employment, family, etc.) they are provided transportation to Flint or Lansing. A noon meal is provided free of charge to people on Monday, Wednesday, Thursday, and Friday from 11:30-12:30. Many of the same people eat at the Salvation Army each day a meal is provided. Employment is a major issue for clients seeking services from the Army with approximately 70% saying that they have been looking for a job but can't find one. Funds come to the Salvation Army from FEMA (Federal Office), the People Care program of Consumers Energy, donations, and the Shiawassee United Way.

## Cooperative Initiatives

1. **Shelter + Care Grant** – this program is headed by Shiawassee County Community Mental Health Authority with Capital Area Community Services and the Shiawassee County Housing Rehabilitation Program as partners. Funds have been made available for 5 persons/families who qualify for this grant. Qualifications are that the 5 persons (families) must have substance abuse issues and a client at CMH. Treatment is a traditional wraparound program where the client is assisted by a variety of coordinated services designed for the client to have a stable and suitable housing option. The program was begun in 2006 and is a 5-year grant. While this program has a clear eligibility criterion, it is hoped that this successfully-proven program will become an option in the continuum of services in Shiawassee County.
2. **Homeless Initiative Discharge Plan 1201** – this is a cooperative venture with the County Corrections Office and providers of service to homeless persons. The plan was written (see appendix) in 2006 in an effort to transition incarcerated persons from serving a sentence to returning to the community. All persons discharged from the County jail can be released at one minute after midnight on the day of release. Those who were homeless were left standing outside the jail, calling 911, saying they don't have any place to go. A community agency was called and a motel opportunity was provided. Now, thanks to the cooperative efforts of community leaders, a plan is in place before the person is released so all is set to go with housing and individualized services that are needed to effectively assimilate him back into society.
 

“The 1201 Discharge Plan is AWESOME!”  
~ Shiawassee Rehabilitation Services staff
3. **Hunger Task Force** – this is a cooperative initiative that coordinates the area food banks. There are several: The Salvation Army, Capital Area Community Services, and the American Red Cross, to name a few. Currently there are efforts to identify food banks and effectively communicate what is available, when, and where.
4. **Expanded Homeless Services Program (EHSP)** - provides long term case management services for homeless clients in Shiawassee County in collaboration with other agencies/shelters and faith based groups. Services include a comprehensive needs assessment and on-going case management (either coordinated with other agencies or provided directly.) Support services are provided to assist homeless individuals in overcoming obstacles which limit their ability to obtain and maintain permanent housing.

## Positive Aspects of the Current Delivery System Serving Homeless Persons

There are a number of positive aspects that Shiawassee County can build upon as the 10-year Plan unfolds.

1. **Committed professionals** who work very hard with the resources available to help people in need.
2. **A good collaborative attitude** and a willingness to attack issues and resolve problems.
3. Social services providers who know one another, respect one another, and will attack the issue with enthusiasm.
4. **A small enough county** (relatively speaking) where progress can be made and built upon.
5. **An array of programs at the prevention level** that are in place and working. Our programs do a phenomenal job with limited resources.
6. **Successful models:** Child Advocacy Center and the Shiawassee Area Transportation Agency (SATA).

## Cost Benefits of Preventing and Ending Homelessness

The National Alliance to End Homelessness published in February, 2006, statistical information reflecting that each unit of supportive housing saves \$16,000 in dollars spent in emergency, institutional and health care services. Additional public services such as police and court resources, and homeless services, were not included in the study and would likely make this amount higher. The savings occurred when costs of homeless persons incurred at emergency rooms and hospitalizations dropped once housed in supportive housing. Living on the streets aggravated chronic health conditions and increase the risk of acute diseases. In addition, the changes in quality of life were un-measurable.

In Portland Oregon, chronically homeless individuals each utilized over \$42,000 in public resources per year. After entering the Community Engagement Program which involved permanent supportive housing, each individual used less than \$26,000 which included the cost of housing.

## THE PLAN TO END HOMELESSNESS IN SHIAWASSEE COUNTY

The roots for the plan have already been set. The Shiawassee Homeless Coalition developed a strategic plan with four goals in 2005. They wrote accompanying objectives and activities. This activity occurred in advance of the state initiative to end homelessness in 10 years. While this plan is an admirable effort it does not focus on ending homelessness in a specified period of time which is the focus of this initiative.

The specifics of the plan to end homelessness in Shiawassee County will come from the people who reside in the county as well as those who have experience serving the homeless population. It was in the focus groups where we expected to obtain a significant amount of information.

There were three focus groups held in Shiawassee County; one in Corunna on September 19, one in Owosso at the Salvation Army following their lunch program on September 20, and one in the south-west quadrant of Shiawassee County, on September 26. Information about the focus groups appeared in the local media as well as a circulation of information in a variety of other mediums.

As we put our plan together, melding the Homeless Coalition Strategic Plan and the information from Focus Groups, we will endeavor to follow the "Ten Elements of Great Plans."

In addition to focus groups open to the public, a number of mini-focus groups were conducted with persons in Shiawassee County who come into contact with homeless persons. These included: School Social Workers at the Shiawassee Regional Service District; staff at the Shiawassee County Community Mental Health, the Family Independence Specialists at the Shiawassee County Department of Human Services.

### Steps In Formulating the Shiawassee Plan

**The First Step is to develop a plan that is preventative/proactive.** It is recommended that a county-wide committee with representatives (only if they have the power to speak for and commit resources for their agency/organization) from county and city government, business, education, social services, be formed to study homelessness in depth and commit to ending it. What is needed is passion and connections. (Essential One)

**The Second Step is to appoint a champion to be a central point of focus for this initiative.** Grant applications, data gathering and reporting, evaluation of change, education and public relations are a few of the responsibilities of this position. A focused champion and the collection and maintenance of reliable data is necessary to show trends, needs, and benchmarks toward progress or lack of it. The county needs a consistent process in meeting the needs of the homeless that is effectively communicated to churches, law enforcement, hospital, state offices in the county and others. (Essential Two)

**The Third Step is to put a significant effort into continuing and improving our efforts with prevention.** Right now, this is our strength, but it lacks coordination. (Essentials Three and Four)

**The Fourth Step is to work toward a continuum of options for persons experiencing homelessness or on the brink of homelessness.** There needs to be a variety of services, the most important of which is prevention: assistance with shutoff notices, foreclosures; eviction, counseling, drug and alcohol treatment, hunger. Then a shelter or a place that serves as an intake center and a base from which the person or family can obtain services (placement services). The development of a half-way house, then affordable subsidized housing, then home ownership may be logical for Shiawassee County. (Essentials Six, Seven, Nine, and Ten)

**The Fifth Step is to provide client-centered Services, putting the client ahead of processes and procedures.** This would include assistance in filling out forms, transportation to various agencies offering assistance, and ending the client feeling his way through a complicated process. It is recommended that the county set forth a clear set of client- centered policies and procedures, including a resource guide for all county providers of services. (Essential Five and Eight)

“Case management is the key to preventing homelessness.”  
 ~Jody Smith  
 Director  
 RAVE

**The Sixth Step is the development of affordable and safe subsidized housing.** This is really embedded in step four, but it deserves special attention. The county needs to work with landlords and developers to assure placements and then to develop fiscal procedures that can assist people with rent payment. According to RAVE, their pilot subsidized housing program met with great success and there are current efforts to combine mental health services with subsidized housing (Shelter+Care). Discussion of rental codes to assure safe housing should occur and was emphasized by those attending focus groups.

The phrase “we are not alone in this endeavor” has never been truer. Every county in Michigan is being asked to reach for the same goal and certainly there are a number of counties very much like Shiawassee to learn from and for us to help.

### Activities to Address Gaps

In order to make a difference, and to address gaps, the following are recommended activities for effective change.

1. **PLANNING REQUIRING TIME, MONEY, AND COMMITMENT:** Ending homelessness in Shiawassee County, or any county for that matter, is a worthy goal that is attainable, but to do so will require a significant amount of time, energy, and money. Most importantly, the attitude of the county must evolve from the recognition of a problem to the expectation and reality assisting all citizens of securing shelter.
2. **TOP DOWN NEEDS TO BECOME BOTTOM UP:** At this point in the process, this initiative is top down as opposed to bottom up. Social change is more effective when the communities (county) see this as a priority, and desires collaboration toward common goals. In order to end homelessness, county leaders and citizens need to see the problem, own the problem, and then work toward its solution.
3. **CONTRIBUTING FACTORS TO HOMELESSNESS MUST BE ADDRESSED:** A major social change such as this requires that a variety of societal concerns be addressed because homelessness in and of itself is not a one-variable issue. Homelessness exists because of a wide and diverse number of factors. The client population has one or more of the following issues tied to the need for adequate shelter: poverty, due mostly to unemployment; crime; attitude; education; substance abuse; or spousal abuse.
4. **ATTITUDE ADJUSTMENT:** Attitudes need to be changed. The delivery system is based, for the most part, on a middle class paradigm and yet the clients are mostly lower class. As participants are learning in poverty training, there is a lot to learn and apply in order for the clients to move up to adequate housing that is sustainable.
5. **CREATION OF SUPPORT SYSTEMS:** Shiawassee County lacks an emergency shelter. There are pros and cons to having a shelter and they need to be addressed, but there currently is no “Place” from which homeless persons or those on the verge of homelessness can seek assistance and believe and trust that a client-friendly process is in place. The county does not have a

“Wrapping services around people in crisis is critical to making a difference.”  
 ~Rebecca Zemla  
 Shiawassee Co.  
 Service Director,

vocational training facility, and does not have an in-patient alcohol and drug treatment facility. These are examples of support systems that can assist in solving the problem or at least working toward the solution of the problem.

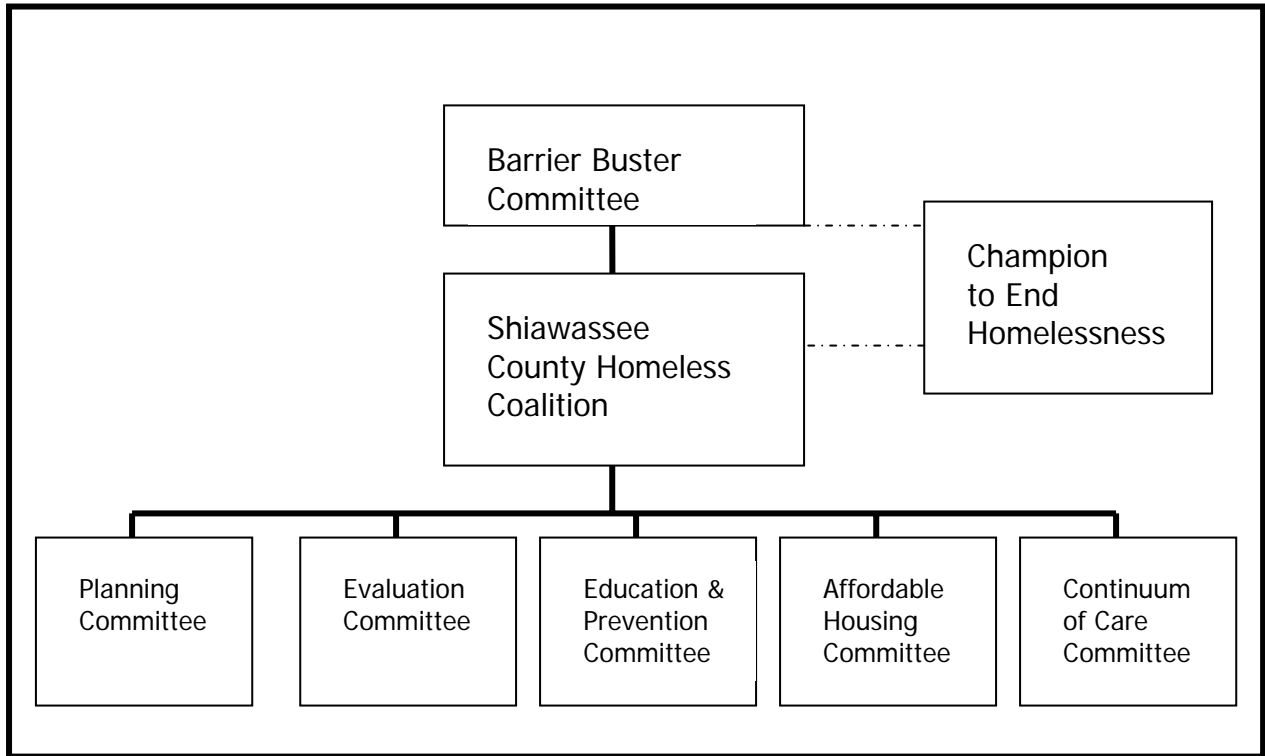
6. **IN-SERVICE EDUCATION:** Everyone from the county commissioners, to the mayors, business leaders, foundations, educators, service providers, landlords and housing developers need to attend and be active participants in understanding poverty by reading material, attending in-service education sessions, and/or visiting other communities who are having success with ending homelessness.
7. **OFFICE FOR ENDING HOMELESSNESS:** There needs to be a point of focus in the form of a leader/coordinator and an office (preferably within an existing agency or organization) that is responsible for a variety of tasks related to ending homelessness which will become obvious as this draft plan unfolds.
8. **WRAPPING AROUND THE CLIENT:** There needs to be a coordinated (Office to End Homelessness) effort to surround those who are homeless or those close to being homeless with client-based goods, services and supports.
9. **WHO IS AT THE TABLE:** Or who is not at the table may be more appropriate. Or, in stark reality there is no table. Change, if it is to occur, means that people and money need to be allocated to achieve goals, their accompanying objectives, and activities. Currently, there is no opportunity for government leaders, foundation leaders, business leaders, social services leaders, or faith-based leaders to make change decisions that are backed with people and money related to the area of homelessness. This "table" needs to be built in collaboration with the entire community.
10. **CLIENT FRIENDLY:** The current system is not client friendly. People who are homeless and without transportation other than perhaps a bike, are expected to travel to agencies for meeting with counselors, completing forms, seeking assistance, and getting food. Each agency has its own policies, procedures, and territory. They all work together, but the client is not at the focal point of the system.
11. **PREVENTIVE/PROACTIVE VS. REACTIVE:** Rather than treat this problem with several minor corrections to the system, the Plan should reflect a systems change that is Preventive/Proactive so that the end result will be sustained over time and truly end homelessness.
12. **PROFESSIONAL COMMITMENT:** Government officials, social service agency directors, judges, law enforcement, businesses, job producers, community leaders, et al. need to commit to resolving this issue in Shiawassee County. Change comes with leadership and with leadership comes the allocation of fiscal and human resources to resolve problems.

"A well supported, seamless system of services is desperately needed in our community to provide effective services to our families and individuals at risk for homelessness in Shiawassee County."  
 ~Susan Fulton, Director  
 Shiawassee County  
 Department of Human Services

**Summary:** There needs to occur a shift in attitude, commitment, and planning in order for the county to own the problem and create effective and sustainable solutions.

## Administrative Flow Chart

The next page provides a visual representation of the Administrative Flow Chart. The signatories will designate a Barrier Buster Committee who will work closely with the Homeless Coalition who will in turn create a committee for each goal. A Champion to End Homelessness will be sought. This Champion will monitor the activities of the committees and coordinate/facilitate organization. Each goal committee will be responsible to carry out the activities of their goal(s). The Champion to End Homelessness will be ex-officio of each committee to assure action and to coordinate all five committees. The director will be the liaison to the Barrier Buster Committee.



## Goals and Activities

The next several pages present our five goals, the accompanying activities, the responsible parties and suggestion time line for completion of the activities.

While ending homelessness in Shiawassee County may take ten years or more, it is expected that a Plan to end homelessness in the County can be accomplished in less than 10 years. So, rather than spread the activities, timelines and responsible persons committees over a 10 year period, a champion hired, and the Barrier Buster Committee and Committees would be named as soon as possible, but certainly within the first six months of the Plan's implementation.

This chart does not have activities beyond a few years. We hope to reach most goals in the first five years of our vision and sustainability then becomes the key focus for the remaining five years.

"Passion is half the battle. A small group of creative people with connections can effectively solve problems."

~A provider of  
Services to  
Homeless people

<b>Goal</b>	<b>Activity</b>	<b>Responsibility</b>	<b>Time Line</b>
1. Planning: Barrier Buster Committee and a committee for each goal will be appointed, given their charge, and will begin working on planning activities	Create a Barrier Buster Committee (members to be those with the power and resources to effect change). This committee must consist of county government representatives, mayoral representative, law enforcement representative, homeless persons or on verge of homelessness, school superintendent, county Human Services Director, County Community Mental Health Director, Directors of Service Providers, Chamber of Commerce Director, Service Organization representative (Kiwanis, Lions, etc.), Cook Foundation and Shiawassee Foundation, and a faith-based representative.	Sue Fulton, Director of the Department of Human Services, Scott Gilman, Director of Shiawassee Community Mental Health, the Chair of the Homeless Coalition and the Chair of the Health and Human Services Council	October, 2007
	Create a Multi-Year Planning Committee (Those who will carry out plans). The committee must consist of persons who are knowledgeable about the problem, who are passionate about ending homelessness, and who can take goal committee recommendations and act on them.	Barrier Buster Committee	April, 2007
	Work to maintain the agreed-upon plan as a living document, reviewing it periodically, revising and adapting it to emerging trends, data, information, funding opportunities.	Barrier Buster Committee	Duration of the Plan
	Identify funding sources at the local, state, and federal level. Seek funds from foundations to fund raisers. Funds secured in Barrier Buster Committee this activity will be earmarked for specific activities in this Plan.	Barrier Buster Committee	Duration of the Plan
	Listen to "Detectives" who will report model programs in the state and country and adapt the plan to incorporate these ideas in with Shiawassee's goals and activities.	Barrier Buster Committee	Ongoing
	Develop a cost benefit ratio to homelessness in Shiawassee County comparing the cost of homelessness to the benefits, fiscal and societal.	Barrier Buster Committee	Annually
	Receive periodic reports from the Multi-Year Planning Task Force Committees	Barrier Buster Committee	Bi-annually
	Note: The committee is free to add additional spin-off activities with authorization from the Champion to End Homelessness.		
2. Office to End Homelessness. Shiawassee County will have created an Office to End Homelessness and hired a Champion. This office can be within an existing agency or organization. Funds for this will come from governmental departments at all levels, foundation dollars, and competitive grant funds.	Establish the Office to End Homelessness and hire a Champion. The Champion to End Homelessness will be responsible for the following activities:	The Barrier Buster Committee and evidence that the goal has been reached is the creation and functioning of an office and a hired Champion.	October, 2007

<b>Goal</b>	<b>Activity</b>	<b>Responsibility</b>	<b>Time Line</b>
	Arranging for in-service education opportunities of community leaders and citizens.	Champion	October, 2007
	Set up a data system for the duration of the project.	Champion	Ongoing
	Seek funds to support the goals and activities of the 10 year plan	Champion	Ongoing
	Coordinate services provided throughout the county.	Champion	Ongoing
	Develop a web site and/or monthly newsletter	Champion	October, 2007
	Develop relationship is local newspapers for updates on goals and activities	Champion	Ongoing
	Plan and be responsible for Homeless Awareness Week (November of each year).	Champion	Each November
	Note: The committee is free to add additional spin-off activities with authorization from the Director.		
3. Define Programs and Services that create a proactive/prevention model and begin to be implementation	With Prevention being the Key, a service continuum will be developed.	Champion to End Homelessness and evidence that the goal has been reached will be a report outlining an array of prevention services that include at a minimum, case management, emergency assistance, coordinated client-friendly services, wraparound activities that are based on the client's needs.	October, 2008
	Discuss innovative emergency and temporary housing (shelter) and advise the Champion of pros and cons of such an initiative in this county.	Education & Prevention Committee	October, 2008
	Discuss innovative options on the continuum such as churches having a rotating shelter, establishing a home where families or individuals can live till housing becomes available.	Education & Prevention Committee	October, 2008
	Discuss the concept of a half-way house for persons coming out of jail or returning from substance abuse treatment or from a shelter for victims of domestic assault.	Education & Prevention Committee	October, 2008
	Discuss and advise on wrapping services around client/families. A great model for doing this exists in our county, the 1201 Plan.	Education & Prevention Committee	October, 2008
	Note: The committee is free to add additional spin-off activities with authorization from the Champion.		
4. Develop a wide array of safe and affordable housing will be available to homeless families and persons who are	Create a data base of affordable and safe housing in the County including addresses, number of units, and name of landlord, rental fees, and availability.	Champion to End Homelessness and evidence that the goal has been reached will be a report entitled, "Affordable and Safe	October of 2009

<b>Goal</b>	<b>Activity</b>	<b>Responsibility</b>	<b>Time Line</b>
leaving jail, leaving an abusive relationship, chronically homeless, are un or underemployed.		Housing Options in Shiawassee County" which will include a continuum from emergency and temporary shelter to a half-way house, to subsidized housing, to independent housing.	
	Work with landlords and developers to discuss the need for affordable and safe housing and to cooperate in creating a win-win paradigm between the provider of housing and those in need of housing.	Affordable Housing Committee & Champion	October, 2009
	Discuss the pros and cons, barriers and procedures for having rental codes in the County and advise the Champion and the Barrier Buster Committee of findings and recommendations.	Affordable Housing Committee & Champion	October, 2007
	Create a program of subsidized housing so that people can access housing with help with rent while saving for independent housing.	Barrier Buster Committee	October, 2009
	Note: The committee is free to add additional spin-off activities with authorization from the Champion.		
5. Persons who are homeless will interact with a client-friendly process. The Office to End Homelessness will coordinate transportation, health care, job placement, drug and alcohol treatment, and other services needed to assist persons in their shelter locations. Support services also means support to agencies/organizations that encounter homeless persons and families, i.e., churches, law enforcement, hospital, state offices, as well as service providers.	Study the current status of client friendly services including accessibility to organizations/agencies; forms, transportation, eligibility for services, and timelines to get help.	The Champion to End Homelessness and evidence that the goal has been met will be determined by interviewing a random set of five homeless persons who have gone through the client-centered program.	October, 2008
	As a result of this study, create a process for one door entry system where the homeless and providers of service know where the point of entry is and what follow-up steps are to be taken from identification of problem to having affordable and safe shelter.	Planning Committee & Champion	October, 2009
	Have as a priority the study of the impact of homelessness on children and create a plan to assure that children are in school and able to receive counseling if needed.	Education & Prevention Committee & Champion	October, 2008
	Study the need for services for men who are victims of domestic	Planning Committee & Champion	October, 2009

Goal	Activity	Responsibility	Time Line
	assault and if the need exists, recommend a program of service for this homeless population.		
	Develop a resource guide for use by consumers and service providers that clearly communicate the process of securing services from community agencies and organizations.	Education & Prevention Committee & Champion	Ongoing
	Note: The committee is free to add additional spin-off activities with authorization from the Director.		

## MARKETING THE PLAN

Given appropriate funding and resources, the following activities will be done:

1. Develop an Executive Summary with some introductory remarks and the actual Plan.
2. Send a copy with a cover letter to numerous individuals who are in a position to assist with this initiative, actively involved to date, as well as service providers.
3. Participate in Homelessness Awareness Week each year – this is an excellent opportunity to inform the public of the plan and to heighten awareness of the problem in Shiawassee County.
4. Create a Speakers Bureau and be available to speak to service organizations, school boards, city and county government meetings, church meetings etc. to announce the plan and outline how people can become involved.
5. The “I Want In!” public relations initiative can begin immediately with people signing up to express their desire to move forward with this plan. Kick off the commitment with a Shiawassee County Summit.
6. A tri-fold brochure should be created and be distributed. The brochure should be educational, brief, and act as an awareness item with information about the problem and how to get involved.
7. Activities should be identified and carried out to begin increasing awareness about homelessness. Popular ones are golf outings, auctions, flea markets, antique car show. Perhaps something that can tie into the Curwood Festival.
8. A brown bag noon luncheon series could be created with speakers leading discussions about homelessness and how to end it in the county.
9. Paper placemats could be created with information. Local restaurants would be asked to use them during a specific time period. Sponsor’s ads could be gotten to pay for the printing.
10. Request foundation funds or donations to create a short video about homelessness in Shiawassee County. This can be used to communicate the problem and set forth the plan to end it.

“Unless it touches you in  
some way, you don’t have a  
clue!”

~Karen VanEpps  
Administrator  
Probate Family Court

## APPENDIX A

### Citizen Feedback from the Focus Groups

#### Do we have a problem with homelessness in Shiawassee County?

FG #1: Yes – weekly contacts for help: churches, social service agencies, families as well as single men, see them on bicycles, average person doesn't understand the population, need, and problem.

FG #2: Yes! Even one is a problem; temporary homeless still need services; there is insufficient housing for current homeless.

FG #3: Yes! This is a problem in Shiawassee County, in the state, and in the nation; problem is going to get worse before it gets better; problem but for some it is a choice because they don't follow the rules, they become homeless.

#### 2. Who are the homeless in Shiawassee County?

FG #1: There is no "one face" to homelessness – affects young, old, men, women.

FG #2: People are for the most part hidden from society. They are protective of reputation; being released from jail and going back to old environment.

FG #3: People who are laid off or who have lost their income; people staying in abandoned units; tents and those in RVs.

#### 3. What prevention services are working in Shiawassee County?

FG #1: Assistance with rent (subsidized housing), wraparound services, TBRA, lower rents.

FG #2: Churches (assistance with eviction). Many churches will give small amounts of money but need to centralize the giving; CACS, LOVE Inc.

FG #3: American Red Cross, Salvation Army, neighbors, churches, self-improvement training, the Rescue Mission in Lansing.

#### 4. Where are the gaps in our service delivery system?

FG #1: Shiawassee County is a crack between Genesee and Ingham Counties; transportation; need consistency and follow up; local assistance to homeless persons; emergency shelter; housing that is affordable and safe; need to find a way to break the cycle (person needs help, gets a little, back for more help, etc.); need employment that is higher than minimum wage; D.D. – immediate assistance not available – hard to get into CMH; affordability of housing; effective communication across organizations and agencies.

FG #2: Emergency shelter; decent and safe housing; rental codes; more rentals, not enough; jobs with a livable wage; older adults with limited income; quality subsidized units; coordination – multiple locations and applications; single point of entry; consumer responsibility – choices.

FG #3: Services for single persons and services for families; need temporary subsidized housing for people to transition to housing;

"Loneliness is a big problem."  
~A Homeless Gentleman

5. What do we need to do in 10 years to end homelessness?

FG #1: Impact attitudes – educate the community leaders and community in general about homelessness. There needs to be greater awareness – residents need to acknowledge and not deny the reality that the average age is 9 years. There needs to be leadership – organization. We need to “Open our mouths” to let people know of the problem; better coordination of services is needed; employment; education; and decent AND affordable housing.

FG #2: Resolutions to landlord issues; short term stay – transition to next door; government (local) officials deny problem; community education – readiness.

FG #3: Create a setting where people can live while giving 30% of their income toward savings toward having their own place; use empty buildings to house homeless; hire the homeless to build accessible and affordable housing; increase self worth; provide job training; have housing codes for rental units.

6. What can we do to work better together to end homelessness?

FG #1: Establish rental codes; find agents of change – people with right attitude and willing to work to seek solutions to this problem (clone Jill); create human interest stories; utilize all ages – youth; create a housing authority in Shiawassee County, educate landlords; educate or express need to our governmental officials.

FG #2: Harness the power of the media; get governmental officials involved and committed.

FG #3: Need to change attitudes; hire the homeless to do work; involve more people to lead the effort and involve all people to teach others.

## APPENDIX B

### Glossary

*(There are words and phrases in this glossary that are not in the report. Additional terms are defined to provide the reader a thorough vocabulary in understanding homelessness.)*

**Accessible housing:** Dwellings that meet the needs of the physically disabled; interpretations of how those needs can be met vary, but generally require barrier-free, adaptable design in both common areas and individual units.

**Activities of daily living skills:** Basic skills required to take care of one's personal needs, such as grooming, housekeeping, and using transportation

**Adjustable Gross Income:** Income after standard deductions set by federal guidelines.

**Affordable Housing:** Housing and utilities that cost no more than 30 percent of a household's adjusted gross income. (US Housing and Urban Development)

**Area Median Income (AMI):** A figure calculated by HUD based on census data, for specific size households in a specific area. The median income divides the income distribution into two equal groups, one having incomes above the median and other having incomes below the median.

**Assertive Community Treatment (ACT) Teams:** Multidisciplinary teams that provide case management, crisis intervention, medication monitoring, social support, assistance with everyday living needs, access to medical care, and employment assistance for people with mental illness. The programs are based on an assertive outreach approach with hands-on assistance provided to individuals in their homes and neighborhoods.

**Buy-in:** The level to which an individual or member of a community is involved with and supports the ideas, concepts, processes and projects that are advanced by the leadership.

**Case Manager:** A person who develops a working alliance with individuals or households who are seeking services and engages them in identifying goals and developing a plan for attaining greater self-sufficiency through resource cultivation, linkages with service providers, advocacy for vital services and the provision of direct services.

**Department of Human Services (DHS):** The State of Michigan Department that is principally responsible for meeting the basic financial, medical and social needs of people who are unable to provide for themselves;; assisting those who are capable of becoming self-sufficient through skill building, opportunity enhancement and family focused services; and protecting children and vulnerable adults from abuse, neglect, exploitation and endangerment.

**Chronically Homeless Person:** HUD defines a chronically homeless person as an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more or has had at least four (4) episodes of homelessness in the past three (3) years. This definition is generally interpreted to exclude families.

**Community Development Block Grant (CDBG):** Provided to communities from the HUD for a range of eligible activities, setting their own priorities as long as they meet basic program requirements.

**Community Housing Development Organization (CHDO):** A non profit housing development organization which can be eligible for a portion of a Participating Jurisdiction's HOME funds allocation and for technical assistance, site control and seed money loans. A CHDO may also be eligible for organizational support. A CHDO must meet HUD-established criteria and be certified from the

Participating Jurisdiction within its service area in order to be eligible for development set asides and organizational support.

**Community Reinvestment Act (CRA):** This federal regulation requires commercial banks and thrifts to have a continuing and affirmative obligation to help meet the credit needs of the local communities which they serve.

**Continuum of Care:** An annual document describing the local continua for caring for homeless in Shiawassee County.

**Couch Homeless:** People who live at friend's or relative's homes temporarily and often move within a short period of time. While they do not meet HUD's strict definition of homeless, they do not have their own place of residence.

**Disabling Condition:** HUD defines a disabling condition as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions. A disabling condition limits an individual's ability to work or perform one or more activities of daily living.

**Dually Diagnosed:** Term used to describe individuals who are diagnosed with two difference disorders, typically a combination of mental health and substance use diagnoses.

**Emergency Shelter:** Temporary housing for individuals and families who are homeless over one night or several nights, typically up to a maximum of 30 days.

**Emergency Shelter Grant (ESG):** Funds that support the operation of homeless prevention services and homeless shelter.

**Emergency Shelter Voucher:** A voucher issued to homeless individuals or families to provide very short-term stay at a local hotel.

**Episodic Homeless:** An individual or family who is homeless for a short period of time and may become homeless again. Episodic homelessness is often perpetuated by job loss, divorce, mental health issues or medical emergencies.

**Extremely Low Income Households:** Households with incomes no higher than 30% of the median income for the area as determined by the US Department of Housing and Urban Development.

**Fair Housing:** Refers to federal laws designed to protect access to housing regardless of race, color, national origin, sex, familial status or disability.

**Fair Market Rent (FMR):** An amount determined by the US Department of Housing and Urban Development to be a maximum allowable rent for HUD-funded subsidy programs in a given geographic area. FMR includes the cost of utilities.

**Food Stamps:** A DHS managed resource that improves the nutritional opportunities of low income people by providing them with financial assistance to buy food for home use. Aid typically comes in the form of a electronic benefits transfer (EBT) card similar to a bank debit card.

**Foster Care:** A system that provides a home for children (0-18 years) who have been neglected and/or abused, as well as for those who are awaiting adoption.

**Homeless:** an individual or family who lacks a fixed regular and adequate nighttime residence

an individual or family who has a nighttime residence that is a shelter designated to provide temporary living accommodations (camper, tent); an individual or family who is in an institution that provides a temporary residence for individuals intended to be institutionalized (prison, substance abuse rehab center, etc); an individual or family who is in a public or private place not designed for or ordinarily used as a regular sleeping accommodation for humans (for example, a park, bus station or under a bridge)

**Homeless** as defined by the Department of Housing and Urban Development (HUD): A homeless person is someone who is living on the street or in an emergency shelter, or who would be living on the street or in an emergency shelter without HUD's homelessness assistance. A person is considered homeless only when he/she resides in one of the places described: In places not meant for human habitation, such as cars, parks, sidewalks, abandoned buildings, on the street; In an emergency shelter, In transitional or supportive housing for homeless persons who originally came from the streets or emergency shelters; In any of the above places but is spending a short time (up to 30 consecutive days) in a hospital or other institution; Is being evicted within a week from a private dwelling unit and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing or their housing has been condemned by housing officials and is no longer considered meant for human habitation; Is being discharged within a week from an institution in which the person has been a resident for more than 30 consecutive days and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing; or is fleeing a domestic violence housing situation and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing. The following do NOT meet the HUD definition of Homeless: Person living housing, even though they are paying an excessive amount for their housing, the housing is substandard and in need of repair, or the housing is crowded. Persons living with relatives or friends. Persons staying in a motel, including pay-by-the-week motels. Persons living in a Board and Care, Adult Congregate Living Facility, or similar place. Persons being discharged from an institution that is required to provide or arrange housing upon release. Wards of the state, although youth in foster care may receive needed supportive services which supplements, but does not substitute for, the state's assistance.

**Homeless Families with Children:** A family that includes at least one homeless parent or guardian and one child under the age of 18, a homeless pregnant woman, or a homeless person in the process of securing legal custody of a person under the age of 18.

**Homeless Management Information System (HMIS):** An internet-based database accessed by trained staff that collected information about homelessness.

**Homeless Prevention:** Efforts to assist individuals and families at risk of becoming homeless to stabilize their housing situation and provide supports necessary to help them maintain their housing and avoid homelessness.

**Housing Choice Voucher:** Formerly known as Section 8 Housing Vouchers, this rent subsidy decreases what low income families pay for housing. The family pays a percentage of income (generally 30-35%) and the voucher pays the landlord the balance of the rent in a unit that meets inspection requirements and is within the local standards for fair market rent.

**Housing First:** An approach to providing access to permanent housing as soon as possible without requiring homeless to enter into specified programs. Housing comes first no matter what is going on in one's life and the housing is flexible and independent so that people get housed easily and stay housed.

**HUD (US Department of Housing and Urban Development):** The federal agency responsible for overseeing a variety of government-subsidized housing related programs such as Supportive Housing Program, Housing Choice Vouchers, and Shelter+Care.

**Individual Development Account (IDA):** Matched savings accounts designed to help low income and low wealth families accumulate a few thousand dollars for investments in job training, education, homeownership or small business start-up.

**Living Wage:** Income provided through employment that is at an adequate level to afford necessities such as housing, food and medical services.

**Mainstream Resources:** Agencies or institutions that provide services and resources to people who are at risk of homelessness or who are homeless.

**Maslow's Hierarchy of Needs:** A theory that humans must have certain needs met before the next level becomes important.

Level One: Biological and Physiological needs (basic life needs - air, food, drink, shelter, warmth, sex, sleep, etc.)

Level Two: Safety needs (protection, security, order, law, limits, stability, etc)

Level Three: Belongingness and Love needs (family, affection, relationships, work group, etc)

Level Four: Esteem needs (achievement, status, responsibility, reputation)

Level Five: Self-actualization (personal growth and fulfillment)

**McKinney-Vento Act:** The primary federal law that targets federal funds to homeless individuals and families. There are nine titles under this Act that are administered by several different federal agencies. This act also created a slightly different definition of homelessness:

The term homeless children and youths means individuals who lack a fixed, regular, and adequate nighttime residence; and includes (i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement; (ii) children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; (iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and (iv) migratory children who qualify as homeless because the children are living in circumstances described in clauses (i) through (iii).

**Medicaid:** The Medicaid Program provides medical benefits to low-income and disabled people who have no medical insurance. The Medicaid Program is funded through state and federal funds.

**Medicare:** A federal program that provides health insurance to people age 65 and over, those who have permanent kidney failure and certain people with disabilities.

**Nimbyism:** The attitude that is characterized by statement such as "not in my backyard" as a response to the need for community change.

**People at risk of Homelessness:** People who are in imminent danger of becoming homeless.

**Permanent Housing:** Typically refers to affordable rental housing in which the tenants have the legal right to remain in the unit as long as they wish, as defined by the terms of a renewable lease agreement.

**Permanent Supportive Housing (PSH):** Safe, affordable rental housing with supportive services for low income or homeless people with severe mental illness, substance abuse disorders or HIV/AIDS. The phrase can also be expanded to include other categories of disabilities.

**Point In Time Survey (PIT):** A regular survey of homeless and precariously housed through local service providers.

**Release of Information Forms:** Documents signed by client to allow staff to share confidential information with other service providers as necessary.

**Scatter Site Housing:** Dwelling units in apartment or homes spread throughout a neighborhood or community that are designated for specific populations, usually accompanies by supportive services.

**Severe Housing Cost Burden:** Housing costs that exceed 50% of income.

**Shelter Plus Care:** A HUD Funded supportive housing program that provides rental subsidy to families and individuals who are disabled and homeless. Supportive services are provided by mainstream programs.

**Shiawassee County Homeless Coalition:** Formerly known as the Shiawassee County Homeless Resolution Task Force, this group is the local continuum of care body charged by HUD and MSHDA to develop the local Continuum of Care Plan and to recommend allocation of Emergency Shelter Grant (ESG) dollars in Shiawassee County.

**Street Homeless:** People who current live on the streets or in abandoned building or other places not meant for human habitation.

**Subsidized Housing:** Housing that has a portion of its rent paid with public funds or, during its development, was financed with public funds that help keep the rent affordable to low income individuals and families.

**Substandard Housing:** Housing that is dilapidated, unsafe and/or unsanitary or that has environmental hazards such as lead-based paint, mold or pest infestation.

**SuperNOFA-Super Notice of Funding Availability:** Each year, HUD issues a super NOFA for their housing, community development and empowerment programs covering 32 grant programs.

**Supplemental Security Income (SSI):** A public assistance cash benefit for persons with disabilities.

**Supportive Housing:** Housing that is both affordable to its residents and linked to supportive services such as employment assistance or mental health services, to help residents successfully stay in permanent housing.

**Supporting Housing Program (SHP):** Federal funds provided through HUD that support transitional and permanent supportive housing programs.

**Temporary Assistance for Needy Families (TANF):** A program offering financial assistance to those in need.

**Transitional Housing (TH):** Housing that provides temporary shelter usually for up to two years to persons making the transition from homelessness to permanent housing.

**Unaccompanied Homeless Youth:** Young people under the age of 18 who are estranged from their families and live on the streets or in shelters and have no stable housing.

**US Department of Veterans Affairs:** A federal agency that administers a variety of medical and other assistance programs to veterans, including military veterans who are homeless.

**Work First Program:** Recipients of public cash assistance who are required to find a job are referred to the local workforce development program for assistance through a “work first” program. Services may include developing an employability plan, job search and placement assistance, and limited financial aid for childcare, transportation and other work related expenses.

**Wraparound Services:** Services that are coordinated to meet the needs of a person with in a system of care to meet that person’s needs and personal goals. Typically involves a variety of service providers that impact the individual’s needs.

## APPENDIX C

### 12:01 Discharge Plan A Shiawassee County Jail Homeless Initiative

Purpose: Institutional Discharge has become designated as one source of homelessness, based on the Michigan Coalition Against Homelessness summary results in the 2004 homeless provider survey on institutional discharge. The purpose of this document is to provide a "safety-valve" for the recognition of and provision for those who may be homeless upon discharge from the local jail.

Our strengths have been identified as the work release center, a strong community resource team, and our commitment to helping the incarcerated homeless population.

Our weaknesses have been identified as limited staffing and lack of space at our jail.

Homeless individuals are identified by team members with access to the jail. This would include, but not be limited to, the following: Jail Nurse, Mental Health, Forgotten Man Ministry, Catholic Charities, Corrections Officers, and Community Corrections Manager. They will contact Community Corrections to start the process.

A referral is made to the Community Corrections Manager, who will contact the individual and complete a screening and a Compass Assessment. If the person is identified as truly homeless, the Manager will form a Transitional Team.

This team will be formed to review and assist in problems of homeless. Teams will be formed as need dictates depending on the inherent problems with the case. Agencies or individuals may be asked to attend a meeting when their presence is pertinent. The individuals will be required to sign a Confidentiality Agreement prior to the meeting. Client's cases may be followed by a team member for as long as two years.

Areas of concern are housing, employment, education, treatment (substance abuse & mental health), medical care, transportation, family reunification, and, of course, legal issues.

Transitional Team:

County Health Department, Friend of the Court, Community Mental Health, Forgotten Man Ministries, SVRC Industries, Community Corrections, District Court Probation & Circuit Court Probation, SATA, and local counseling agencies.

**APPENDIX D****Directory****Providers of Service and Those who Come in Contact with Homelessness**

American Red Cross  
Sue Osika (989) 743-6227  
Address: 702 W. Corunna Ave.  
Corunna, Michigan 48817  
sosika@michonline.net

Arc Shiawassee  
Cynthia Mayhew (989) 723-7377  
Address: 1905 W. M-21  
Owosso, Michigan 48867  
arcshia@michonline.net

Baker College: Bentley Campus  
Heather Kirk (989) 729-3310  
621 Oliver St.  
Owosso, Michigan 48867  
Heather.Kirk@baker.edu

Coalition Against Vulnerable Adult Abuse  
(CAVAA)  
Pam Keener (800) 339-9513  
Address: 436 S. Saginaw St.  
Flint, Michigan 48502  
keener@lsem-mi.org

Capital Area Community Services  
Rebecca Zemla (989) 723-3115  
Address: 1350 E. Main Street  
Owosso, Michigan 48867  
rzemla@cacs-inc.org

Catholic Charities  
Pam Smith  
120 E. Exchange St.  
Owosso, Michigan 48867  
psmith@catholiccharitiesSG.org

Faith-based:  
LOVE, Inc. 989 834-9723 or 800 314-3464

St. John's United Church of Christ  
Rev. John Downing (989) 725-7072

LOVE, Inc. of Mid-Michigan  
(989) 834-9723 or (800) 314-3464  
P.O. Box 22  
Ovid, Michigan 48866

Memorial Healthcare  
Cathy Stevenson (989) 729-4724  
826 W. King St.  
Owosso, Michigan 48867  
cstevenson@memorialhealthcare.org

RAVE  
Jody Smith 989 224-4662 x. 109 (in St. Johns)  
or (989) 723-9716 in Owosso  
Address: 120 W. Exchange St.  
Owosso, Michigan 48867  
jsmith@michonline.net

REACH  
Tina Irland 810-233-8700  
308 W. Main St.  
Owosso, Michigan 48867

Shiawassee Area Transportation Agency (SATA)  
Larry Alpert (989) 729-2687  
Address: 180 North Delaney Road  
Owosso, Michigan 48867  
sata@tir.com

Shiawassee County Community Corrections  
Linda Spencer (989) 743-2314  
Address: 1042 N. Shiawassee St.  
Corunna, Michigan 48817  
lspencer@shiawassee.net

Shiawassee County Community Mental Health  
Authority (CMH)  
Scott Gilman (980) 723-6791  
Address: 1975 W. Main Street  
Owosso, Michigan 48867  
sgilman@shiacmh.org

Shiawassee County Department of Human Services (DHS)  
Susan Fulton (989) 725-3200  
Address: 1975 W. Main St.  
Owosso, Michigan 48867  
fultons@michigan.gov

Shia. Co. Housing Rehabilitation Program  
Linda Schonberg: (989) 743-2270  
Address: 201 North Shiawassee Street  
Corunna, Michigan 48817  
housing@shiawassee.net

Shiawassee County Probate Court  
Karen VanEpps (989) 723-5877  
110 E. Mack St.  
Corunna, Michigan 48817  
kvanepps@shiawassee.net

Shiawassee United Way  
Sheila Shegos: (989) 723-4987  
1302 W. Main  
Owosso, Michigan 48867  
suw@michonline.net

Shiawassee Rehabilitation Services  
Ruth Jandik (989) 723-8205  
2009 Corunna Avenue  
Owosso, Michigan 48867  
Srp2@onemain.com

Shiawassee Regional Education Service District (SRES D)  
Don Trap (989) 743-3471  
Address: 1025 N. Shiawassee Street  
Corunna, Michigan 48817  
trap@sresd.k12.mi.us

The Salvation Army  
Amy Kerry (989) 725-7485  
302 E. Exchange St.  
Owosso, Mi 488  
Amy\_Kerry@usc.salvationarmy.org

## APPENDIX D

### Internet Links to more Information and Resources (Order does not imply importance)

<http://home.comcast.net/~hcoc> This web site is a central site for guidance in developing 10 year plans in Michigan. Suggestions for focus groups, outlines, and content can be found here.

[www.Mihomeless.org](http://www.Mihomeless.org) This website is the home site of the Michigan Coalition Against Homelessness. It has much valuable information that focuses on the State of Michigan.

[www.swmicomm.org/SWMC/MSHDA.htm](http://www.swmicomm.org/SWMC/MSHDA.htm) This web site provides information about Cass and Van Buren Counties and their efforts to develop a 10 Year Plan to End Homelessness. This web-site is identified because these counties are similar to Shiawassee in that they are predominantly rural.

[www.grahcoc.org](http://www.grahcoc.org) and [www.whalliance.org](http://www.whalliance.org) These sites provide information about efforts in Kent County and in Washtenaw County to develop 10 Year Plans. These sites are noted to give the reader an idea of efforts in a large urban area where there are an abundance of resources available.

[www.nlchp.org](http://www.nlchp.org) This site is sponsored by the National Law Center on Homelessness and Poverty based in Washington D.C. This site is helpful with information about the McKinney-Vento Act and the rights of homeless children and youth.

[www.usich.gov](http://www.usich.gov) This site is sponsored by the United States Interagency Council on Homelessness. The organization is based in Washington D.C. The site provides a tool kit for the development of 10 Year Plans and provides the components of successful plans. See call below.