

There's No Place Like Home ...



**A Ten-Year Plan to Address Issues
Surrounding
Housing and Homelessness
In Benton County Oregon**



Contents

Executive Summary	3
List of Steering Committee Members	6
Introduction	7
Data on the Homeless and Services	9
Goals	20
Glossary	32
Additional Resources	36

This publication was produced in 2009

A note about the photographs: Many of the photographs in this document portray the faces of individuals and families experiencing homelessness in Benton County and elsewhere in the state of Oregon. Some were taken by local law enforcement; others were supplied by Community Outreach, Inc.; Jackson Street Youth Shelter; Melissa Hendricks, a Portland photographer.

*Heartfelt thanks and grand appreciation are given to Amy-Rose Simpson and Jamie Ernst, 2nd- and 1st-year AmeriCorps*VISTA volunteers, respectively, for their hard work and dedication to this project. Without them, the process to completion would have been much more laborious and time-involved.*

Production: Joann Zimmer

Executive Summary

The creation of this document has been a long and informative process, one in which “labors of love” and “it’s our duty as citizens” were commonly expressed thoughts. While ambitious in its broad scope, this plan is merely an attempt to guide, and channel, if you will, the energies and focus of the citizens of Benton County into an organized plan to address the issues surrounding homelessness in our own communities. It is the solid belief of the Steering Committee that the goals contained within this document are indeed attainable and, most importantly, sustainable in steps moving forward into the next decade.

To that end, the Board of Commissioners in Benton County unanimously chose to support the Community Services Consortium, the community action agency for Benton, Linn, and Lincoln counties, as it worked to coordinate the interests of the various stakeholders in facilitating the creation of this comprehensive housing and homelessness planning document.

The Steering Committee adopted the following statements:

Vision: Everyone residing within Benton County should have opportunity to live in decent, safe, and affordable housing that provides the basis for a stable environment from which to move forward in their respective lives.

Mission: The primary charge of this committee is to develop a comprehensive document dealing with issues around housing and homelessness for Benton County that will approach the realities of not only those currently homeless but also those at close risk of joining this ever-growing population. The plan will identify problems, identify specific and attainable solutions and goals, and establish timelines and resources for meeting those goals. The creators of this plan recognize that a primary outcome of this work needs to be the development of transitional and permanent, supportive housing that can accommodate the needs of those who face unique challenges associated with mental illness, addictions, long-term homelessness, and other difficult-to-place populations.

This document, once it is blended with the Linn County document, will eventually be organized into

four sections: Part One will briefly describe the overall efforts throughout the remainder of Oregon and the nation to address the needs and solutions relating to homelessness; Part Two will present background data that has been gathered over the last year from a variety of sources as well as identify gaps in services; Part Three will present data and issues identified as regional in scope and include basic related data from Benton and Linn counties as well as the bordering counties of Lincoln, Marion, Lane, and Polk; Part Four will contain the actual blended Action Plan, incorporating county and regional views, which will offer ideas, suggestions for solutions, timelines for implementation (in one- to three-year blocks), and ways to measure effectiveness.

A primary interest of the Steering Committee was to better identify, and

quantify, the ever-growing scope of overall housing issues in Benton County. It was intended that we more aptly defined the variety of contexts in which homelessness occurs (medical bills, domestic violence, incarceration, etc.) and the housing issues of working families. In addition to the public consultation held in June 2009, this document, in varying stages of completeness, was posted on a website for public viewing. Information and data was gathered at the Summits and website comments and have been captured within the pages of this document.

A special note – March 2009

The Steering Committee began meeting together and working on all aspects of the plan’s research and documentation in the fall of 2007. At that time, the economy, though not perfect, was reasonably stable and certainly gave no solid indication of the chaotic and painful turns it would take a little more than a year later. We fully acknowledge the gravity of today’s economics and the pressing need to drastically reduce the numbers of our unemployed neighbors as soon as humanly possible.

That said, the issues that originally brought us all to the table – specific needs and possible solutions to address homelessness and those at risk of losing their homes – are still as valid today, and perhaps even more so (when the discussion is around preventing homelessness altogether), than they were in 2007. Therefore, at a recent meeting, the Steering Committee elected to continue

We do believe that it is better to identify our needs and begin moving forward than to do nothing at all.

moving forward with this work as originally planned.

NOTE: An oversight committee will be formed after the plan is officially rolled out On October 23rd, 2009. This committee's primary purpose will be to track progress of the plan and its suggested solutions. The secondary purpose, and equally as important, is to keep up on emerging issues – such as the economy and unemployment – and work to adjust the draft and corresponding solution possibilities as appropriate. Since collaboration and building partnerships has been the cornerstone of this planning process and will continue to be so as we move forward, the oversight committee welcomes the participation and input of interested community members.

A note about the scope of this plan

This plan is very broad in scale. A survey of plans to end homelessness by the National Alliance to End Homelessness found that approximately one-third of completed plans focused exclusively on chronic homelessness while the rest addressed various types of homelessness. The plan we've created for Benton County not only includes homelessness (chronic or temporary) but also housing issues and eventually a regional perspective that incorporates work being done in neighboring counties. Because of the broad scope, it will be essential for the committees charged with implementing the plan to establish priorities and continuously strive to maintain focus on achievable, measurable results while not losing sight of the longer-term goals. For a variety of reasons, the County is facing and

Everyone residing within Benton County should have opportunity to live in decent, safe, and affordable housing that provides the basis for a stable environment from which to move forward in their respective lives.

currently suffering through a substantial lack of affordable housing (rental and otherwise) that is safe and clean. If by "affordable" we only talk about the monthly cost of the housing, one could argue there is enough of a supply if folks just look for them. On the other hand, strong arguments can be made that "affordable" takes on a whole new meaning when the housing stock available for no-, low-, and/or moderate-income folks is poorly managed and maintained, and the cost of heating these homes is nearly the same as, or more than, the monthly rental cost. Taking steps to increase the overall housing supply to this population will be helpful, but ensuring existing laws are enforced in the provision of rental housing must be part of the discussion. Being mindful of these two aspects will not only help the most vulnerable populations, it will also strengthen the economies and the health of the included communities by ensuring that most people are able to find decent, affordable places to live.

We entertain no illusions that the solutions to the problems of homelessness and affordable housing will be simple, quick, or cheap. But we do believe that it is better to identify our needs and begin moving forward than to do nothing at all.

Although it is the dire need of these vulnerable populations coupled with the compassion and interests of local service providers that has brought these issues to the forefront, it will take the combined efforts of city and county government, non-profit agencies, the faith-based community, the business community, and every interested and concerned citizen to eradicate what Philip Mangano, the executive director of the U.S. Interagency Council on Homelessness, has called the "moral disgrace of homelessness." We hope you will join us in this important effort.

~ Ten-Year Plan Steering Committee Members

"The words "THANK YOU" poorly convey how truly grateful I am to all of you. All of the time and inconveniences in your life to establish and keep the doors open to the shelter, I believe, are truly worth it. You have all truly changed my life for the better, for the rest of my life."

~ Resident current in shelter.

Sample Text of Resolution of Support

(submitted to incorporated cities within the County; a list of cities which have adopted this resolution follows)

RESOLUTION TO DEVELOP A BENTON COUNTY 10-YEAR PLAN TO ADDRESS HOMELESSNESS

WHEREAS, safe and decent shelter is one of the most basic of all human needs; and

WHEREAS, the lack of adequate and affordable housing is being felt by individuals of all ages and income levels in Benton County; and

WHEREAS, inadequate housing and homelessness make it more difficult for children to learn, adults to be productive, and people of all ages to stay healthy; and

WHEREAS, lack of affordable housing and homelessness represent an economic burden on the community, especially the public safety and public health systems; and

WHEREAS, many government agencies, non-profit groups and individuals in Benton County are valiantly working to address shelter issues; and

WHEREAS, the local resources to deal with the problem fall far short of the need, with housing and shelter programs of all types reporting long waiting lists; and

WHEREAS, there is a new focus on the problems of affordable housing and homelessness at both the state and federal levels, as well as recognition that new approaches, including the "housing first" model show great promise in ending homelessness; and

WHEREAS, the federal government has adopted a 10-year goal to end homelessness, and has asked local jurisdictions to join in this effort; and

WHEREAS, the Community Services Consortium has agreed to coordinate the development of a 10-year Plan to Address Homelessness for Benton County;

NOW, BE IT RESOLVED, that the city of _____ supports development of this plan and will strive to achieve its goals through working with other government partners at all levels, non-profit organizations, the private sector, the faith community and interested individuals.

Cities supporting the resolution

Corvallis * Philomath * Adair Village * Monroe *

Benton County Ten-Year Plan Steering Committee

Name	Organization/Agency
Steering Committee Chair: Jay Dixon	Benton County Commissioner
Project Coordinator: Joann Zimmer	Assistant to the Executive Director, CSC
Project Support: Amy-Rose Simpson	Second Year AmeriCorps*VISTA
Project Support: Jamie Ernst	First Year AmeriCorps*VISTA
Jennifer Ambrosius	Corvallis Daytime Drop-in Center
Mitch Anderson	Director, Benton County Health Department
Ben Atchley	Captain, Albany Police Department/HEART
Hundley Bergstad	Corvallis Daytime Drop-In Center; Project Action
Gary Boldizar	Chief of Police, Corvallis Police Department
Ann Craig	Executive Director, Jackson Street Youth Shelter
Angie Dahlke	Community Outreach, Inc.
Sherlyn Dahl	Clinics Director, Benton County Health Department
Richard Donovan	Executive Director, Community Outreach, Inc.
Scott Gentry	Corvallis Homeless Shelter Coalition
Mark Greenfeld	Samaritan Health Services, Mental Health Division
Jerry Groesz	Community Outreach, Inc. Supportive Housing
James Hackett	Executive Director, Linn-Benton Housing Authority
David Hamby	Corvallis City Council
Aleita Hass-Holcombe	Corvallis Homeless Shelter Coalition
Dan Hendrickson	Captain, Corvallis Police Department
Julie Manning	Samaritan Health Services
Mike Mitchell	Samaritan Health Plans
Jennifer Moore	Executive Director, United Way of Benton & Lincoln Counties
Jim Moorefield	Executive Director, Willamette Neighborhood Housing Services
Gail Newman	Division Commander, Benton County Parole and Probation
Irisha Niles-Flamez	Community Outreach, Inc.
Kristin Osbourne	Medical Detox Committee
Dee Dee Overholser	OSU Homeless Student Resource Center
Cindy Pratt	CSC
April Pritchard	Corvallis Daytime Drop-In Center; Project Action
Barbara Ross	Corvallis Daytime Drop-In Center; Project Action
Wilma Van Schelven	Love, INC. of Benton County
Matt Walker	Linn-Benton Housing Authority
Kent Weiss	Housing Division Manager, City of Corvallis
Sheryl White	Title 1 Coordinator, Corvallis School District
Mary Zelinka	CARDV

Introduction

In creating and implementing this plan, Benton County joins a growing nationwide movement to address issues surrounding housing and homelessness with an intent to eventually end homelessness altogether. Although the U.S. Interagency Council on Homelessness (USICH) was originally created in 1987, it was dormant for several years before being reactivated in 2002. That action was motivated not only by a growing recognition of the problem of homelessness but also by the realization that there were promising new approaches that made it possible to move beyond managing homelessness toward a vision of ending it.

In 2000, the National Alliance to End Homelessness announced the creation of "A Plan, Not a Dream: How to End Homelessness in Ten Years." This report drew on research and innovative programs from around the country to outline a new approach to addressing the problem of homelessness. Under the leadership of the USICH, more than 300 cities and counties to date have launched the development of plans to end homelessness.

These plans target a variety of strategies aimed at providing housing and services to shorten the time that people spend in homelessness as well as preventing it in the first place. The suggested strategies have been proven through extensive research and have a focus on measurable outcomes. This results-oriented approach has further validated these approaches.

At the core of this strategy are two elements: **Housing First** is an alternative to the current system of emergency shelter/transitional housing which tends to prolong the length of time that individuals and families remain homeless. The methodology is premised on the belief that vulnerable and at-risk homeless individuals and families are more responsive to interventions and social services support

after they are in their own housing, rather than while living in temporary/transitional facilities or housing programs. With permanent housing, people can begin to regain the self-confidence and control over their lives they lost when they became homeless.

Permanent Supportive Housing is affordable rental housing with support services for low-income or homeless people with severe mental illness, substance abuse, or HIV/AIDS. Some support services are offered in the home and some are offered in other locations in the community. There are different types of permanent supportive housing, including furnished single room occupancies (SROs), group homes, subsidized Section 8 apartments, and shared living arrangements. While some people stay in permanent supportive housing for only a few months, others may stay for several years, and, for some, it will be their permanent living situation.

Here in Oregon, the efforts by Multnomah County and the City of Portland have been in the vanguard of the effort to end homelessness. During the first three years of implementation of their plans, that area has seen a marked reduction in chronic homelessness. As of this writing, one-third of Oregon counties have plans completed, in development, or under discussion.

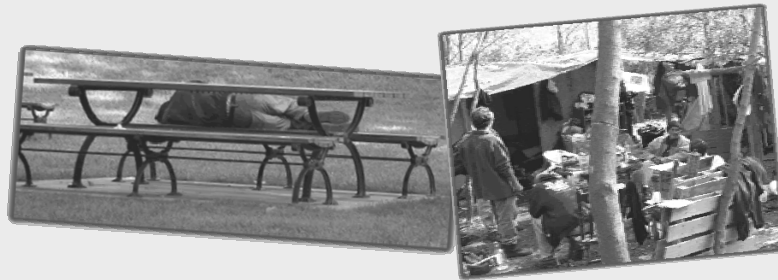
In 2006, Governor Ted Kulongoski approved an Executive Order creating the Oregon Ending Homelessness Advisory Council (EHAC) to develop a Ten-Year Plan to End Homelessness for the State. The State council, co-chaired by Lincoln County Commissioner Bill Hall, is focused on increasing coordination of services by state agencies, advocacy for homeless populations and support to cities and counties in development of local plans. The council was scheduled to deliver a completed plan to Governor Kulongoski in December 2007, and in June of 2008, the completed plan was approved by the Governor and rolled out to the public at the 2008 Oregon Homeless Leadership Summit in Salem.

Working Towards a Ten-Year Plan

Housing Specific Focus Groups (this is information the Steering Committee sub-groups provided; information-gathering is on-going)

In the initial phases of development of the Benton County Ten-Year Plan, the Steering Committee broke out into focus groups that were homeless sub-population specific. After a couple of meetings and much discussion of the needs of these different populations, it became apparent that they all had one thing in common: the need for housing. After some consideration, it made sense for the focus groups to concentrate on the three areas of housing which are required by different homeless populations: transitional/emergency, affordable, and supportive.

Additional needs identified are better, more efficient coordination of existing governmental and community services, development of services and outreach efforts to underserved areas outside of the Corvallis city limits and to continue to identify and find ways to fill gaps in services throughout the county.



Are You At-Risk of Being Homeless? Take this 6 question Quiz to Find Out

If you are, or if you were to become, unemployed or temporarily disabled, do you have enough savings to live on for at least three months?

Yes **No**

If you were laid-off today, could you find another job with comparable pay in your area?

Yes **No**

Do you spend less than 1/3 of your income on rent or mortgage payments and utilities?

Yes **No**

Do you have low credit card balances that would not default if not paid for a few months?

Yes **No**

Could your extended family help you out for a few months should something happen to your income?

Yes **No**

Are you covered by disability, car and/or medical insurance in case of a catastrophic illness or accident?

Yes **No**

If you answered NO to two or more of these questions, you are potentially at risk of homelessness.

Data on the Homeless Population and Services

NOTE: The statistical information that follows will be continuously updated during quarterly reviews of this planning document.

Who are the homeless in Benton County and how many are there?

The number of people experiencing homelessness in Benton County is a compilation of data gathered from agencies in the county serving the homeless population. It is noted that these estimates may include some duplicate counts. It is also noted that many more homeless individuals were not counted. This includes many of those who are doubled up with families and friends, those sleeping in vehicles, in campgrounds, in the woods and those who have exhausted their opportunities for services or who have never attempted to access them.

Shelter Count in Benton County

According to the Oregon one-night-shelter count conducted in January of 2009, there were a total of 154 total homeless individuals in Benton County, sheltered and turned away. This included:

- 138 total sheltered individuals
- 76 singles
- 65 persons in families with children
- 23 children less than 11 years old
- 20 children between 12 and 17 years old
- 16 homeless individuals turned away
- 1 single individual

Demographics of the Homeless

(from the National Coalition for the Homeless)

Two trends are largely responsible for the rise in homelessness over the past 20-25 years: a growing shortage of affordable rental housing and a simultaneous increase in poverty. Persons living in poverty are most at risk of becoming homeless, and demographic groups who are more likely to experience poverty are also more likely to experience homelessness.

Students Experiencing Homelessness in Benton County

Continuing concern for the homeless population within the Corvallis city limits prompted a 2009 survey of the homeless on October 3rd and 4th, 2009. This unscientific count was conducted by volunteers with the Corvallis Daytime Drop-in Center: Project Action and now establishes a continuum of information from the original unsheltered count conducted in October of 2008.

Of the 136 homeless persons counted in 2009, 28 (21%) are women and 108 (79%) are men. In the 2008 count of 130, 16 (12%) were female and 114 (88%) were male.

<i>Length of time currently homeless:</i>	<u>2008</u>	<u>2009</u>
Less than 30 days	6	7
30-90 days	12	17
6 month-1 year	25	23
1-5 years	61	49
10 years	2	1
13 years	1	6 (15-40 years)

Benton County School Districts (as of September 19, 2009)

Alsea district — fewer than 5 homeless students counted

Corvallis district — 268 students counted, 92 more than previous year (4% total)

Monroe district — 20 students counted, 15 fewer than previous year (4.3% total)

Philomath district — 37 students counted, 4 fewer than previous year (2.2% total)

Benton County

- Adults released from jail and prison and are a part of parole and probation; about 9 per month. Between November 2007 and June 2008, 77 individuals released from incarceration were homeless.

- Alcohol and Drug Clients; more than 50% of clients are homeless or at risk of homelessness at time of admission to outpatient program
- Mental health clients; served 84 homeless clients in 2007
- Recently released youth from foster care – information pending

CARDV (fiscal year 2008-2009 Linn and Benton Counties)

- 85 women, 79 children (unduplicated count)
- 2,171 bed nights
- CARDV will be opening 10 permanent supportive housing units in 2011-2012. This is a joint project with Willamette Neighborhood Housing.

Community Outreach Inc. (July 2008/July 2009)

- 268/318 people sought housing due to homelessness
- 114/367 men, 67/209 women, 32/99 families (adult), 55/167 families (children)

Emergency housing only

Housing nights: 390/1029 for men, 269/516 for women, 295/353 for families

Transitional housing only

Housing nights: 6533 for men, 4016 for women, 1698 for families

Jackson Street Youth Shelter

In FY2008-2009, 483 crisis calls were received; 110 youth ages 10-17 requested shelter. 70% of the youth served were from Benton County; bed nights provided were 1,625.

Current Housing Programs/ Shelter/Rental Assistance in Benton County

Permanent Supportive

Benton County Developmental Disabilities Services

- Adult foster homes 21 (2-5 beds in each home)
- Residential homes 18 (2-5 beds in each home)
- Supportive living apartments 5 (1-2 people in each apt.)

Benton County Mental Health Services

- Residential Treatment Facilities
- Foster Homes
- Community Outreach, Inc., Mid-Valley Housing Plus
- Assertive Community Treatment through Benton County Mental Health

Oregon Cascades West Council of Governments

Adult foster homes	32
Assisted living facilities	7
Residential care facilities	1
Specialized care facilities	3 residential care facilities

Current Housing/Rental Assistance in Benton County

Willamette Neighborhood Housing Services

An additional 178 units to be added to portfolio after mergers and acquisitions in 2008

Linn-Benton Housing Authority

Approximately 700 Section 8 Housing Choice Vouchers

Community Services Consortium

Housing Stabilization Program—\$20,585 allocated in FY2008-2009

Transitional Housing Program (Tenant Based Assistance)—\$67,979 in FY2008-2009

Emergency Shelters and Services in Benton County

A variety of housing types, services, and needs are covered under the “emergency” label and include the following:

- Emergency shelter
- Daytime drop-in-center
- Inclement weather shelter/warming shelter
- Homeless prevention – general and/or emergency assistance services to those at-risk of homelessness

A variety of populations in need of “emergency” services include the following:

- Seniors on low and/or fixed incomes
- Chronically mentally ill
- Those addicted to or recovering from drugs and/or alcohol (including those being discharged from residential treatment programs (A&D, psychiatric, or dual-diagnosis))
- Youth
- Felons and/or those released from incarceration (including those involved with parole and probation)
- Sex offenders (adult and youth)
- Veterans
- Victims of domestic violence
- Homeless – temporary and chronic (families, youth, and adults without children)
- Those who are discharged from hospitals with chronic health issues

Current Services	Needed Services	Identified Gaps/Needs
<p>Food</p> <p>South Corvallis Food Bank St. Vincent DePaul South Benton Food Bank (Monroe) Philomath Food Bank Blodgett Food Bank Alsea Food Bank CSC</p> <ul style="list-style-type: none"> ■ Food Share ■ Rental Assistance ■ Weatherization/ Housing Rehabilitation ■ Job Training ■ Alternative High School ■ Energy Assistance <p>WIC vouchers for women with infants and children</p> <p>Daytime Drop in Center</p> <ul style="list-style-type: none"> ■ Snacks, Breakfast, Lunch (closed until further notice; seeking acquisition of new space/funding) <p>COI Crisis Intervention, I&R Services</p> <ul style="list-style-type: none"> ■ Phone Calls- 24 hours a day ■ Walk in- 9am to 9 pm ■ COI-Community Kitchen and Shower Hours <ul style="list-style-type: none"> ■ 8 a.m. to 2 p.m. ■ 5-7 pm <p>Stone Soup (Corvallis)</p> <ul style="list-style-type: none"> ■ 7 Meals <p>Neighbor to Neighbor (Philomath)</p> <ul style="list-style-type: none"> ■ Tuesday 5-6:30 	<ul style="list-style-type: none"> ■ Advocate – assistance in navigating through a variety of venues (SSI, SSD, Senior and Disability Services, other community services) ■ Assistance in obtaining an Oregon identification card (this is vital) and birth certificates (ID needed for employment; birth certificates needed for disability benefits) ■ Crisis counseling ■ Dental ■ Drug and Alcohol treatment – current services are limited and not widely available (long waiting lists) ■ Education and training for “living and employability” <i>i.e.</i>, sex education and Health education (Hepatitis C, AIDS, etc.) ■ Financial/staff support to case manage/coach people in adapting to living in housing 	<ul style="list-style-type: none"> ■ Additional assistance for one-time events – utilities, rent, move-in expenses, car repair etc. ■ Funds are also needed to purchase shoes for the homeless and clothing in odd sizes (very large or tall) ■ Awareness and education of homeless issues ■ Case management and outreach services ■ Local <ul style="list-style-type: none"> ■ Close to schools ■ Close to sources ■ Detox services (drug and alcohol services) ■ Drop-in day centers ■ Employment services/restoration – 2nd chance employability ■ Family transitional housing ■ Housing First with supports ■ Medical and dental services (currently inadequate)

Current Services	Needed Services	Identified Gaps/Needs
<p><u>Gleaners</u> Alsea Valley Gleaners Mary's River Cleaners (Corvallis) South Benton Co. Gleaners (Monroe) Philomath Community Gleaners Benton County Gleaners work in accordance with many Linn County Gleaners through Linn/Benton Food Share. Last year Benton County alone brought in 580, 248 pounds of food through to the food share through the 4 gleaning groups listed above.</p> <p><u>Medical</u> COI (Corvallis, Monroe, and Albany)</p> <ul style="list-style-type: none"> ■ Clinics <ul style="list-style-type: none"> ■ 4-6 a week ■ Medical Checks ■ Dental opportunities ■ Psych- once a month Alsea Rural Health Clinic ER <ul style="list-style-type: none"> ■ Urgent Care Clinics <ul style="list-style-type: none"> ■ 53rd and hwy by the Bi-mart ■ BCHD (Monroe) <ul style="list-style-type: none"> ■ 27th family med clinic Lincoln School <p><u>Housing</u> Community Outreach Incorporated Services men, women, and families MH housing for adult offenders (2) YES House – teenage drug and alcohol rehab; must be detoxed; capacity of 32, usually close to full Jackson Street Youth Shelter: 12 beds CARDV <ul style="list-style-type: none"> ■ Women and Children ■ 14 beds, crib space, hotel nights Janis House—residential group home with 1 or 2 beds for respite Fish—assistance vouchers Adult parole and probation—6 transitional beds for adult offenders under community supervision</p> <p><u>Clothing</u> Vina Moses</p> <p><u>Financial</u> A&S Accounting – currently provides payee services to more than 100 folks – could definitely use more help and advertising of this service</p>	<ul style="list-style-type: none"> ■ Information and referral – services currently exist in a number of formats, but a centralized and comprehensive community response is preferable) <ul style="list-style-type: none"> ■ Medical ■ Mental Health ■ Oregon Health Plan – more comprehensive coverage for a more broadly defined population ■ Personal coaches (life, spiritual, financial, etc.) ■ Prevention ■ Re-entry support for a variety of populations – mental illness, physical illness and limitations, released from incarceration, returning veterans. ■ Restoration and employment services – support finding a job with encouragement and direction (some employers will not hire felons). Ideally, a Second Chance employability program is needed. Senior and disabled services volunteers: <ul style="list-style-type: none"> ■ SOAR volunteers (additional needed) to help navigate the Social Security process. ■ Payee Pool – help for those unable to manage financial resources and/or unable to manage financial obligation/needs. There is need to expand the payee programs that are free for clients. This could be done by: <ul style="list-style-type: none"> ■ Establishing money management programs through AARP and Easter Seals, and/or Love INC. 	<ul style="list-style-type: none"> ■ Mental health transitional and permanent supportive housing as well as an outreach worker to work on the street with those affected by serious mental illness or dual diagnosis. ■ Rural shelters (close to smaller towns; safe, temporary housing) ■ Sex offender transitional housing (adults and youth being released from incarceration) - additional units ■ Transportation (especially to/from the rural areas of the county) ■ Veteran's awareness and outreach (assistance is out there but folks don't know how to access: Benton County veteran's service; Employment Department has a veteran's employment program)

Affordable Housing and Benton County

According to the Federal Housing and Urban Development (HUD) department, the generally accepted definition of Affordable Housing/affordability is for a household to pay no more than 30 percent of its annual income on housing, including utilities. Families who pay more than 30 percent of their income for housing are considered cost burdened and may have difficulty affording necessities such as food, clothing, transportation and medical care.

Currently, it is estimated that 46% of renter and homeowner households in Benton County now pay more than 50 percent of their annual incomes for housing, and a family with one full-time worker earning the minimum wage cannot afford the local fair-market rent for a two-bedroom apartment.

Scope of the issue in Benton County

The need for affordable housing in Benton County has been determined by looking at the 2000 U.S. census and comparing the information to local area Median Income: ***Information to be supplied/ updated per Benton County Needs Assessment. In Benton County there is a surplus of housing affordable at VLI that exceeds the deficit for ELI.*

Note: The cost of utilities is assumed to be \$74 for a four-person household and \$43 for a one-person and other non-family household.

Affordable Housing Available in Benton County ***Information to be updated*

Corvallis: 407 units

Other incorporated cities and towns: 314 units

Unincorporated cities, towns, private sources: unknown at this time

Sustainable Affordable Housing

Preserving affordable housing

Many of the current affordable housing units could go away if they are not preserved.

When the rental assistance contract expires, there is the possibility that the landlords would no longer be willing to rent to low-income residents

Oregon Housing and Community Services is working to preserve the stock of affordable housing

Local capacity could also jump in to aid if necessary

What is needed?

Adequate funding for housing providers (community support) and reserves to make units available

Keeping people in affordable housing

People are not able to successfully remain in housing for a number of reasons including the availability of: jobs, transportation, child care, health care, mental illness, etc. The following are a list of available services (may not be all-inclusive):

- Love INC is working on a program to match persons in need with volunteer to help educate in house-keeping, money management, etc.
- The State is working on strategies for keep residents in their affordable housing units.
- The Linn-Benton Housing Authority has a family self-sufficiency and personal asset development program.
- Willamette Neighborhood Housing Services has a personal asset development program and community education program (*i.e.*, financial literacy, homeownership, business training).
- We Care
- Community Services Consortium offers rent and utility assistance as do the Salvation Army, FISH, and other agencies previously noted.

What is needed?

- Increased funding for programs and services; increased access to money management education
- Community education
- Workforce development (work readiness, job skills)
- Resident/supportive services in housing; more units of affordable housing
- Streamlined access to existing services in order to prevent homelessness

Unhoused Subgroups

The chronically homeless often remain homeless due to a variety of reasons. These individuals are often discharged from public institutions such as hospitals, jails and prisons, or treatment programs despite the knowledge that they will be living on the street or in a shelter without the support systems that could prevent their return. This revolving-door process of admission for incarceration or treatment followed by discharge to the streets leads to significantly increased costs for social and other community services.

To better serve both the individuals and the community structure at large, it is imperative that an educational program be built around philosophical support and community outreach, thus building trust and a safer environment, before knowingly discharging individuals into homelessness.

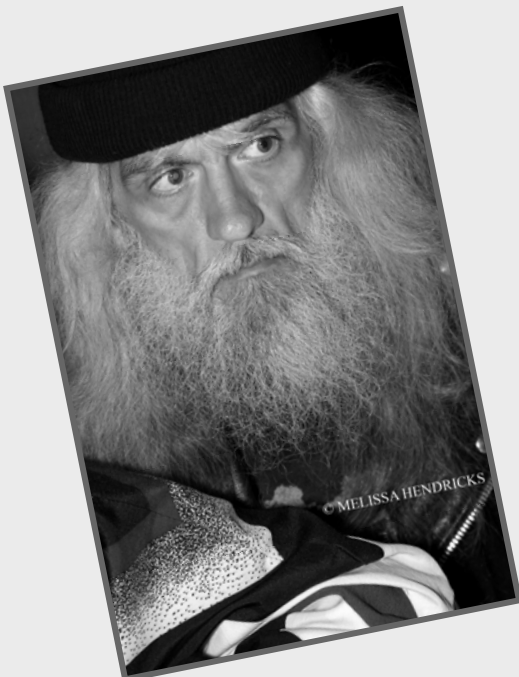
Among the Unhoused subgroup are those:

- With chronic and persistent mental illness
- With a history of substance abuse
- Who are survivors of domestic violence
- Who are elderly, often on fixed incomes
- Who are military veterans
- With a criminal history
- Currently housed but at risk of homelessness
- With physical disabilities and chronic illness
- Who are chronically homeless
- Who are single adults (without children)
- With dual diagnoses (mental health, drug/ alcohol)

Generational Poverty

Those who live in generational poverty are frequently families and youth who have left dysfunctional or unsafe families. Generational poverty is often associated with moving frequently, often for the primary provider to find work. This pattern then leads to:

- Poor socialization skills
- Lack of adequate or consistent education or consideration of its importance
- Lack of social support outside the family
- Lack of mentoring opportunities by those not living in poverty
- Living “in the moment”, getting by, no future orientation
- An oral tradition which can create difficulties when needing to function within the literate and written tradition of mainstream society



Possible Solutions

<ul style="list-style-type: none"> ■ A Habitat for Humanity model for reclaiming housing units. ■ Advocacy to legislators to reinstate general assistance program. ■ Community development with Block Grants ■ Community planning support and funding for shared living arrangements, and other transitional supportive housing, as an intermediate step to permanent housing. Housing First is a potential strategy for this action. ■ Concentrate resources on programs that offer measurable outcomes and best practices. ■ Educational programs for landlords so they will feel safe in renting to chronically homeless people with supportive services provided by various social agencies. ■ Also educate homeless on how to be good tenants; this should be a focus piece. 	<ul style="list-style-type: none"> ■ Enforcement and assistance of basic maintenance and repair of housing units (maintain current units). ■ Fair Housing Act education: service providers, property managers and landlords, city planners, homeless individuals. ■ Funds for public education and citizen involvement with homeless housing programs so town residents learn that the homeless exist but are not threatening. Publicity and Resource Fairs are needed (Albany has annually) ■ Help with infrastructure ■ Incentives for owners to increase available Section 8 housing. ■ Strategies specifically for setting aside vouchers for the homeless. ■ Mental health court. 	<ul style="list-style-type: none"> ■ More readily available and free clinics for mental health, physical health, dental, vision, addiction resolution, and other needed health services. ■ Public Education through the development and promotion of the Ten-Year Plan. ■ Rehabilitation of existing housing. ■ Supportive Housing with case management services. ■ When Corvallis becomes an entitlement community, more financial resources will be available to help develop more affordable housing units.
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Models of existing programs

Examples of how affordable housing is currently being financed

- HUD-811: Supportive housing for people with disabilities
- HUD-202: Supportive housing for the elderly
- HUD-236: Subsidized interest payments on mortgages for rental or cooperative housing
- HUD-HOME program
- IRS-Low Income Housing Tax Credit Program
- USDA-Rural Development Program

Partners in Change

<ul style="list-style-type: none"> ■ Builders ■ Businesses ■ Community and governmental agencies ■ Community members/volunteers ■ Landlords ■ Local government; Benton County Extension ministries/faith community ■ Realtors ■ Un-housed individuals and families ■ Local private non-profits 	<ul style="list-style-type: none"> ■ Utility and garbage services – deposits over time; notify resident services prior to shut-off notice ■ Do not escalate late payment amounts and schedules because of past due balances for water, gas, electricity for low-income people ■ Have assistance programs available through the utility for low-income residents in danger of shut-off ■ Prevent discharge into homelessness
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Volunteer Services

There is need to develop a clearing house to connect skills with needs; Love INC of Benton County's goal is to match needs with volunteers – to serve as a clearinghouse (will begin as the clearinghouse and then move to the advocacy piece)

<p>Available organizations to provide services:</p> <ul style="list-style-type: none"> ■ Budgeting ■ Cleaning ■ Cleaning ■ Collecting, storing and distributing building and household supplies ■ Construction ■ Cooking ■ Help getting ID and birth certificates (Check Cash NW provides IDs for \$15) ■ Mentoring ■ Payees and Social Security lay representatives ■ Repair and maintenance ■ Responsible renting ■ Yard work, planting, donation of tools and plants 	<p>Identified organizations to date:</p> <p>Kiwanis LB Vision Love INC Volunteer Caregivers Youth Volunteer Corps Loose group of volunteers affiliated with the day-time drop-in center and winter shelter provide a variety of services: transport to Detox, medical facilities, etc.; securing IDs, etc. Project Action – provides advocates for the homeless seeking work Rotary RSVP Senior companion program United Way</p>
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Supportive Housing and Benton County

Identified needs	Existing Services
<ul style="list-style-type: none"> ■ Case management and housing for the following <ul style="list-style-type: none"> ■ Developmentally disabled ■ Mentally ill ■ Oxford houses ■ Survivors of domestic violence ■ Medically frail ■ Parents in poverty with no job skills and need support ■ Drug and Alcohol housing ■ General Assistance Program – This program was discontinued in 2005 (homelessness increased as a result of this program being cut) ■ Mental Health Housing ■ Mental health outreach worker to work on the street with those who suffer mental illness and dual diagnoses ■ Second Chance Housing/Housing First/Housing Plus 	<ul style="list-style-type: none"> ■ COI transitional housing (66 units) ■ Home Life <ul style="list-style-type: none"> ■ 7 Houses ■ Total Capacity 48 hopes to gain 2 more rooms soon ■ Benton County Sheriffs (2 units) ■ Oxford houses <ul style="list-style-type: none"> ■ Mary's River House – capacity of 10 ■ Corvallis Men's House – 11 beds, Serviced approximately 30 men in last fiscal year. Hope to have an additional house in the next year. ■ WNHS & CARDV building new units

Demographics of the Homeless

(from the National Coalition for the Homeless)

Families with children are among the fastest growing segments of the homeless population. In its 2007 survey of 23 American cities, the U.S. Conference of Mayors found that families with children comprised 23% of the homeless population. This proportion is likely to be higher in rural areas.

Identified Needs	Existing Services
<ul style="list-style-type: none"> ■ We need to develop a plan to help people and help change the communities' attitude toward homelessness. Homeless behavior is criminalized. People are living in cars, using public facilities such as libraries as de facto daytime shelters. ■ There is a need to look at cooperative ownership of mobile home parks. ■ Case management can help people get out of difficult situations. Often people have emergency situations and need one-time help. ■ There is a need to have some type of shelter available for families with children that experience temporary homelessness so that they don't have to worry about where they will sleep that night. ■ Advocates for medical needs and paperwork submission. ■ There is a need to have the municipalities and Benton County develop and implement a policy on homeless camping that recognizes the social nature of the problem and ensure the most humane treatment for the removal of homeless individuals from camping sites on public property. ■ Strategies for the Prevention of Homelessness in Benton County. ■ Local city governments (electeds) need education. Their most fundamental responsibility is to improve communities by addressing existing and future needs. ■ Street-level outreach: people actually on the streets engaging with those on the streets, sleeping under the bridge, etc. sharing information on resources, etc. First step to get people into shelter and Continuum of Care. ■ Detailed assessments for those entering shelters or other social service agencies (people who are homeless often are focused on getting an immediate need met, not able to evaluate the bigger picture (cause of homelessness or plan of action)). ■ There is a need for additional free/low-cost medical/dental clinics and health care. People have to choose between shelter and medical cost. ■ Need employment opportunities to help people support themselves, both part-time work and periodic work. ■ Provide job training to clients. ■ Case management/outreach to help individuals access community services. ■ Need more "Oxford House" style of housing. ■ Need a funding source to provide additional rent assistance and deposits; perhaps a revolving loan fund. 	<ul style="list-style-type: none"> ■ Alcohol and Drug ■ CARDV ■ Developmentally Disabled-caseworkers ■ Jackson Street Youth Shelter ■ Benton County Mental health ■ Physically Disabled-caseworkers ■ Seniors-Assisted and Alzheimer's ■ Veterans Services ■ Vocational rehabilitation <p style="text-align: center;">Concerns</p> <ul style="list-style-type: none"> ■ It is in the best interest of the community to address issues of homelessness, as it is a liability and safety issue to all who live in the County. ■ There is negative public perception of homelessness by the public who don't like panhandling. ■ There is a strain on social service agencies. ■ Police agencies report increased incidences of people experiencing homelessness trespassing, sleeping in public, using public facilities, littering, and shoplifting. ■ There are illegal, unsafe and unsightly shelters and encampments that raise concerns about potential health issues. ■ Abandoned vehicles that are parked long-term are sometimes used as sleeping quarters. ■ Most homeless service providers are located in Corvallis. Rural Benton County homeless are underserved. ■ Need more outreach and assessments once person enters shelter or other 'point of entry' – this is part of the continuum of care plan. ■ Sex offenders have a difficult time finding available housing due to landlords unwilling or unable (parole and probation restrictions) to rent to them.

Battered women who live in poverty are often forced to choose between abusive relationships and homelessness.

Identified Needs (continued)

- Need more assistance to prevent housing loss for households facing eviction.
- Build stronger mentor – youth relationships and internships.
- Need long-term support network for adults and for youths being released from the foster care system.
- Initiate fees to support affordable housing development.
- Need a centralized place, address or PO Box where people can be contacted.
- Need a safe, secure temporary shelter where people can stay overnight.
- Need to educate the community about the issues of homelessness and the barriers they face.
- Coordinate services and agencies in efficient and effective ways to prevent duplication.
- Find additional funding for programs.
- Create a better transportation system for those who need to get to jobs and services.
- Need to stop discharging people into homelessness. This will require more housing units and services. Better coordination between agencies.
- Need more subsidized housing units.
- Increase the number of permanent supportive housing units.
- Engage the business community into creating housing for their workforce.
- Look at new models – housing cooperatives and community land trusts.
- Preserve existing housing through rehabilitation.
- Preserve expiring use HUD and Rural Development projects.
- Assist residents of mobile home parks from being displaced or with purchase of the park.
- Assistance with paying rent.
- Systematic approach for chronically mentally ill – treatment and support vs. punitive measures. Establish a mental health court in Benton County for non-violent individuals (mental health court would be a goal).
- Money for case management
- Money for rent
- Low rent apartment – how many units do we need?
 - For mentally ill
 - Developmentally disabled
 - Recovering alcoholics
 - Probation and Parole
 - Survivors of domestic violence

Supportive Housing existing in Benton County (short/long term)

Benton County Mental Health Services

Home Life

Benton Plaza — now a program of Community Outreach Incorporated

*more information to come

Causes of Homelessness

Data gathered from Steering Committee meetings and interviews with service providers provided considerable insight on housing issues and homelessness in Benton County. People are homeless for many reasons, but the following are a few major factors:

- There isn't enough affordable housing
- People are homeless because they are fleeing domestic violence
- Mental illness and/or substance abuse interferes with their ability to find and retain housing
- The government safety net has failed
- Federal policies have shifted funding away from affordable housing
- Individuals have poor credit, poor rental history, lack of income (or sufficient/adequate), or have been incarcerated

Recommended Goals and Strategies

The recommendations that follow represent the Steering Committee's best current thinking based on all data collection during the course of the project. Those organizations listed in the 'Proposed Partners' column are included as logical potential partners; if they are not already involved in work on the specific goal, they will be formally approached for collaborations when the Oversight Committee is convened in the coming months. Likewise, the 'Cost' and 'Funding Status' columns have been left blank until the Oversight Committee begins its work in fully defining and refining the complete strategies roadmap. In the final analysis, priorities, to a degree, will ultimately be determined by pressing need and availability of funding and collaborative opportunities.

We hope we've articulated our collective thought in a way that is clear and engaging, and we welcome your thoughts as we continue moving forward one hopeful step at a time.

Potential Funding Sources (not inclusive)

- Rural Oregon Continuum of Care
- Runaway and Homeless Youth Grants
- Federal Department of Housing and Urban Development
- American Recovery and Reinvestment Act (Stimulus)
- Federal Emergency Shelter and Food Programs (formerly known as FEMA)
- Rapid Re-Housing Program
- Federal Community Development Block Grants
- Federal Community Services Block Grants
- Foundation and Private Sources

Projects in Process (since inception of this planning effort)

- 10 units of transitional housing (partnership of CARDV and WNHS)
- COI updates:
 - SOAR advocate training
 - Document Storage Services
 - Food Box increase from every 90 days to every 30 days
 - Supportive Housing Program (SHP) partnership with Linn-Benton Housing Authority for permanent housing
 - HUD VASH permanent housing vouchers through the Veterans Administration
 - Increase in one full-time mental health counselor
 - Increased frequency of dental vans through Medical Teams International
 - Participating in the Online Resource Guide committee

The National Coalition for Homeless Veterans estimates that on any given night, 271,000 veterans are homeless.

Goal 1: Prevent people from becoming homeless by supplying services that allow them to obtain housing or maintain their current housing status.

Keeping a family or individual in their homes is more cost-effective than placing them back in housing after a period of homelessness. Goal 1 offers strategies that will address barriers that put families and individuals at risk of losing their homes.

Strategy One (1.1): Supportive Services- Supportive services are intended to assist both the homeless and those at risk of becoming homeless in transitioning and integrating from the streets or shelters into a more permanent form of housing.						
	Strategy	Action	Time Frame	Proposed Partner	Cost	Potential Funding Sources
1.1 A	Expand availability of temporary rent assistance through discretionary funding that bridges the gap between permanent housing availability and the time the tenant secures long-term means to pay rent (i.e., Section 8, other assistance and/or self-supports). Link to "Second Chance" and "Ready to Rent" education.	<ul style="list-style-type: none"> ■ Renewal of the Second Chance Program (C) ■ Fundraise and advocate for discretionary funding for rent ■ Apply for grants 	Ongoing	<ul style="list-style-type: none"> ■ Linn-Benton Housing Authority ■ Community Services Consortium 	\$\$\$	<ul style="list-style-type: none"> ■ HUD programs ■ Rural Oregon Continuum Of Care ■ AARA ■ Agency budgets ■ Private funders
1.1 B	Identify and prioritize preservation properties such as existing rent-assisted housing as well as preserve rental subsidies.	<ul style="list-style-type: none"> ■ Properties identified ■ Priorities to be determined based on owner intent and market opportunities 	Ongoing	<ul style="list-style-type: none"> ■ Willamette Neighborhood Housing Services ■ Linn-Benton Housing Authority ■ City of Corvallis Housing Division 	\$	<ul style="list-style-type: none"> ■ CDBG ■ State CFC ■ HUD ■ Private funding ■ OHCS ■ VA ■ Private funders

Legend:

- \$ = \$50,000
- \$\$ = \$50,000 to \$100,000
- \$\$\$ = \$100,00 to \$250,000
- \$\$\$\$ = \$250,000 and up
- (C) = Currently in progress

Goal 1: Prevent people from becoming homeless by supplying services that allow them to obtain housing or maintain their current housing status.

(Continued from previous page)

1.1 C	Support both existing and new transitional housing and supportive services for people moving out of institutional settings (hospital, jail, detox program, etc.) and needing a temporary stay in supervised, a community-based setting.	<ul style="list-style-type: none"> ■ Evaluate project needs by type ■ Prioritize projects (based on need, funding, and presence of sponsor) 	1-5 yrs On-going	<ul style="list-style-type: none"> ■ COI ■ Center Against Rape and Domestic Violence ■ Samaritan Health Services ■ Sheriff's Office ■ Benton County Mental Health/Community Health Clinics ■ Oxford House ■ Corvallis Shelter Coalition 	\$\$\$	<ul style="list-style-type: none"> ■ HUD programs ■ VA ■ CDBG ■ HOME ■ State CFC ■ Agency budgets ■ Private funders ■ Samaritan Health Services
1.1 D	Identify and apply for funds to provide project-based rental subsidies to serve homeless individuals and families with little or no income.	<ul style="list-style-type: none"> ■ By creating a pot of funds and identified housing/rental vouchers, the plan will enable people to move straight into Housing First 	On-going	<ul style="list-style-type: none"> ■ Willamette Neighborhood Housing Services ■ Linn-Benton Housing Authority ■ City of Corvallis Housing Division ■ CSC ■ Benton County ■ CDDC; Project Action 	\$\$	<ul style="list-style-type: none"> ■ HUD programs ■ VA ■ Section 8 ■ HPRP ■ Population-Based Funding ■ Agency budgets ■ Private funding



Goal 1: Prevent people from becoming homeless by supplying services that allow them to obtain housing or maintain their current housing status. *(Continued from previous page)*

Strategy Two (1.2): Medical- It is said that many of the community's low-income persons are often only a paycheck away from falling into homelessness. While economic problems and evictions are often the final event leading to homelessness, it is important to understand what is causing the financial strain. For many individuals and families, this event can be extenuating medical costs.						
	Strategy	Action	Time Frame	Proposed Partner	Cost	Potential Funding Sources
1.2 A	Ensure those in need are referred to the most appropriate services.	<ul style="list-style-type: none"> ■ Expand coordination of service providers (C) ■ Streamline information and referral (C) ■ Expand availability of existing services 	3-5 yrs	<ul style="list-style-type: none"> ■ COI ■ Benton County Health Department ■ Samaritan Health Services ■ Corvallis Clinic ■ Independent Physicians ■ Community Health Clinics 	\$\$	<ul style="list-style-type: none"> ■ City of Corvallis Social Services ■ CDBG-Human Services ■ United Way ■ Private Funders
1.2 B	Expand on community-based outpatient mental health	<ul style="list-style-type: none"> ■ Fundraising ■ Fill the need for increased caseworkers 	3-5 yrs	<ul style="list-style-type: none"> ■ Benton County Health Department/Community Health Clinics ■ Samaritan Health Services ■ COI 	\$\$\$	<ul style="list-style-type: none"> ■ City of Corvallis Social Services ■ United Way ■ Agency budgets ■ Private funders
1.2 C	Sustain funds to support the homeless in healthcare, specialists, medication, or other unmet needs.	<ul style="list-style-type: none"> ■ Keep thorough records of the success of this project through CDDC; Project Action ■ Fundraising 	1-3 yrs	<ul style="list-style-type: none"> ■ CDDC; Project Action 	\$\$	<ul style="list-style-type: none"> ■ City Of Corvallis Social Services ■ CDBG ■ Samaritan Health Services ■ Agency budgets ■ Private funders
1.2 D	Increase the capacity of already existing organizations to provide low- and no-cost dental assistance.	<ul style="list-style-type: none"> ■ Fundraising ■ Increase access to existing services ■ Formation of Benton County Dental Access Task Force (C) ■ Boys and Girls Club (C) 	3-5 yrs	<ul style="list-style-type: none"> ■ Love INC. ■ Boys and Girls Club ■ COI ■ Benton County Health Department/Community Health Clinics ■ Oregon Oral Health Coalition ■ Samaritan Health Services ■ Assistance League Of Corvallis ■ Oregon Dental Association 	\$\$\$	<ul style="list-style-type: none"> ■ United Way ■ Agency budgets ■ Private funders ■ NW Medical International

Goal 2: Expand, develop, and coordinate the supply of affordable housing for both the homeless and those at risk.

The noted lack of affordable housing in Benton County necessitates the addition of new units as well as the preservation of units that already exist. This document intends to address the needs of those who are homeless as well those who are at risk of losing their homes by adopting a Housing First approach and addressing fair and affordable rental stock, emergency/transitional housing and permanent supportive housing.

Strategy One (2.1): Emergency and Transitional -Emergency housing is intended for short-term stays. Transitional housing is short-term supportive housing used to facilitate the movement of homeless individuals and families into independent living.						
	Strategy	Action	Time Frame	Proposed Partner	Cost	Potential Funding Status
2.1 A	Create 4 units of transitional housing for homeless and runaway youth.	<ul style="list-style-type: none"> ■ Identify sponsor ■ Design program ■ Design facility ■ Fundraise ■ Buy/rehab facility 	3-5 yr	<ul style="list-style-type: none"> ■ Jackson Street Youth Shelter ■ Commission on Children and Families ■ Department of Human Services 	\$\$\$\$	<ul style="list-style-type: none"> ■ DHS ■ State CFC ■ CDBG ■ Federal Grants ■ Private funders ■ Agency budgets
2.1 B	Expand the transitional housing offered to those suffering mental illness by 10 new units.	<ul style="list-style-type: none"> ■ Identify sponsor ■ Design program ■ Design facility ■ Fundraise ■ Buy/rehab facility 	3-5 yr	<ul style="list-style-type: none"> ■ Janus House ■ COI ■ Adult Probation and Parole ■ Benton County Mental Health 	\$\$\$\$	<ul style="list-style-type: none"> ■ Population-based funding ■ CDBG ■ HOME ■ State CFC ■ Agency budgets ■ Private funding
2.1 C	Maintain our existing system of emergency shelters for families, survivors of domestic violence, and people receiving treatment services.	<ul style="list-style-type: none"> ■ Fundraising ■ Education 	Ongoing	<ul style="list-style-type: none"> ■ COI ■ Center Against Rape and Domestic Violence ■ McKinney Vento Liaison ■ Jackson Street Youth Shelter 	\$\$	<ul style="list-style-type: none"> ■ Agency budgets ■ Private funding ■ CSC ■ City of Corvallis Social Services ■ CDBG

Homelessness and poverty are inextricably linked. Poor people are frequently unable to pay for housing, food, childcare, health care, and education. Being poor means being an illness, an accident, or a paycheck away from living on the streets.

Goal 2: Expand, develop, and coordinate the supply of affordable housing for both the homeless and those at risk.

(Continued from previous page)

	Strategy	Action	Time Frame	Proposed Partner	Cost	Potential Funding Status
2.1 D	Establish new shelter systems for individuals that cannot be served in a treatment-oriented setting.	<ul style="list-style-type: none"> ■ Identify Sponsor ■ Design Program ■ Design Facility ■ Fundraise ■ Buy/rehab or build 	1-3 yr	<ul style="list-style-type: none"> ■ Corvallis Homeless Shelter Coalition ■ Community Outreach Inc. 	\$\$\$	<ul style="list-style-type: none"> ■ Grants ■ Private funders ■ City/County ■ Agency budgets
2.1 E	Develop additional units of Permanent Supportive Housing that links permanent and affordable housing to supportive services with a focus on the following populations: <ul style="list-style-type: none"> ■ homeless families (50 units) ■ domestic violence survivors (10 units) ■ alcohol &/or drug addicted (10 units) ■ mentally ill (50 units) ■ veterans (35 units) 	<ul style="list-style-type: none"> ■ Evaluate and project needs by type ■ Prioritize projects (need, feasibility, funding, presence of sponsor) ■ Design program(s) ■ Design housing ■ Fundraise ■ Buy/Rehab or Build 	On-going	<ul style="list-style-type: none"> ■ Willamette Neighborhood Housing Services ■ Linn Benton Housing Authority ■ City of Corvallis Housing Division ■ Benton County 	\$\$\$\$	<ul style="list-style-type: none"> ■ HUD programs ■ OHCS ■ VA ■ State CFC ■ Agency budgets ■ CDBG ■ HOME ■ Private funding
2.1 F	Expand on housing and treatment options for supervised sex offenders to 12 units total.	<ul style="list-style-type: none"> ■ Gather data and facts about the at risk population ■ Fundraise 	3-5 yr	<ul style="list-style-type: none"> ■ Adult Parole and Probation 	\$\$\$\$	<ul style="list-style-type: none"> ■ State and County funds ■ Agency budgets ■ Private funding



Goal 3: Increase the capacity of homeless persons for self-support through strategies that identify their risk of homelessness, their needs, and access to appropriate housing with suitable supportive services.

This goal intends to identify and assist individuals who are homeless as well as those at the greatest risk of becoming homeless. By identifying the needs and goals of these at-risk populations, service providers can work with individuals and families to remove barriers to make services more accessible and in return create a more self-sufficient population. By becoming more self-sufficient, this population will become more sustainable and have a quicker turnover through the social services agencies.

Strategy One (3.1): Street outreach worker- There has been an outcry from various service organizations for a street outreach worker that will work directly on the streets connecting homeless who are mentally ill, addicted, or unaware of already existing services in the community.						
	Strategy	Action	Time Frame	Proposed Partner	Cost	Potential Funding Status
3.1 A	Create a trial position for a street outreach worker with experience in the mental health field.	<ul style="list-style-type: none"> ■ Work with CDDC; Project Action to get a match for their current grant 	1-3 yr	<ul style="list-style-type: none"> ■ City of Corvallis ■ CDDC Board ■ St. Mary's Catholic Church ■ Benton County Mental Health ■ COI 	\$	<ul style="list-style-type: none"> ■ Agency Budgets ■ Private Grants ■ CDBG ■ City of Corvallis Social Services
3.1 B	Create a linkage agreement to coordinate services between agencies who service the homeless population.	<ul style="list-style-type: none"> ■ Partners design model ■ Fundraise ■ Execute 	1-3 yr	<ul style="list-style-type: none"> ■ City of Corvallis ■ CDDC Board ■ St. Mary's Catholic Church ■ Benton County Mental Health 	\$\$	<ul style="list-style-type: none"> ■ Agency budgets ■ Private funding
Strategy Two (3.2): Job Training- Job training programs are essential to not only transitioning people out of homelessness but keeping people in their homes. Although there are services being provided, many of them are overburdened and leave out specialized populations.						
3.2 A	Enhance specialized training to help the chronic homeless re-enter the job training field.	<ul style="list-style-type: none"> ■ Enhance a model that helps chronic homeless learn computers and technology (C) 	1-3 yr	<ul style="list-style-type: none"> ■ CSC ■ CDDC; Project Action ■ LBCC 	\$	<ul style="list-style-type: none"> ■ Agency budgets ■ Private funding ■ LBCC
3.2 B	Establish a job bank; day labor site.	<ul style="list-style-type: none"> ■ Determine need/scope, feasibility ■ Design Program ■ Design facility ■ Fundraise ■ Buy/rent/rehab 	3-5 yr	<ul style="list-style-type: none"> ■ COI ■ CSC 	\$\$\$	<ul style="list-style-type: none"> ■ Agency budgets ■ Private funding

Goal 3: Increase the capacity of homeless persons for self-support through strategies that identify their risk of homelessness, their needs, and access to appropriate housing with suitable supportive services.

(Continued from previous page)

Strategy Three (3.3): Daytime Drop-in Centers – Drop-in centers create street-level points of service or referral to services. Often times serving as warming stations during cold weather these centers provide a great opportunity for service providers to outreach to a population in a place in which they are comfortable.						
	Strategy	Action	Time Frame	Proposed Partner	Cost	Proposed Funding Status
3.3 A	Establish a permanent site for the Corvallis Daytime Drop in Center.	<ul style="list-style-type: none"> ■ Determine need/scope ■ Design Program ■ Determine feasibility ■ Design facility ■ Fundraise ■ Buy/rent/rehab 	1-3 yr	<ul style="list-style-type: none"> ■ Corvallis Daytime Drop in Center Coalition 	\$ if Lease \$\$\$ if owned	<ul style="list-style-type: none"> ■ CDDC ■ CDBG ■ CSC ■ Benton County
3.3 B	Establish a walk-in service center for survivors of sexual and domestic violence.	<ul style="list-style-type: none"> ■ Determine need/scope ■ Design Program ■ Determine feasibility ■ Design facility ■ Fundraise ■ Buy/rent/rehab 	1-3 yr	<ul style="list-style-type: none"> ■ Center Against Rape and Domestic Violence ■ Willamette Neighborhood Housing Services 	\$ if Lease \$\$\$ if owned	<ul style="list-style-type: none"> ■ CDDC ■ City of Corvallis Social Services ■ Benton County ■ CSC ■ Private funding ■ CARDV/ WNHS
Strategy Four (3.4): Address Financial Issues - By appropriating discretionary funds that allow people to catch up during a financial shortfall and addressing financial issues at their root causes before they become out of control can prevent homelessness, as well as help people overcomes it.						
	Strategy	Action	Time Frame	Proposed Partner	Cost	Funding Status
3.4 A	Expand on comprehensive discretionary financial assistance programs That include one-time assistance for financial shortfall.		1-3 yr	<ul style="list-style-type: none"> ■ Love INC ■ FISH ■ We Care ■ CDDC; Project Action ■ Willamette Neighborhood Housing Services 	\$\$	<ul style="list-style-type: none"> ■ Private funders ■ City of Corvallis Social Services ■ Agency budgets

Goal 3: Increase the capacity of homeless persons for self-support through strategies that identify their risk of homelessness, their needs, and access to appropriate housing with suitable supportive services. (Continued from previous page)

Strategy Five (3.5): Re-entry- Many people face homelessness upon release from hospitals, prisons, as well as the foster care system. It has been shown that a healthy re-entry into housing without a lapse in shelter and services will keep many people from re-offending as well as end the cycle of homelessness.

	Strategy	Action	Time Frame	Proposed Partner	Cost	Proposed Funding Status
3.5 A	Long-term support network for youth and adolescents being released from foster care and juvenile facilities.	<ul style="list-style-type: none"> ■ Expand on independent living skills programs and skill-based classes while in care ■ Match youth with mentors and sponsors 	1-3 yr	<ul style="list-style-type: none"> ■ Jackson Street Youth Shelter ■ DHS ■ Juvenile Parole and Probation 	\$\$	<ul style="list-style-type: none"> ■ State CFC ■ City/County Social Services ■ Agency budgets ■ Private funders
3.5 B	Long-term support network to support adult re-entry.	<ul style="list-style-type: none"> ■ Match adults with advocates ■ Connect adults with already existing programs post-release (C) 	1-3 yr	<ul style="list-style-type: none"> ■ Adult Parole and Probation ■ New Beginnings 	\$\$	<ul style="list-style-type: none"> ■ City of Corvallis Social Services ■ Benton County ■ Agency budgets ■ Private funders ■ Samaritan Health Services
3.5 C	Long-term support network to support elderly in independent living.	<ul style="list-style-type: none"> ■ Match elderly with advocates 	1-3 yr	<ul style="list-style-type: none"> ■ COI ■ DHS ■ Council of Governments ■ Parrish Nurses 	\$\$	<ul style="list-style-type: none"> ■ City/County Social Services ■ Agency budgets ■ Private funders
3.5 D	Support existing/develop transitional housing/support services for people moving from hospital, jail, detox, etc. and needing short stay in community-based setting.	<ul style="list-style-type: none"> ■ Evaluate project needs by type ■ Prioritize projects (based on need, funding, and presence of sponsor) 	1-5 y	<ul style="list-style-type: none"> ■ COI ■ Center Against Rape and Domestic Violence ■ Samaritan Health Services ■ Sheriff's Office ■ Benton County Mental Health ■ Oxford House 	\$\$\$	<ul style="list-style-type: none"> ■ HUD programs ■ VA ■ CDBG ■ HOME ■ State CFC ■ Agency budgets ■ Private funders ■ Samaritan Health Services

Goal 4: Address the societal stigma about homelessness and create new advocates for prevention through education, awareness, and community dialogue.

This goal intends to remove boundaries through the education of the general public, service providers, and those in positions of power. Through education campaigns on who the homeless population is in the area and how they have found themselves there, the community will be better prepared to offer services.

Strategy One (4.1): Advocates- Advocates can take many forms, from reaching out on a street level to making phone calls and connections that may be hard for someone to do in situation of homelessness. Advocates are essential to connecting people to services and giving each individual a voice.

	Strategy	Action	Time Frame	Proposed Partner	Cost	Potential Funding Status
4.1 A	Assistance in navigating through SSI, SSDI, payee and other social services.	<ul style="list-style-type: none"> ■ Host a SOAR training ■ Have SOAR trained advocates help clients navigate through the process (C) 	1-3 yr	<ul style="list-style-type: none"> ■ PayE INC (A&S Accounting) ■ RSVP ■ DHS ■ Adult Probation and Parole ■ CDDC; Project Action ■ COG ■ Love INC 	\$	<ul style="list-style-type: none"> ■ Private funders ■ Agency budgets
4.1 B	Street-level outreach to bring people off the streets and initiate the continuum of care.	<ul style="list-style-type: none"> ■ Expand on street-level mentoring and advocacy programs that connect with people to educate them about existing services 	1-3 yr	<ul style="list-style-type: none"> ■ CDDC; Project Action ■ Vina Moses ■ Fish ■ Linn Benton Food Share ■ St. Mary's Catholic Church ■ VA 	\$	<ul style="list-style-type: none"> ■ Private funders ■ Agency budgets ■ City of Corvallis Social Services
4.1 C	Create an education and awareness program about existing veterans services.	<ul style="list-style-type: none"> ■ Connect on a street level (see 4.1B) ■ Educate service providers on up-to-date information and programs in order to have the most efficient referrals 	1-3 yr Ongoing	<ul style="list-style-type: none"> ■ CDDC; Project Action ■ Veterans Services ■ COI ■ King's Circle Assembly 	\$	<ul style="list-style-type: none"> ■ VA ■ Agency budgets ■ Private funders

According to the Federal Task Force on Homelessness and Severe Mental Illness, only 5-7% of homeless persons with mental illness require institutionalization; most can live in the community with the appropriate supportive housing options assisting them.

Goal 4: This goal intends to address the societal stigma about homelessness and create new advocates for prevention through education, awareness, and community dialogue.

(Continued from previous page)

Strategy Two (4.2): Education- An education campaign can't be successful unless everyone involved is willing to learn. This strategy plans to outreach to citizens, service providers, and those in positions of power all equally. With a better understanding of the problem, we are better equipped to find the answer.

	Strategy	Action	Time Frame	Proposed Partner	Cost	Proposed Funding Status
4.2 A	Centralize the available information and referral guides into a site that is easy to access and update.	<ul style="list-style-type: none"> ■ Phase I—on-line resource guide ■ Phase II—211 service (Linn, Benton, Lincoln counties) 	1-3 yrs	<ul style="list-style-type: none"> ■ United Way ■ CBC Library ■ Love INC ■ CSC ■ COI ■ OSU ■ Commission on Children/Families 	\$\$	<ul style="list-style-type: none"> ■ Federal ■ State ■ United Way ■ Private funders ■ Agency budgets
4.2 B	Engage partners in ongoing community and information sharing through their own channels and networks.	<ul style="list-style-type: none"> ■ Keep community involved and knowledgeable on subject matter 	1-3 yrs Ongoing	<ul style="list-style-type: none"> ■ Committee members ■ Community members 	\$	<ul style="list-style-type: none"> ■ Agency budgets ■ Private funders
4.2 C	Embrace and engage members of the homeless population as part of the success of the plan.	<ul style="list-style-type: none"> ■ Keep community involved and knowledgeable on subject matter ■ Have community meetings to update on the progress of the plan as well as receive feedback (C) 	1-3 yrs Ongoing	<ul style="list-style-type: none"> ■ CDDC; Project Action ■ CSC ■ COI 	\$	<ul style="list-style-type: none"> ■ Agency budgets ■ Private Funders



According to the National Law Center on Homelessness and Poverty, 2004, unaccompanied minors comprised 5% of the urban homeless population. In other cities and especially in rural areas, however, the numbers of children experiencing homelessness are much higher.

Goal 5: Create a system of data collection and community accountability to sustain homeless programs.

It is important that all of our goals and strategies have measurable outcomes that make it possible for service providers to know if a solution is being met. By applying a standard for collecting data the information brought in would be more comprehensive and credible.

Strategy One (5.1): Information Evaluation and Accountability- It is imperative to collect information about those who are receiving services in order to better serve them and others in the future. This is done by implementing a comprehensive system accessible by even those with lower-level technological capabilities to collect data in order to produce measurable outcomes and track the results of social service programs.						
	Strategy	Action	Time Frame	Proposed Partner	Cost	Potential Funding Status
5.1 A	Adopt a local system which will collect the same basic demographic information from those accessing shelters and social services	<ul style="list-style-type: none"> ■ Determine information needed ■ Determine best practices in which to collect information 	3-5yrs Ongoing	<ul style="list-style-type: none"> ■ HMIS ■ Homeless Management Information System ■ CSC ■ Oversight Committee 	\$\$	<ul style="list-style-type: none"> ■ Agency Budgets ■ City of Corvallis Social Services ■ Benton County
5.1 B	Implement an oversight committee that will take part in making sure that the Plan is followed in a timely fashion with measurable outcomes that the community can count on	<ul style="list-style-type: none"> ■ Implement an Oversight Committee ■ Report to the community with no less than Annual Reports of progress made 	1-3 yrs to implement Oversight will be ongoing	<ul style="list-style-type: none"> ■ Ten-year plan committee ■ Community partners 	\$	<ul style="list-style-type: none"> ■ CSC ■ City of Corvallis Social Services ■ Benton County
5.1 C	Create a regional oversight committee comprised of members of Linn, Benton, and Lincoln counties.	<ul style="list-style-type: none"> ■ Begin conversation about regional homeless issues specifically around transportation, medical detox and medical respite care 	1-5 yrs Ongoing	<ul style="list-style-type: none"> ■ Oversight committee members ■ Community partners 	\$- \$\$\$\$	

*People who become homeless do not fit one general description. However, people experiencing homelessness **do** have certain shared basic needs, including affordable housing, adequate incomes, and health care. Some homeless people may need additional services such as mental health or drug treatment in order to remain securely housed. **All of these needs must be met to prevent and to end homelessness.***

Glossary of Terms

Affordable Housing: The generally accepted definition of affordability is for a household to pay no more than 30 percent of its annual income on housing. Families who pay more than 30 percent of their income for housing are considered cost burdened and may have difficulty affording necessities such as food, clothing, transportation, and medical care. (HUD)

An estimated 46% of renter and homeowner households in Benton County now pay more than 50 percent of their annual incomes for housing, and a family with one full-time worker earning the minimum wage cannot afford the local fair-market rent for a two-bedroom apartment.

AmeriCorps*VISTA (Volunteer in Service to America): A volunteer, employed by the Corporation for National and Community Service, who provides capacity building services to a poverty relief-focused non-profit agency for one year.

Area Median Income (AMI): AMI is the midpoint in the income distribution within a specific geographic area. By definition, 50% of households earn less than the median income, and 50% earn more. HUD calculates AMI levels for different communities annually, with adjustments for family size. AMI is used to determine the eligibility of applicants for both federally and locally funded housing programs.

*In Fiscal Year 2008, the Area Median Income in Benton County was \$53,100.

Center against Rape and Domestic Violence (CARDV): An emergency and transitional shelter for those affected by sexual and domestic violence that also provides services, support and advocacy.

Community Services Consortium (CSC): A non-profit Community Action Agency that develops, manages, and provides services and support to individuals and families who lack sufficient financial resources to meet their basic needs.

Community Outreach, Inc. (COI): a multi-faceted human service organization provides hope for men, women, and children who are homeless and very low income in the mid-Willamette Valley.

Continuum of Care: A community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness. (HUD)

Co-Occurring Disorders (Dual Diagnosis): A diagnosis that describes both a mental disability and a substance abuse disorder.

Cost Burden: Refers to a household's gross rent that exceeds 30 percent of the household's income. Gross rent is the contract rent plus the average monthly cost of utilities.

ELI: Extremely low income.

Emergency Shelter: Any facility for which the primary purpose is to provide temporary or transitional shelter for the homeless in general or for specific populations of the homeless (HUD). Space is available to all who need.

Entitlement Community: Any city with residency of 50,000 or more or county with residency of more than 200,000 and recognition as a participating jurisdiction under the HOME program.

Fair Market Rent (FMRs): Fair Market Rents (FMRs) are primarily used to determine payment standard amounts for the Housing Choice Voucher program, to determine initial renewal rents for some expiring project-based Section 8 contracts, to determine initial rents for housing assistance payment (HAP) contracts in the Moderate Rehabilitation Single Room Occupancy program (Mod Rehab), and to serve as a rent ceiling in the HOME rental assistance program (HUD – based on the 40th percentile of the rental market).

The Fiscal Year 2008 FMRs for Benton County are as follows:

Efficiency: \$506

One-bedroom: \$613

Two-bedroom: \$764

Three-bedroom: \$1,110

Four-bedroom: \$1,277

HMIS (Homeless Management Information System): A database used to streamline intake of services consumed and confidentially track data on homeless people who use the housing and service systems. HMIS may be used to evaluate the outcomes of the Ten-Year Plan.

HOME: Housing Opportunities Made Equal. This is a funding source for creating and supporting housing for the homeless.

Homeless: Any person who does not have a permanent place to live, which includes those at imminent risk of homelessness* (this is the definition that the Benton County Ten Year Plan to End Homelessness Steering Committee has chosen to use as their definition.

This includes the HUD definition of: (1) an individual who lacks a fixed, regular, and adequate nighttime residence; and (2) an individual who has a primary nighttime residence that is: A) a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill); B) an institution that provides a temporary residence for individuals intended to be institutionalized; or C) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

HUD's definition of chronic homelessness is also acknowledged: 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 episodes of homelessness in the past three years. To be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation (living on the streets) and/or in emergency shelter during that time.

*At imminent risk of homelessness includes: those facing eviction; those facing foreclosure, forfeiture, or tax crisis; those with shut-off notices or current disconnection of basic utilities; those with an order to vacate their home for health or safety reasons by a governmental body; those experiencing domestic violence; or those with existing housing which is unlivable (not defined by a governmental body).

Housing First: A “housing first” approach rests on two central premises: 1) Re-housing should be the central goal of working with people experiencing homelessness; and (2) Providing housing assistance and follow-up case management services after a family or individual is housed can significantly reduce the time people spend in homelessness. Case management ensures individuals and families have a source of income through employment and/or public benefits, identifies service needs before the move into permanent housing, and works with families or adults after the move into permanent housing to help solve problems that may arise that threaten their tenancy including difficulties sustaining housing or interacting with the landlord and to connect families with community-based services to meet long term support/service needs. (The National Alliance to End Homelessness)

Housing Plus: Refers to housing where residents are encouraged to accept support services necessary to help them maintain their housing. The term is another way of referring to “permanent supportive housing,” but puts the emphasis on “housing *plus* intensive services” for people with serious disabilities.

HUD: The United States Department of Housing and Urban Development.

Jackson Street Youth Shelter (JSYS): A private, non-profit agency that provides services to youth and their families, including emergency and transitional shelter for girls and boys aged 10-17 who are experiencing crisis in their lives.

Linn-Benton Housing Authority (LBHA): A regional public corporation created by Linn and Benton Counties to provide decent, safe and sanitary housing for low-income residents.

Low Income: Defined by the U.S. Department of Housing and Urban Development as at or below 80% of the Area Median Income (AMI).

Very- Low Income: Defined by the U.S. Department of Housing and Urban Development as at or below 50% of the Area Median Income (AMI)

Extremely Low Income: Defined by the U.S. Department of Housing and Urban Development as at or below 30% of the Area Median Income (AMI)

Oregon Cascades West Council of Governments (COG): As a voluntary association of twenty-one cities, three counties, the Confederated Tribes of the Siletz Indians and two port districts, the COG provides member governments and the people living within the region a broad range of programs and services.

Permanent Supportive Housing: Long-term, community-based housing that has supportive services for homeless individuals with disabilities. This type of supportive housing enables special needs populations to live as independently as possible in a permanent setting. The supportive services may be provided by the organization managing the housing or coordinated by the applicant and provided by other public or private service agencies. Permanent housing can be provided in one structure or several structures at one site or in multiple structures at scattered sites. (HUD)

Furnished single room occupancies (SRO's): A residential property that includes multiple single room dwelling units. Each unit is for occupancy by a single eligible individual. The unit need not, but may, contain food preparation or sanitary facilities, or both. (HUD)

Group homes

Subsidized Section 8 apartments

Shared living arrangements

Section 8 Housing Choice Voucher Program: The Section 8 Housing Choice Voucher Program increases affordable housing choices for very low-income households by allowing families to choose privately owned rental housing. The public housing authority (PHA) generally pays the landlord the difference between 30 to 40 percent of household income and the PHA-determined payment standard-about 90 to 110 percent of the fair market rent (FMR). The rent must be reasonable. The household may choose a unit with a higher rent than the FMR and pay the landlord the difference. (HUD)

SOAR: SSI/SSDI Outreach, Access, and Recovery. Sponsored by the Departments of Health and Human Services, Housing and Urban Development, Labor, and Veterans Affairs, the goal is to help States and communities increase access to SSI and SSDI for homeless people with mental illnesses and/or co-occurring substance use disorders. Homeless advocates and service providers are trained in assisting homeless individuals in applying for SSI and SSDI.

Supportive Housing: Housing designed to support individuals, not just socially, but with basic life skills. Housing is coupled with social services such as job training, alcohol and drug abuse programs and case management. Often targeted at low-income workers and populations in need of assistance such as the homeless, those suffering from mental illness or substance abuse problems, and the elderly or medically frail.

Supportive Services: Services that assist homeless participants in the transition from the streets or shelters into permanent or permanent supportive housing, and that assist persons living successfully in housing. (HUD)

Transitional Housing: One type of supportive housing used to facilitate the movement of homeless individuals and families to permanent housing. Basically, it is housing in which homeless persons live for up to 24 months and receive supportive services that enable them to live more independently. The supportive services may be provided by the organization managing the housing or coordinated by them and provided by other public or private agencies. (HUD)

VLI: Very low income.

Willamette Neighborhood Housing Services (WNHS): A private, nonprofit community development corporation whose mission is the creation of safe, decent, affordable housing and healthy neighborhoods.



Additional Resources

In addition to the information and sources cited in this text, a wealth of additional information about homelessness and affordable housing is available on the Internet.

Oregon Housing and Community Services:

<http://www.ohcs.oregon.gov/>

Oregon Ending Homelessness Advisory Council:

<http://www.ehac.oregon.gov/>

U.S. Interagency Council on Homelessness:

<http://www.usich.gov/>

National Alliance to End Homelessness:

<http://www.endhomelessness.org/>

National Coalition for the Homeless:

<http://www.nationalhomeless.org/>

The National Low-Income Housing Council:

<http://www.nlihc.org/template/index.cfm>

The National Coalition for Homeless Veterans:

<http://www.nchv.org/>

The National Center for Homeless Education:

<http://www.serve.org/nche/>

The National Resource Center on Homelessness and Mental illness:

<http://www.nrchmi.samhsa.gov/Default.aspx?AspxAutoDetectCookieSupport=1>

The National Law Resource Center on Homelessness:

<http://www.nlchp.org/>

The National Student Campaign Against Hunger and Homelessness:

<http://www.serve.org/nche/>

U.S. Department of Housing and Urban Development homeownership:

<http://www.hud.gov/initiatives/homeownership/index.cfm>

The National Housing Council:

<http://www.nhc.org/>

The Housing Assistance Council focuses on the needs of the rural poor:

<http://www.ruralhome.org/>

The Fair Housing Council of Oregon:

<http://www.fhco.org/index.html>

“Million Dollar Murray” is an article by Malcolm Gladwell that appeared in the February 13, 2006 issue of the New Yorker magazine. It provides an excellent introduction to the concept of Permanent Supportive Housing. The article is available at:

http://www.gladwell.com/2006/2006_02_13_a_murray.html

“Raise the Roof” a 2003 report, provides a good overview of Oregon’s affordable housing issues and some possible approaches. It is available at:

<http://oregonaction.org/pdf/raisetherooft.pdf>

“Best Practices in Affordable Housing” is a study by the Urban Land Institute. It is available at:

<http://www.uli.org/AM/Template.cfm?Section=Home&CONTENTID=42837&TEMPLATE=/CM/ContentDisplay.cfm>

The Western Regional Advocacy Project (WRAP) released a report in 2006 that documents the decline in investment in affordable housing at the federal level and its consequences. It is available at:

<http://www.wraphome.org/>

American Planning Association: Policy guide on homelessness (for City/County planners, city councils, county commissioners) – <http://www.planning.org/policyguides/homelessness.htm>

Homelessness: tragic side effect of non-treatment: fact sheet: severe mental illness – <http://www.treatmentadvocacycenter.org/generalresources/fact11.htm>

There's No Place Like Home ...



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