

3. The Homeless and Persons with Special Needs

Nature and Extent of Homelessness

On January 28, 2005, the St. Joseph Continuum of Care Homeless Services Coalition surveyed the local shelters to count this community's sheltered and unsheltered population. The point-in-time survey identified 88 sheltered individuals and 6 unsheltered chronically homeless persons on that date. The six individuals that were unsheltered were chronically homeless females. The 88 shelter individuals were staying at the Cold Weather Shelter, The Salvation Army Booth Center, and the YWCA Women's Shelter.

Sixty-nine of the sheltered individuals were White, 15 were African American, and 4 were African American/White. None of the individuals that were in the shelters on that particular day reported a Hispanic ethnicity.

InterServ's Cold Weather Shelter III served 120 unduplicated men during its 88 nights of operation during January-March 2005. On the night of the survey, there were 19 men in the Cold Weather Shelter; it was filled to capacity (16 beds) and three men were tucked into bedrolls on the floor. Each of the 19 men would have been unsheltered, had the temporary three-month program not been available.

The Street Survey sub-committee, a group composed of three CoC committee members and a homeless person, conducts annual street surveys. In 2003, this committee found 36 men living on the streets. In 2004, through the efforts of the staff of the Cold Weather Shelter, many of the chronically homeless men were assisted in locating permanent housing. Now in 2005, because the Cold Weather Shelter has closed for the season, there are fifteen males living on the streets. There are also six women.

Data Collection

Statistical information on the number of homeless in the community is hard to gather. Agencies collect data based on the requirements of their funding sources; therefore, if they do not receive funding for homeless programs, they normally do not track the information.

In order to gather better data on the chronically homeless, two types of counts have been conducted: (1) a *Homeless Shelter Survey* that was emailed to area agencies to count the

sheltered homeless, and (2) a street count of non-sheltered homeless was done. The CoC Gaps Analysis sub-committee designed the survey, emailed it to agencies and organizations that assist the homeless, and tabulated the results. The sub-committee selected January 28, 2005 as the point-in-time for data collection. It was one of the coldest nights of the winter, the shelters were full and the Cold Weather Shelter reported an overflow.

The *Homeless Shelter Survey* was distributed to eight agencies. Each of the contact-agencies responded to the survey with their statistical information. The agencies that were surveyed provided data from administrative records for the sheltered population.

The Gaps Analysis sub-committee is responsible for implementing an annual survey of all agencies and organizations listed in the CoC System Housing Activity Chart. The sub-committee also distributes a survey to all CoC member agencies to annually collect data for the purpose of updating access of services by the chronically homeless and determining future plans. To ensure accuracy of data, members of the Gaps Analysis committee personally contacts any agency that does not respond to the survey. In January of 2005, the CoC began its annual effort to collect and update the sheltered and unsheltered counts to identify the gaps and begin looking at the community's priorities for the 2005 Supportive Housing Program (SHP) competition.

The HMIS system is a relatively new data collection tool for this community. In the future, it will provide critical statistical information for tracking the number of beds and the populations of homeless in our community.

Continuum of Care Coordinates Facilities and Services for Persons That Are Homeless

The St. Joseph Continuum of Care Homeless Services Coalition (CoC) continues to solidify old partnerships and create new ones among community leaders, human service organizations, the faith community and the City of St. Joseph to address the needs of the chronic homeless. The CoC, striving to gain the homeless community's trust, is becoming more attuned to their needs and the reasons for their homelessness. Thus, our agencies can tailor services to address actual needs, not perceived needs. To gain a more accurate count of the homeless population and to track and coordinate services for St. Joseph's chronic homeless population, our homeless shelters and eight service organizations collect client data through an HMIS database. They also collect data on the precariously housed and those receiving rent and utility assistance, food pantry orders, and medical care from the Social Welfare Board of Buchanan County.

For the third year in a row, the CoC continued its partnership with InterServ, the Open Door Food Kitchen, and members of the faith community through operation of the Cold Weather Shelter. This temporary Shelter, available during the months of January through March in 2003, 2004, and again in 2005, offered refuge from the cold for homeless men that had “burned their bridges” at another shelter, either by refusing to observe rules or by exhibiting objectionable behaviors. The Cold Weather Shelter provided 1,421 nights of warm shelter for 120 different men in 2005, an increase of 26% over the previous year. By late 2005, all of the invaluable information regarding the needs of chronically homeless men gleaned from three years’ experiences operating the Cold Weather Shelter, tours of successful havens, and interviews with staff from those havens will converge in our community when InterServ completes and opens both Juda House and the St. Joseph Haven.

The Salvation Army has re-evaluated some of its policies to create a more accessible atmosphere, and now its staff includes a full time Veterans’ Representative. This caring person helps veterans seek benefits and services they need and to which they are entitled. A representative from the 4th District-American Legion Department of Missouri Homeless Veterans Task Force is now involved with the CoC.

The Social Welfare Board conducted focus groups at homeless shelters and meal sites and identified barriers to healthcare. A Homeless Advisory Committee now brings issues and concerns to the attention of the agency’s Board of Directors and to the CoC. The CoC’s goal is to have a Nurse Practitioner and Medical Social Worker available for onsite medical care and case management for residents of the YWCA Women’s Shelter, The Salvation Army Booth Center, the temporary Cold Weather Shelter, and eventually, St. Joseph’s Haven and Juda House. Doing so, will address many barriers relating to health issues.

The Community’s CoC Planning Process

The CoC’s planning process includes monthly meetings and subcommittee assignments. There are 38 member agencies represented by 70 individuals. Our sub-committees include: 1) Unmet Needs, 2) Unmet Needs/Homeless sub-committee, 3) Street Survey Committee, 4) Transitional Housing Committee, 5) HMIS Planning and Implementation, 6) Home Plan Sub-committee, 7) Cold Weather Shelter, and 8) Permanent Housing. The Permanent Housing Committee is divided into three sub-committees that are addressing issues relating to information and referrals, homeownership, and landlords/tenants. The Information sub-committee is working with owners of rental property to develop a database of available, affordable housing that CoC agencies can access.

Other task groups are organized as needed. Each sub-committee regularly reports to the CoC. Minutes of the plenary and sub-committee meetings are transcribed and distributed to all members.

The structure of the St. Joseph CoC enables member agencies to communicate and address issues. Member agencies present an overview of their services and eligibility guidelines to help the CoC avoid overlap and duplication of services. Such knowledge also helps those involved in case management to match the needs of clients to appropriate service providers. The electronic media is very helpful; case managers that have news to share or need help in solving a client's problems utilize e-mail for quick communication and almost instant response.

The CoC developed a card system for clients who utilize area food pantries. The card is obtained through the Social Welfare Board. It entitles the bearer to six months of use in obtaining food pantry services. Each time the client presents the card at a food pantry, the card is stamped with that pantry's unique stamp. This system provides a means of tracking the use of specific pantries, reduces fraud and duplication of services.

The Emergency Assistance Committee meets regularly to coordinate funding for utility assistance. Agencies report on available funding so that appropriate referrals can be made. Sharing this information amongst service providers prevents needy families from being bounced from one agency to another in search of assistance.

**Chart 44:
Continuum of Care Planning Process Organizations**

Specific Names of CoC Organizations/Persons	Geographic Area Represented	Subpopulations Represented, if any*	Level of Participation (activity and frequency) in Planning Process
State agencies:			
Albany Regional Center	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI, Y	Active participant of monthly CoC planning meetings and Corrections/Discharge Policy sub-committee chaired By-Laws sub-committee, member of HMIS sub-committee. Participates in Outreach and Awareness activities. Member of Permanent Housing Committee and its Information/Referral sub-committee.
Missouri Department of Mental Health	State of Missouri	SMI, SA	Transitional housing sub-committee member, attends most monthly meetings, provides technical services.

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Family Services Division	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI, Y	Unmet Needs committee member, attends most monthly CoC meetings; serves on Corrections/Discharge Policy sub-committee, and Permanent Housing Committee.
Department of Health	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	HIV/AIDS, Y	Attends most monthly plenary meetings and actively involved in Corrections/Discharge Policy sub-committee.
Department of Health and Senior Services	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	HIV/AIDS, VETS	Actively involved with Permanent Housing Committee and its Information and Referral sub-committee and attends all Corrections/Discharge Policy sub-committee meetings.
Northwest Missouri Psychiatric Rehab Center	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI, VETS	Attends some monthly CoC meetings; several employees are actively involved members of Corrections/Discharge Policy sub-committee.
Social Security Administration	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI	Unmet Needs committee member who maintains contact with CoC
Western Reception Diagnostic Correctional Center	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	VETS	Active participant of Corrections/Discharge Policy Sub-committee and Permanent Housing Committee.
Local government agencies:			
City of St. Joseph	St. Joseph	Sub-contracts and funds Programs for DV, Y, SMI	Attends all CoC meetings; Serves as Chair and lead entity; active with Transitional Housing sub-committee, Unmet Needs Committee and Unmet Needs/Homeless sub-committee, Permanent Housing Information and Referral sub-committee, and Scattered Site Housing sub-committee. In HMIS network.
Social Welfare Board of Buchanan County	Buchanan County and City of St. Joseph	HIV/AIDS, DV	Unmet Needs Committee member, attends all monthly CoC planning meetings, actively involved with Permanent Housing sub-committee, HMIS Implementation, Corrections/Discharge Policy sub-committees, and Cold Weather Shelter Committee. In HMIS network. Chair of Health Services sub-committee. Is CoC's Secretary.
St. Joseph/Buchanan County Health Department	Buchanan County and City of St. Joseph	HIV/AIDS, Y	Attends most monthly CoC planning meetings and serves on Corrections/Discharge Policy sub-committee.

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Public Housing Authorities (PHAs):			
Community Housing Ministry, Inc.	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	Manages HUD subsidized housing for seniors and SMI in St. Joseph, all subsidized housing in rural areas of Buchanan, Andrew, Clinton, and DeKalb Counties.	Member of Transitional Housing Task Force, attends some CoC planning meetings and meetings of Permanent Housing sub-committee. In HMIS network.
St. Joseph Housing Authority	St. Joseph	Y (and very low income families)	Maintains contact.
Nonprofit organizations: (includes Faith-Based organizations):			
AFL/CIO Community Services	18 counties of Northwest Missouri and Doniphan County, KS	VETS, SMI, Y	Unmet Needs Committee member that actively participates in Unmet Need/Homeless sub-committee; attends most monthly CoC meetings and HMIS sub-committee, attends Transitional Housing and is actively involved with Permanent Housing-Information and Referral sub-committees. In HMIS network. Participates in Outreach and Awareness activities. Involved in planning for Cold Weather Shelter.
Catholic Charities of Kansas City-St. Joseph	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI, SA, Y	Member of Unmet Needs Committee, Unmet Needs/Homeless sub-committee, attends all monthly CoC meetings, member of Transitional Housing, Corrections/Discharge Policy, Permanent Housing, Housing Information sub-committee, and HMIS sub-committees. In HMIS network. Participates in Outreach and Awareness activities. Involved in planning for Cold Weather Shelter.
Catholic Charities Restorative Justice	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI, SA	New member attending all meetings of Corrections/Discharge Policy sub-committee.
Economic Opportunity Corporation	Andrew, Buchanan, Clinton, DeKalb	Y, DV	Member of Unmet Needs Committee, attends most monthly

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	Counties, St. Joseph		CoC meetings, member of Transitional Housing, Permanent Housing, and HMIS sub-committees. In HMIS network. Participates in Outreach and Awareness activities. Involved in planning for Cold Weather Shelter.
Family Guidance Center for Behavioral Healthcare	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI, SA	Attends most monthly CoC meetings, actively involved in Corrections/Discharge Policy sub-committee. Involved in planning for Cold Weather Shelter, and provided training of volunteers/staff of Cold Weather Shelter.
Fellowship House	Buchanan County, St. Joseph	SA	New participant attending all meetings of Corrections/Discharge Policy sub-committee.
R. Mike Feurt, 4 th District-American Legion Department of Missouri Homeless Vet's Task Force	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	VETS	Newly recruited member that attends most CoC plenary meetings and Corrections/Discharge Policy sub-committee.
Interfaith Community Services, Inc. (InterServ)	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	Y, DV	Member of Unmet Needs Committee, Unmet Needs/Homeless sub-committee, attends all monthly CoC meetings, chairs Transitional Housing sub-committee and Transitional Housing Task Force, involved with Permanent Housing Committee, member of HMIS sub-committee. In HMIS network. Participates in Outreach and Awareness activities. Facilitates homeless surveys. Provides outreach to homeless. Lead agency for planning and staffing Cold Weather Shelter, recruiting and training volunteers, and soliciting contributions for the pilot program. Lead agency for planning, construction, staffing and operation of Juda House and St. Joseph's Haven when construction is completed.
Habitat for Humanity	St. Joseph	Y (and their families)	Attends some of monthly CoC meetings, member of Permanent Housing sub-committee.
Helping Hand of Goodwill Industries	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI, SA, VETS	Active member of Unmet Needs Committee, Unmet Needs/Homeless sub-committee, attends most monthly CoC meetings,

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			member of Transitional Housing and Outreach and Awareness sub-committees. Participates in Outreach and Awareness activities.
Legal Aid of Western Missouri	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SA, DV, SMI,	Member of Unmet Needs Committee that attends most of the monthly CoC meetings, Corrections/Discharge Policy sub-committee, developed and coordinated survey of homeless at Open Door Food Kitchen, active in Permanent Housing Committee.
Midland Empire Resources of Independent Living (MERIL)	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	Y, VETS	Maintains contact.
Mission St. Joseph	St. Joseph	SMI	Participated in planning of Cold Weather Shelter, member of Transitional Housing task force; attends some of monthly CoC meetings.
Open Door Food Kitchen	St. Joseph	VETS, SA, SMI	Attends most monthly CoC meetings, assisted with survey of homeless and planning for Cold Weather Shelter.
Probation and Parole	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	VETS, SA, SMI	New member attending all meetings of Corrections/Discharge sub-committee.
Progressive Community Services	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SMI, Y	Attends some monthly CoC meetings.
The Salvation Army	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	SA, VETS	Member of Unmet Needs Committee and Unmet Needs/Homeless sub-committee, attends all monthly CoC meetings, member of Transitional Housing, Outreach and Awareness, and HMIS sub-committees. Participates in outreach activities. In HMIS network. Involved in planning for Cold Weather Shelter.
St. Joseph Youth Alliance	St. Joseph	Y	Maintains contact. Involved in Cold Weather Shelter planning.
United Way of Greater St. Joseph	Andrew, Buchanan, Clinton, DeKalb Counties, St. Joseph	Funder of programs for SMI, SA, DV, Y	Facilitates Unmet Needs Committee and Unmet Needs/Homeless sub-committee, organized Permanent Housing Committee and three sub-committees, attends most of monthly CoC meetings, helped with survey of unsheltered

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			homeless. Member of HMIS sub-committee. In HMIS network. Funder and involved in planning for Cold Weather Shelter.
Young Women's Christian Association (YWCA)	17 counties of Northwest Missouri, St. Joseph	DV, Y	Attends all monthly CoC meetings, serves on Transitional Housing sub-committee, Outreach and Awareness sub-committee; participates in outreach activities. Former Chair of HMIS sub-committee. Lead agency for HMIS network. Helped plan for Cold Weather Shelter.
Businesses / Business Associations:			
Commerce Bank	St. Joseph	Y	Serves on Permanent Housing sub-committee.
L. Rucker -- Student, MWSC	St. Joseph	DV, SMI	Attends majority of monthly CoC meetings, Outreach and Awareness sub-committees.
Trinity Management & Community Development Corporation	Mid-City Neighborhood Revitalization Strategy Area, St. Joseph	Y (and families)	Housing organization that attends most monthly CoC meetings and is involved with Permanent Housing Committee.
Homeless / Formerly homeless persons:			
D. Pelto	St. Joseph	DV	Attends most of monthly CoC meetings, serves on Outreach and Awareness sub-committee.
Other: e.g.: Law Enforcement, Hospital/Medical, Funders:			
Buchanan County Sheriff's Department	Buchanan County, St. Joseph	DV, SA	Actively participates with Unmet Needs Committee and Unmet Needs/Homeless sub-committee.
Heartland Regional/Community Foundation	Andrew, Buchanan Counties, St. Joseph	SA, HIV/AIDS	Attends some of monthly CoC meetings, served on Transitional Housing and Outreach/Awareness sub-committees. Funder and involved in planning for Cold Weather Shelter.
St. Joseph Police Department	St. Joseph	DV	Attends some of monthly CoC meetings, assisted street survey team in locating and providing outreach to unsheltered homeless individuals. Involved in planning for Cold Weather Shelter.
School District of St. Joseph	St. Joseph	Y	Attends almost all of monthly CoC meetings; organizing sub-committee to address issues relating to homeless youth.

* **Subpopulations Key:** Seriously Mentally Ill (SMI), Substance Abuse (SA), Veterans (VETS), HIV/AIDS, Domestic Violence (DV), and Youth (Y).

**Chart 45:
Continuum of Care Service Activity Chart**

Fundamental Components in CoC System - Service Activity Chart
<p>Component: <i>Prevention</i></p> <p><u>Rental/Mortgage Assistance</u></p> <ol style="list-style-type: none"> <li style="margin-bottom: 10px;"> <p>1. Interfaith Community Services, Inc. (InterServ): <u>Services in place:</u> InterServ is a community interfaith-based organization that provides an array of services to individuals at risk of homelessness. Programs offered include rent and utility assistance, veterans’ assistance, assistance to individuals with HIV/AIDS, free clothing, and a food pantry. <u>Services planned:</u> InterServ plans to continue all current programming and add programs for seniors, immigrants and the homeless. <u>How persons access/receive services:</u> Persons can access services by either calling for an appointment or presenting in person to the agency where an intake and budget session is completed to determine needs and eligibility. InterServ refers to other community agencies as appropriate.</p> <li style="margin-bottom: 10px;"> <p>2. Catholic Charities (Emergency Assistance): <u>Services in place:</u> Catholic Charities’ Emergency Assistance Program provides monetary pledges to landlords and utility providers and advocates on behalf of individuals. <u>Services planned:</u> Catholic Charities plans to add Housing Counseling to their current services. <u>How persons access/receive services:</u> Clients are accepted by making an appointment with the Emergency Assistance Coordinator by telephone or in person. Qualifying individuals are required to attend a budget management class prior to receiving assistance.</p> <li style="margin-bottom: 10px;"> <p>3. Catholic Charities (Restorative Justice): <u>Services in place:</u> Catholic Charities’ Restorative Justice Program provides information and referral to ex-offenders and probationers. Emergency assistance in the form of rent, utilities, clothing, and hygiene kits are also available to this population. <u>Services planned:</u> The agency hopes to implement programming to better assist with housing and employment needs. <u>How persons access/receive services:</u> Individuals can access services by either self-referral or referral by other service providers.</p> <li style="margin-bottom: 10px;"> <p>4. Buchanan County Health Department (HIV Case Management): <u>Services in place:</u> The HIV Case Management Department of the Buchanan County Health Department provides direct services to individuals diagnosed with HIV/AIDS. Services available include referrals for Section 8 housing, as well as referrals to Shelter Plus Care Program. Ryan White funds are also available as the payer of last resort if eligible per guidelines. <u>Services planned:</u> The HIV Case Management Dept. plans to enhance the quality of current services. <u>How persons access/receive services:</u> Individuals who are HIV+ can access services by scheduling an appointment with the HIV Case Manager.</p> <p>5. Community Action Partnership: <u>Services in place:</u> Community Action Partnership (CAP) provides case management, advocacy, and referral services to help homeless individuals become self-sufficient. It also offers financial assistance to address their current housing situation; the assistance may be in the form of rent, mortgage, utilities, old housing bills, or to address other needs they have to maintain/retain housing. Clients enrolled in the program also have access to programs designed to help them achieve self-sufficiency, such as schooling, volunteer opportunities, on-the-job training, assistance with job seeking and job keeping skills, and job search activities.</p>

Services planned:

CAP continues to monitor its programs to ensure self-sufficiency goals are being worked on and the client is making progress toward those goals.

How homeless persons access/receive services:

Clients access services by presenting to Missouri Career Center site.

6. Legal Aid of Western Missouri:

Services in place:

Legal Aid of Western Missouri provides information, advice, and representation to individuals and families who have landlord/tenant problems, have been evicted, or have received eviction notices from either private landlords, Section 8 landlords, or the Housing Authority. When appropriate, Legal Aid refers individuals and families to social service agencies for rental assistance, or to the Housing Authority to apply for housing or housing assistance.

Services planned:

Legal Aid of Western Missouri plans to continue to improve the quality of current services.

How persons access/receive services:

All persons access services by applying in person or by telephone. An Intake Specialist interviews the client to determine the legal issues and need for other services. The Intake Specialist then consults with an attorney who determines what information, advice, or representation is needed.

Emergency Shelter

7. The Salvation Army

Services in place:

The Salvation Army provides emergency shelter for up to 120 days. Residents of the shelter receive assistance and training in life skills, job placement, and obtaining their GED. Clothing is provided as needed and residents receive assistance with accessing entitlement programs such as Medicaid, Social Security, Food Stamps, TANF, etc.

Services planned:

The Salvation Army plans to continue to improve the quality of current services.

How persons access/receive services:

Homeless individuals access services by appearing in person at The Salvation Army.

8. The YWCA Shelter for Abused & Homeless Women & Children:

Services in place:

The YWCA Shelter provides emergency protective shelter to victims of domestic violence and to homeless women and children. Services provided include court advocacy, life-skills training, support groups, individual counseling, case management, victim advocacy, and referrals and education.

Services planned:

The YWCA Shelter plans to explore the possibility of transitional housing.

How persons access/receive services:

Women and their children can access services by calling or presenting to the agency, or by referral from other agencies. In the event that a woman calls in need of shelter and is unable to secure transportation, the YWCA will provide the transportation.

Shelter for Seriously Mentally Ill

9. Family Guidance Center for Behavioral Health Care

Services in place:

Family Guidance Center provides services to persons diagnosed with a chronic and persistent mental illness. They provide respite beds to individuals who qualify for services that are being discharged from an inpatient psychiatric facility and would otherwise have no suitable placement options. In addition, respite beds may be used for qualifying individuals who are currently homeless when they present or are referred by community agencies.

Services planned:

Family Guidance Center plans to improve their residential programs and enhance their Shelter Plus Care program.

How persons access/receive services:

Referrals are accepted by community agencies such as Social Welfare Board, Salvation Army, Health and Senior Services, Heartland Mental Health Unit, InterServ etc. Family Guidance Center staff complete an intake to determine eligibility for services.

Component: Outreach

To Homeless Persons Living on the Streets:

1. Interfaith Community Services, Inc. (InterServ):

Outreach in place:

InterServ meets regularly with churches and organizations to keep them aware of programs available at both InterServ and in the community. InterServ staff has participated in four homeless street surveys and has assisted with handing out literature, sleeping bags, food, and hygiene items to individuals living on the streets. InterServ operated a Cold Weather Shelter in 2003 and 2004, and again in 2005. It is a place for homeless men to stay when the Salvation Army Shelter is at capacity. The Cold Weather Shelter accepts all homeless men, including those that have “burned their bridges” and not allowed to re-enter The Salvation Army Shelter.

Outreach planned:

InterServ plans to continue efforts to reach out to the homeless and provide them with information. InterServ re-opened the Cold Weather Shelter in January 2005. InterServ is constructing a Safe Haven and permanent housing for homeless men in 2005.

To Other Homeless Persons:

2. Catholic Charities of Kansas City-St. Joseph, Inc.:

Outreach in place:

Catholic Charities agency meets monthly with other emergency assistance providers to determine what resources are available in the community. Pamphlets are distributed in doctors’ offices, the Health Department, other social service agencies, and schools. An information booth has been set up at various community events, and articles have appeared in the local newspaper. In addition, the telephone number for Catholic Charities is located in the St. Joseph telephone directory.

Outreach planned:

Catholic Charities will continue to improve the quality of the current services.

3. The Helping Hand of Goodwill Industries:

Outreach in place:

The Helping Hand of Goodwill Industries participates in several community organizations, distributes flyers, and speaks to organizations regarding available services.

Outreach planned:

The Helping Hand of Goodwill Industries plan to continue to improve the quality of outreach activities.

4. Legal Aid of Western Missouri:

Outreach in place:

Legal Aid publishes brochures that are distributed to the courthouses, social service agencies, and other locations or agencies likely to have contact with seniors, low-income, and/or at-risk populations. In addition, Legal Aid’s telephone number is widely publicized and is given out by government agencies that deny or terminate public benefits, housing, and housing subsidies. Legal Aid also presents informational programs to client groups and social service agencies, as requested.

Outreach planned:

Legal Aid plans to improve the quality of their services and outreach activities.

Seriously Mentally Ill:

5. Family Guidance Center:

Outreach in place:

The Family Guidance Center works closely with area mental health units and service providers to identify individuals with chronic mental illness and helps them access services. In addition, a Mobile Crisis Response Team is available to screen individuals in need of emergency services within the community on a 24-hour basis.

Outreach planned:

The Family Guidance Center plans to continue providing quality services with the cooperation of community partners.

Veterans:

6. The Salvation Army:

Outreach in place:

The Salvation Army provides transportation between Veterans Hospitals and their facility to assist individuals with accessing

their services. A full-time staff person has been assigned to work exclusively with veterans, assisting them with job placement, accessing housing, obtaining healthcare and accessing community resources.

Outreach planned:

The Salvation Army plans to enhance their services offered to Veterans.

Ex-Offenders & Probationers:

7. Catholic Charities:

Outreach in place:

Catholic Charities Restorative Justice program provides case management services to homeless ex-offenders. Individuals are referred by other service providers, parole officers, self-referrals, etc.

Outreach planned:

Catholic Charities plans to work with local service providers to expand available resources.

Mentally Retarded/Developmentally Disabled:

8. Albany Regional Center

Outreach in place:

The Albany Regional Center provides services to individuals with Mental Retardation/Developmental Disabilities. Individuals are assessed regarding needs and services are coordinated to meet those needs in order to prevent negative consequences such as homelessness.

Outreach planned:

The Albany Regional Center will enhance current services through continued community partnerships.

How homeless persons access/receive services:

Persons access services by applying on their own or through referral by community agencies. Individuals are then assessed to determine program eligibility.

Seniors:

9. Missouri Division of Health and Senior Services:

Outreach in place:

Information regarding available services is available through the following sources: community agencies, brochures, phone books, resource guides, health fairs, and various community events.

Outreach planned:

MO Dept of Health and Senior Services will strive to improve current services.

HIV/AIDS:

10. Buchanan County Health Department (HIV Case Management):

Outreach in place:

The Health Department works closely with local service organizations, physicians and emergency rooms. They have publicized a 1-800-phone number to assist individuals in need of services. Transitional Case Management is a service available to all HIV-positive incarcerated individuals prior to being released. TCM provides these individuals with discharge planning and linkage to health care, medications and other needed support services in their community of residence.

Outreach planned:

Transitional Case Management begins when the TCM meets with an interested HIV-positive person at the correctional facility's medical unit prior to release. HIV Case Management will enhance services by networking with community partners on awareness and prevention.

Domestic Violence:

11. The YWCA Shelter for Abused & Homeless Women & Children:

Outreach in place:

The YWCA Shelter provides information and education regarding the issue of domestic violence by maintaining an active Speaker's Bureau in the community. Shelter staff is active in various collaborative community organizations that address the issues of domestic violence and homelessness. A number of events are organized within the community to increase awareness and to establish helping relationships with victims of domestic violence. Informational brochures are distributed and made available to local service providers, law enforcement, Buchanan County Courthouse, Missouri Western State College, and various other locations.

Outreach planned:

The YWCA Shelter plans to increase outreach activities over the coming year.

Component: *Supportive Services*

Case Management:

1. Albany Regional Center:

Services in place:

The Albany Regional Center provides services to individuals with Mental Retardation/Developmental Disabilities. Individuals are assessed regarding needs and services are coordinated to meet those needs in order to prevent negative consequences such as homelessness.

Services planned:

Albany Regional Center will network with community service providers to coordinate services.

How homeless persons access/receive services:

Persons access services by applying on their own or through referral by community agencies. Individuals are then assessed to determine program eligibility.

2. Missouri Division of Health and Senior Services:

Services in place:

The Division of Senior Services provides services to individuals ages 60 and older, as well as to those 18-59 years of age whom are disabled. Services available include housekeeping, personal care, meal delivery, respite, nursing care, and counseling. The agency also provides information and referral services.

Services planned:

MO Dept of Health and Senior Services will strive to improve current services

How homeless persons access/receive services:

Services can be accessed by calling the local office or the 24-hour hotline.

3. Community Action Partnership (CAP):

Services in place:

CAP provides case management, advocacy, and referral services to help homeless individuals become self-sufficient. It also offers financial assistance to address their current housing situation; the assistance may be in the form of rent, mortgage, utilities, old housing bills, or to address other needs they have to maintain/retain housing. Clients enrolled in the program also have access to programs designed to help them achieve self-sufficiency, such as schooling, volunteer opportunities, on-the-job training, assistance with job seeking and job keeping skills, and job search activities.

Services planned:

CAP continues to monitor its programs to ensure self-sufficiency goals are being worked on and the client is making progress toward those goals.

How homeless persons access/receive services:

Clients access services by presenting to Missouri Career Center site.

4. The YWCA Shelter for Abused & Homeless Women & Children:

Services in place:

The YWCA Shelter provides emergency protective shelter to victims of domestic violence and to homeless individuals. Services provided include court advocacy, life-skills training, support groups, individual counseling, case management, victim advocacy, and referrals and education.

Services planned:

The YWCA Shelter plans to seek funds for additional case management staff and services.

How homeless persons access/receive services:

Women and their children can access services by calling or presenting to the agency or by referral from other agencies.

5. The Salvation Army:

Services in place:

The Salvation Army provides emergency shelter for up to 120 days. Residents of the shelter receive case management,

assistance & training in life skills, job placement, and obtaining their GED. Clothing is provided as needed and residents receive assistance with accessing entitlement programs such as Medicaid, Social Security, Food Stamps, TANF, etc.

Services planned:

The Salvation Army plans to continue to improve the quality of services offered.

How homeless persons access/receive services:

Individuals access services by appearing in person at The Salvation Army.

6. Missouri Division of Family Services:

Services in place:

The Division of Family Services provides case management, referrals and assistance with food stamps, Medicaid and TANF programs.

Services planned:

DFS plans to continue to improve the quality of services offered.

How homeless persons access/receive services:

Individuals may access services through self-referral, community referral, or through the Child Abuse/Neglect Hotline.

Life Skills:

As noted previously, both The Salvation Army and the YWCA Shelter provide life skills training to residents of their respective facilities.

Alcohol & Drug Abuse Treatment:

7. Family Guidance Center Chemical Dependency Program:

Services in place:

The Family Guidance Center Chemical Dependency Program provides an array of services including inpatient treatment, detoxification unit, day treatment, and aftercare services. In addition, their program assists individuals with permanent supportive housing through the Shelter Plus Care Program. They serve indigent populations, as well as those with Medicaid and private insurance.

Services planned:

Family Guidance Center Chemical Dependency program continues to improve the quality of services offered.

How homeless persons access/receive services:

The Family Guidance Center Chemical Dependency Program accepts referrals from numerous community agencies, and self-referrals.

Mental Health Treatment:

8. Family Guidance Center Adult Mental Health Services:

Services in place:

Family Guidance Center Adult Mental Health Services provides case management/community support services, psychiatric services, day treatment, transitional housing, housing in residential care facilities, and respite for individuals with serious mental illness.

Services planned:

Family Guidance Center plans to improve their residential programs and enhance their Shelter Plus Care program.

How homeless persons access/receive services:

The Family Guidance Center accepts referrals from numerous community agencies, and self-referrals.

AIDS-related treatment:

9. Buchanan County Health Department-HIV Case Management:

Services in place:

The Buchanan County Health Department provides an array of services to individuals with HIV and AIDS. Available services include food vouchers, medical referral, medications, laboratory tests, transportation, dental, mental health referral, vision exams, home health skilled nursing visits, and durable medical equipment and supplies.

Services planned:

HIV Case Management will enhance present services for quality assurance.

How homeless persons access/receive services:

All individuals who are HIV positive are eligible for services and can be self-referred or referred by community agencies or

physicians.

Education:

Adult Education and Literacy sites are available throughout the community to help individuals earn their GED's, as well as providing other educational services. In addition, Vocational Rehabilitation is available for educational/vocational services for individuals with qualifying disabilities.

10. School District of St. Joseph:

Services in place:

The School District of St. Joseph provides education-related supplies to children that are homeless. It has grant funds from the Department of Elementary and Secondary Education that can be used for clothing, transportation, tutoring, items relating to cleanliness (detergent, soap, personal hygiene, tissues, etc.) It also helps pregnant teenagers whose parent has evicted them.

Services planned:

The St. Joseph School District plans to continue seeking DESE funds and to keep a Homeless Social Worker on staff to help children of homeless families remain in school.

How homeless persons access/receive services:

Counselors, teachers and administrative staff of the SJSD are trained to listen to their students and observe any behaviors that might allude to unusual living conditions or other problems. Students may refer themselves or their friends. In addition, the Homeless Social Worker works closely with the YWCA Shelter and the Salvation Army to coordinate services to homeless children and families who reside in Shelter.

Employment Assistance:

11. The Helping Hand of Goodwill Industries:

Services in place:

The Helping Hand of Goodwill Industries provides assistance in accessing employment opportunities, and provides vocational evaluations, job placement assistance, and computer skills training.

Services planned:

The Helping Hand of Goodwill Industries will expand their community partnerships for improved quality assurance of programs.

How homeless persons access/receive services:

Referrals are accepted from agencies on a fee-for-service basis.

12. Missouri Career Center:

Services in place:

The Missouri Career Center has representatives from 17 programs and offers employment counseling, training, resources and employment readiness classes that include interviewing skills, resume writing, etc. They also offer adult education and computer training with specialized services in various software programs.

Services planned:

The Missouri Career Center through community partnerships are enhancing and expanding present services.

How homeless persons access/receive services:

Individuals can access services by presenting to Missouri Career Center site.

Child Care:

13. Missouri Division of Family Services:

Services in place:

The Division of Family Services provides assistance to income-eligible individuals to cover the cost of childcare.

Services planned:

DFS plans to continue to improve the quality of services offered.

How homeless persons access/receive services:

Individuals may access services by presenting to the local office.

14. Community Action Partnership (CAP):

Services in place:

CAP provides Head Start and Early Head Start programming to low-income and homeless children beginning with pregnancy to 5 years of age. Some of their services in addition to childcare and education include oral health, nutrition, mental health and

behavioral issues, transportation and parent involvement. For children 0 – 3 years of age, childcare is provided through 3 local childcare providers with the cost of services being paid for by CAP.

Services planned:

CAP plans to continue to improve the quality of services offered.

How homeless persons access/receive services:

Individuals may access services by presenting to Community Action Partnership. CAP works closely with area schools and social service providers in an effort to reach out to eligible families.

Transportation:

The City of St. Joseph operates a public transportation system that is easily accessible and affordable. In addition, a number of social services agencies that provide case management services also provide assistance with transportation needs.

Food Pantry/Free Clothing:

There are six food pantries in the community, including those sponsored by InterServ and Catholic Charities, assisting people to access food including both the homeless and chronic homeless populations. The Open Door Food Kitchen provides a noon meal, six days a week provided by local faith communities for any one experiencing hunger. InterServ operates one of the two Clothing Stores facilities in the community where quality used clothing can be obtained free of charge.

Legal Services:

15. Legal Aid of Western Missouri:

Services in place:

Legal Aid provides civil legal assistance or advice with many issues that may affect a person's ability to maintain housing, such as denial or termination of public benefits, landlord/tenant problems, unemployment problems, domestic violence, utility problems, and consumer problems such as garnishment.

Services planned:

Legal Aid plans to improve the quality of their services and outreach activities.

How homeless persons access/receive services:

All persons access services by applying in person or by telephone. An Intake Specialist interviews the client to determine the legal issues and needs for other services. The Intake Specialist then consults with an attorney who determines what information, advice or representation is needed.

Medical Services:

16. Social Welfare Board:

Services in place:

The Social Welfare Board provides medical and dental care to low-income, uninsured individuals. Additional services include diet counseling, diabetic food, crisis counseling, gynecology clinic, birth control and free mammograms. In addition to medical services, the SWB provides referrals to food pantries and assists with transportation to medical facilities.

Services planned:

The Social Welfare Board has applied for funding to provide additional healthcare services for the homeless which would include the addition of Medical Social Workers and Nurse Practitioners who would conduct health education and screenings in shelter facilities and other areas frequented by homeless.

How homeless persons access/receive services:

Individuals can access services at the clinic on a first-come-first-served basis.

Housing Inventory Chart -- Explanation

The Gaps Analysis committee, sub-committee of the CoC, designed a survey, sent it to homeless service providers, and tabulated the results. The *Homeless Shelter Survey* included questions that targeted the local shelters, The Salvation Army, YWCA, Cold Weather Shelter, and Noyes Home, to obtain current inventory of beds for individuals and also persons in families with children. The shelters were also surveyed to determine if they had plans for additional beds in 2005 and to estimate the need in the community for additional beds to assist the homeless. All eight agencies responded.

The community's determination for unmet needs for Emergency Shelter, Transitional Housing, and Permanent Supportive housing for the homeless is based on the administrative records of the local shelters gathered in the *Homeless Shelter Survey* for the number of beds that are currently available. In 2004, the Oxford House was the only housing provider that expressed they were adding 10 new beds for men. The estimated needs for additional beds are based on the individual experiences of shelter providers in the community. The point-in-time date selected was a date agreed upon by the shelter providers in the community.

In 2005, the CoC conducted a survey based on a date-in-time, January 28, 2005. All members of the CoC were given the Housing Charts and asked to update them based on their administrative records and to identify any existing housing gaps. The CoC plans to distribute a *Homeless Shelter Survey* in the spring of 2005 and its Gaps Analysis sub-committee will initiate another survey at the Open Door Food Kitchen (Soup Kitchen). The Street Survey sub-committee also plans to conduct additional street counts.

The CoC will continue to count the homeless by two methods: (1) street count, and (2) survey of all agencies that provide services and shelter to the homeless. With the implementation of the HMIS system, collected statistical information will provide an accurate, unduplicated point-in-time count. Even with the HMIS system in operation, some in-person counting will need to be done in order to find new homeless individuals who have not yet become part of the service network. Street counts will also help the community locate the actual sites where the homeless camp.

The number of "chronically homeless" in our community is lower in 2005 than in 2004 and 2003. In 2003, the street count identified 36 men who were homeless and living in tents and boxes along the river. In 2004, the street count showed a drastic reduction: only 15 men were homeless. In 2004, the "chronically homeless" stayed at the Cold Weather Shelter operated by InterServ. Its staff worked with these chronically homeless individuals and assisted them in securing services and permanent housing. Those fifteen men also reported to the committee that they are waiting for the Safe Haven to be built in St. Joseph and they plan to stay there when it opens in 2005.

Insert page one and two of housing inventory chart

this is page 2 of housing inventory chart

Chronic Homelessness Strategy/Goals

The CoC continues to support the goals and action steps that the Missouri Governor's Committee to End Homelessness endorses to end chronic homelessness in Missouri in the next decade. St. Joseph's experiences with the Cold Weather Shelter support the State's assertion that, unless a chronically homeless individual can access affordable, supportive housing, the individual will fail.

The CoC is committed to providing outreach, service, and support to assist chronically homeless individuals (single men with mental illness, substance abuse issues, and physical disabilities that have been homeless for one or more years or who have had four or more episodes of homelessness in the past three years) in meeting their basic needs, moving off of the streets, and achieving self-sufficiency.

To date, the St. Joseph community has taken the following actions towards ending chronic homelessness:

- Gaining the trust of chronically homeless individuals by providing them alternatives to sleeping on the streets;
- Offering shelter during periods of cold weather;
- Providing staff who can assist homeless veterans in accessing the benefits to which they are entitled;
- Studying low-demand housing approaches utilized by other communities that could be implemented in our community;
- Exploring better ways of identifying available, affordable, and decent housing units, including creating a database that will be accessible to service providers;
- Exchanging ideas for improving discharge planning from public systems;
- Finalizing plans to construct a safe haven and permanent housing complex that will provide case management and essential services;
- Gathering data on our community's homeless problem through surveys, street counts, and entering client data into the HMIS System;
- Using the Homeless Management Information System (HMIS) to share information, permitting staff of one service agency to view services provided to the client by other agencies.

Those actions have made an impact on the number of chronically homeless in the St. Joseph community. A familiar face and a friendly greeting have enabled chronically homeless individuals in St. Joseph to begin to trust those that want to help them move off the streets and into a safe, warm habitat. The CoC and its outreach team regularly visit the Open Door Food Kitchen and the Peace of Mind Center to talk to those who gather there about their housing needs. These outreach efforts are broadening the CoC's

understanding of the chronically homeless population and the life struggles that made them homeless.

For the third year in a row, InterServ and the faith-based community were challenged to provide a short-term shelter program for those homeless men who couldn't or wouldn't obey the rules that would allow them to stay at The Salvation Army's Booth Center. Each evening for 88 nights, InterServ transformed the dining hall of the Open Door Food Kitchen into a sleeping area and used the kitchen facilities to prepare meals for these homeless men. The Cold Weather Shelter's philosophy continued to be based on the premise of hospitality, where the site and volunteers act as hosts to the homeless guests, and food and emergency shelter that meet the basic needs of the homeless is provided in a dignified, hospitable manner.

Criminal Record	1
Drug and Alcohol Abuse	48
Left Dept of Corrections	5
Family Disruption	3
Family Separation	16
Chronic Homeless	59
Lost Job	7
Other Shelters were at Capacity	1

During the 88 nights it was open, the Cold Weather Shelter provided a total of 1,550 nights of shelter, food and a warm bed for 121 different men. Most nights it was filled to capacity with 16 single men and there were many nights when bedrolls were dug out of storage so additional men could be warm. The shelter staff and volunteers treated the men with respect and won their trust. The program coordinator and staff worked with the men to address the barriers that cause homelessness and provided support

services and encouragement. Fifty-nine of the 121 men that stayed there were the chronically homeless: 39% were veterans and 40% reported alcohol or chemical abuse. Their ages ranged from the mid-20's to 60-plus. Almost one-half of the men were in the 40-49 age range. The average stay at the shelter was 13 nights, although several stayed more than a month. About 30% of the men had used the Cold Weather Shelter in previous winters.

The Salvation Army has revised some of its policies to create a more accessible atmosphere. The Army obtained additional funding that permitted the organization to add a staff person who concentrates on helping veterans get the benefits and services they need to which they are entitled. The CoC's knowledge of available resources and its awareness of the needs of veterans have improved due to the participation of a representative from 4th District American Legion Homeless Veterans Task Force on the CoC.

With three years' experience under its belt, InterServ and the CoC have learned that the Cold Weather Shelter and the services it provides are merely band-aids that keep homeless men from freezing and provide them with a hot meal. Even though many of the men become somewhat stable with permanent housing and/or become employed, we have learned that, unless there is ongoing case management and encouragement, many of the men regress and end up becoming homeless once again. These are the chronically homeless that will be helped when St. Joseph's Haven and Juda House, InterServ's FY 2003 SHP project, are built and accepting clients.

Lastly, the St. Joseph Continuum of Care Homeless Services Coalition has ten agencies that are collecting data into the Homeless Management Information System. The data they are gathering not only provides a better picture of the number of homeless and their initial contact point, it also enables us to track them as they access services and follow them to see if they are accepting the referrals given to them. We are also gathering client data on individuals who are precariously housed and those who are receiving food orders, rent and utility assistance.

St. Joseph's Chronic Homelessness Strategy

- **Continue Outreach**

It is vital to our effort to end homelessness in St. Joseph that we continue outreach efforts to homeless individuals. Outreach enables us to identify homeless individuals, move them off the street into a safe haven, and offer support services that will enable them to transition into permanent housing.

- **Protect Homeless in Cold Weather**

The CoC plans to continue offering a cold weather shelter in space leased from the Open Door Food Kitchen until construction of Safe Haven is completed. While this is far less than an ideal situation, it serves the purpose of protecting homeless men from the extreme cold weather during the nights from January through March.

- **Provide Health Care Services to the Homeless**

With the participation of a Homeless Advisory Committee, the Social Welfare Board will offer a new program focused on providing health care services to homeless and formerly homeless individuals.

- **Provide a Safe Haven with Support Services**

Plans for the construction of Safe Haven are closer to fruition. The Safe Haven will provide consistent and ongoing shelter for homeless men that affords the men privacy, kitchen facilities for meal preparation, a dining area, laundry facilities,

showers and 24-hour shelter. Support services will be offered to the men, including mental health assessment and treatment, crisis intervention, medical treatment, and case management.

- **Provide Permanent Supportive Housing for Homeless Single Men**

Plans for the construction of Juda House are also progressing. Juda House will provide private apartments, along with supportive services and case management to assist formerly homeless men in learning life skills, finding and retaining employment, and becoming productive members of our community.

- **Provide Permanent Supportive Housing for Homeless Women and Women with Children**

Under the scattered site leasing program, homeless women and homeless women with children will be moved directly from a homeless situation into permanent housing with supportive services. The goal of this program is to assist homeless women in addressing those issues that prevent them from becoming full and productive members of the community while also providing them with safe housing.

- **Enhance Community-wide Planning Efforts**

HMIS has been implemented and it is expected that this system will be refined as necessary to provide solid information regarding homeless persons in the community and to identify other needs that the CoC should address.

- **Count Unsheltered Homeless**

The Street Survey subcommittee of the CoC will continue its annual count of those living on the streets, under bridges, and in the parks, alleys and other places not fit for human habitation. The experience from past street surveys should assist future surveyors in being even more effective. A count of unsheltered homeless will provide valuable information on the extent of homelessness in St. Joseph and possible action that needs to be taken to address the situation.

- **Count Sheltered Homeless**

An annual survey of those agencies that provide emergency shelter, transitional housing, and permanent housing will provide data regarding adequacy of facilities (and supportive services) and whether additional beds and services might be needed.

**Chart 48
Future Goals for Ending Chronic Homelessness**

Goal: End Chronic Homelessness (“What” are you trying to accomplish)	Action Steps (“How” are you to go about accomplishing it)	Responsible Person/Organization (“Who” is responsible for accomplishing it)	Target Dates (mo/yr will be accomplished)
Ex: Count unsheltered homeless to establish baseline	Annual street counts of unsheltered homeless persons	Emergency Shelter Commission	January 2005
Goal 1: Move chronically homeless off the street and into a safe haven with supportive services network.	Re-establish outreach teams and schedule regular visits to Open Door Food Kitchen and Peace of Mind, Identify and extend outreach to other places frequented by homeless individuals.	CoC Outreach and Awareness Committee	Annually in August, October, December, February and April.
Goal 2: Protect homeless in extreme weather conditions	Provide Cold Weather Shelter and supportive services.	InterServ and faith-based committee (St. Joseph Cathedral, First Lutheran Church, Catholic Charities, McCarthy Baptist Church, Christ Episcopal and others)	January through March 2006, unless the Safe Haven has been completed and is accepting guests.
Goal 3: Provide quality health care services for homeless and formerly homeless individuals. Create Homeless Advisory Committee and locate members in shelters within close proximity of the Social Welfare Board	Advisory Committee to conduct focus group sessions with homeless individuals and families, discuss needs and issues, and present issues of concerns to Directors of Social Welfare Board. Determine why homeless don't worry about their health care.	Social Welfare Board of Buchanan County	November 2006
Goal 4: Move chronic homeless single men off the street and into a safe haven and supportive services network	Construct building for safe haven for hard to reach homeless single men Open Safe Haven, including provision of supportive services	InterServ0	July 2005
Goal 5: Transition homeless single men into permanent housing with supportive services	Construct building for permanent housing (Juda House) for single men Open Juda House, including provision of supportive services	InterServ	Fall 2005
Goal 6: Provide permanent housing for homeless women and women with children	Implement scattered site leasing program for homeless women and women with children, with case management	Catholic Charities	October 2005

Goal 7: Enhance community-wide planning efforts (Refine HMIS)	Refine and enhance HMIS Utilize data in future community wide planning efforts	Continuum of Care Homeless Services Coalition and HMIS Partners	(Continuing)
Goal 8: Count unsheltered homeless to monitor improvement	Conduct annual street count of unsheltered homeless	Street Survey Subcommittee	Annually
Goal 9: Count sheltered homeless to monitor improvement	Conduct annual count of sheltered homeless	Continuum of Care Homeless Services Coalition and homeless shelter providers	Annually

Funding continues to be the greatest obstacle to providing long-term, permanent housing for the chronically homeless. The construction of St. Joseph's Haven and Juda House, InterServ's FY 2003 SHP project, will provide shelter, meals, and services twenty-four hours a day, instead of asking the men to pack up their belongings and leave at 7:00 a.m. so the Open Door Food Kitchen can begin preparing for the noon meal.

Although the Open Door Food Kitchen provides mid-day meals, Monday through Saturday, there are no hot meals available for the chronically homeless on Sundays. Neither is there available in the community hot, nutritious evening meals. The St. Joseph community also lacks a Detoxification Program for homeless individuals.

Continuum's Priorities for 2005/2006

During its meeting on April 27, 2005, the St. Joseph Continuum of Care Homeless Services Coalition established its priorities for 2005/2006. The public, homeless service providers, and other interested parties are being encouraged to submit proposals for *Continuum of Care Homeless Assistance* as announced in the FY 2005 Continuum of Care Program NOFA. The priorities are:

- 1. Enhance HMIS -- Renewal of Supportive Housing Program (SHP) project, HMIS**
- 2. Unmet Needs Case Management Program that includes street outreach and support services.**
- 3. Shelter for Youth, ages 16-19 years, including pregnant and parenting teens.**
- 4. Housing and Services for Ex-offenders**
- 5. Housing and Services for Immigrants and Migrants**
- 6. Transitional Housing for Homeless Families with Children**

Housing and Services for Non-Homeless Persons with Special Needs

The St. Joseph community offers some housing for non-homeless persons with special needs. Facilities available include approximately fifty (50) beds for the mentally disabled homeless. Housing and services for the chronically mentally ill, persons with alcohol and/or drug addictions, the frail elderly, and persons diagnosed with AIDS and related diseases are also addressed. A description of providers of services and/or housing for non-homeless persons with special needs follows:

- *Family Guidance Center for Behavioral Healthcare* facilitates services for individuals who are not homeless but require supportive housing because of mental disabilities. Facilities and services provided by this agency include:

Fifteen Residential Care Facilities that provide twenty-four hour oversight room and board, nursing care, and access through case management to medical, psychiatric, social, recreational, vocational and employment services.

Two supervised apartments that provide twenty-four hour Resident Manager support, medication oversight and administration for chronic mentally ill persons adjusting to apartment living.

Independent apartments throughout the community that are utilized by more than 200 high functioning, chronic mentally ill persons who have established stability in their illness and are compliant with medication.

Two beds for Respite Care to temporarily house and care for those persons who are experiencing episodes of stress, need increased nursing assistance for medical convalescence, or are homeless because they have been evicted from an apartment or residential care facility. The two beds are located in a residential facility.

- *Family Guidance Center* also offers supportive housing and services to individuals released from short-term psychiatric inpatient treatment programs. The Supported Community Living Services Supported Housing Program, funded by the Department of Mental Health, provides safe and affordable housing opportunities for these clients. The program contracts with Family Guidance Center's CPR Program to subsidize the housing needs of persons who are chronically mentally ill. The subsidies extend across a continuum of housing options that include residential care facilities, supervised apartments, and independent apartments and houses. Persons discharged from a short or long-term facility are assessed for a housing setting comparable to their functioning

level and available service accommodations. Case Management helps the client to transition to a residential care facility or to an apartment. The Case Manager helps the client search for an apartment, qualify for maintenance funds for the apartment, and provides any follow-along services the client needs to successfully utilize the apartment.

- Two agencies, *East Side Human Resource Center* and *Interfaith Community Services, Inc.*, provide Mobile Meals Programs that deliver hot noon meals to homebound senior citizens and younger individuals with physical disabilities.

These agencies also make frozen meals available for those who need meals for evenings and weekends. Inter/Serv also serves congregate meals at two sites, Calvin Center and Wesley Senior Towers, and this agency started a *Senior Neighborhood Action Program* (SNAP) for minority women that live in the Mid-City NRSA.

InterServ also offers a realm of other services: Outreach, telephone reassurance, health screenings and health promotion/disease prevention programs. In home clients also are eligible for homemaking, personal care, errands, nurse visits, and respite care.

- *Fellowship House*, 2421 Francis Street, provides a 25-bed halfway house for men and a 12-bed residential care facility for senior citizens. All residents must have had thirty days of sobriety or have been released from a treatment center. The treatment program at Fellowship House spans 90 days to one year in duration.
- *Progressive Community Services*, 3131 Frederick Avenue, provides housing and supportive services for persons with developmental disabilities. Progressive Community Services houses twelve (12) individuals in group homes and five (5) others in Individualized Supported Living at three sites. The Doniphan Group Home houses 8 individuals and is located at 2612 Doniphan. Four others are housed at the Charles Street Group Home, 225 South 36th Street. The organization's main focus is residential services; however, their rehabilitative services include life skills and accessing community resources. Other services for persons with mental/developmental disabilities (MR/DD) provided by Progressive Community Services pertain to Home Management (life skills), GRASP (respite/socialization), and Attendant (home care/respite).
- The *St. Joseph/Buchanan County Health Department* provides case management services to individuals and families affected by HIV/AIDS. Components of the program include intake and referral, housing/rental assistance, utility assistance,

food vouchers, medical care referral and payment assistance, medications, referral and linkage to mental health and substance abuse treatment and services, transportation assistance to medical services, federal and state agencies, and for case management visits. A Community Health Nurse, Health Educator, and HIV Care Coordinator are housed in The St. Joseph-Buchanan County Health Department's facilities at Patee Market. A consortium meets quarterly to identify needs, barriers, and to resolve issues and problems encountered by persons with HIV/AIDS infections. The HIV Care Coordinator assists the clients in locating affordable housing.

- The *City of St. Joseph* continues with the implementation of the Mid-City Neighborhood Revitalization Strategy by targeting Community Development Block Grant and HOME Investment Partnership funds to construct new housing stock affordable to low to moderate income individuals and families. Private developers, *Habitat for Humanity*, *Trinity Management and Community Development Corporation*, and *Community Action Partnership* have joined forces with *Neighborhood Partners, Inc.*, to build infill housing and rehabilitate old housing stock. The City of St. Joseph and Neighborhood Partners, Inc., work in partnership to rehabilitate existing housing units and construct new housing that is affordable to lower income individuals. Habitat for Humanity is also very active in St. Joseph and has built several houses for people who could not otherwise afford to own a home.
- Four Community Based Development Organizations (CBDO's) are active in the Mid-City NRSA. Each CBDO addresses social and academic needs of Mid-City residents, including those of youth and senior citizens. They offer affordable child care and latchkey programs to keep the children off the streets, in addition to recreational and cultural activities.
- In its recently renovated third floor facility, the *YWCA* continues to provide protective shelter and services for women and children who are victims of domestic violence. The *YWCA* reserves one wing of the shelter for unaccompanied women while the other wing provides family suites for women with children. Although the *YWCA* provides some flexibility, most of the residents leave the shelter after a three-month period. Many of the women return to their abusers after intensive, structured services diminish. Others have difficulty finding affordable housing. Lack of supportive housing and services to successfully transition women back into the community is an ongoing issue and a priority need.

Requests for rent and utility assistance from individuals and families that have eviction and utility disconnect notices are constantly received by AFL/CIO Community Services, Catholic Charities of Kansas City-St. Joseph, Inc. and Interfaith Community Services, Inc. The Emergency Assistance Programs help individuals that are precariously housed and just one payment away from losing their homes. Most of these individuals have jobs, but they are the new working poor, the ones that probably lost their benefits due to layoffs, plant closings, or because the State-funded public assistance programs are no longer available to them.

Unmet Needs

The *Unmet Needs Committee*, consisting of a group of St. Joseph service providers, is facilitated by the United Way of Greater St. Joseph. The group began meeting in 1993 to address the needs of the individuals and families that were affected by the flood. The group continues to meet on a monthly basis to discuss the needs of the community and those of individual clients.

Unmet Needs Committee Membership Roster

AFL/CIO Community Services
Albany Regional Center
Catholic Charities of Kansas City-St. Joseph, Inc.
City of St. Joseph
Community Action Partnership
Helping Hand of Goodwill Industries
Interfaith Community Services, Inc.
Legal Aid of Western Missouri
Midland Empire Chapter of the American Red Cross
Midland Empire Resources for Independent Living (MERIL)
St. Joseph Health Department
Social Welfare Board of the County of Buchanan
The Salvation Army
United Cerebral Palsy
United Way of Greater St. Joseph, Inc.
Young Women's Christian Association (YWCA)
Youth Alliance
Division of Aging
Division of Family Services
Vocational Rehabilitation

The Unmet Needs Committee includes representatives from a wide range of service providers, municipal and State governmental agencies. When an individual seeks services in the community and it is determined that no existing program fits that individual's needs, or it is determined the client needs services of multiple agencies, the intake agency presents the case to the Unmet Needs Committee. The committee functions as a community safety net and therefore can help prevent homelessness.

Although a *voucher program* to assist homeless persons in obtaining shelter, meals, or services is not known to be available in this community, a consortium of social service agencies work together to provide the basic needs of the homeless and less fortunate individuals. Networking amongst the agencies maximizes the resources available and helps prevent duplication of services. The types of social service programs designed to assist the homeless and/or prevent low-income individuals and families with children from becoming homeless include:

- *Food pantries*, sponsored by local churches, parishes, and synagogues are conveniently located in proximity to lower income areas and public transportation routes. Food orders may be obtained once each month.
- Clients may shop once a week at *Harvest House* at America's Second Harvest of Greater St. Joseph, 915 Douglas Street, where they can obtain fresh produce and perishable products.
- The *Open Door Food Kitchen*, 510 Edmond Street, serves a hot noon meal from 11:30 a.m. to 1:30 p.m., Monday through Saturday. There is no charge for the meal. Bus tickets are provided to qualified, low-income individuals who lack transportation.
- *Division of Family Services*, 525 Jules Street, provides emergency food stamps five days after application, if the homeless individual has not previously applied for the assistance.

Medical and dental care and other social service programs are available to the homeless and persons threatened with homelessness.

- *Social Welfare Board*, 904 South 10th Street, provides services relating to health, nutrition and patient advocacy; and provides medical and dental care for the indigent.
- *Family Guidance Center*, 910 Edmond Street, implements therapy, education, rehabilitation services for children and adults, and provides an emergency medical program which is available to individuals who cannot afford needed medication, eye exams, or medical supplies on a once a year basis. Family Guidance Center is a source for the homeless to obtain financial assistance for prescriptions, medical supplies, and medically related transportation.
- *AFL/CIO Community Services*, 118 South 5th Street, has a clothes closet, food pantry, and furniture exchange, and provides information and referral services for

individuals needing assistance. The agency may be able to provide assistance to newly unemployed individuals who are over-income for other programs.

- *Legal Aid of Western Missouri*, 7th and Felix Streets, represents clients in hearings for public assistance, i.e., AFDC, Food Stamps, Disability, SSI, General Relief, and Medicaid. Legal Aid serves as a advocate on issues relating to utilities, unemployment compensation, mental health, landlord/tenant disagreements, family law, public housing problems, welfare termination, Social Security and Medicare problems, consumer fraud, and issues affecting senior citizens. The agency's staff conducts community legal education programs and assists organizations working with issues affecting the poverty community. Legal Aid gives advice and represents low-income persons and the elderly, ensuring they receive the public benefits they are entitled to, thus preventing them from becoming homeless.

Despite early setbacks, HMIS (Homeless Management Information System) is progressing and proving to be a useful tool. Our database not only includes homeless individuals and families, but data on those who are precariously housed. The HMIS partners now include the YWCA Women's Shelter, The Salvation Army, the temporary Cold Weather Shelter, with the St. Joseph Haven and Juda House coming on line once the facilities are completed. To get a better picture of the needs of St. Joseph's sheltered and unsheltered homeless population, other service providers are also committed to HMIS. AFL/CIO Community Services, Catholic Charities, Social Welfare Board of Buchanan County, Community Action Partnership and its satellite office in the Missouri Career Center, and InterServ are all entering data regarding the services they are providing and tracking referrals. Thus, HMIS is providing new insight on the needs of these individuals, the referrals they are provided, and the services that they were able to utilize.

Strategy for Addressing Needs of Non-Homeless Persons with Special Needs

The Continuum of Care established the following goals for addressing the needs of non-homeless individuals that have special needs::

Goal 1: Expand Housing Counseling

Mortgage delinquency counseling helps prevent low-income homeowners from losing their home and possibly becoming homeless. Homebuyer's education is designed to increase the probability of success for people, especially those with low incomes, who are in the process of purchasing a home.

Goal 2: Develop Single Point of Entry

Providing a single point of entry for delivery of services to the homeless will reduce barriers that may exist, such as lack of transportation, language, handicaps, etc. The CoC will appoint a committee to study the feasibility and provide recommendations to the Coalition regarding further steps to be taken.

Goal 3: Services to Veterans

The Salvation Army will investigate the housing and service needs of veterans.

Goal 4: Increase Affordable, Quality Housing Units

The United Way facilitates the Permanent Housing Committee as well as a Housing Information sub-committee and two others that are studying landlord issues and housing stock. The purpose of these committees is to determine and put into practice ways to increase the supply of affordable housing units in St. Joseph, and to disseminate information regarding the availability of housing to social service agencies that serve the low-income population.

**Chart 50:
Goals: Other Homelessness**

Goal: Other Homelessness	Action Steps	Responsible Person/ Organization	Target Dates
Goal 1: Expand Housing Counseling program	Implement mortgage delinquency counseling In conjunction with banks and other lenders, provide home buyers education	Catholic Charities	October 2006
Goal 2: Develop a single point of entry for delivery of services	Appoint committee to study feasibility	CoC Homeless Services Coalition	July 2005
Goal 3: Improve local services for veterans.	Increase knowledge of resources available and awareness of needs of Veterans.	The Salvation Army	July 2005
Goal 4: Increase the supply of affordable, quality housing units.	Establish priorities and needs, develop plan	United Way, Permanent Housing sub-committee.	July 2005

Discharge Planning Policy

The CoC's Discharge Policy sub-committee was re-organized, expanded, and is now called the Home Plan Committee. Members have been discussing discharge policies and procedures of various entities in the community. The sub-committee meets monthly and

includes twenty-two representatives from the community. The diverse representation includes individuals from the Department of Corrections, health care, the mental health system, and Probation and Parole. In addition, individuals from local halfway houses, the faith-based community and major community social service and governmental agencies actively participate in this group. The honest, non-judgmental exchange of information continues to be rewarding, informative and fruitful.

The community partners study the impact of discharges on the homeless population and through the identification of strengths and weaknesses of each policy will develop a systematic plan to eliminate homelessness and reduce discharges to the shelter system.

One of the growing issues that the CoC has identified is homelessness among ex-offenders. The Home Plan Committee was given the task of addressing that issue. The problem, as identified by the Home Plan Committee, is twofold:

1. Offenders who seek to be released on parole but have no appropriate housing for a Home Plan are caught in a “Catch 22” mode. On one hand, they are not eligible for HUD-funded housing because while they are in prison, they do not meet HUD’s definition of “homeless.” On the other hand, they cannot be released without approvable housing as part of their Home Plan. Therefore, increasing numbers of inmates need to stay in prison after being eligible for parole, thereby adding to the cost of our prison system.
2. Offenders that have served their entire prison sentence and are not supervised upon release by Probation and Parole, may have little or no relationship with family or significant others and find themselves without housing or the resources necessary to obtain house. Therefore, they become homeless.

The Home Plan Subcommittee meets regularly and works to improve discharge procedures of various entities in the community. Through networking, the sub-committee has identified concerns relating to individuals who have been incarcerated, those on probation and parole, and those who have completed their sentence. The sub-committee sadly discovered that the number of foster homes in the community has decreased from 80 to 40 in the past year while the demand continues to grow. Another concern is the number of elderly individuals forced to choose between paying their rent and utilities and purchasing necessary medical prescriptions.

Insert Chart CoC Homeless Population and Subpopulations Chart\

Explanation and Comments Pertaining to CoC Continuum of Care Homeless Population and Subpopulations Chart

The CoC has been under the impression that the needs of the “chronically” homeless women and children were being met, that The Salvation Army and the YWCA provide adequate shelter to meet the demands for women and children who are chronically homeless.

While conducting street counts in 2003 and 2004, the Street Survey sub-committee found no women living on the streets at the time the counts were conducted. However, in winter 2005, staff of the Cold Weather Shelter reported that six women came to the facility to seek shelter during the inclement winter months. Because the facility could only handle men, the women were referred to shelters for women. The CoC did prioritize the need for more beds for women and children who fit into the category of the “other homeless” population.

The Salvation Army and the YWCA routinely allow residents to remain in the shelters for periods longer than three months due to the unavailability of permanent supportive housing in the community. Housing opportunities for women and children with low incomes is a major gap in our community. These women and children become the “repeat” homeless families who face becoming homelessness when they lose a job, suffer a cut in hours of employment, or become ill.

Needs of Persons Threatened with Homelessness

The “precariously housed”

Many low-income families cannot make their rent or mortgage payments when a family member loses his job or has a reduction in income due to layoffs and plant closings.

Rent and utility assistance continues to be the only salvation for the many families who are “at risk” of becoming displaced because they lack sufficient funds to pay their rent, mortgage, or utilities. Agencies that provide emergency rent or utility assistance note that most of the “at risk” homeless live in older sections of the city where the housing stock is not energy efficient. Therefore, the householders are forced to spend a large portion of their income on high utility costs.

These individuals also need case management programs for crisis intervention, goal setting, budgeting, and referrals relating to health, support groups, employment, and housing, and other supportive services that will enable them to attain self-sufficiency and live independent and successful lives.

It is estimated that each month approximately 200-300 individuals and families need assistance with utilities, rent or mortgage payments, and other support services.

Non-elderly Persons Who Are Physically Disabled

Non-elderly persons between the ages of 18 and 59 years who are physically disabled need an apartment complex with staff available around the clock. They need housekeeping and personal care assistance.

Access to legal services

Two leading causes of homelessness in St. Joseph are the lack of decent, safe and sanitary housing, coupled with unlawful evictions. Many St. Joseph families need legal assistance to help them contend with obnoxious landlords who ignore requests for repairs, attempt illegal evictions, or try to illegally lock them out of their homes.

Disaster Assistance

Approximately 35 low to moderate- income households or families will lose their homes because of fire and other disasters. Many of the families will not have insurance and will

need monetary assistance and other support to help them relocate to suitable and affordable housing.

Lack of Affordable Health Care

According to the U.S. Census, approximately one-third of the population living in poverty has no health insurance. For families and individuals that struggle to meet housing and personal obligations, a serious illness or disability can start a downward spiral into homelessness. They lose their job, deplete their savings to pay for the medical care and other expenses, and eventually face eviction or foreclosure.

Needs of Special Populations Who Are Not Homeless

Several agencies provided insight on the special needs of specific groups of non-homeless individuals.

Persons with Mental Disabilities

Family Guidance Center for Behavioral Health Care reports 100 to 110 persons were discharged from short-term psychiatric facilities in 1999, linked to the Supported Community Living Services Program, and transitioned into one of the supported housing programs. In addition, about 35 individuals were discharged and transitioned to residential care facilities. These individuals continue to need:

- ◆ Home health care during convalescence.
- ◆ Respite care that provides temporary housing for people with chronic mental illness who have short-term mental health and/or medical needs that are treatable on outpatient basis. (est. 96 persons/year)
- ◆ Personal Care Workers to assist during transition of clients from residential care to apartments.

These individuals need case management programs to help them access residential care, apartments or houses. Supervised apartments are needed for clients who have apartment living skills, but need their medications monitored.

About 2/3 of the mentally disabled do not qualify for, are on a waiting list for HUD housing, or have a Section 8 voucher without an approved dwelling. Clients with reputations for behavioral problems (impulsive lease jumping, chaotic and messy

housekeeping) need help in overcoming their problems through increased support, personal care and supervised apartments.

Teens with substance abuse problems

There is a need for a group home for adolescents with substance abuse issues. There is also a need for focused rehabilitation programs for those teens dealing and using substances.

Alcohol addicted or drug addicted

Treatment programs for young women, especially those addicted to crack cocaine, need to include childcare, transportation, housing assistance, and general education. Young mothers also need help with parenting skills, co-dependency, sexuality, and relationships. Housing is a major problem. According to the agency's Women's Coalition, there is housing for men going through treatment, but St. Joseph lacks transitional facilities for women.

Clients released from treatment need jobs, homes, and support groups. Funds to assist single individuals with their housing costs are scarce; case management is needed in nearly all cases. Recovering alcohol/drug abusers have few resources for rental assistance, peer groups, housing assistance.

Veterans

The 2000 Census reports there are 8,242 Civilian veterans in St. Joseph. There are 9,565 veterans in Buchanan County. Many of the veterans have attained or passed the age of 65 years – as the county lost 329 vets during the last decade, 1990-2000.

Almost 40% of the men that stayed in the Cold Weather Shelter earlier this year were veterans and 30% of the individuals counted in the January 28, 2005 point-in-time survey were veterans.

The U. S. Department of Veterans Affairs estimates 30% of the homeless population are veterans. About 7% contend with severe mental illness, 75% are chemically dependent, and 22% have personality disorders. Although they have access to medical services located in Leavenworth, Kansas, veterans need to be able to obtain medical treatment at a local clinic. A local site would eliminate transportation problems now incurred by this community's veterans and their families. Other needs of veterans include a drop-in center for camaraderie and information, facilities for personal hygiene, transitional housing, and training in economic literacy, budgeting, and job skills.

The Department of Veterans Affairs offers a wide array of special programs and initiatives specifically designed to help homeless veterans to live as self-sufficiently and independently as possible. The VA's specialized homeless veterans treatment programs were first authorized in 1987 and the programs strive to offer a continuum of services, including aggressive outreach to those living on the streets and in shelters who otherwise would not seek assistance, clinical assessment and referral to needed medical treatment, long-term sheltered transitional assistance, employment assistance, and supported permanent housing.

The Salvation Army participates in the grants and per diem programs offered by the Department of Veterans Affairs and now has a staff person that concentrates on helping veterans get the benefits and services they need to which they are entitled.

Elderly and Frail Elderly

CHAS Data, *Housing Problems Output for Mobility and Self Care Limitation*, shows there are 1,557 elderly 1 or 2 member households that have at least one person that is 75 years or older; 343 of these elderly households have mobility or self-care limitations. Most of them are renters. There are 1,318 younger elderly 1 or 2 member households (either person is age 62-74 years); about 355 of these households need assistance with basic physical activities or have conditions that make it difficult to dress, bathe or get around inside their homes.

The frail elderly need *affordable* residential-care facilities that offer supervised medication administration, 24-hour staffing, meals, and help with personal care. The residential-care facilities provide those senior citizens that are no longer able to live at home with another option to a nursing home setting.

Persons diagnosed with AIDS and related diseases:

On March 10, 2000, fifty-eight (58) persons were enrolled in the HIV case management program facilitated by the Buchanan County/St. Joseph Health Department. There were sixty (60) enrollees during the previous month. However, 45% of the individuals identified by surveillance as HIV+ and living in this region are not in case management. Marketing efforts are underway to increase the number enrolled to ensure all HIV+ people are receiving all the required services.

Currently, housing needs are met for the 41 HIV+ persons living at or below 150% of poverty by utilizing a variety of housing programs. Seven clients are on the Section 8 Program. Thirteen, primarily homeowners, are benefiting from the HOPWA (Housing

Opportunities for Persons with AIDS) Program and ten (10) others are being assisted by the Ryan White Emergency Rental Assistance Program, a program that provides transitional funding for rent and/or utilities for persons on waiting lists for permanent homes. Ten others are living with friends or relatives.

Although at this time, the HIV/AIDS housing needs are being met, the funding sources and the assistance are not permanent. The Ryan White Program is temporary; HOPWA is facing a new funding cycle. Any loss or reduction in either program would force them, and any new enrollees, into homelessness. On average, incidences of HIV/AIDS individuals and families being at risk of being homeless occur three or four times a year.

According to the AIDS Care Coordinator, individuals with HIV/AIDS continue to seek assistance and testing in Kansas City, due to concerns about confidentiality and the availability of a wider range of treatment options, including clinical trials.

The Northwest Missouri Ryan White Consortium meets quarterly to identify needs, barriers, and find resolutions to issues and problems encountered by persons with HIV/AIDS infections. Housing issues continue to be a problem and housing assistance and services are on-going needs. The St. Joseph community lacks congregate or supportive living facilities. The amount of acceptable housing is limited, rent costs are high, and utilities are frequently not included in rent payments. Sometimes neighbors object.

The health and psychosocial needs of persons with AIDS continually need to be brought to the attention of the public and medical community. Formation and/or expansion of local networks are essential to meet ongoing demands. Support groups for persons with HIV, their caregivers, and loved ones are needed. Psychiatric services are not regularly available.

Dental care and respite childcare also are major concerns. Dental care is available on a very limited basis to clients who are too ill to travel to Kansas City. Childcare is unavailable to persons seeking respite or for medical services, especially in the rural areas.

Observations regarding the housing needs of persons diagnosed with AIDS and related diseases were provided by several agencies. Inter/Serv commented that the fact a person has been diagnosed with AIDS magnifies an already existing housing problem. Decent, safe, and affordable, single occupancy rental units are needed to address the unsheltered homeless who have AIDS. In addition to a continuum of care, hospice services will be needed.

Other needs that were cited include community education to desensitize the prejudices of the community, case management, prevention education, and local health care facilities.

Legal Aid says the sheltered individuals need counseling and transportation to health care providers, while the unsheltered need temporary housing, in addition to counseling, transportation, and health care.

A "half-way house" or assisted living program for dual diagnosed HIV+ clients, i.e. those who are chemically dependent or have AIDS related dementia and mental problems, was identified as a need by the AIDS Care Coordinator.

There continues to be a shortage of rent-assisted housing, as well as supported living environments for people who suffer from AIDS-type dementia. Catholic Charities also identified case management and emergency funds for rent and utility assistance and access to food pantries as a need of this special sub-population.

Persons with developmental disabilities

According to Progressive Community Services, there are approximately 100 persons with developmental disabilities in St. Joseph. Many of the individuals need help finding affordable one-bedroom units that are located in a safe area, and in close proximity to other amenities.

Persons who are physically disabled

United Cerebral Palsy estimates three percent of the total population, approximately 2,400 individuals, have permanent conditions that interfere with their ability to do something independently -- walk, see, hear, learn, or lift. About 800 of the disabled adults probably need supportive housing.

Alternate Housing for Families Requiring Lead-Based Paint Chelation

With 58% of St. Joseph's housing stock being built before 1959, the family of a child tested by the Buchanan County/St. Joseph Health Department and found to be lead poisoned has difficulty finding temporary or alternative housing during the thirty-day chelation period. These families need help in finding temporary housing and, if they are low-income, the resources to pay for the temporary housing and whatever is necessary to eradicate the lead-based paint in their home.

Homeless Youth

Because so many troubled youth temporarily move into the homes of their friends, it is difficult to project how many teenagers are homeless at any one period. Homeless Case Managers in the St. Joseph School District recently reported to the Continuum of Care that there are 32 youth ages 17-18 that are homeless according to HUD's definition. There are 122 other younger youth that are homeless and need assistance.

The CoC has determined transitional housing and shelter for homeless teens is a priority in St. Joseph. Another concern is the number of young parenting and/or pregnant teenagers that seek shelter at the YWCA. The School District has forty pregnant students; one is attending Middle School. There are 100 parenting and pregnant high school students.

Transitional housing for families living in substandard housing

The need for transitional housing for families living in substandard housing -- in units that are in such poor condition that they are neither structurally nor financially feasible for rehabilitation -- or in units that cannot be rehabilitated without involuntarily displacing the occupants -- is becoming more apparent. The actual numbers of individuals and families with the worst case needs are unknown, however. Code enforcement is precarious because, should the family be forced to leave, there is no transitional housing facility to provide them immediate help.