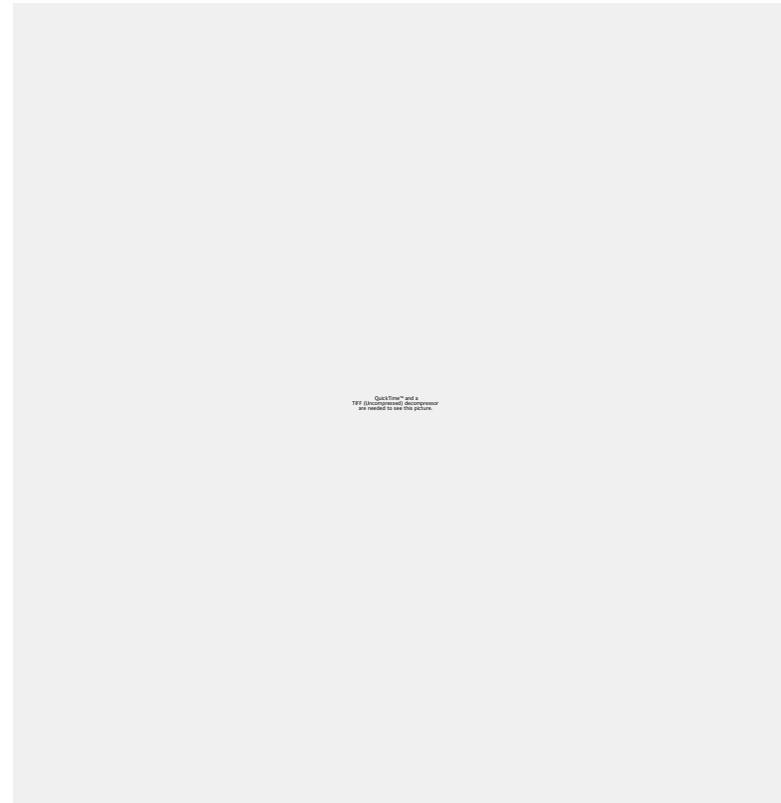


DRAFT
California Action Plan
to Address
Homelessness among
Families with Children

Review Copy
November 7, 2006



Introduction

When a family with children becomes homeless, the consequences of that period of instability can persist for years. Each year at least 1.35 million children are homeless in the United States and on any given day 200,000 children in families are homeless.¹ Families with children are the fastest growing segment of the homeless population.² A study done in Los Angeles this year found that families constitute 25.6% of the homeless population there.³ The numbers are shocking and the results are tragic. Children who experience homelessness are physically sicker, experience more stress and trauma, and struggle more in school when compared with children who have not, and these effects can last into adulthood.⁴ **This plan signifies California's commitment to end family homelessness in this State. TRINA—are you comfortable with this line?**

Vision Statement:

Guided by the needs of families, California will prevent and end family homelessness through an adequately resourced and well-coordinated system of housing, income supports, and collaborative services that recognize family strengths.

About the Plan

This Action Plan to Address Homelessness among Families with Children in California is a companion document to the Plan to Address Chronic Homelessness. Teams of State agency personnel and community representatives attending Policy Academies on Homelessness developed both strategic plans. The Policy Academy for Families with Children Experiencing Homelessness was sponsored by the Federal departments of Health and Human Services and Education, with collaboration by the Federal departments of Housing and Urban Development, Veterans Affairs, Labor, Agriculture, Justice and the U.S. Interagency Council on Homelessness. The Policy Academy for People Experiencing Chronic Homelessness was sponsored by the Federal departments of Health and Human Services, Housing and Urban Development, Veterans Affairs and Labor.

Members of the Homeless Families Team included Mary Ault, Deputy Director for Families and Children, California Department of Social Services; Kelly Brooks, Legislative Representative, California State Association of Counties; Scott Carney, Assistant Secretary, California Health and Human Services Agency; Carmen Delgado, Assistant Deputy Director, California Alcohol and Drug Programs; Kevin Gaines, Deputy Director for Local Government and Community Relations, California Department of Social Services; Trina A.

¹ The National Center on Family Homelessness. "America's Homeless Children"

² *Id.*

³ Shelter Partnership, Inc. (2006). "Operating at Capacity: Family Shelters in Los Angeles County."

⁴ The National Center on Family Homelessness (1999). *Homeless Children: America's New Outcasts.*

Gonzalez, Special Assistant to the Secretary, California Health and Human Services Agency; Sharon Johnson, Homeless Services Administrator, City of San Diego; Dariush Kayhan, Director, San Francisco Department of Human Services; Natalie Profant Komuro, Director of Policy and Strategic Planning, Los Angeles Homeless Services Authority; Dr. Stephen W. Mayberg, Director, California Department of Mental Health; Christine Minnehan, Western Center for Law and Poverty; Frank Motta, Project Manager, Governmental Relations and Planning, Santa Clara County Social Services Agency representing the County Welfare Directors Association of California; Theresa Ann Parker, Executive Director, California Housing Finance Authority; Ruth Schwartz, Executive Director, Shelter Partnership; Chris Westlake, Assistant Director for External Affairs, California Department of Housing and Community Development and Martha Fleetwood, Executive Director, HomeBase/The Center for Common Concerns, Inc., as facilitator.

As companion Plans, there is overlap in some of the strategies and action steps, particularly those that are administrative and support leadership. The Chronic Homelessness Plan covers the needs of families who experience chronic homelessness; therefore, the families' plan does not. Likewise, the needs of homeless youth are covered only in the Chronic Homelessness Plan. That document can be accessed at [\[give web address\]](#)

Mission Statement:

To prevent homelessness and to shorten the length of time families remain homeless by focusing statewide efforts towards providing housing as the first and primary solution.

Core Actions

There are five core actions that the State can take to accomplish this mission, and these inform the content of both plans. The State can:

- Lead the way in strengthening and enforcing State policy and legislation to address the needs of families who experience homelessness;
- Provide support in the form of technical assistance and help build capacity on the local level, in California cities and counties;
- Educate the public about homelessness, its causes and its solutions;
- Establish priorities and incentives to assess and evaluate the effectiveness of programs to address homelessness, thereby supporting improvement, and
- Provide resources, by making appropriate government-owned property available, streamlining access to State monies and otherwise supporting the goals set forth in this Plan.

Goal 1: Identify Preventing and Ending Family Homelessness As A Statewide Priority And Provide State Level Leadership And Resources

After more than twenty years responding to family homelessness, the solutions to this crisis are clear cut and well-known: they include affordable housing; a coordinated system of service supports to help families maintain health and ongoing residential stability; and access to adequate income streams through a combination of employment opportunities and benefits programs. Despite this knowledge, efforts to help families avoid or end homelessness have consistently been hampered by a lack of adequate resources and poor coordination across the multiple systems and programs addressing their needs. It is clear that in order for local jurisdictions to take effective action to prevent and end family homeless, both at the scale that is necessary and with the cross-system coordination needed for success, State level leadership and resource commitments are required.

The State of California has already indicated its strong commitment to the effort to prevent and end family homelessness. In November 2005, California sent a State team to attend the Federally-convened Policy Academy for Families with Children Experiencing Homelessness and then committed to a statewide planning process to develop a Ten Year Plan For Ending Family Homelessness. This collaboratively-developed Plan establishes preventing and ending family homelessness as a priority for the State, lays out a strong vision for accomplishing this effort, and identifies key strategies and actions for the State to take that are consistent with its role and responsibilities.

As a first step, the Plan calls for the creation of a new cabinet level position on homelessness to facilitate State leadership and action on this issue and to oversee implementation of this Plan and the Plan to Address Chronic Homelessness. The State's role includes enacting State level policy and allocating funding to support solutions to homelessness; advocacy for Federal policy and funding to support State efforts; use of policy, incentives, technical assistance and other measures to encourage and facilitate local level action; public education to generate broad-based support for this effort; and data collection and analysis to guide policy and program efforts and identify best practice interventions. Much of this work will be carried out by the new cabinet level position, the Interagency Council and relevant State departments and agencies which will be directed to adopt preventing and ending homelessness as a central goal and to adjust their policies and programs accordingly.

Strategy 1.1: Provide strong State leadership to direct and coordinate statewide efforts to implement the Plan and prevent and end homelessness.

Implementation of the State’s Ten Year Plan for Ending Family Homelessness will require strong leadership, coordination and oversight. Creation of a cabinet level position makes clear the State’s intention to prioritize this effort; provides a clear platform for leadership; and facilitates, in conjunction with the Interagency Council, both a reorientation at State agencies and departments to focus on ending homelessness and the cross-department and cross-agency coordination that will be necessary to effectively address this issue. In addition, creation of a consumer advisory board will provide a forum and opportunity for those with experience of homelessness to help guide the State’s efforts in this area. Key to the State’s role in advancing the effort to end homelessness will be creation of a policy and funding environment that supports the development of effective solutions. This includes advocacy for changes in Federal and State policy, regulations and funding to better advance efforts to address homelessness; use of policy, regulations and other incentives to encourage appropriate local action; and public education to put a spotlight on the issue of homelessness and galvanize broad-based support.

Manager: Office of the Governor	
Implementer: Office of Planning and Research	
Expected Outcomes: More attention and resources devoted to family homelessness	
Benchmarks:	Completion Date (Estimated):
<ul style="list-style-type: none"> ● Identification of State and local leaders and supporters for Plan implementation ● Appointment of cabinet level position (1.1.1) ● Establish Consumer Board (1.1.2) ● Instruct State lobbyists (1.1.3) ● Appointment of Coordinator (1.1.4) ● Begin media outreach and public education campaign (1.1.5) 	Years 1-3 Years 1-3 Years 1-3 Years 1-3, ongoing Years 1-3 Years 1-3, ongoing

Action Step 1.1.1

Create and fund a cabinet level position to lead the State government in advancing and coordinating its efforts to prevent and end homelessness, including championing the Plan and building political momentum for its implementation.

Action Step 1.1.2

Create and fund a consumer advisory board to the State Interagency Council to provide guidance on implementation of this Plan as well as to ensure that State efforts on homelessness are culturally competent and responsive to the needs and perspectives of families who are homeless or at-risk.

Action Step 1.1.3

Advocate on the Federal and State level to promote efforts to **prevent and end** family homelessness, including lobbying for increased funding for housing and services; changes in policy and regulations to allow integration and blending of funding streams to facilitate efficient use of resources; and removal of unnecessary barriers to effectively serving this population.

Action Step 1.1.4

Align State and local efforts to **prevent and end** family homelessness by 1) using existing laws and regulations and providing incentives to strengthen local activity to **prevent and end** family homelessness; 2) fostering relationships and communication between the State Interagency Council and local Continua of Care on Plan implementation and related policy and program development; and 3) identifying and resolving barriers to service provision. Mechanisms to carry out this Action Step should be developed in Years 1-3 of the new Coordinator.

Action Step 1.1.5

Develop a statewide media outreach and public education campaign to provide information about family homelessness, including fiscal and social impacts and cost-effective best practices, and to galvanize broad-based support and action. Target information to elected officials and conduct outreach to the business community, faith-based organizations and community organizations to garner support and resource commitments.

Strategy 1.2: Designate preventing and ending family homelessness as a joint mission of all relevant State agencies and departments and hold them accountable for their success in this effort.

The State’s commitment to preventing and ending family homelessness will be carried out in large part through the State agencies and departments who have contact with this population. As such, in order to make the State’s commitment real, these agencies and departments must incorporate this goal into their work and develop outcome measures that monitor their effectiveness in serving families who are homeless or at-risk.

<p>Manager: Office of the Governor</p> <p>Implementers: Department of Health and Human Services; Department of Housing and Community Development; Department of Education</p> <p>Expected Outcomes: State agencies and departments will act effectively to prevent and end family homelessness</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Plans, policies and budgets developed by State agencies will reflect the goal of preventing and ending family homelessness (1.2.1) • Relevant State agencies will develop outcome measures (1.2.2) 	<p>Completion Date (Estimated): Ongoing</p> <p>Years 1-3</p>

Action Step 1.2.1

Require all State agencies and departments to incorporate the goal of preventing and ending family homelessness in their planning, policy and relevant program development and budgeting.

Action Step 1.2.2

Implement homeless and housing related outcome measures for all relevant State agencies, departments, contractors and grantees. Measures will be appropriate for each agency or department function, but will, at a minimum, include the housing status of clients at intake and exit; homelessness-related services provided, both directly or through referral; and entitlements applied for and received. Measures will be developed to be consistent with and to complement outcomes measures currently in place and required by Federal and local governments.

Strategy 1.3: Collect and analyze data on family homelessness and client outcomes to monitor implementation of this State Plan, identify best practices and guide ongoing policy design, program development and budget allocation.

In order to be most effective, the State’s efforts to address family homelessness should be grounded in data about the characteristics and needs of this population and about the effectiveness of the policy and program interventions being used. Statewide data collection will allow tracking of overall progress in ending family homelessness and monitoring of client outcomes and program effectiveness. Based on data analysis, best practices can be identified and disseminated, policy and programs can be adapted to facilitate improved outcomes, cost savings can be redirected to support effective interventions, and data can be used to lobby for changes in policy, programs and funding.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Office of Planning and Research</p> <p>Expected Outcomes: Determine if this Plan and the related activities are being implemented effectively</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Develop homeless policy standards for State agencies and departments • Annual consensus on best practices and corresponding policy/administrative action needed for implementation taken • Develop Data Clearinghouse (1.3.1) • Develop capacity to collect and analyze data at State and local level (1.3.1) • Determine workable models (whether Best Practice, EBP, promising practice, etc.) (1.3.2) • Organize statewide forums about best practice models (1.3.2) • Provide county level training and support for implementation of best practice models (1.3.2) • Expand effective interventions (1.3.3) 	<p>Completion Date (Estimated):</p> <p>Years 1-3, ongoing</p> <p>Ongoing</p> <p>Years 1-3</p> <p>Years 4-10</p> <p>Years 1-3</p> <p>Years 4-10</p> <p>Years 1-3</p> <p>Years 4-10</p>

Action Step 1.3.1

Consistent with and building upon Federal Homeless Management Information Systems, create a statewide Social Services Data Clearinghouse that collects and analyzes data on family homelessness, program effectiveness and client outcomes in order to track statewide progress in meeting the goal of ending family homelessness and collect information on best practices and promising models. Facilitate the development of local capacity for data collection and analysis through technical assistance and by building funding for data collection and evaluation into State grants and contracts for services for homeless families and those at-risk.

Action Step 1.3.2

Facilitate the implementation of best practice models by 1) developing data to demonstrate to elected officials and community leaders that prevention and other best practices are cost-effective in ending family homelessness, 2) organizing statewide forums to share information among policy makers and practitioners, and 3) providing county level technical assistance, training and funding. Solicit support for the forums and trainings from the private sector and foundations.

Action Step 1.3.3

Based on statewide data collection and analysis, invest any cost savings which accrue to mainstream systems and programs from interventions to prevent and end family homelessness, to support continuation and expansion of those interventions found to be most effective.

Goal 2: Increase The State’s Supply Of Affordable Housing For Families Who Are Homeless Or At-Risk Of Homelessness

The severe deficit of affordable housing in California and the growing gap between income and housing costs is the primary cause of homelessness for families. The combination of high housing cost-burden with illness, addiction, low job skills and/or lack of affordable childcare is pushing a growing number of the State’s families into precarious housing arrangements and outright homelessness. This situation is particularly difficult and damaging for the children of these families as growing up in shelters and on the streets or repeatedly changing housing means that they lack the stability, security, and healthy role models critical to healthy development. In addition, even as compared with low income children in housing, children who are homeless are more likely to have health problems⁵, experience more disruptions in schooling and friendships⁶, and those who are pre-school age, are more likely to have one or more developmental delays⁷. With childhood housing instability and homelessness identified as one of the indicators of future homelessness⁸, these children are at high risk of continuing to live poverty-stricken and marginalized lives as adults.

Recognizing the central importance of housing to healthy family functioning, a key focus of this Plan is aimed at shortening the length of time that families are homeless by providing housing as the first and primary solution. This approach, known as *Housing First*, works to rapidly re-house families in permanent, affordable rental housing of varying types, without requiring that they spend extended time in transitional programs. Instead, families are assisted in moving directly into affordable rental housing in residential neighborhoods as quickly as possible, thus helping them to regain independence, self-confidence and control over their lives. Then, once they are in housing, they receive home-based case management to help them access the services and supports needed to address other needs. With the base of stability and security that permanent housing provides, families are in a better position to be able to successfully address the health, mental health, addiction and income issues that caused or were exacerbated by their homelessness.

However, in order to implement a *Housing First* approach to addressing family homelessness, California must address its severe deficit of affordable housing. It is currently estimated that the State backlog of affordable home production is over 651,000 units.⁹ This problem is even more pronounced for housing affordable to people with extremely low incomes, those whose incomes are less than 30% of the area median, which includes families who are homeless or at-risk. Because their incomes are so low, this housing requires very deep subsidies, and so is not only expensive to build, but very complicated to finance. Effectively addressing this crisis

⁵ Weinreb, L., Goldberg, R., Bassuk, E., & Perloff, J. N. (1998). Determinants of health and service use patterns in homeless and low-income housed children. *American Academy of Pediatrics* 102(3): 554-562.

⁶ Masten, A. S., Miliotis, D., Graham-Bermann, S. A., Ramirez, M. & Neeman, J. (1993). Children in homeless families: Risks to mental health and development. *Journal of Consulting and Clinical Psychology*, 61(2): 335-343.

⁷ Bassuk, E. L. & Rosenberg, L. (1990). Psychosocial characteristics of homeless children and children with homes. *Pediatrics*, 85(3): 257-261.

⁸ Burt, Martha R. “Demographics and Geography: Estimating Needs” for the 1998 National Symposium on Homelessness Research.

⁹ “Expanding Opportunity: New Resources to Meet California’s Housing Needs”. A PolicyLink Report for Housing California, Executive Summary, Winter 2005.

requires State leadership. The State must actively signal through policy and administrative mechanisms that the development of housing for families who are homeless or at-risk is a priority and foster and support local action to develop new units. In addition, the State has a key role to play in helping to provide the financial resources needed to develop affordable housing through strategies such as the development of a *Homeless Housing Trust Fund* and providing incentives to encourage private developers to help in this effort. Finally, the State can provide leadership in addressing barriers to housing access through education and outreach to landlords; funding for programs that provide housing advocacy services and help with move-in costs; and advocacy for changes in policies that limit access to subsidized housing by needy sub-populations. And, until sufficient housing is in place to meet the needs of these families, the State must work with localities to provide resources for shelters and interim housing (that is, short-term housing provided for the minimum time needed to access permanent housing, with services focused on an immediate and comprehensive needs assessment, to replace emergency shelter and/or transitional housing) to address families' immediate crises, while permanent housing is being arranged.

Best Practice Spotlight

Housing Subsidies Prevent Homelessness For Families

Housing subsidies have been identified as a key factor in preventing homelessness for poor women and children.

- Data indicates that even the most troubled families can escape homelessness and maintain their housing when they receive a housing subsidy, regardless of whether or not they receive services.*
- A study of homeless families in New York City found that those who left homeless shelters with a housing subsidy were 21 times more likely to be stably housed five years later than other formerly homeless families without housing subsidies.**
- In addition, housing subsidies are linked with success by families in finding and retaining employment. Possible reasons for this are that subsidies help to stabilize families' living situation and free up funds to cover work-related expenses such as childcare and transportation.***

*Rog, D. J., & Gutman, M. (1997). The homeless families program: a summary of key findings. In Isaacs & J. R. Knickman (Eds.) *To improve health and health care: The Robert Wood Johnson Foundation anthology*. [209-231]. San Francisco: Jossey-Bass Publishers and Rog, D. J., Gilbert-Mongelli, A. M., & Lundy, E. (1998). *The Family Unification Program: Final Evaluation Report*. Washington, DC: CWLA Press.

**Shinn, M., Weitzman, B. C., Stojanovic, D., Knickman, J. R., Jimenez, L., Duchon, L., James, S. & Krantz, D. H. (1998). Predictors of homelessness among families in New York City: from shelter request to housing stability. *American Journal of Public Health*, 88(11): 1651-1657.

***Center On Budget And Policy Priorities, "The Increasing Use of TANF and State Matching Funds to Provide Housing Assistance to Families Moving from Welfare to Work.", February 2000.

Best Practice Spotlight

Family Housing Scholarship Program Fremont, California

The City of Fremont Housing Scholarship Program provides reduced rent to low-income parents who are full-time students, working toward a certificate or degree that leads to employment, and are within 18 months of graduation. Families accepted into the program are placed in subsidized housing units with rents of approximately \$330 for a single bedroom and \$360 for a two-bedroom unit. After 18 months, families have a maximum of three months at the scholarship rental rate to find a full time job. If employment is found within 3 months, families are awarded another 5 months at the scholarship rental rate. After that the subsidy ends and rent increases. However, Mid-Peninsula Housing Coalition, a developer of several of the properties that include scholarship units, has worked with the City to create a stair-stepped below-market rent structure for employed graduates of the program. The program combines job training and housing with case management services provided by Tri-City Homeless Coalition.

Administered by the Housing Office of the City of Fremont, the program is a public/private partnership and the advisory board is composed of landlords, realtors, churches, community groups, city council members, and a scholarship program graduate. Approximately 98% of the recipients of the scholarship are single mothers and more than half are homeless or at risk of becoming homeless when they enter the program. More than 300 families have graduated from the scholarship program and of those, over 95% have completed training, secured employment in their field, and remain stably housed.*

* *Ending Bay Area Homelessness Finding the Way Home: A Philanthropic Guide to Housing Solutions*, Bay Area Foundation Advisory Group to End Homelessness, May 2006.

Best Practice Spotlight

Beyond Shelter – Housing First Program Los Angeles, California

Beyond Shelter's Housing First Program helps homeless families move directly into affordable rental housing in residential neighborhoods as quickly as possible, and then provides six months to one year of individualized, home-based social services support "after the move" to help each family transition to stability. Their approach is implemented through four stages:

- **Crisis Intervention & Short-Term Stabilization:** helping families access emergency shelter services and/or short-term transitional housing and address crisis needs.
- **Screening, Intake and Needs Assessment:** development of an action plan for clients with short- and long-term goals and objectives with concrete action steps.
- **Provision of Housing Resources:** addressing any housing barriers and assisting families in moving into permanent, affordable housing in a safe neighborhood.
- **Provision of Case Management:** before the move into permanent housing, case management services to identify family needs and ensure that sources of income through employment and/or public benefits are in place, and after the move, time-limited case management services to help families solve problems that may arise and connect them with community services to meet longer-term needs.

Program Outcomes include:

- 88% of the over 2,500 Los Angeles families enrolled in Beyond Shelter's Housing First Program from 1989-2001 have been relocated to and stabilized in permanent housing.
- An evaluation of 185 families enrolled in this program found that over 80% of adults were attached to the labor force through employment, and others were enrolled in job training programs. Only 2.3% of those who entered the program with reported substance abuse problems had relapsed and only .4 % of domestic violence survivors had returned to a dangerous relationship.

http://www.beyondshelter.org/aaa_initiatives/ending_homelessness.shtml and <http://www.endhomelessness.org/families/srcbk/BeyondShelter.pdf#search=%22beyond%20shelter%22>

Strategy 2.1: Adopt Housing First as the central plank of the State’s effort to end family homelessness and, through State policy and administrative measures, support and foster the development of the affordable housing necessary to meet the needs of this population.

Given the damage to children from childhood homelessness and housing instability and the tremendous costs of homelessness on State-funded systems of care, the State has a leadership role to play in promoting policy and program approaches, such as Housing First, that shorten the length of time that families are homeless. It also has an essential role to play facilitating action by local jurisdictions to develop housing to meet the needs of homeless families, including by strengthening and enforcing State policy and regulations relating to the planning and development of affordable housing; establishing priorities and incentives for meeting the housing needs of homeless families; making appropriate government-owned property available for housing development for this population; providing support and technical assistance to local jurisdictions in reforming zoning and planning processes and supporting local developers in developing housing for this population; streamlining access to State housing monies in order to help reduce the costs of development; and establishing regulations and providing incentives to maintain the stock of housing affordable to families who are homeless or at-risk.

<p>Manager: State Interagency Council on Homelessness; Department of Housing and Community Development</p> <p>Implementer: Department of Housing and Community Development; California Housing Finance Agency; Department of Mental Health; Department of Social Services; Alcohol and Drug Program; Department of Corrections</p> <p>Expected Outcomes:</p> <ul style="list-style-type: none"> • All families that experience homelessness will be placed in an affordable housing unit very quickly • Enough affordable housing units will be developed to meet the needs of this population 	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Enact legislation adopting Housing First as a key component of the State’s effort to end family homelessness (2.1.1) • Establish statewide affordable housing goals for homeless families (2.1.2) • Preservation of Programs Funded through Proposition 46 targeted to low-income housing • Identification of enforcement issues of Housing Element law (2.1.3) • Provision of incentives to increase affordable housing through other means, e.g. transportation funding (2.1.3) • Passage of legislation to improve RHNA process and/or housing element (2.1.3) • Infrastructure bonds containing funding for HCD programs, including homeless shelters, supportive housing and rental housing (2.1.3) • Inventory State, county and city-owned property that could be developed into affordable housing for homeless families (2.1.4) • Provide technical assistance to local jurisdictions to make zoning and planning changes (2.1.5) • Retain current MHP program (2.1.7) 	<p>Completion Date (Estimated):</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Years 1-6</p> <p>Years 1-3</p> <p>Years 4-6</p> <p>Years 4-6</p> <p>Years 4-6</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Ongoing</p>

Action Step 2.1.1

Enact legislation adopting Housing First as a key component of the State’s effort to end family homelessness and allocate resources for technical assistance and training to assist local jurisdictions in implementing this approach.

Action Step 2.1.2

Establish statewide affordable housing goals for homeless families based on Continuum of Care Plans and State and selected key local Consolidated Plans. Target resources to the development of permanent affordable housing for homeless families with children in State housing. Require the recipients of State funding to provide data on the housing pipeline to allow effective tracking of progress in meeting the goal of housing this population.

Action Step 2.1.3

Strengthen and enforce Housing Element law to encourage local jurisdictions 1) to incorporate in their Housing Elements the needs of homeless families and the strategies to address these needs as identified in local 10-year and other homeless planning documents; and 2) to identify adequate sites to meet the housing needs of families, including shelter and interim housing, transitional housing, and permanent housing, including scattered site apartments with transitional case management, supportive housing, and service-enriched housing.

Action Step 2.1.4

Reach State level agreement on what government-owned property is suitable for developing housing for homeless families. Inventory available State, county and city-owned property throughout the State and make it available to be developed for housing for homeless families. Explore the development of community land trusts for the development of housing for this population using these properties.

Action Step 2.1.5

Provide support, assistance and incentives to encourage local jurisdictions to make zoning and planning process changes to facilitate and streamline the development of affordable housing for homeless families. Provide technical assistance to local jurisdictions and developers and facilitate the development of partnerships and other collaborations in order to enhance capacity for developing housing for families who are homeless or at-risk.

Action Step 2.1.6

Improve access to State funding by consolidating and streamlining funding applications for services, treatment, operations and capital to develop housing and conduct outreach and technical assistance to local jurisdictions about available State housing and services funding and resources.

Action Step 2.1.7

Develop a compendium of housing models that meet the needs of homeless families.

Strategy 2.2: Create sustainable and flexible funding sources to support the expansion of housing availability to families who are homeless or at-risk of homelessness.

Development of housing to meet the needs of families who are homeless or at-risk will require significant resources from all levels of government and from the private sector. Both statewide and local sources of financing are needed to cover housing development, rehabilitation, subsidies and services costs as are incentives to encourage developers and private owners to set-aside units in market rate developments for this population. Such incentives can include tax breaks, density bonuses, and targeting of revenue to activities that help sustain affordability of the units, such as debt reduction, rental subsidies, and long-term leases with rental caps.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Department of Housing and Community Development; California Housing Finance Authority; Department of Social Services; Department of Mental Health; Alcohol and Drug Program</p> <p>Expected Outcomes: All families that experience homelessness will be placed in an affordable housing unit quickly</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Convene a task force to design California Homeless Housing Trust Fund (2.2.1) • Develop funding sources for State start up or matching funds for local housing trust funds (2.2.2) • Create an incentive program for private entities to develop affordable housing (2.2.3) • Create support for refunding the Supportive Housing Initiative Act 	<p>Completion Date (Estimated):</p> <p>Years 1-3</p> <p>Years 4-6</p> <p>Years 4-6</p> <p>Years 1-3</p>

Action Step 2.2.1

Convene a Governor-mandated task force to design a California Homeless Housing Trust Fund for construction, rehabilitation, preservation, rental subsidies and supportive service costs of affordable housing and supportive housing for families who are homeless or at-risk. Establish funding priorities and mix, and identify permanent, dedicated revenue streams.

Action Step 2.2.2

Provide incentives to encourage localities to maximize funding available to develop housing affordable for families who are homeless or at-risk. Provide State start up or matching funds for local housing trust funds to incentivize their investment in developing housing affordable for homeless families.

Action Step 2.2.3

Create an incentive program to encourage developers and/or landlords to set-aside a percentage of units in new and existing market-rate housing complexes affordable to families who are homeless or at-risk.

Action Step 2.2.4

Refund the Supportive Housing Initiative Act (SHIA), providing flexible resources for rental subsidies and services linked to housing. Allow funds to be used for “buy-down” rental subsidies, in the form of housing scholarships for families.

Strategy 2.3: Increase the housing opportunities available to families who are homeless or at-risk by expanding the availability of rental subsidies and removing barriers to accessing existing housing units.

Housing subsidies/vouchers have been identified as an effective strategy in helping formerly homeless families maintain residential stability, although there currently are not nearly enough subsidies available to meet the need. Also important in the effort to expand housing opportunity for this population are efforts to enhance access to the existing housing supply. Often times, this population, even when they have housing vouchers, is unable to find housing due to reluctance by private sector landlords to rent to people with unattractive tenant profiles, including poor housing histories, credit problems and indebtedness, low income-to-rent ratios, and histories of homelessness and/or health problems. In addition, lack of money to pay for security deposits and other move-in costs can pose an insurmountable barrier. Addressing these barriers requires a combination of landlord education, better enforcement of fair housing laws, funding of housing assistance services and programs to help with one time move-in costs, and changes in housing policy and regulations.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Government and Public Housing Agency-designated staff; Department of Housing and Community Development; County Continua of Care; Department of Fair Employment and Housing</p> <p>Expected Outcomes: All families experiencing homelessness will have access to rental subsidies, as needed, and be able to access an affordable housing unit</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Coordinated Federal lobbying effort based on unified PHA policy position on supply, targeting and background requirements (2.3.1) • Maintenance or expansion of Section 8 vouchers (2.3.2) • Local PHA’s target and dedicate vouchers to homeless families (2.3.2) • Conduct inquiry into illegal barriers to housing for families who are homeless or at risk (2.3.3) • Coordinate with State-wide landlord associations to educate about family homelessness (2.3.4) • Develop best practices for services that address housing barriers (2.3.5) • Provide support for services that address housing barriers (2.3.5) 	<p>Completion Date (Estimated):</p> <p>Years 1-3</p> <p>Ongoing</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Years 4-6</p> <p>Years 1-3</p> <p>Years 4-6</p>

Action Step 2.3.1

Expand the supply of rental/operating subsidies for homeless families by lobbying for additional Federally funded vouchers and by using Federal TANF and State maintenance of effort funds for TANF families transitioning from welfare to work who are homeless or at-risk.

Action Step 2.3.2

Enhance access to publicly funded housing by families who are homeless or at-risk by 1) encouraging local Public Housing Authorities (PHA) to streamline eligibility procedures and set aside units for homeless families; and 2) create a State rental subsidy and target it to meet the housing needs of homeless families who are unable to access Federally supported units.

Action Step 2.3.3

Enforce existing fair housing regulations to remove illegal barriers to housing access by families who are homeless or at-risk.

Action Step 2.3.4

Organize a statewide education and outreach campaign to encourage State affordable housing fund recipients and all landlords to rent to families who are homeless or at-risk, including those who have Section 8 vouchers. Highlight incentive programs; effectiveness of community-based rent guarantee programs and crisis intervention services in helping tenants maintain stability; background information on homelessness, mental illness and addiction; and fair housing laws.

Action Step 2.3.5

Provide State funding for programs which address barriers to housing access including: housing advocacy services to help negotiate with landlords and resolve credit and rental history problems; local security deposit and rental guarantee programs which help with one-time move-in costs and address concerns of rental property owners by insuring them against loss from property damage for non-payment of rent; development of regional and local clearinghouses on housing availability; and, other related programs that lead to housing placement.

Strategy 2.4: Provide resources to support local jurisdictions in meeting the immediate housing needs of homeless families.

Until an adequate stock of affordable housing is in place, there will still be a need for immediate housing those impoverished families experiencing a housing crisis, while permanent housing is arranged. “Immediate” housing, enriched with services as “Interim Housing” programs, will include full assessments of family needs, linkages to services and treatment, in a wrap-around model, as a family needs to achieve housing stability.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Department of Housing and Community Development</p> <p>Expected Outcomes: Families experiencing homelessness will have access to immediate housing</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Develop resources for a variety of interim/temporary housing options. 	<p>Completion Date (Estimated): Years 1-3</p>

Action Step 2.4.1

Fund interim/temporary housing options, including scattered site, vouchered motel/hotel rooms and master leased apartments that are used as temporary housing, to meet the needs of homeless families.

Goal 3: Promote Early Identification Of Families At-Risk Of Homelessness And Establish Policies And Programs To Prevent Its Occurrence

Homelessness is a devastating crisis that can be physically and emotionally damaging to parents and children. It sometimes tears families apart, with homeless children at higher likelihood of being taken from their parents and placed in foster care. For those families that manage to stay together, the stress and instability of their lives takes its toll, undermining the health and mental health of both the parents and children. Parents, often single mothers, struggle against immense odds to get their families back into safe and secure housing and to meet the full range of their children's needs, including food, clothing, health care, and education. All are made more difficult if not impossible by the lack of housing, and the potential for neglect and even abuse is augmented by the parent's ongoing stress and feelings of failure. In addition to the impact on parents and children, family homelessness also wreaks high societal costs through increased use of public resources including shelters, hospitals, mental health services and child protective services. Given both the individual damage and the high societal costs, it is clear that the most humane and cost-effective strategy for addressing family homelessness is *prevention through early intervention and discharge/transition planning*.

The State's public systems have a key role to play in preventing homelessness as most families that are homeless or at-risk are in touch at some point or other with at least one of these systems, including health clinics and hospitals, mental health programs, welfare, child protective services and foster care, schools, drug and alcohol treatment facilities, police departments, and the corrections system. Identification of this population by public agencies can facilitate *early intervention* to address their housing, health and income needs, and thus avoid homelessness altogether.

For those being released from hospitals, prisons or other residential or custodial care facilities, *discharge/transition planning* practices work to ensure that they are linked with housing and the services they need to maintain health and stability over the long term. Typically, *discharge planning and transition services* are provided in three phases: 1) Pre-Release Phase– comprehensive assessments that identify housing, service and income needs and provision of services while the individual is still in the program or facility; 2) Transition Phase – intensive case management and services to facilitate health, housing stability, and maximum self-sufficiency; and 3) Ongoing / Community Linkage Phase – less intensive services and supports on an as-needed basis and provided through community-based providers.

Family Homelessness Is Expensive!

- The Office of the Inspector General of the U.S. Department of Health and Human Services has concluded that the cost of preventing a homeless episode is one-sixth the cost of responding once a family has become homeless.*
- The cost of placing two children of a homeless family in foster care is \$34,000/year** and the annual cost of an emergency shelter bed is \$8,607.*** -- both much higher than the \$6,805 average annual cost of a HUD housing voucher.****

*U.S. Department of Health and Human Services Office of the Inspector General (1990). *Homeless Prevention Programs*. [OIG: 07-90-00100]. Washington, DC: Author. <http://www.oig.hhs.gov/oei/reports/oei-07-90-00100.pdf>

** Harburger, D. S. & White, R. (2004). Reunifying families, cutting costs: housing-child welfare partnerships for permanent supportive housing. *Child Welfare*, 83(5): 493-508.

*** Office of Policy Development and Research, U.S. Department of Housing and Urban Development, Evaluation of the Emergency Shelter Grants Program, Volume 1: Findings September 1994. p 91.

**** Sard, B., Lawrence, P. & Fischer, W. 2005. *Appropriations Shortfall Cuts Funding for 80,000 Housing Vouchers this Year*: Congress rejected deeper reductions sought by Administrations. Washington, DC: Center on Budget and Policy Priorities.

Also important in the effort to prevent family homelessness is supporting community efforts to develop the range of prevention services and supports needed to address emerging crises so as to avoid housing loss. These include *temporary housing subsidies and eviction prevention services*.

Best Practice Spotlight

Prevention Through Early Intervention
New York City

- 1) **Neighborhood-Based Prevention Efforts:** New York City is using its client data systems and Geographic Information Systems (GIS) to match prevention resources to the neighborhoods from which the largest numbers of families enter the city’s shelter system. Data is provided to community-based organizations to help them reach the highest risk families by targeting their outreach to specific streets or buildings. Once at-risk families are identified, financial assistance and support services are provided to help them maintain their housing.
- 2) **Eviction Prevention Services Linked To Landlord/Tenant Court:** A dedicated “housing court” has been established which hears all eviction cases. Legal aid and social workers, attached to the court and funded by the United Way, work with families and landlords to resolve issues in ways that avoid housing loss. Services include a mix of mediation between the landlord and the tenant and, in some cases, financial assistance to cover back rent. Since the program’s inception in January 2005, it has served 300 families—successfully resolving their housing issues and preventing evictions and homeless shelter stays.

Best Practice Spotlight

New Directions: Hospital Discharge Planning Targeted at Frequent Users Santa Clara County

New Direction is designed to assist frequent users of hospital emergency rooms to achieve greater health and housing stability and to reduce their use of hospital emergency services. A comprehensive range of discharge and transition planning services are provided to clients through an inter-disciplinary service team using an intensive case management approach and inter-agency case conferencing to effectively coordinate care. Services include housing assistance, benefits advocacy, health care, mental health, drug and alcohol treatment, employment and training, budgeting and other life skills, and transportation assistance.

Evaluation of the New Directions pilot study documented the following outcomes:

- 31 percent reduction in emergency department visits
- 53 percent decrease in inpatient hospital days for clients
- Almost 50 percent reduction in cost of emergency department, inpatient, and outpatient clinic services provided to clients, after just one year of enrollment with greater reductions for clients who completed two years of enrollment.

Strategy 3.1: Establish State policy, guidelines and funding to promote effective early intervention and discharge/transition planning practices by publicly-funded agencies and institutions in order to identify families that are homeless or at-risk and intervene to address their housing and service needs.

A significant percentage of families who are homeless or at-risk of homelessness are in contact with public agencies and institutions, including welfare programs, schools, child protective services, landlord-tenant court, the corrections system, foster care, hospitals, mental health programs and drug and alcohol treatment facilities. Too often, they are not identified and do not receive the assistance they need to prevent their becoming homeless. Instead, they end up in emergency shelters, doubled up in unstable situations with friends and family or living in cars and other places not made for human habitation. Early intervention and discharge/transition planning services can help them maintain their housing and avoid costly recycling through public systems and programs. These services include comprehensive assessment of the family’s needs, case management, prevention assistance, and linkage with ongoing support services, such as health care, mental health, addiction treatment, benefits, and employment and training. Indicators of possible problems that can lead to homelessness and which should trigger a broader assessment of family needs include: CalWORKS sanctioning or benefit termination; initiation of Child Protective Services involvement; Police Department receipt of a domestic violence complaint; delinquency in utility bill payment; notice of eviction; children’s problems at school; frequent use of emergency services; and discharge from facilities providing residential and custodial care, such as hospitals, foster care and the corrections system.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: State inter-agency teams; Office of the Secretary of Education and all State departments and agencies interfacing with populations: including Department of Social Services; Department of Mental Health; Department of Corrections; Attorney General; Developmental Services; Alcohol and Drug Programs; California Department of Education; school districts</p> <p>Expected Outcomes: Effective identification of at-risk population and delivery of appropriate services</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Connection of Regional Centers with emergency and transitional housing centers to support families and children with developmental disabilities • Interagency teams determine programs to screen for risk of homelessness (3.1.1) • Relevant programs develop an assessment tool to screen for family homelessness (3.1.1) • State departments examine policy and protocol to see what changes they can make to prevent homelessness (3.1.2) • Establish linkages and collaborative efforts between State agencies (3.1.3) • Identify best practices for early intervention and discharge planning (3.1.4) 	<p>Completion Date (Estimated):</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Years 4-6</p> <p>Years 1-3</p> <p>Years 4-6</p>

<ul style="list-style-type: none"> • Set aside funds to promote early intervention and discharge planning (3.1.5) • Establish discharge planning policies for CalWORKS (3.1.6) • Schools examine policy and protocol in relation to best practices to see what changes they can make to assist children who are homeless or at-risk (3.1.7) • Develop linkages to share data about people discharged from State institutions to monitor effectiveness of policies (3.1.8) 	<p>Years 4-6 Years 1-3</p> <p>Years 7-10</p>
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Action Step 3.1.1

Develop a uniform assessment tool to be used as part of initial intake by all appropriate State-operated, -funded and -regulated programs and facilities to screen for family homelessness or at-risk status and identify related housing, health and social service needs. The assessment will guide early intervention strategies to prevent family homelessness from occurring, whether from loss of housing or upon discharge or program exit, and facilitate efforts to rapidly rehouse and provide service supports to those already homeless. The assessment will be developed to be consistent with and to complement assessment tools currently in place. The CA inter-agency Teams formed to implement this Plan will determine the range of appropriate programs where this screening will occur.

Action Step 3.1.2

Enact State policy to prohibit discharges into homelessness by State-operated, funded and regulated institutions providing custodial and residential care and to require adequate early intervention and discharge/transition planning practices for all State-operated, funded and regulated programs serving families who are homeless or at-risk. Establish guidelines for effective and appropriate early intervention and discharge/transition planning practices that promote ongoing residential stability and require State agencies and departments to a) review existing protocols, procedures, contractual obligations, licensing and accreditation standards, services and funding related to early intervention and discharge/transition planning and b) make necessary revisions in their policies, regulations, contracts and practices so as comply with State guidelines and facilitate the development of sustainable and culturally competent early intervention and discharge/transition planning practices.

Action Step 3.1.3

Facilitate State level inter-agency and inter-departmental collaboration around early intervention and discharge planning practices through the development of memoranda of agreement to streamline linkage of families to housing, income and services; creation of financial incentives (cost-sharing, savings sharing, fee for service) to encourage inter-agency collaboration to prevent and end homelessness; co-location of mainstream services at large State institutions to facilitate access to services and benefits; and sharing of data to expedite access to benefits and services.

Action Step 3.1.4

Within each appropriate State agency and department, establish an early intervention and discharge/transition planning budgetary line item to provide technical assistance, staff training and funding to support Counties and contractors in implementing “best practice” early intervention and discharge/transition planning strategies. Identify other Federal and State policy and resources needed to support effective action.

Action Step 3.1.5

Establish State policy and allocate resources to identify families who are homeless or at-risk that are frequent users of emergency services, including hospital and police services, and target case management and housing assistance services to this population. These services should begin while they are still within the system and continue until they achieve housing stability and are linked with community-based support services.

Action Step 3.1.6

Develop State guidelines on the use of CalWORKS sanctions and other actions which put families at-risk of homelessness and mandate that Counties develop effective transition planning practices for families at-risk of homelessness who are transitioning off CalWORKS, including ensuring that they be evaluated for health, housing and other services needs prior to loss of benefits and that appropriate steps be taken to link them with needed supports. Provide technical assistance, staff training and other resources to support these efforts.

Action Step 3.1.7

Promote effective early interventions by schools to identify and assist families that are homeless or at-risk by 1) identifying best practice interventions and the Federal and State technical assistance, policy and funding needed to support their implementation; and, 2) promoting full compliance by school districts with Federal requirements regarding homeless children.

Action Step 3.1.8

Collect data statewide, including through use of Federal Homeless Management Information Systems, to track housing and support service outcomes of clients who have exited or been discharged from State-operated, regulated and funded facilities or programs, such as public assistance programs, prisons and jails, foster care, hospitals, mental health facilities, and drug and alcohol treatment programs, in order to monitor effectiveness of programs and discharge practices and track progress in ending family homelessness.

Strategy 3.2: Create policy guidelines and provide resources to support efforts by local jurisdictions to provide temporary housing support and other services to prevent homelessness.

Effective prevention of family homelessness requires putting in place a range of services and supports at the local level to prevent loss of housing and provide temporary assistance until permanent solutions are arranged. Many communities are working to establish housing support centers that offer an array of easily accessible prevention and housing advocacy services under one roof, including temporary housing subsidies to provide a bridge until permanent housing solutions can be put in place and rental and utility assistance for people who fall behind due to a one-time emergency. To enhance effectiveness, these centers should be located in neighborhoods that have been identified by providers as areas with large numbers of families who are homeless or at-risk. In addition, statewide eviction prevention policies and programs can help to eliminate unnecessary and unfair housing loss.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Department of Housing and Community Development; California Housing Finance Authority; Department of Mental Health; Department of Social Services; Department of Corrections; Department of Social Services</p> <p>Expected Outcomes: Counties and cities will support temporary housing and act to prevent homelessness for at-risk families</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Identify funding resources for rental assistance (3.2.1) • Coordinated flexibility in use of Federal, State and other funds (3.2.1) • Identify funding resources for Housing Support Centers (3.2.2) • Identify funding resources for prevention activities (3.2.3) • Revise eviction prevention policies (3.2.4) 	<p>Completion Date (Estimated): 3 years to coordinate, launch; 10 years to sustain</p>

Action Step 3.2.1

Amend State law to increase the limit on prevention assistance available to families on welfare.

Action Step 3.2.2

Fund development of “Housing Support Centers” in key areas to provide prevention and housing advocacy services. “Housing Support Centers” should be located in neighborhoods with the highest levels of families who are homeless or at-risk as determined by an analysis of data on families served by shelters and other programs.

Action Step 3.2.3

Fund time-limited rental subsidies to 1) help families at-risk of homelessness regain financial stability and 2) provide “bridge housing” for families waiting for a permanent rental subsidy or other permanently affordable unit to become available after loss of housing or discharge from custodial care.

Action Step 3.2.4

Prevent unnecessary and unfair evictions of families by strengthening enforcement mechanisms for policies restricting predatory evictions and funding eviction prevention services for families. These eviction prevention services should be linked with landlord-tenant courts and make use of key public data to guide early intervention efforts, such as offering assistance to families with delinquent utility bills.

Goal 4: Enhance The Availability, Accessibility And Integration Of The Support Services Needed By Families Who Are Homeless Or At-Risk Of Homelessness

Families who are homeless or at-risk need access to a comprehensive and integrated system of support services in order to access and maintain stable housing, increase economic self-sufficiency and improve family and child well-being. Typically, they need access to multiple support services that are linked to their housing, including benefits, health care, mental health, drug and alcohol treatment, employment services, life skills and a range of family and children's services. Some families only need services on a short-term or transitional basis to help them address the immediate crisis and to regain their stability. Others need long-term assistance through ongoing linkages with community-based support services. In all cases, the service plan should be tailored to meet the specific needs of each family and developed in a way that recognizes and reinforces family strengths.

Ensuring that services are in place to meet the needs of this population requires *expanding the capacity of community-based service providers* so that they can effectively meet the level of need. This in turn requires the development of *a sustainable and flexible revenue stream* that can fund the full range of services that people need, including those who are not currently eligible for services under existing funding streams, such as Medi-Cal and the Mental Health Services Act. Also important are efforts to expand access to these services. Though part of the community's mainstream services safety net, a system of services established to meet the needs of people with low incomes, these service programs have often failed to successfully serve families who are homeless, due in part to failure to accommodate their special needs and situation. As such, it is also vitally important to implement strategies which *enhance access to mainstream services* by this population. Such strategies include streamlining eligibility and documentation requirements; sharing data to expedite applications; facilitating access to specialized services; providing funding for home-based case management; outstationing efforts such as through regional one stop centers and mobile service units; fast track applications; access to legal assistance; and addressing issues of discrimination and stigma that impede service delivery. Home-based case management, typically for a transitional period of time, provides an opportunity for families to build basic life skills and to be linked to community-based services to promote long-term housing stability

Support Services Help Families Maintain Housing

- In a recent, ongoing study, of a pilot program that serves populations, including families, with long histories of homelessness who are struggling with mental illness, chemical dependency and/or HIV/AIDS and that provides services in the form of primary providers, support teams and supportive housing, it was found that the services provides critical emotional and tangible supports for participants, that participants are highly satisfied with services and most importantly it demonstrates success at housing participants and keeping them housed.*
- In another study, 89.5% of previously homeless families who received home-based case management for six months in a housing first model maintained residential stability.**

*Hearth Connection for The National Center on Family Homelessness. (2004). The Minnesota Supportive Housing and Managed Care Pilot. Qualitative Evaluation: Year Two.

** Institute for Research, Training & Technical Assistance, (2006). The Seaver Study.

In addition, since this population typically has multiple and concurrent needs for housing and a range of services, strategies to *integrate services at both the system and client levels* are necessary. System level approaches include development of inter-agency agreements and blended funding to support service integration. Effective client level approaches include use of integrated service teams, composed of staff representing multiple agencies and service systems, to coordinate services and ensure quality of care and positive client outcomes. Also important is provision of case management, using an assertive case management approach, in which the case manager acts as an advocate for families ensuring that they are able to access needed services and that the services they need are provided in an effective and coordinated manner.

Best Practice Spotlight

HOPES Collaborative-Homeless Outreach Promoting Education
Orange County Department of Education
Orange County, CA

The HOPES Collaborative is a partnership between the Orange County Department of Education, the County Homeless Coordinator, 28 Orange County School Districts, community-based organizations, law enforcement, the faith based community, and shelter and housing service providers. Working together, the HOPE Collaborative is committed to improving the academic success of homeless children and youth by removing enrollment barriers, increasing attendance and providing information on resources available to students and families. Through the school district Homeless Liaisons, the HOPES Collaborative provides coordination, technical support, resource material and professional development for the Orange County school districts. By connecting school districts with service providers and agencies in the larger County of Orange Continuum of Care Network, homeless children and youth are provided integrated services aimed at giving them a full and equal opportunity to succeed in the classroom.

Best Practice Spotlight

North County Interfaith Council, Inc., dba, Interfaith Community Services (“Interfaith”) San Diego, California

Interfaith provides 13 California program sites throughout North San Diego County, from the coastal City of Oceanside to inland communities south and east of its Escondido headquarters. With more than 3,200 volunteers in direct service, 464 member faith centers, and 69 professional staff, Interfaith served 22,000 unique persons with a variety of services last year. Interfaith’s model demonstrates that cooperation and respect between diverse faiths is the key to a capable and competent operation. Interfaith’s member faith centers provide volunteers, board members, program development input, financial and in-kind donations, and refer clients to services. Interfaith recognizes that homelessness does not exist in isolation but is linked to other conditions including hunger, under- or un-employment, inadequate parenting skills, physical, emotional and mental illness, illiteracy, lack of education and social skills, unawareness of available resources, and most of all, hopelessness, loss of human dignity and spiritual crisis. Interfaith is a continuum of programs and services consisting of numerous programs designed to overlap in order to provide as many services as are necessary for each client. Services, including services specifically for elderly persons, veterans, and families, fall into five categories:

- **Basic Needs**- Basic needs provided by Interfaith Services include hot breakfasts, sack lunches, emergency food, toiletries, laundry facilities, shower facilities, thrift store vouchers, blankets, fax, phone and message services, and mail services for clients.
- **Housing**- Interfaith manages several emergency shelters including one for mentally ill women, a men’s shelter, a winter shelter, sobering mats, and motel vouchering programs, as well as transitional housing for families, single men and women recovering from homelessness, veterans, and people dealing with unemployment and chemical dependency, and permanent housing, including apartments for individuals with permanent disabilities and low income families.
- **Counseling**- Interfaith provides behavioral health counseling, case management, legal clinics, financial advisors, Earned Income Tax Credit clinics, vocational and job training referrals, health care referrals, shelter referrals, rent/mortgage assistance vouchers, utility vouchers, bus passes for job and medical appointments, substance abuse treatment program referrals and legal advice referrals.
- **Employment Services**- Interfaith provides employment services in the forms of case management, employment placement, vocational and career exploration, vocational assessment, vocational counseling/planning, job referral services, job retention services, academic and vocational training counseling/referral services, and a unique program providing health care blended with a hiring hall to provide jobs, referrals and supportive services for the population of day labor/migrant workers in North County.
- **Drug & Alcohol Rehabilitation**- Interfaith also operates a 44 bed sobering and recovery program and other substance abuse services.

Strategy 4.1: Support and foster the expansion of key community-based services to support long-term housing stability by families who are homeless or at-risk of homelessness and identify strategies for funding this increased capacity.

For families who are homeless or at-risk, long-term housing stability depends on access to key services, including health care, mental health services and addiction treatment. Also important for the well-being of the family are a range of family and children-related services, including child care, child development services, tutoring, recreation, parenting services, and domestic violence services. However, the community-based services on which these families depend are under-funded and not able to meet the level of need that exists. In addition, a significant portion of this population does not meet the criteria for services through Medi-Cal, the Mental Health Services Act, etc. In order to fund the comprehensive and flexible services needed to meet the needs of these families, a sustainable and flexible revenue stream is needed that can fund the full range of services they need. In addition, strategies should be implemented to expand access to services through existing private health care providers and by increasing the services funded by Medi-Cal and the capacity of community-based organizations to provide and bill for these services. Investment in these services is essential so they can expand their capacity and quality of care and play a strong role in ensuring the family’s residential stability and the ongoing health and wellness of the parents and children.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Department of Mental Health; County Continua of Care; Department of Health Services; Health and Human Services Agency; Alcohol and Drug Program</p> <p>Expected Outcomes: Families at-risk or who are homeless will receive support on their specific challenges, which will lead to housing stability</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> ● Identify effective State prevention programs (4.1.1) ● Provide support to community-based addiction programs and services (4.1.2) ● Support accessible mental health services for members of families who are homeless or at risk (4.1.3) ● Support health care facilities that respond to the unique needs of families who are homeless or at risk (4.1.4) ● Support child services that assist homeless families in staying together or reuniting (4.1.5) ● Review and streamline Medi-Cal policies and priorities to make Medi-Cal more supportive for homeless and at risk families (4.1.6) ● Identify a funding source to support the medical and service needs of families who are homeless or at risk and cannot access other sources of funding (4.1.7) ● Identify funding sources to incentivize private physicians to treat homeless families (4.1.8) 	<p>Completion Date (Estimated):</p> <p>Years 1-3</p> <p>Ongoing</p> <p>Years 4-6</p> <p>Years 4-6</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Years 4-6</p> <p>Years 1-3</p>

Action Step 4.1.1

Identify and prioritize State programs necessary to improving developmental, educational, and health outcomes for families and children who are homeless or at-risk.

Action Step 4.1.2

Through funding, technical assistance, training and other support, facilitate the development of community-based treatment on demand and dedicated treatment capacity to meet needs of families who are homeless or at-risk, including a continuum of dependency interventions, sobering stations and detox facilities, peer-mentoring services, after-rehabilitation support, family counseling programs, and residential treatment facilities.

Action Step 4.1.3

Through funding, technical assistance, training and other support, increase the scope and timely availability of mental health services, including assessments, counseling, medication management and peer-mentoring. Expand eligibility for services to include parents and children of families who are homeless or at-risk who have mental health problems that fall short of a seriously mentally ill diagnosis.

Action Step 4.1.4

Through funding, technical assistance, training and other support, expand the availability and scope of health care treatment for parents and children who are homeless or at-risk by funding programs at locations such as neighborhood health centers, regional one-stop health centers and mobile service programs. Services should include primary health care, treatment of acute/chronic illnesses and communicable diseases (such as TB and HIV/AIDS), dental services, health education, case-management, medications, vision services and a full range of pediatric services.

Action Step 4.1.5

Through funding, technical assistance, training and other support, expand the availability of community-based family and children's services, including childcare, child development services, tutoring, recreation, parenting services, and domestic violence services. Services should be provided from the perspective of helping homeless families remain intact, and where necessary, helping them to reunify.

Action Step 4.1.6

Enhance third party payments for health, mental health and drug and alcohol treatment by a) funding eligibility staff in the health, mental health and alcohol and other drug treatment systems to link clients to funding streams that will cover the costs of their services and b) increasing the use of Medi-Cal as a funding source for services for families who are homeless or at-risk. Amend the State Medi-Cal Plan to include case management, service coordination and other supportive services and to include the rehabilitation option for drug and alcohol services; provide technical assistance and training to help community organizations and supportive housing providers to develop the capacity to provide and bill for Medi-Cal-eligible services; and simplify the Medi-Cal billing process, including allowing for same day service billing.

Action Step 4.1.7

Create a permanent, sustainable, flexible funding source for support services for families who are homeless or at-risk and are not covered by other revenue streams.

Action Step 4.1.8

Provide incentives to private sector health care providers to serve families who are homeless or at-risk

Strategy 4.2: Enhance access to State mainstream services by families who are homeless or at-risk.

Despite the fact that mainstream health, housing, employment, education and social service programs are funded to meet the needs of people with low incomes, they are often unsuccessful in meeting the needs of families who are homeless or at-risk. Due to a variety of factors, including lack of understanding and sensitivity to the special needs of homeless people by staff, complicated and intimidating application and interview procedures, and inaccessible locations, many people who are homeless or at-risk are not accessing services for which they are eligible. At the same time, many families are extremely reluctant to interact with the service system, due to previous bad experiences, inability to navigate the procedures and rules, and fear that their children will be taken away. In order to better serve this population and assist them in regaining and maintaining health, residential stability and economic self-sufficiency, mainstream programs need to review and adapt their policies and operating procedures to enhance access by families who are homeless or at-risk, such as through streamlining eligibility and documentation requirements, sharing data to expedite applications, facilitating access to specialized services, outstationing efforts such as through regional one stop centers and mobile service units that visit shelters and permanent housing sites, fast track applications, access to legal assistance, and addressing issues of discrimination and stigma that impede service delivery.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Department of Housing and Community Development; Health and Human Services Agencies; Counties; school districts</p> <p>Expected Outcomes: Families who are homeless or at-risk will have access to all the mainstream benefits for which they are eligible</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Facilitate access to public programs (Medi-Cal, Section 8, substance abuse programs, mental health programs, in various environments, i.e. shelters) (4.2.1) • Establish communication and linkages between State programs serving homeless families (4.2.2) • Conduct homelessness sensitivity trainings (4.2.3) • Monitor school district compliance with Federal requirements (4.2.4) • Monitor and respond to services delivery barriers (4.2.5) 	<p>Completion Date (Estimated):</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>

Action Step 4.2.1

Establish a no-wrong door policy for all State operated, funded and regulated programs to ensure that families seeking services through any one agency have seamless access to the entire system of care and receive assertive case management to provide them with referrals and assistance in accessing services.

Action Step 4.2.2

Require State-operated, regulated and funded agencies and departments providing housing, health, social service, education and employment programs to review their operations to identify policy, procedural, structural, cultural and attitudinal barriers to services by families who are homeless or at-risk, obtain feedback from staff in the field and from clients about barriers experienced, develop strategies to enhance access by this population, and put in place outcome measures to monitor effectiveness of the strategies in improving access. Compile list of best practice approaches to enhancing access to mainstream services by homeless families to facilitate these efforts.

Action Step 4.2.3

Support staff training to assure appropriate interactions between State representatives and members of this population in order to improve access to services. Training topics can include homeless sensitivity; services, eligibility requirements and referral protocols for other State programs; crisis intervention techniques; and culturally competent care for sub-populations.

Action Step 4.2.4

Investigate and document school district compliance with Federal requirements regarding education for homeless children and identify Federal and State resources available to provide assistance in this area. Support coordination and integration among school districts and other agencies and departments providing services to families who are homeless or at-risk of homelessness.

Action Step 4.2.5

Identify and resolve service delivery and program implementation barriers for faith-based and other service delivery organizations, as found in State law, regulations, or administrative procedures.

Strategy 4.3: Promote and facilitate inter-agency and inter-departmental integration and collaboration horizontally, between State entities, and vertically, between the State and the county and city level, in order to enhance quality of care for families with multiple needs, such as those who are homeless or at-risk.

Typically, families who are homeless or at-risk have multiple needs for services that must be integrated across different agencies and service systems. These needs include assistance in locating and maintaining housing, health care, mental health services, drug and alcohol treatment, children’s services, benefits, education, employment services, and life skills, such as budgeting. In order to effectively serve this population, these services must be coordinated at the system level, through inter-agency and inter-departmental agreements to facilitate joint service provision, development of capacity for interagency case management and electronic referrals, and inter-agency blending of funding streams to support integrated service provision. At the same time, client level service integration must be brought about through integrated service teams composed of staff from multiple agencies and through efforts to co-locate services from multiple agencies in easily accessible locations.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Interagency appointed team</p> <p>Expected Outcomes: Families who are homeless or at-risk will be able to access all the State services they need in a coordinated manner.</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Appoint an interagency team (4.3.1) • Sustained State level discussions (4.3.2) • Sustained communication between staff level work groups and local organizations (4.3.2) • Integrated systems of care and funding, including coordination of funding for supportive housing from Propositions 46 and 63 (4.3.3) • Dissemination of best practice models (4.3.4) • Adoption of policies to support coordination (4.3.4) • Provide training and technical assistance (4.3.4) • Annual reports on allocation steps • Identification of permanent staff designated to council 	<p>Completion Date (Estimated):</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Years 1-3</p> <p>Years 1-3</p>

Action Step 4.3.1

Create State-level inter-agency teams to identify barriers to services and improve access, facilitate cross-agency coordination, and provide a forum for State level discussions on homelessness-related issues.

Action Step 4.3.2

Develop the agreements, capacity, systems, policies and integrated funding to facilitate inter-agency and inter-departmental service coordination, including inter-agency case management, electronic referrals, client information-sharing, and other strategies to streamline linkage of clients to housing, income and services. Identify and promote best practice approaches and develop outcome measures to monitor agency progress in enhancing coordination and integration and its effect on efforts to prevent and end family homelessness.

Action Step 4.3.3

Develop strategies for more efficient allocation of resources through integration of funding streams and administrative processes at the State level and by allowing new uses for funds in order to better respond to family homelessness. Identify legal and regulatory barriers preventing efficient use of funding and work with Federal agencies to create needed regulatory and policy change.

Action Step 4.3.4

Support service delivery approaches which increase access to services and facilitate coordination of services and housing, such as providing funding and technical assistance to support the development of integrated service teams and assertive case management capacity and outstationing State program staff with integrated service teams, at one-stop service centers, at shelters, transitional housing and permanent housing sites and as part of other efforts to co-locate and coordinate service provision.

Action Step 4.3.5

Implement the State Co-Occurring Disorders Joint Action Council Plan: provide integrated funding, mission, goals and language for treatment and services between the Department of Mental Health and the Department of Alcohol and Other Drug Services; dual training for mental health and substance abuse; and make available an appropriate range of housing.

Action Step 4.3.6

Provide integrated funding, mission, goals and language for treatment and services between the Department of Justice and the Department of Social Services; cross train staff; and make available an appropriate range of housing.

Goal 5: Facilitate Access To An Adequate Income Stream To Support Ongoing Housing Stability

Maintaining ongoing housing stability ultimately depends on having access to adequate income to cover housing costs and other basic necessities. Unfortunately, families who are homeless or at-risk struggle at very low income levels, with many headed by single women. Parents of these families often have difficulties in obtaining decent employment because of the lack of opportunities in today's economy, their limited work history and experience, lack of child care, disabilities which interfere with their ability to work, and reluctance by employers to hire them. However, the combination of *targeted employment and training services with other support services, such as childcare*, can help this population find and maintain employment.

State leadership can help promote this effort by ensuring that a portion of State employment and vocational training resources are targeted to develop specialized programs for parents in families who are homeless or at-risk and by taking State action to encourage private businesses to offer employment opportunities to this population.

Most families who are homeless or at-risk are eligible for CalWORKS benefits and those with serious health, mental health or addiction disabilities may be eligible for Social Security's SSI/SSDI. However, many families are not accessing the full range of benefits for which they are eligible, due to lack of information, complicated application processes and fear that their children will be taken away. A study of families in Washington State found that only 1/3 were receiving TANF cash assistance benefits when they became homeless, although 2/3 were eligible. However, when people are provided with assistance in filling out applications, helped to obtain supporting documentation and guided through the interview process, their rates of approval for these programs is much higher.

In addition to funding benefits access programs that provide these types of support, the State can also review and revise State level policies to facilitate eligibility for Medi-Cal, and lobby for Federal policy changes to improve access to Federal benefit programs. In particular, the State can lobby for greater flexibility in the five year limit on CalWORKS/TANF benefits, as parents of homeless families with multiple needs and young children often need more time. Loss of CalWORKS benefits is a factor in homeless for a growing number of families.

In addition to access to an adequate income stream, ongoing housing stability depends upon good fiscal management, and ideally, upon developing savings to provide a cushion

Gap Between Housing Costs and Wage and Benefit Levels Fuels Homelessness

- The "Housing Wage" in California, the hourly wage need to afford housing if working 40 hours/week, is \$22.09 for a two-bedroom apartment. This is 327% of the minimum wage and 151% of the average wage of renters in the State.*
- The CalWORKS payment for an individual who is not able to work and has no other source of income is \$378 to \$398, so \$113 to \$119 in monthly rent is affordable, while the FMR for a one-bedroom is \$942.**

*National Low Income Housing Coalition, "Out of Reach", 2005.
<http://www.nlihc.org/oor2005/data.php?getstate=on&state%5B%5D=CA>

**"CalWORKS: How Much Should I Get?".
Legal Services of Northern California,
www.lsn.net.

against unexpected emergencies. The State can take action to minimize barriers faced by those with low incomes in accessing banking services and establish standards for representative payee services to protect against abuse.

Best Practice Spotlight

Rubicon Programs, Inc.: Fathers at Work Program
Richmond, California

The Rubicon Fathers-at-Work Initiative is an all-encompassing approach to serving young non-custodial fathers with multiple barriers to employment. This three-year program addresses the economic, housing, and emotional needs of a difficult-to-serve population -- young, low-income, unemployed/under-employed non-custodial fathers, many of whom are ex-offenders. The program is a key element of Rubicon Program Inc.'s integrated service model.

The program helps young fathers to improve the quality of their relationships with their children, the mothers of their children, Child Support, employers, and other public institutions. Ultimately, it helps them to provide greater emotional and financial support to their children.

With young fathers at the center of the program, Rubicon connects program participants with the means for economic growth – through Child Support, Jobs, and Housing -- and personal growth, enhancing their relationships with their Kids, Family, and Community. Rubicon accomplishes this with a network of public and private sector partners including the Housing Authority, County Child Support, Rubicon Career Center, and a network of private employers.

Strategy 5.1: Streamline and expand access to Federal and State benefits for families who are homeless or at-risk.

Many families who are homeless or at-risk are potentially eligible for Federal and State benefits that provide income and health services, including CalWORKS, Medi-Cal, Food Stamps, and others. Helping those who are eligible to access these supports is also beneficial for the State and for local jurisdictions since it gives these individuals an income stream that can support their care, helping to take some of the financial stress off over-burdened public systems of care. As such, strategies which remove barriers to accessing benefit programs make sense for both the individuals and the community at-large. Such strategies include application assistance, streamlining access to identifying documents and other supporting documentation, presumptive eligibility mechanisms and lobbying for needed policy changes and waivers.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Department of Social Services; Social Security Administration</p> <p>Expected Outcomes: Families who are homeless or at-risk of homelessness and are eligible for income support or health services will receive such benefits</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Set aside funds to support assisting homeless families to overcome enrollment barriers to benefit programs (5.1.1) • Develop procedures that support the ability of homeless families to collect identifying documents (5.1.2) • Develop procedures that prioritize processing Medi-Cal applications for homeless families (5.1.3) • Provide technical assistance to support homeless families trying to access Federal benefits (5.1.4) • Work towards increasing flexibility in the TANF/CalWORKS eligibility window (5.1.5) 	<p>Completion Date (Estimated):</p> <p>Years 1-3</p> <p>Years 1-3</p> <p>Years 4-6</p> <p>Years 1-3</p> <p>Ongoing</p>

Action Step 5.1.1

Support and fund efforts to assist families who are homeless or at-risk to access benefits programs, including CalWORKS, Section 8 housing vouchers, SSI/SSDI, Food Stamps, etc. Fund eligibility workers in County Human Services Departments to assist families in applying for the full range of benefits for which they are eligible.

Action Step 5.1.2

Streamline and fund the acquisition of identifying documents such as birth certificates, social security cards, driver's license or CA State I.D. for families who are homeless or at-risk. Ensure that those discharging from or exiting State institutions have all needed documents.

Action Step 5.1.3

Review and revamp the State's process for processing Medi-Cal applications and determining eligibility to improve access by families who are homeless or at-risk and expedite the process. Fund County outreach workers to assist families who are homeless or at-risk in completing applications and complying with recertification requirements.

Action Step 5.1.4

Through funding, regulation and technical assistance, provide State income and health benefits for families who are homeless and disabled based on presumptive eligibility for benefits by SSA, Medi-Cal and other Federal providers and fund mental health services to document disability. Establish a mechanism to recapture retroactive Federal benefits to cover costs of services provided once permanent benefits are awarded.

Action Step 5.1.5

Lobby for greater flexibility in the CalWORKS/TANF five-year eligibility limit.

Strategy 5.2: Develop targeted education and employment and training services to meet the needs of parents in families who are homeless or at-risk.

Although many parents of families who are homeless or at-risk are interested in employment and capable of working, mainstream education, training and employment programs are not always successful in meeting their needs. They need specialized programs designed to accommodate their needs and barriers. To accomplish this, employment and training resources must be targeted to serving this population along with other necessary supports, most especially affordable childcare.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Labor and Workforce Development Agency; Department of Rehabilitation</p> <p>Expected Outcomes: Parents in families experiencing homelessness will have access to adequate employment</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Set aside funds for employment and vocational training for homeless and at-risk families • Coordinate and integrate employment or vocational programs with other services offered to homeless or at-risk families 	<p>Completion Date (Estimated): Years 4-6 Years 1-3</p>

Action Step 5.2.1

Target a portion of State employment and vocational training resources for homeless families and those at-risk. Fund specialized employment and training programs homeless families and those at-risk by the State Department of Rehabilitation and local employment services providers.

Action Step 5.2.2

Provide State funding, matched by Federal Food Stamp Employment and Training funds, to counties for employment and training services for homeless families and those at-risk and who are employable.

Action Step 5.2.3

Ensure employment is linked/integrated with other supportive services to provide wraparound support, including transportation and childcare.

Action Step 5.2.4

Develop integrated education and employment programs (including VA, WIA, EDD, etc.) and make them accessible to parents of families who are homeless or at-risk.

Strategy 5.3: Increase the education and employment opportunities available to parents in families that are homeless or at-risk.

Providing adequate employment opportunity to enable parents of families who are homeless or at-risk to enter the labor market requires support from private sector businesses. Offering tax incentives and creating contracting bid preferences on State contracts can help to encourage hiring of this population by private employers.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: Labor and Workforce Development Agency; California Franchise Tax Board</p> <p>Expected Outcomes: Parents in families experiencing homelessness will have access to adequate employment</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Public education campaign directed at private business about hiring people who are homeless • Develop incentives for private business to employ people who are homeless 	<p>Completion Date (Estimated): Years 1-3 Years 4-6</p>

Action Step 5.3.1

Offer tax incentives to private business for training and hiring parents of families who are homeless or at-risk.

Action Step 5.3.2

Institute contracting bid preferences for businesses that provide employment and training opportunities for parents of families who are homeless or at-risk on State contracts.

Strategy 5.4: Promote ongoing financial stability and savings opportunities families who are homeless or at-risk of homelessness.

People with low incomes face barriers in accessing banking services and are often victimized by unscrupulous check cashing and payee services. They need access to secure money management and payee services that will allow them to achieve some measure of financial stability and to develop savings that provides a cushion against future unexpected emergencies. Also important to their getting back on their feet financially is addressing backlogs of unpaid tax payments.

<p>Manager: State Interagency Council on Homelessness</p> <p>Implementer: California Franchise Tax Board, California State Department of Financial Institutions</p> <p>Expected Outcomes: Families experiencing homelessness will have access to affordable, reliable financial services</p>	
<p>Benchmarks:</p> <ul style="list-style-type: none"> • Educate financial institutions and create incentives for them to provide services and support to families experiencing homelessness 	<p>Completion Date (Estimated): Years 1-3</p>

Action Step 5.4.1

Prevent and minimize barriers for families who are homeless or at-risk in securing fiscal management services (such as banking and payee services). Create standards and regulations for payer qualifications. Fund representative payee and money management programs for parents of families who are homeless or at-risk.

Conclusion

This Plan to Address Homelessness among Families in California has set forth the goals, strategies and action steps necessary to work towards its mission of preventing homelessness and shortening the length of time families remain homeless by focusing statewide efforts towards providing housing as the first and primary solution.

These steps when taken together propel Californians towards a time when, guided by the needs of families, California will prevent and end family homelessness through an adequately resourced and well-coordinated system of housing, income supports, and collaborative services that recognize family strengths.

For more information about this plan, please contact:

