

Orange County Homeless Community
Orange County, North Carolina

An Action-Oriented Community Diagnosis
Findings and Next Steps

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Dedication

This document is dedicated to the individuals who are experiencing or have experienced homelessness that were willing to share their stories with us. We thank you for your honesty, courage, and trust.

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Executive Summary

From September 2005 to April 2006, a five-member team of graduate students from the Department of Health Behavior and Health Education in the School of Public Health at the University of North Carolina-Chapel Hill conducted an Action-Oriented Community Assessment (AOCA) in Orange County, North Carolina of persons who are homeless in the county. An AOCA examines the quality of life, community capacity, and strengths and needs of a community. The purpose of this process is to include community members and service providers in identifying the needs and challenges of the community, as well as the strengths and resources, which may influence the development of effective interventions. Two preceptors affiliated with the county's Ten-Year Plan to End Homelessness, Billie Guthrie, Housing Coordinator at OPC Area Program, and Stan Holt, Homeless Coordinator at Triangle United Way, guided and mentored the students throughout the entirety of the project. The students volunteered, attended committee meetings, reviewed secondary data, and conducted in-depth interviews with 32 community members, 16 of which have experienced or are experiencing homelessness. Additionally, the student team collaborated with J-Quad & Associates LLC, a consulting firm that had been hired to assist the community in composing the Ten-Year Plan. They transcribed and analyzed 12 focus groups conducted by J-Quad as well as the 32 interviews. This information was used to identify the community's most common reoccurring themes. The students presented its findings at a community forum held on April 27, 2006, at A.L. Stanback Middle School in Hillsborough, North Carolina. For the forum, the student team worked to bring together homeless/formerly homeless community members, service providers, and other residents to address the how the community can work together to address homelessness in the

most valuable way. The immediate action steps and long-term recommendations for the Ten-Year Plan to End Homelessness that were generated at the forum are listed below:

Lack of affordable housing, combined with non-livable wages, creates a barrier to ending the cycle of homelessness.

Action Steps

1. Develop an incentive program for those in the private sector which will encourage them to create more affordable housing units. In exchange for funding a percentage of affordable units or giving money to an authority for affordable housing, businesses will be allowed to build more expensive units.
2. Generate a list of key business people and policy makers (aldermen, town council, John Edwards/Poverty Center) who should be invited to the meeting.
3. Invite those individuals to a meeting to propose the incentive program.
4. If adequate interest in the program is expressed at the meeting, contact the media to publicize the plan.

Recommendations

1. Increase the minimum wage
2. Change zoning requirements to allow for more affordable housing units
3. Form an authority to manage affordable housing units in the private sector
4. Create more flexible eligibility criteria for affordable housing units and rental subsidies
5. Secure more funding for cooperative housing models like Weaver Community Housing which generate their own income
6. Revisit the definition of “affordable housing” in ordinances to consider those that live below 80% of the area median income.

Inadequate access to essential resources creates a barrier for homeless persons to secure jobs.

Action Steps

1. Generate a list of telecommunications providers (Verizon, Cingular, etc) in the area
2. Research potential options (used cell phones, prepaid cell phones, donation of minutes)
3. Approach these businesses and ask for donations. Also discuss what they are willing to contribute to the effort and what they may gain in return (good publicity etc.).

People who are homeless do not have relevant skills training and employer support to become employed, remain employed, and plan for the future.

Action Steps

1. Seek out funding for educational expenses
2. Work with Community Resource Court to clear criminal records.
3. Provide home business training resources
4. Explore if it is possible to set aside a certain number of jobs for the homeless and look into developing an inter-departmental study of homelessness at UNC.

Recommendations

1. Develop resource manual of community services available (including self-employment training).
2. More computers with internet access at the shelters

3. Job program for homeless that sets aside jobs for the homeless.

Inadequate transportation services create a barrier to sustaining employment and accessing services.

Action Steps

1. Identify resources and create community resource guide for transportation in Orange County.
2. Help to obtain transportation through auctions held by the police departments in the state.

Recommendations

1. Subsidize shuttles vans for the shelters.
2. Access state cars through auctions to be assigned to the shelters.
3. Provide additional funding to shelters to allow money to be set aside for transportation.

Stereotypes of homelessness create tension between homeless persons and the surrounding community.

Action Steps

1. Create action group that works to increase community awareness of the individual faces/stories of homelessness. The group will decide on the format of the message, and collaborate with various community groups (media, civic, church, university, restaurants) to help educate the community and encourage participation.
2. Each group member commit to volunteering and/or 1:1 time with people experiencing homelessness.

Recommendations

1. Educate the public on the individuality of homelessness.

Community partnerships need to be strengthened to ensure successful service provision.

Recommendations

1. Compile a master list of providers and services provided specifically for homelessness issues.
2. Make the Orange Book more accessible and user friendly (change from pdf format to something more searchable).
3. Recommend creation of a “hub”, or one place to go for resources.

Services are available, but only to those who are regularly using or know how to navigate the service delivery system. Therefore, many who are homeless “slip through the cracks.”

Action Steps

1. Create a bilingual pocket-sized resource guide for homeless persons, with a version with pictorial representations to accommodate those with lower literacy.

Recommendations

1. Increase outreach workers who can establish informative relationships with persons who are not connected to services. Use case managers or train those formally homeless, students, and community volunteers to do the outreach.

Homeless individuals' unique ways of achieving success are often limited by standardized eligibility requirements and delivery structures.

Recommendations

1. Create an advocacy program, incorporating volunteers, to support community members as they seek services.
2. Increased innovative/flexible funding, potentially through community fundraising, to provide specialized services not included in grants or federal funding.
3. Increase communication among service providers to increase knowledge of existing services, decrease work-related frustration, and facilitate supportive relationships.

The lack of collaboration in discharge planning and a lack of appropriate facilities burdens service providers and limits success for the homeless population.

Action Steps

1. Have service providers who are using the housing first model or a model similar to the housing first model, document their outcomes both successes and failures and report back to other service providers possibly at a Community Initiative meeting.
2. Have service providers to document inappropriate discharges and send their concerns to their legislatures.

Recommendations

1. Have training for service providers about the housing first model.
2. Make more efforts to support Club Nova because it is a successful housing first model and it is facing hard times.
3. Discharge people into more stable and rehabilitative environments that shelters cannot always provide; however, there is a lack of these places.
4. Create more affordable and transitional housing for people to be discharged to.
5. The county needs to focus their resources on high risk individuals who consistently utilize institutions to help them become more stable and prevent them from returning to these institutions.

More prevention strategies are needed that target families and individuals at risk of becoming homeless.

Action Steps

1. Speak to key players about raising the living wage
2. Have the new Boys and Girls Club work with children in foster care to give them a positive environment to interact in and provide mentors.

Recommendations

1. Adjust the city and county's living wage to be more livable.
2. Identify high risk individuals and get them comprehensive/wrap around services. Possibly create teams of church members and service providers to work together to help out individuals so that no one person or organization is not stretched too thin allowing them to pool their resources.
3. Create transitional housing for people who are being discharged from certain institutions who need more structure before trying to live on their own.
4. Ensure foster children stay connected to services as they "age out."
5. Strengthen emergency services need to help people out with rent, utilities, car, etc.
6. Offer financial classes or counseling to people about how to budget their money.

In addition to these action steps and recommendations, this document provides information gathered through secondary data sources, one-on-one interviews, community focus groups, and community observations by the student team. Ideas about homelessness and how the county can address it were varied in some respects, but many common viewpoints were identified. In a county with an abundant amount of resources, the team found that most of the tools needed to address the issue are present. However, it will require a united effort to properly use those tools and reduce homelessness in the county.

This AOCA document is meant to serve as a catalyst to change within the community. It presents an overview of the project, overview of the problem, findings from primary and secondary data sources, the methodology and limitations of the data collecting process, an overview of the community forum, and conclusions and recommendations for next steps of action. It is the hope that the next steps of actions in this process will begin to eliminate the culture of reliance on the shelter system by those who are homeless. The student team presents this document as a resource and reference for the citizens of Orange County and hopes that it will serve as a supplement and compliment to the work already underway in addressing the issue of homelessness. The student team thanks the people of Orange County, North Carolina for all of their dedication and wishes them much success as they continue to strive to end homelessness in the county.

INTRODUCTION

Overview of Action-Oriented Community Assessment

Homelessness has become an important public health concern in Orange County. Five students from the University of North Carolina at Chapel Hill's School of Public Health were invited by the county's Partnership to End Homelessness to participate in the community's efforts to address this issue. The students conducted an Action-Oriented Community Assessment (AOCA) to help the community identify its strengths and needs and to encourage community participation in addressing the findings of the AOCA process.

The project began in October 2005 when students were introduced to key community services and leaders. At this point, students became involved in weekly volunteering activities and joined several committees that were meeting to address homelessness issues. Students also began collaboration with a consulting firm, J-Quad, which had been hired to assist the county in writing a Ten-Year Plan to End Homelessness.¹¹ This process allowed students to develop relationships and gain an enhanced perspective of the community. Students also collected and analyzed secondary data regarding homelessness both nationally and locally.

In January 2006 the students began the next phase of the AOCA process. This included conducting 32 individual interviews with homeless persons or those who have experienced homelessness, service providers, and the general population. Students analyzed this data, along with data from 12 focus groups conducted by J-Quad. The analysis was used to present ten reoccurring themes to the community, facilitate a community forum, and initiate action planning.

Introduction to Homelessness

On any given night in the United States between 700,000 and 800,000 people are homeless. Over the course of one year, between 2.5 and 3.5 million people will experience

homelessness.² The majority of adults who use the shelter system will only do so once or twice, stay for just over one month, and never return. However, 20% of the homeless population find themselves unable to break the cycle and obtain permanent housing.²

Homelessness has been on the rise in the United States over the past 20 to 30 years², and several explanations have been given for these increases. Housing resources have decreased, low-income earnings have not kept pace with the cost of housing, and social support services are harder to obtain.² The deinstitutionalization of the mentally ill and rising rates of substance abuse have also contributed to the problem.³ Combined, these issues make homelessness a public health priority for the nation, as well as individual communities such as Orange County.

Introduction to Orange County

Geography

Orange County is located in the hills of the North Carolina Piedmont and is strategically located between the Research Triangle Park and the Triad cities of Greensboro, Winston-Salem, and High Point. Orange County was founded in 1752 and the county seat, Hillsborough, was founded in 1754. The county also includes Chapel Hill, Carrboro, Mebane, and Efland.²⁹

Economy

Orange County is located on the western edge in the Research Triangle Park which employs over 38,000 individuals in research and technical jobs. Orange County is also home to UNC-Chapel Hill, which offers employment opportunities through a leading medical facility and educational institution²⁹. Other major employers include Blue Cross Blue Shield, General Electric, and the Orange County school system. Rural Orange County economics are mainly educational, health and a social service oriented (33.0%), and also includes manufacturing (12.8%).³¹

Population

According to 2002 Census estimates, Orange County has a population of 122,526, with over half of the population living in the Chapel Hill/Carrboro area²⁹. In 2000, the racial makeup of the county was about 78% White, 13.8% Black or African American, 4.5% Hispanic or Latino, 0.4% Native American, 4.1% Asian, 0.02% Pacific Islander, 2% from other races, and 1.7% from two or more races³⁰. The population includes 20.3% under the age of 18, 21% from 18 to 24, 29.9% from 25 to 44, 20.4% from 45 to 64, and 8.4% who were 65 years of age or older. The median age was 30 years³⁰.

Overview of Homelessness in Orange County

Defining Homelessness

The definition of homelessness is varied. Many housing programs and services in Orange County rely upon the U.S. Housing and Urban Development (HUD) definitions. HUD defines a homeless person as someone unsheltered who resides in a place not suitable for human habitation, such as a car, park, sidewalk, or abandoned building. A person is also considered homeless if s/he resides in an emergency shelter, transitional housing, or supportive housing for homeless persons formerly living on the streets or in an emergency shelter.⁴ Some organizations in Orange County also provide services for individuals who do not meet HUD criteria, such as those who are “doubled-up” (transitionally living with other persons or families).

Identifying Homelessness

In a recent Point in Time (PIT) count, an annual count of individuals currently experiencing homelessness, 237 people were found to be homeless in the county, up from 230 in 2005 and 179 in 2004.⁴ These numbers are thought to underestimate the true number of homeless persons for several reasons. First, the PIT uses HUD definitions that do not reflect those who are doubled-up. In addition, the PIT often misses those living in hard to find areas such as

campgrounds or in the woods. It is also only a one-day snapshot of those who are homeless and does not capture changes in the homeless population or the number of those cycling in and out of the system.

Determining the impact of Homelessness

Although no formal analysis has been conducted, the economic cost of homelessness is a concern to Orange County officials. According to Martha Are, a policy specialist with NC's Interagency Council on Coordinating Homeless Programs, "When people live in an emergency shelter or on the streets, they tend to require the most expensive services."⁹ The Inter-Faith Council for Social Service (IFC), a leading provider of shelter and services for the homeless in Southern Orange County, spent nearly \$1.9 million during its 2004 fiscal year. Orange Congregations in Mission (OCIM), a social services agency in Northern Orange County, expects to spend \$167,000 this year on services provided to prevent homelessness or assist those experiencing homelessness. Citizens and the local government have donated the equivalent of an additional \$1.35 million in volunteer service hours and in-kind donations such as utilities and food. These numbers do not include the cost of healthcare provided to the homeless. While the exact figures are elusive, it is estimated that healthcare for the homeless costs the county another \$1 million each year.⁹ These statistics indicate that homelessness has economic as well as social implications for the county.

Orange County's Response to Homelessness

Orange County is currently in the process of developing a Ten-Year Plan to End Homelessness. The Ten-Year Plan is a federal initiative that was passed into legislation by the United States Interagency Council. North Carolina opted to participate in the initiative and each county has been encouraged to form its own plan. In response, the Orange County community

has steadily increased its efforts to address the needs of the homeless community in recent years.²⁴

Through resolutions on behalf of all local governments in the county, the Orange County Partnership to End Homelessness was formed in March 2005 as the entity responsible for developing and initiating the Ten-Year Plan.¹⁰ This body is comprised of two groups. The Working Group meets bi-weekly to address the day-to-day issues involved with developing the plan and is made up of representatives from agencies such as Triangle United Way, OCIM, IFC, Orange Person Chatham (OPC) Area Program, Chapel Hill, Carrboro and Hillsborough townships and Chambers of Commerce, and UNC-CH.¹⁰ The Steering Committee meets once every three months to guide the planning process. This committee is comprised of a cross-section of citizens, including representatives from the private sector, policy makers, and board chairs, and is also working to include those who are or were homeless. The Partnership is responsible for completion and initial implementation of the Ten-Year Plan by December 2006.²⁸

Defining Orange County Homelessness for AOCA

For the purposes of this project, individuals were considered a part of the homeless community if they self-identified as being without permanent, habitable housing in Orange County at any point in their lives. This document will refer to these individuals as community members. Those who provide direct or indirect services to community members will be referred to as service providers. Those not homeless and not providing services to the homeless will be referred to as the general public

RESULTS OF THE AOCA PROCESS

Strengths

During the course of the project, the student team observed the strengths of Orange County as a whole, as well as community members. Interviews allowed the team to hear from community members, service providers, and the general public about the strengths and triumphs of the county.

Identified community strengths included resource availability and community involvement. Interviewees noted that Orange County has many residents who are eager and willing to be involved in community service. The progressive atmosphere contributes to a large volunteer body that is known for its dedication. Churches are key players in the community and many have prioritized aiding those who are homeless. Comprehensive services and extensive resources were also identified as strengths in the county. One provider commented, “I think the county funds somewhere between 20-30 non-profit organizations and are providing services of all kinds. So I think you would be hard pressed to find a service that is not provided.”

Community members were praised for their ability to gather resources. Their resiliency and courageousness despite hardships of daily living were strengths identified by service providers and peers. One provider stated an important strength as “their ability to adapt, seek resources, and survive in some very bad situations.” Interviewees also recognized their generosity and willingness to share resources as well as assist others.

These strengths demonstrate the power that exists within this community. As one provider stated, “This community is full of people who can rally if they get behind a cause.”

Organization of Themes

Analysis of interviews and focus groups (see Methodology section) revealed ten reoccurring domains. The student team summarized the key issues within each domain to create a thematic statement for the domain. Each domain is presented below, followed by the thematic statement. Sections include secondary data, findings from community member, service provider, and general public interviews and focus groups, and student field observations. A comparison of perspectives is provided at the end of each section. For team recommendations generated at the community forum see Appendix A.

Housing

Theme: Lack of affordable housing, combined with a non-livable wage, creates a barrier to ending the cycle of homelessness

“The wage around here is low and then the rent’s high...If you get a job, it’s either pay your rent or buy food.” ~Community Member

Secondary Data

The gap between wages and the cost of living is a well known contributor to homelessness. In NC, 45% of families with children earn too little to meet basic needs like housing, food, health care, child care and transportation. With the highest cost of living in the state, Orange County is an especially difficult place for a low-income earners.¹³

Housing expenses in Orange County have a large impact on the cost of living. The sale of high income units has dominated the housing market in recent years, driving up costs and making affordable housing for the low income segment of the population scarce.¹ The US Department of Housing and Urban Development (HUD) defines affordable housing as having a cost which is 30% or less than a household’s income.¹² In Orange County, 84% of households with extremely low income live in housing that is not affordable and 75% pay more than half of

their income in housing costs.¹ A person who earns minimum wage in Orange County can afford a housing price of \$268/month, while the median gross rent (rent plus utilities) is \$684/month. A person in this situation would have to work 116 hours a week in order to afford housing.¹

The number of persons who do not earn a living wage is on the rise. Recent downsizing and outsourcing of manufacturing jobs have also taken a toll on the earning power of some North Carolinians. These positions provided livable wages to individuals with moderate education, but now these workers must find employment in the low-pay low-benefit service or retail industry.¹³

Although strides have been taken to help Orange County's low income earners meet basic needs, many challenges remain. The county recently passed an affordable housing bill that requires 15% of units in rezoned areas to be affordable. However, these units are made to be affordable for those earning 80% of the area median income and will not help those most vulnerable to homelessness. Many other services designed to alleviate cost burdens, such as Section 8 vouchers, low rent housing, health department services and child care subsidies, have long waiting lists and are not currently accessible to all those they were designed to serve.¹

Community Member Perspective

Every interviewee and many focus group participants noted that their income did not provide adequate funds to pay for housing and other basic necessities. Some said that this situation leads to persistent financial stress and creates a substantial obstacle to breaking the cycle of homelessness. One community member explained, "I stay in my vehicle. I prefer that to being under the pressure of being one paycheck away. It's difficult because jobs don't pay off."

Service Provider Perspective

Nearly all service providers identified the combination of low fixed income or wages with the high cost of living as a primary cause for homelessness. Several people commented that

Orange County's housing was the most expensive in the state. They acknowledged that an increasing number of wealthy persons have been moving into the area in recent years. This growth, in addition to the ability of university students to pay high rents, was recognized as a large contributor to the rising cost of housing. A few interviewees mentioned new housing policies stating that a certain percentage of units must be affordable. However, they noted that this only applies to new builds and "the definition of affordable is for people who make almost \$40,000 a year." Many noted that even middle class workers leave the county to find affordable housing.

The scarcity of job opportunities for low or unskilled workers was also noted. Corroborating secondary data, interviewees explained that cut backs in industries such as tobacco farming, milling, and manufacturing have left many jobless. Others are reliant upon jobs that offer little stability and do not pay a livable wage. One service provider commented,

A lot of people we see in low income jobs are in retail or service. You might make a little more than minimum wage in Orange County., but for the expenses here, you can't make it on that salary ... [T]hose jobs don't have job security either. Your hours get varied quickly; there's no month warning that your check's going down ... It's a real hardship.

Student Team Perspective

The student team learned about the scarcity of affordable housing and inadequate wages during initial introduction to the community, volunteer experiences and committee meetings. Conversations with residents at the IFC Community House revealed that many of these individuals worked but were unable to sustain housing. Other working persons were in housing but would not be able to meet food needs without the free meals offered at Community House.

Affordable housing initiatives were noted, but they did not seem to be enough to meet the need. The team heard that the ordinances, which had been passed to mandate "affordable" housing, did not bring prices down far enough to help the homeless. Club Nova Apartments, a

collection of Section 8 and Section 11 funded single room occupancy units, was recognized as a successful model to provide supported living for those with mental illness. However, only 24 units are available and turnover is low. Other efforts with promise include The Northside Initiative, which is working to buy lots in Chapel Hill, revitalize them and sell them to low income families, and the home ownership program at The Women's Center, which provides money for a down payment to families living below 30% of the area median income.

Comparison of Perspectives

The disparity between high housing costs and low wages was a pervasive theme in all the data. Community members and the student team acknowledged this as an issue of concern, and service providers and other sources of information offered further insight into the problem.

Basic Necessities

Theme: Inadequate access to essential resources creates a barrier for homeless persons to secure jobs.

“You know homeless people, we really don’t have nice clothes ... and that can make a difference in the way you look when you go look for a job. People tend to prey on that when you ask for an application or something.” ~Community Member

Community Member Perspective

The majority of community members interviewed identified a lack of appropriate clothing as a barrier to securing a job. Some said that the thrift store did not carry professional clothing. Those who do not have beds in the shelter explained that the lack of a place to wash or store their clothes makes it difficult to build a professional wardrobe or look presentable at an interview.

Many community members noted limited phone and computer access. Some said that following up with employers was hard because phones are not readily available to residents and

the message system is unreliable. Interviewees said that although the shelter had computers with Internet access, guests were rarely able to use these resources. The libraries were referenced as good places to access computers, but some noted that priority is given to students. Suggestions to address these issues included the creation of a day shelter with computers, phones and a washer/dryer or the development of a voicemail system for shelter residents.

Several community members said that identification had been lost or stolen during transitional periods. They reported that during a lack of documentation precluded them from obtaining employment. As stated by one man at the shelter, “Everybody in here, they somehow don’t got a social security card, birth certificate and all that ... [Jobs] require that.” Community members could identify few resources to help with this issue.

Another barrier to employment identified was the shelter address. Many felt that employers were unwilling to hire them when they saw that they were living in the shelter. Some noted that PO boxes were difficult to obtain because of cost and proof of residency requirements.

Medical conditions were also noted as a barrier to employment. Poorly treated mental illness and substance abuse issues were commonly cited barriers to sustaining employment. Those with chronic conditions said that they had trouble finding jobs because employers consider them a risk. Some working in manual labor said they suffered from injuries that impeded productivity and lessened their appeal to employers. Interviews revealed that the health care available to community members was inadequate to manage medical needs.

Service Provider Perspective

Service providers mentioned basic necessities for employment far less frequently than community members. A few interviewees acknowledged difficulties with documentation. They noted that the process and cost to regain driver’s licenses or birth certificates prevent many from

obtaining these documents. One focus group participant acknowledged the lack of access to appropriate clothing and suggested a program like “Dress for Success” which provides professional outfits for low-income women.

Some necessities were identified by service providers that were not mentioned by community members. Two interviewees noted the need for more childcare subsidies. Health care providers in one focus group recognized that dental care is not accessible to many homeless persons, and poor dental care creates a negative impression for potential employers.

Student Team Perspective

The team noted several potential barriers to jobs in their field research. Providers at Freedom House (a detoxification facility) and OCIM stated that many of those that use their services cannot secure jobs because of lost identification. Residents at IFC Community House told personal stories that explained this problem and their struggle to overcome it.

During reception duties at the shelter, the team noted that access to a phone was difficult for community members. Only one phone is available for persons using shelter services. The phone is located behind a locked door, and guests must ask the receptionist on duty for permission to use it. A message system exists, but shelter guests cannot receive calls directly.

Clothing resources were explored by the team. They learned that while clothing vouchers are available through IFC and OCIM, only those with beds at the shelter have access to laundry facilities and lockers for storage.

Comparison of Perspectives

Each community member mentioned a lack of basic necessities, which in turn impede employment. The most common needs included a means to acquire and maintain a professional wardrobe for interviews, access to phones and computers, an alternative address for job

applications, regaining documentation, and medical care. The student team also observed some of these barriers. Service providers focused less upon these immediate needs. They did note that child subsidies and improved dental care may help people secure employment.

Education/Employment

Theme: People who are homeless do not have relevant skills training and employer support to become employed, remain employed, and plan for the future.

“I don’t think I could get a much better job right now because of my education”
~Community Member

Secondary Data

Although there are several large organizations offering possible employment in the Orange County area, the closing of eighteen businesses in 2004 offered a blow to the economy and left many blue collar workers unemployed.¹ This increased the need for training and educational support for unemployed community members.

In Orange County, the Orange County Skills Development/Job Link Center provides a comprehensive range of employment and training services. The center was created to allow job seekers to make more informed decisions about their careers and for employers to make more informed decisions about future employees. A wide array of services is offered including job search and placement assistance, résumé preparations, employer contacts, and career information resources.¹ Additionally, Durham Technical College offers free workforce skills training for new and expanding industries and management training programs for existing employees in the county. Orange County Work First Program also assists in finding job and educational opportunities for low-income families who currently receive federal cash assistance.¹

Community Member Perspective

Community members reported a lack of opportunities to enhance their education. They also felt that education and employment were connected, and that lack of education was partially responsible for the shortage of jobs for the homeless. There is a large variation in educational needs. Some of those interviewed cited utilizing training programs offered by a local technical college as a way to enhance their educational levels and make them a more viable candidate for employment. On the other hand, several reported not being able to read or write.

Persons interviewed reported competition for jobs with college students in the area, with preference given to the students. One community member stated, “The stores up on the avenue will hire college students before they will hire these guys. For the one simple reason that [they] are going to college and these guys are in a shelter.” Negative perceptions of homelessness were also a formidable barrier to gaining employment. Some acknowledged that there were employment opportunities for homeless persons, but many are unaware of these opportunities.

Service Provider Prospective

Service providers also acknowledged the lack of adequate education as a barrier to securing employment for the homeless. They recognized that Orange County does not offer many low-skilled jobs or traditional working class methods of earning a sustainable living. Many service providers also felt that employers were hesitant to offer a job to a homeless person who has a criminal background, especially those convicted of violence or theft. An interviewee commented, “I talk to people weekly, probably daily, that have felonies and they are not getting hired.”

Student Team Perspective

The student team also observed inadequacies and barriers in obtaining employment for community members. There are agencies such as the Job Link office, where community members are able to search for employment opportunities in the area. The shelters also work to provide more services to their clients such as computer training courses, as well as life skills and job training classes. However, the students found that these classes are not offered on a consistent basis, they were not substantial enough to accommodate all community members in need of a job, and Job Link was the only well advertised place where community members could go to look for employment opportunities. These factors, combined with those mentioned in the “Basic Necessities” section above, seemed to create a culture of reliance on the shelter system and a lack of self-sufficiency.

Comparison of Perspectives

The community members, service providers, and student team members all identified different barriers to employment. However, they all agreed that more services are needed to better educate the homeless and to make them more marketable to potential employers.

Transportation

Theme: Inadequate transportation services create a barrier to sustaining employment and accessing services’

“I lost my job...because of transportation problems. The bus stopped running before I got off work so I would be left stranded” ~Community Member

Secondary Data

Transportation affects employment and educational opportunities in the area. In Southern Orange County, Chapel Hill Transit provides free bus routes throughout Chapel Hill and

Carrboro. Orange Public Transportation (OPT) provides for fee services mainly throughout the more rural sections of county. Additionally, the Triangle Transit Authority (TTA) operates in the county and provides access to other locations in the greater Triangle Area, also for a fee.¹

Although bus services are provided in the county, further needs for transportation remain. The bus system has limitations including reduced schedules during university holidays and limited weekend and evening hours.¹⁴ Additionally, the Chapel Hill-Carrboro City Schools and Orange County Schools together paid about \$26,000 in taxi fees alone to take homeless children to school.⁹

Community Member Perspective

Transportation was also identified as a barrier to obtaining employment. The general view of the community members is that transportation services do not adequately meet the needs of those living in the county and are a barrier to accessing many services and activities in the county. Because the public transportation system is focused upon student activities, the schedule does not accommodate those who are not in school. Examples of this include those trying to work second or third shift and those working during school holidays.

Transportation is also limited in the areas that it serves. Many reported that it was difficult getting to places such as Hillsborough or Raleigh, where they would be able to access services. While the Chapel Hill Transit system is free, it only serves a very limited portion of Orange County. The TTA serves the greater Triangle area, but its cost limits some from using it. The limited hours, limited areas serviced, and cost of the public transportation creates a barrier to accessing services, employment, and other activities in which community members may need to engage.

Service Provider Perspective

Service providers identified the free transportation system as an asset. However, they recognized transportation as a major barrier for some and reinforced many of the points raised by community members. As stated by one service provider, “[There are] people who can’t take the bus for some reason or if it doesn’t run, like at night. Sometimes the schedule is limited and some of our women have to work at night.” Service providers also acknowledged the lack of transportation between the north and south Orange County as an obstacle to obtaining services such as mental health, substance abuse, and employment that may be in the opposite end of the county from where the client lives. This is particularly true when discussing those living in the unincorporated areas of the county where no public transportation system is in place.

Student Team Perspective

The field observations of the student team were aligned with what the community members and service providers identified. The student team noted the free bus system for those living in the Chapel Hill area is frequently used by those who are homeless. However, the team did find that transportation was extremely difficult between Northern and Southern Orange County because of the limited services provided between the two areas. The hours of operation are limited to daytime and early evening hours, making it insufficient for those who have third shift jobs.

Comparison of Perspectives

Community members focused upon the limitations of the current transportation system. Although secondary data, service provider interviews, and student team observations

corroborated the existence of these weaknesses, these sources also noted the free bus system in Southern Orange as an asset of the community.

Perceptions of Homelessness

Theme: Stereotypes of homelessness create tension between homeless persons and the surrounding community

“If you sit next to people they get up and move away; I guess they think it’s a disease or something.” ~Community Member

Secondary Data

Community perceptions of homelessness have recently been reflected in the media. A series entitled “Franklin Street Blues” published in *The Chapel Hill News* in October 2005 discussed the changing environment of downtown Chapel Hill. Letters written by the general population conveyed feelings of negativity regarding panhandling and crime. Most of the editorials expressed a direct connection between homelessness and these concerns. One individual wrote, “I think that our local politicians enable bad behaviors in the homeless. Panhandling, verbal harassment, foul odors and ownership of benches prevent the Franklin St. experience from being all it can be.”¹⁵ Another said, “I hate the amount of homeless people on Franklin St. It’s ridiculous. You cannot walk ten feet without coming across another homeless person seeking hand-outs or assistance. Again, it’s not a family-friendly environment.”¹⁵ The tension between townspeople and the homeless community was also evident when plans to move the IFC Community House away from downtown began to take shape. Several articles described community protests in neighborhoods around proposed relocation sites. Residents in these areas perceived that the shelter would bring increased crime and substance abuse to their area.^{16, 17}

For Northern Orange County, there is the perception that homelessness does not exist. A government official in Hillsborough was quoted in 2005 as saying “We have very few true

people who don't have anywhere to sleep at night."²⁰ He also expressed his belief that anyone who is homeless in Hillsborough migrated into the area to benefit from social programs.²⁰

In contrast, some individuals are working to engage the community in seeing a different picture of homelessness. Another series of articles in *The Chapel Hill News* entitled "Homeless in Orange County" ran in September 2005. These articles gave community members an opportunity to share their opinions and stories. The author focused upon the strengths and struggles of individuals experiencing homelessness. This included those living on low wages, actively seeking employment, recovering from addictions, and overcoming past criminal records.^{9, 18, 19} In Northern Orange County, Reverend Ronnie Torain and his wife Sharkita have spearheaded a movement to start a shelter in Hillsborough.²⁷ Along with local churches, they started the "Food For All" program in November 2005.²¹ This program currently serves approximately 75 meals nightly to families in need. The effort has raised awareness of homelessness in Northern Orange County.

Community Member Perspective

Community members expressed concern and frustration with others' perceptions of homelessness. Many interviewees made comments that reflected this, such as "[The community perception is that] you're dirty, you're dangerous, they should be scared of you." There is a feeling that the word "homeless" is equated with a particular negative stereotype that does not include all faces of homelessness. This narrow definition by some members of the general population leads to inaccurate assumptions about why people become and/or stay in homelessness. Persons interviewed often mentioned the difficulty of overcoming the general population's perceptions of the homeless as panhandlers, substance abusers, and those unwilling to work. Interviewees noted being accused of criminal activities and feeling unwelcome in many

areas of the community, most specifically in the downtown Chapel Hill/Carrboro area. Persons interviewed felt that those experiencing homelessness were seen as a group instead of individuals, which led to hostility towards anyone in the “group” regardless of their actual behaviors and daily activities. This misperception often hinders an individual’s ability to obtain housing, find employment, and feel part of the community. One interviewee stated, “It’s interesting how afraid people are of the homeless...all [the people they] see at Franklin Street everyday panhandling gives us a bad name, and one individual can’t overcome that”.

Although some persons experiencing homelessness mentioned a noticeable tension between the groups, others reported feeling ignored and invisible. One person described it as looking 500 or 600 people in the face every day, but only finding five or six who will look back. Interviewees perceived more acceptance from the students than other community members. However, interviewees felt that Chapel Hill caters to students, which makes it harder for those who are homeless to feel they are part of the community.

Service Provider Perspective

Service Providers recognized community perceptions of homelessness as a factor that hinders progress. They reinforced community member concerns regarding the narrowness of the general population’s definition of homelessness, and expressed a need for a better understanding of who makes up the homeless population and those at risk for becoming homeless.

Most often mentioned was the tension between business owners and community members in Southern Orange County. Many of the homeless concentrate in the downtown area. The perception that this is hurtful to businesses has created hostility and led to increased pressure to move services for the homeless out of the center of Southern Orange County. However, few

members of the general public have been receptive to accepting these services in their neighborhoods.

Service providers in Northern Orange County in particular noted the overall community perception that homelessness does not exist in this area of the county. The emphasis on informal family and neighbor support for housing issues in rural areas, combined with a historical lack of community awareness regarding formal services for the homeless, has created this misperception. The success of the Food For All program is changing this perception. However, the majority of the general population continues to be generally unaware of persons experiencing homelessness.

Student Team Perspective

The divide between community members and the general public was apparent to the student team, particularly in Southern Orange County. The team learned that the community is divided over a possible new shelter location, with most expressing the perception that the shelter will be detrimental to whatever part of town it is located in. There also seemed to be a general hesitancy from many service providers and community leaders about including community members in decisions and activities around the Ten-Year planning process.

Community members were often friendly and appreciative of volunteers and service providers, but seemed unaccustomed to the students' interests in their perspectives. They perceived that others viewed them as dirty and that some service providers were not responsive to their needs which inhibited communication and partnership. Many also voiced frustration with media representation of homelessness, stating their stories and words were often skewed and did not accurately represent the needs and issues of the homeless community. Community members

also had assumptions of each other. Some mentioned the idea that substances users and those not interested in moving out of homelessness restrict opportunities for others.

Most persons in Northern Orange County seemed unaware of the scope of homelessness in the area. The Food For All program's efforts to provide meals for those in need and the plan to build a homeless shelter in the area have increased awareness. The student team observed many positive interactions between church organizations providing meals and those receiving them.

Comparison of Perspectives

All data sources create a common picture of the perceptions of homelessness. Secondary data, community member and service provider interviews, and field observations revealed that there is tension between community members and the general population in Southern Orange County, while in Northern Orange County the issue of homelessness is just beginning to be discussed.

Community Partnerships

Theme: Community Partnerships need to be strengthened to ensure successful service provision

"It's difficult to move from your individual organization to a combined force" ~Service Provider

Secondary Data

As previously noted in the section entitled *Orange County's Response to Homelessness*, the Partnership to End Homelessness, is working to meet the needs of those experiencing homelessness. Many other agencies in the county are working alongside the Partnership to meet this goal. Throughout Orange County's history, partnerships for homeless services have been led by IFC and OCIM in coordination with local churches. The Orange County of Continuum of Care was established by the IFC in 2002 and reorganized by OPC Area Program in 2004 to become the Community Initiative to End Homelessness (CIEH). With many service

organizations represented, this group meets bi-monthly to discuss issues of homelessness in the county. CIEH also oversees HUD homeless assistance funding, PIT counts, and the Homeless Management Information System.²²

Community Member Perspective

Community members revealed that gaps in the service delivery system may exist. They felt that they were often unable to get information or help without going through multiple providers. They were aware of and expressed appreciation for church support and involvement in Orange County, and felt this relationship was important to strengthen and maintain.

Service Provider Perspective

Service providers noted the increase in collaboration and participation regarding services for the homeless over the past few years. Several supportive actions, such as the creation of the CIEH, have led to more organized and knowledgeable partnerships in the community. However, many service providers felt that partnerships need to be strengthened. Service provision for homelessness is difficult to organize as the scope of the problem is broad and multifaceted. Organizations are often limited in what services they can provide, and the services they do offer take considerable time and effort to implement. This restricts the time available to network and participate fully with other organizations. No central communication link for all homelessness services exists. Competition for funding resources also inhibits effective collaboration. Additionally, difficulties in partnerships between Northern and Southern Orange County were also acknowledged by service providers. Many interviewees noted historical differences in perspectives on service provision and utilization of resources between the two areas.

Student Team Perspective

While those providing services to the homeless now have formal opportunities to network through the CIEH and the partnership, there seems to be a lack of knowledge about services in the area. This is particularly true for small and informal service providers. Many great ideas and opportunities to improve services were often mentioned. However, participating group members seemed unclear of what was already in place or had been tried in previous years. When team members tried to use service provider partnership resources, such as 211 and the Orange Book, information was hard to access and outdated. Several service providers were unaware of these tools, and could not direct the team to appropriate resources.

Comparison of Perspectives

Secondary data, service provider interviews, and team observations revealed that strides have been made in recent years to increase collaboration among service providers. However, accounts from community members, supplemented by information from service providers and student field notes, indicated that communication between agencies could be improved.

Continuum of Services - Connecting

Theme: Services are available, but only to those who are regularly using or know how to navigate the service delivery system. Therefore, many who are homeless “slip through the cracks”

“The problem is that [services] aren’t advertised, so unless you hear about it from someone else, you don’t know there’s help.” ~ Community Member

Community Member Perspective

Interviewees reported that the principle method of passing information among community members is word of mouth. Persons were often unaware of services unless they were already in the service system, and mentioned having difficulty locating a service entry point.

However, most persons interviewed stated that once they entered the system they were impressed and grateful for the vast amount of services available. One community member stated:

The people in the program that helped me at that time would help me sign up for different things, give me information or send me in the direction of different things . . . and I was like wow, I didn't even know people could get help with any of this. Once you're there, you see what there is to offer.

The IFC Community House bulletin board was identified as a site for information, but some also said that few persons read it. Additionally, the library, billboards on the bus, and Internet were identified as utilized resources. Individuals who met success in acquiring needed information attested that their inquisitive behavior profited the most information. The biggest barrier for connecting to services was lack of knowledge of what services are available. An interviewee explained, “If you don’t know, you don’t know and you don’t know to ask. They don’t have billboards saying, ‘If you need help with this, call this number.’”

Service Provider Perspective

The majority of interviewed service providers rely upon a referral system to inform the community of their services. This system operates formally between organizations as clients are referred to other agencies, and informally between clients and their acquaintances. Additional sources of information are brochures and fliers. One provider referred to community outreach, such as community fairs, as a tool frequently utilized by their organization. Other providers individually advertised their services at community events, or while walking on Franklin Street.

Providers expressed concern about the ‘hidden homeless’ persons who are not connected with services. A provider suggested that those who most need services might not be accessing services. The transient nature of homelessness makes it difficult to connect to this population. One service provider explained the situation in the following way:

The challenge becomes, how do you find them? I don't have a clue about that. How do find those homeless people who are not looking for services? Everybody that's homeless

doesn't come to IFC . . . So how do you actually get to those people who are homeless and really need the service particularly in the unincorporated areas of the county?

Others expressed difficulty reaching the growing Latino population in the county. Service providers felt unequipped to serve this community due to lack of qualified translators and understanding of the Latino culture and needs. Cultural differences make the population hard to reach and service needs unclear.

Some organizations did not feel the need to advertise more due to a steady clientele:

"I'm like some contractors that never advertise. We never have to. I mean people find us, agencies refer individuals to us, clergy, congregations, I mean people know where we are. We're well established, we're quite visible. Homeless folk will tell other homeless folk if there are either problems or good experiences they've had. "

Despite perspectives like these, there was an articulated need for additional advertising for services such as housing support. The majority of providers recognized the benefit of increased community awareness of services and opportunities.

Student Team Perspective

The student team observed inconsistent information provision to the community about available services. As mentioned in the Partnerships section, the 211 system has not been regularly updated. Furthermore, there is no centralized location specifically for the homeless population to access service information. While IFC Community House maintains a bulletin board for information, not all homeless persons are literate or frequent the building. As there is no shelter in the northern part of the county, it is difficult to identify the homeless population and ensure needed services are provided. Unincorporated areas of the county have no consistent means of accessing information.

Many agencies observed had their own information system to communicate with their clientele. Yet those not engaged in these services are not accessing this information. Informal

conversations between the team and community members reinforced the idea that most information is spread through word of mouth. This ‘grapevine’ can provide an abundance of information for those within this informal network. However, those who are not engaged in services or informal social networks are left to discover resources on their own or risk slipping through the cracks. Furthermore, the team observed a lack of advertising, which hinders general knowledge of the services available.

Comparison of Perspectives

A comparative look at community member and service provider interviews reveals differing perception of the sharing of information. While both groups rely upon word of mouth, community members feel it is inadequate. All of the community members interviewed were accessing services, yet they recognized their own limited knowledge of services and that of homeless persons in the community. Both groups recognized the need for improved knowledge of services, particularly of those who are outside the information systems.

Continuum of Services - Successful Care

Theme: Homeless individuals’ unique ways of achieving success are often limited by standardized eligibility requirements and delivery structures

“I don’t think there’s any cookie cutter model that’s going to work for everyone” ~ Service Provider

Secondary Data

Limited and inflexible funding restricts service providers from providing extensive individualized care to the heterogeneous homeless population. Atlanta’s Regional Commission recognized outreach, intake, and assessment as a key component to a continuum of care.²⁵ Assessment is a crucial step to identifying the individual needs of a community member. Orange county has initiated client-centered comprehensive approaches through Assertive Community

Treatment (ACT) teams, which combine the efforts of social and health professionals in an individual's care, provide intensive case management and have been found to increase positive treatment outcomes.²⁶ Ultimately, efforts to end homelessness must account for the specific needs relevant to subgroups of the homeless population, such as children and victims of domestic violence.

Community Member Perspective

Community members were well aware of their individual needs and expressed frustration with 'cookie cutter' approaches. One interviewee commented,

You have to find out what's causing the homeless problem. Is it because you don't have a job, you're an addict, you're disabled, or you're not qualified. And then once you get that, you can address the needs of the individual because each individual is gonna need different attention.

Though grateful for the shelters, not all of the residents felt supported in their situation. Many mentioned that programs did not acknowledge their individual strengths and motivations. Many expressed their desire for more compassion and engagement from the shelter management. For example, one woman said she would appreciate being asked how her day was going, or if she wanted to talk about something. Lack of engagement made some residents resentful of the staff and reluctant to approach them for help. In contrast, those who received personalized care identified their social worker or therapist as an important source of support.

Some interviewed community members requested more structure in shelter programming. There was concern that since the Community House provides shelter for recovering and current substance users, the co-residence makes it difficult for recovering addicts to stay clean. In addition, interviewees mentioned inconsistent regulations and limited accountability as contributing to some individuals' lack of motivation to exit the system.

Service Provider Perspective

Providers realized that while there are common situations that may lead to homelessness, each person has a different story. With different stories come different needs, which mean that any one service will not meet the need of all. This is expressed in the following quote,

[I]t's probably not enough to put a drug addict in a house- a homeless drug addict in a house with no help who continues to abuse drugs, because what's going to happen? He's going to end up being right back out there where he was.

Case management was identified as being an important service that should be increased, as it provides need-specific guidance and assistance. However, increased case management requires more resources to hire personnel and to fund service provision for the additional clients served. These resources often are not available.

Many of the services offered, such as housing and mental health, require the long-term commitment of the service provider and community member. Providers expressed some frustration with successfully engaging community members who are transient. Bureaucratic processes can also draw out the process of service delivery, hindering successful care.

Student Team Perspective

The student team recognized a lack of structured and motivating activities at the shelters that build upon individual strengths. There were some programs such as writing or art groups, but these activities were only a small proportion of the amount of time spent at the shelter. Without services in place to encourage productive use of time, many residents seemed lost.

Comparison of Perspectives

Community members and service providers articulated a need for more individualized care. Community members, both current and former, expressed an appreciation for personalized

attention and frustration with generalized care. Providers desire more case management, but face difficulties with limited resources and a transient service population.

Prevention

Theme: More prevention strategies are needed that target families and individuals at risk of becoming homeless.

“Most people are two paychecks away from homelessness” ~Service Provider

Community Member Perspective

The team did not formally ask people from the homeless community about prevention efforts, but information about prevention strategies was revealed in several interviews. One community member expressed concern about keeping young people off the street. Many said they became homeless after being forced out of doubled up situations. Another person noted that her inability to recover from emergency situations had driven her into homelessness, reporting “I ended up being homeless because I was illegally evicted. Some are just unfortunate homelessness like their house burning down for instance. I have been in that case where our house burned down and... we didn’t know where we was going to go.”

Service Provider Perspective

Prevention of homelessness emerged as a theme when interviewing and listening to focus groups with service providers. Statements were commonly made about the growing number of people who are at risk or “one step away from homelessness” due to the rising gas prices, changing economy, loss of factory jobs, low living wage, lack of affordable housing, increasing water costs, rising utilities, and other reasons. Some noted that many at risk individuals are employed, but rely on social programs to help make ends meet. If these programs were stopped, then these people would be homeless. A common suggestion was to assist those who are close to

becoming homeless instead of focusing all resources on those who are already homeless. One service provider said it was important to, “provide assistance to those that are nearly homeless ...I’d like to help before people actually get to that point.”

Many service providers recognized the difficulty of serving those at risk who do not meet HUD’s definition of homelessness. Because they are not counted, resources cannot be allocated to help them. Service providers indicated that those who are doubled up are living in limbo. Relying on others for shelter provides no security and circumstances could change without warning. It was perceived that Hillsborough has more doubled up families than Southern Orange County. One service provider said, “A lot of the homeless people in Hillsborough are not technically homeless; they have a camper or a tent at a campground. A lot of them are also doubled up.”

Student Team Perspective

The team was told about doubled up situations when first introduced to the county. This seemed to be more of an issue in Northern Orange County. In one instance, a service provider told the team:

Rural homelessness is different from those who are in more urban areas by the fact that there is more doubling up of families in a house, there are more sub-standard houses in use. Many people will live in shacks in the backyard of another family member, people move from house to house to stay sheltered, and people will live in a tent in the backyard of another person. Because of these reasons, homelessness is more hidden in Hillsborough.

When some of the teammates participated in the PIT count, they heard volunteers’ frustrations with the limitations of the HUD definition. Some services, like IFC and the Food For All program, provide support to those who are at risk. Team members often spoke with persons who were employed, but needed to eat lunch and dinner at the shelter to save money.

Comparison of Perspectives

The issue of prevention was most evident in service provider interviews and focus groups. However, accounts from community members and observations by the team provided information to support this as a contributor to homelessness.

Discharge Planning

Theme: The lack of collaboration in discharge planning and a lack of appropriate facilities burdens service providers and limits success for the homeless population.

“People are being discharged....to environments that are not rehabilitative or appropriate.” ~Service Provider

Secondary Data

A Supreme Court ruling in 2001 led to the deinstitutionalization of mental health and substance abuse services. For North Carolina, this shift included decentralizing case management and investing in community centered patient care to reintegrate clients back into the community.⁵

In 2005, almost 1250 patients were sent to homeless shelters from the state psychiatric hospital alone, a large increase from the 750 sent to shelters in 2000.⁷ This number does not include the street homeless that contribute to almost 40% of the mentally ill shelter residents.⁶ Already filled to capacity, Freedom House and Club Nova (in collaboration with the Mental Health Association of North Carolina) are the only facilities offering residence and mental health services in this county and bear the weight of providing for the influx of discharged patients.⁸ In the absence of adequate and accessible community facilities, the reform means there are few governmental services for this population to fall back on.²³

Community Member Perspective

Community members were not directly asked about discharge planning; however, several reported being affected by the discharge processes. A few people spoke about the hospital

sending them to the shelter if they did not have anyone to stay with or money for a motel after receiving care. One person commented that after going through treatment no one worked with her to find a job or a place to stay leaving her with the only option of going to the shelter. Another person experiencing homelessness pointed out that as some mental health facilities are being shut down they are not properly putting people back into the community where resources are already being stretched too thin.

Service Provider Perspective

The lack of collaboration for re-entry as well as the lack of appropriate places for discharge emerged as a theme in our data from service providers. Interviews and focus groups revealed two unique perspectives about the issue; those from the discharging institutions and those who provide temporary shelter. Shelter providers noted a lack of communication with discharging institutions. As a result, the shelter may not have space, resources or knowledge of the individual's needs to provide appropriate care. One service provider commented, "If somebody's discharged from UNC, John Umstead, or Dortehea Dix on a certain day...they come here... I don't know they are coming, there's no heads up." Another provider felt that people were getting discharged without an after care plan, "More and more people are being dropped off at our shelter...these people are not ready to get back into society, there has been no planning by institutions for releasing these people."

Conversely, persons responsible for discharge planning from institutions expressed frustration with lack of appropriate places for discharge. One service provider said "No one thinks it's a good idea to put a person in the shelter at discharge. Run through your list of options and there aren't many." Another provider noted, "In the correctional system what we're seeing is that all the work done to rehabilitate in prison is all for nothing if there is no housing at

discharge.” Statements were commonly made by both types of providers that the problem of discharge planning was bigger than the individual institutions making it a “systems issue” that must be addressed at state and federal levels.

Student Team Perspective

The team did not recognize discharge planning as a significant concern by observation and did not understand the significance of the issue until interviews with service providers were completed. Team members did notice through volunteering that many individuals in the shelter had previously been in hospitals and prisons. Shelter staff discussed safety concerns when receiving people from hospitals and prisons without adequate information. They also commented that this situation perpetuates the cycle of homelessness.

Comparison of Perspectives

Discharge planning was most often discussed by service providers, and this concern was supported by findings in secondary data. Neither community members nor the student team explicitly recognized this issue, although evidence of its effects was present.

COMMUNITY FORUM

The Forum Background

On April 27, 2006, a community forum, “Seeking Solutions for Ending Homelessness,” was held as the final phase of the AOCA project. This forum focused on education and empowerment of community members regarding identified homelessness issues. At the end of the forum the AOCA team began to exit the community and turned ownership of findings as well as continued action over to the community itself.

Forum Planning and Follow Up

The forum planning process began as a collaboration between the student team and the Partnership to End Homelessness Work Group. This alliance was formed in an effort to plan forum events that encouraged community input in short term action plans as well as long term recommendations for the Ten-Year Plan.

On February 22, 2006, the students presented their identified domains and themes to the Steering Committee of the Partnership to End Homelessness (See Appendix B for PowerPoint presentation). Steering Committee members decided all ten themes needed to be addressed at the forum to generate the most effective feedback for the Ten-Year Planning process.

The student team's forum proposal was presented to Work Group members on April 4th, outlining the format of the forum as well as planning and implementation activities. Work Group members gave feedback and collaborated with the student team in forum preparations. At a last forum planning meeting on April 18th, students presented the forum agenda for approval and finalized logistics for forum events. After the forum, on April 28th, a meeting was held with Work Group and student team members to debrief and discuss the Work Group's next steps for addressing actions and recommendations formulated by the community.

Forum Promotion/ Marketing

The promotion and marketing of the forum was divided among the Work Group members, AOCA preceptors, and the student team. Forum advertising included website notices, service provider and university email listservs, community fliers (See Appendix C), public service radio announcements, and a media press release (See Appendix D). The AOCA team conducted outreach to persons experiencing homelessness and the general population by distributing fliers at the local Apple Chill festival, interacting with businesses in the downtown

area, delivering personal invitations to community members participating in interviews, as well as informing and inviting individuals currently living in shelters or participating in Northern Orange County's food distribution programs. By request, student team members also presented AOCA findings during a Chapel Hill Town Council meeting in an effort to educate and involve additional community leaders. This presentation was aired on a local cable channel for further community awareness of the forum.

Transportation was also considered an important need for increasing community participation. The Work Group arranged for Orange Public Transportation (OPT) to offer transportation to and from the forum site. The OPT phone number was posted on flyers and press releases. Unfortunately, after the forum, the student team learned that OPT dispatchers had not been debriefed on this information. Therefore, persons contacting OPT were unable to secure transport through this service. Several forum participants mentioned this problem, and stated that some community members from Hillsborough were unable to attend because of this. In Southern Orange, the two homeless shelters, Community House and Homestart, planned and provided transportation for interested community members to and from the forum.

The Forum

The forum was held on April 27th from 5:45- 9:00 pm at A.L. Stanback Middle School. Located between Hillsborough and Chapel Hill, the site was chosen specifically to encourage equal community participation throughout the county and to strengthen the partnership between Northern and Southern Orange County. The final participant count was 72 and included 22 community members, 22 service providers, and 28 members of the general public.

Guests arriving at the forum were greeted by two Work Group members who handed out a booklet with detailed forum activities (See Appendix E). Ten story boards created by persons

experiencing homelessness were posted in the entrance of the lobby. These boards were an effort to allow individuals to share their personal stories of homelessness with the community. Community resource information and action tables were also set in the entrance way to encourage awareness and participation in current community efforts to address homelessness.

After a light dinner, Moses Carey and Nathan Milian, Co-Chairs of the Steering Committee, gave opening remarks and a brief review of the efforts that have been made towards the Ten-Year Plan to End Homelessness. One of the student team's preceptors, Billie Guthrie, introduced the team and gave a brief overview of the AOCA process. Team members spoke about the purpose of the evening and introduced each theme and small group facilitator. They also encouraged continued community participation after the forum, presenting a contact phone number and website containing forum information and connection opportunities.

Forum participants attended one of five small group sessions. Each session, divided into two 50 minute segments, covered one set of paired topics (See Appendix F). Each small group session was facilitated by an AOCA team member who used empowerment education techniques (Forcefield Analysis, SHOWED, or ORID) to help create a focused group dialogue, critically analyze the identified theme, and develop tangible action steps as well as recommendations for change. At the end of the small group sessions, all participants reconvened as a large group. A representative from each small group briefly spoke about the recommendations and action steps generated from his/her session. During closing remarks, participants were given the opportunity to sign up for other small group's planned actions. See Appendix A for a summary of the domain; theme, trigger and discussion framework; key discussion points, Ten-Year Plan recommendations, and Action Steps identified at the forum.

METHODOLOGY

Secondary Data Collection

Secondary data discussed in the previous sections were collected by the team through newspaper searches, websites, team preceptor recommendations, and participation in service provider collaborative meetings. This information was reviewed by individual team members and relevant topics were discussed during regularly scheduled team meetings.

Gaining Entrée

In early October 2005, the team participated in an extensive tour of Orange County and services offered for the homeless community. They used this opportunity to identify volunteer opportunities. For the next six months, they volunteered at various organizations in the county to form relationships and observe strengths and needs from an outsider's perspective. Through active participation in monthly meetings of the CIEH and the Partnership to End Homelessness, the team was also able to establish rapport with leading service providers and develop a broader perspective of the current issues (See Appendix G for a list of the team's volunteer activities and committees with which they were involved). Team members completed detailed field notes from each voluntary event and community meeting that explained their participation and expressed their thoughts, feelings, and perceptions of the community.

Primary Data Methods

Primary data were obtained through individual interviews and focus groups with service providers, current or formerly homeless community members, and members of the general population who had not experienced homelessness but expressed either business or personal interest in the issue of homelessness (See Appendix H for interviewee demographics).

Development of Interview Guides

Individual interview guides for service providers, community members, and members of the general public were developed by the team based on guidance from course instructors, research of previous interview guides used in Orange County and with other homeless populations, and review of secondary data (See Appendix I for guides). Interviews were initially conducted with team preceptors to test for effectiveness, relevance to issues, and appropriate terminology. Revisions were made based upon preceptor feedback and submitted for IRB approval (See Appendix J for IRB approval letter).

Qualitative Data Collection

Upon receiving IRB approval in January, the team began conducting interviews with service providers designated as key informants by team preceptors. These key informants were selected due to their interest in and recognized work experience with the homeless population of Orange County. Interviews with community members began in February. Persons who identified themselves as homeless or formerly homeless were introduced to the team by preceptors, through service providers, through homeless interviewees, and through volunteer events. In March, interviews were conducted with the general public. To ensure participation was voluntary, these individuals were given the opportunity to contact the team and schedule interviews via confidential phone, email or personal contact. Interviews were completed by two team members, with one team member taking the role of interviewer and the other assisting with note taking and recording. All participants signed informed consent forms before interviews were conducted (See Appendix K).

Focus groups were conducted by J-Quad (See Appendix L). Team members attended several of these focus groups, and requested copies of recordings from each completed focus group. The team was able to acquire twelve completed focus group session recordings.

Qualitative Data Analysis

Recordings of team interviews and J-Quad's focus groups were transcribed by team members and then coded using the ATLAS ti qualitative data analysis software (See Appendix M for code book). Data queries were performed on the data to identify common themes. Themes were selected based on reoccurrence in multiple interviews. This list of themes was prioritized based on concurrence with focus group findings.

Limitations

Limitations in data collection were observed by the team for several reasons. Varying definitions of homelessness limited how service providers spoke about the clients they served and whether they felt that people experiencing homelessness utilized their services. This made it difficult for the team to determine the extent to which interviewees' knowledge accurately reflected the strengths and needs of the homeless community.

Due to the transient nature of the population, the team experienced challenges in scheduling and completing interviews with persons experiencing homelessness. Team members made efforts to overcome these obstacles by meeting potential interviewees at a location of their choice, conducting interviews on weekends and evenings, and coordinating interview times with shelter activities. Even with these accommodations, many interviews were missed. Although this created complications for the project, it helped the team to gain a greater appreciation for the daily struggles experienced by the homeless.

Team members were also unable to reach several segments of the homeless population. The growth of the Latino community in Orange County was not reflected in the demographics of interviewees. The team did interview one provider that specifically served the Latino community, but most had little access to this population, and therefore the team struggled to reach this group. Furthermore, with only one Spanish-speaking member, the team's ability to assess the effect of homelessness for Latino community members was hindered.

The team also experienced difficulties in connecting with persons experiencing homeless Northern Orange County. Although team members regularly volunteered at the Food For All program, this program offered few opportunities to interact or speak confidentially. Since homelessness has only recently come to the forefront of discussion in Northern Orange County, service providers did not have the connections necessary to help the team identify key community member informants. Efforts were made to conduct a focus group in the area, but no community members attended.

Limitations in reaching persons not utilizing services were also present. The combination of IRB regulations that limited strategies for interviewee recruitment, and a lack of referrals from service providers led to the exclusion of this population from the interview data. This hindered the team's ability to understand the factors that perpetuate homelessness in this population.

The team also experienced time constraints in data collection. IRB approval was not obtained until January, and data collection had to be completed by mid-March to accommodate county timelines for the Ten-Year planning process. Time constraints further inhibited the team's ability to effectively pilot and revise interview guides with a sample of the homeless population. Although the process allowed the team to gain a wealth of information from the community, additional time could have strengthened the findings.

CONCLUSIONS

Overall the student team found this project to be very rewarding. When examining the strengths of Orange County and, the team found that the county has a large potential for capacity building amongst its residents. Orange County has a wealth of resources to deal with issues of housing, employment, and transportation, along with the other domains identified throughout this process as barriers to ending homelessness. These resources are diverse in nature, present themselves formally and informally, and are fairly comprehensive in the types of services that they offer. There are also many people who live in the community that are more than willing to assist in the efforts to end the cycle of homelessness for individuals in the county.

The student team encourages the county as it proceeds with its Ten-Year planning process to prioritize the voice of the homeless and formerly homeless (See Appendix P). This group will provide the partnership with the necessary information for establishing effective and efficient services for those in need. The team also encourages the increased sharing of resources, particularly between the northern and southern portions, to provide the most comprehensive services to those affected by homelessness. Along with combining resources, it is essential to generate more resources to adequately serve the needs of all the people experiencing homeless or at risk of becoming homeless. The creation of services tailored to the individual's needs should also be carefully considered in the plan. Additionally, the team has included suggestions that came out of interviews and focus groups with service providers and community member on ways to improve the homeless situation (See Appendix N). Furthermore, it is recommended that the actions steps and recommendations generated at the community forum are addressed to ensure that participants are recognized for their vital role in the planning process.

Orange County is an exceptional place, with the resources needed to address the issue of homelessness along with the people dedicated to delivering those services in the most effective manner. The student team has enjoyed becoming acquainted with the people and stories of Orange County. They hope that the enthusiasm they witnessed during this year-long process will continue in the years to come. The team is confident that the county can reduce homelessness and encourages residents of the county to remain engaged during the next phases of this process.

Appendix A

Community Forum Summary				
Domain and Theme	Trigger and Discussion Frame Work	Key discussion points	Action Steps	10 Year Plan Recommendations
Domain: Housing Theme: Lack of affordable housing, combined with non-livable wages, creates a barrier to ending the cycle of homelessness.	Trigger: No Trigger used. Discussed using Forcefield Analysis.	<ol style="list-style-type: none"> 1. The minimum wage in Orange County is not high enough to meet housing costs. 2. An authority that manages affordable housing units in the private sector is necessary. 3. Zoning requirements must be changed to allow for more affordable housing units. 4. The definition of “affordable housing” in ordinances only applies to those who earn 80% of the area median income. 5. Cooperative 	<ol style="list-style-type: none"> 5. Develop an incentive program for housing developers in the private sector which will encourage them to create more affordable housing. In exchange for funding affordable units, businesses will have some of their requirements waived, be allowed to build additional units, or be granted more square footage. 6. Generate a list of key business people and policy makers (aldermen, town council, John Edwards/Poverty Center) who should be invited to the 	<ol style="list-style-type: none"> 7. Increase the minimum wage. 8. Change zoning requirements to allow for more affordable housing units. 9. Form an authority to manage affordable housing units in the private sector. 10. Create more flexible eligibility criteria for affordable housing units and rental subsidies. 11. Secure more funding for cooperative housing models like Weaver Community Housing which generate their own

		<p>housing models like Weaver Community Housing generate their own income and have been successful.</p> <p>6. More efforts are needed to encourage the private sector to create affordable housing units. Economic, rather than moral arguments may be more effective.</p> <p>7. Many people who are currently homeless do not qualify for the affordable housing that is currently being offered.</p>	<p>meeting.</p> <p>7. Invite those individuals to a meeting to propose the incentive program.</p> <p>8. If adequate interest in the program is expressed at the meeting, contact the media to publicize the plan.</p>	<p>income.</p> <p>12. Revisit the definition of “affordable housing” in ordinances to consider those that live below 80% of the area median income.</p>
<p>Domain: Basic Necessities</p> <p>Theme: Inadequate access to essential resources creates a barrier for homeless persons to secure employment.</p>	<p>Trigger: No trigger used.</p> <p>Discussed using an abbreviated version of Forcefield Analysis</p>	<p>1. Current access to phones for persons experiencing homelessness is inadequate.</p> <p>2. Those who use shelter services can only use the phone if staff is at the</p>	<p>4. Generate a list of telecommunication s providers (Verizon, Cingular, etc) in the area.</p> <p>5. Research potential options (used cell phones, prepaid</p>	<p>No recommendations were generated.</p>

		<p>reception desk.</p> <ol style="list-style-type: none"> 3. The message system at the shelter is not consistent. 4. IFC is in the process of creating a voice mail system for those that participate in the job program, but this will not help because one will need a telephone to access the voice mail. 	<p>cell phones, and donation of minutes.</p> <ol style="list-style-type: none"> 6. Approach these businesses and ask for donations. Also discuss what they are willing to contribute to the effort and what they may gain in return (good publicity etc.). 	
<p>Domain: Education/Employment</p> <p>Theme: People who are homeless do not have relevant skills training and employer support to become employed, remained employed, and plan for the future.</p>	<p>Trigger: “I don’t think I could get a much better job right now because of my education.</p> <p>Discussed using SHOWED</p>	<ol style="list-style-type: none"> 1. People lack education and skills to obtain employment and criminal records prevent some from securing a job. These factors combined make it difficult to obtain a job that provides a livable wage. 	<ol style="list-style-type: none"> 5. Seek out funding for educational expenses. 6. Work with Community Resource Court to clear criminal records. 7. Provide home business training resources 8. Explore if it is possible to set aside a certain number of jobs for the homeless and look into 	<ol style="list-style-type: none"> 4. Develop resource manual of community services available (including self-employment training). 5. More computers with internet access at the shelters. 6. Job program for homeless that sets aside jobs for the homeless.

			developing an inter-departmental study of homelessness at UNC.	
Domain: Transportation Theme: Inadequate transportation services create a barrier to sustaining employment and accessing services.	Trigger: “I lost my job...because of transportation problems. The bus stopped running before I got off work so I was left stranded.” Discussed using SHOWED	1. Limited Transportation options for those who are homeless in Orange County.	3. Identify resources and create community resource guide for transportation in Orange County. 4. Help to obtain transportation through auctions held by the police departments in the state.	4. Subsidize shuttles vans for the shelters. 5. Access state cars through auctions to be assigned to the shelters. 6. Provide additional funding to shelters to allow money to be set aside for transportation.
Domain: Community Engagement-Perceptions of Homelessness Theme: Stereotypes of homelessness create tension between homeless persons and the surrounding community.	Trigger: Cartoon Illustration Discussed using ORID.	1. Community misperception that all homeless are panhandlers/don’t work. 2. Lack of clarity by community of who is represented in the homeless population. 3. Lack of understanding by	3. Create action group that works to increase community awareness of the individual faces/stories of homelessness. The group will decide on the format of the message, and collaborate with various community groups (media,	2. Educate the public on the individuality of homelessness.

		<p>community of “at risk” population having difficulty making ends meet.</p> <p>4. Misperceptions lead to community members being unsure of how to get help.</p>	<p>civic, church, university, restaurants) to help educate the community and encourage participation.</p> <p>4. Each group member commit to volunteering and/or 1:1 time with people experiencing homelessness.</p>	
<p>Domain: Community Engagement-Partnerships</p> <p>Theme: Community Partnerships need to be strengthened to ensure successful service provision.</p>	<p>Trigger: No trigger used.</p> <p>Discussed using Forcefield Analysis</p>	<p>1. Agencies service homeless persons but no single agency is charged with homelessness specifically.</p> <p>2. Community members and service providers are unsure of services offered and by whom.</p> <p>3. Competition for resources inhibits collaboration.</p>	<p>No action steps were generated.</p>	<p>4. Compile a master list of providers and services provided specifically for homelessness issues.</p> <p>5. Make the Orange Book more accessible and user friendly (change from pdf format to something more searchable).</p> <p>6. Recommend creation of a “hub”, or one place to go for resources.</p>

		<p>4. Keeping information updated is tedious, time consuming, and a constant need.</p> <p>5. The lack of positive reinforcement to encourage partnerships.</p>		
<p>Domain: Continuum of Care-Connecting</p> <p>Theme: Services are readily available, but only to those who are regularly using or know how to navigate the service system. Therefore, many who are homeless slip through the cracks.</p>	<p>Trigger: Utilized quotes from community members and service providers</p> <p>Discussed using Forcefield Analysis</p>	<p>1. There is a lack of a centralized resource system fall to access information about available services.</p> <p>2. There is a disconnect between service providers wants and community members desires for service.</p> <p>3. There are general resource guides that are available in different parts of the county but not accessed by all.</p> <p>4. Need for increased outreach to improve</p>	<p>2. Create a bilingual pocket-sized resource guide for homeless persons, with a version with pictorial representations to accommodate those with lower literacy.</p>	<p>2. Increase outreach workers who can establish informative relationships with persons who are not connected to services. Use case managers or train those formally homeless, students, and community volunteers to do the outreach.</p>

		<p>homeless persons' knowledge of services.</p> <p>5. Service restrictions and depleting sources makes it difficult to engage underserved homeless persons in services.</p> <p>6. Community Initiative has the potential to act as a centralized information system but suffers from lack of involvement.</p>		
<p>Domain: Continuum of Care-Successful Care</p> <p>Theme: Homeless individuals' unique ways of achieving success are often limited by standardized eligibility requirements and delivery structures.</p>	<p>Trigger: Utilized quotes from community members and service providers.</p> <p>Discussed using ORID.</p>	<p>1. Eligibility requirements and wait times make it difficult for homeless persons to obtain services.</p> <p>2. Service providers may feel burned out and unsupported; frustration may overflow into interactions with</p>	<p>No action steps were generated.</p>	<p>4. Create an advocacy program, incorporating volunteers, to support community members as they seek services.</p> <p>5. Increased innovative/flexible funding, potentially through community</p>

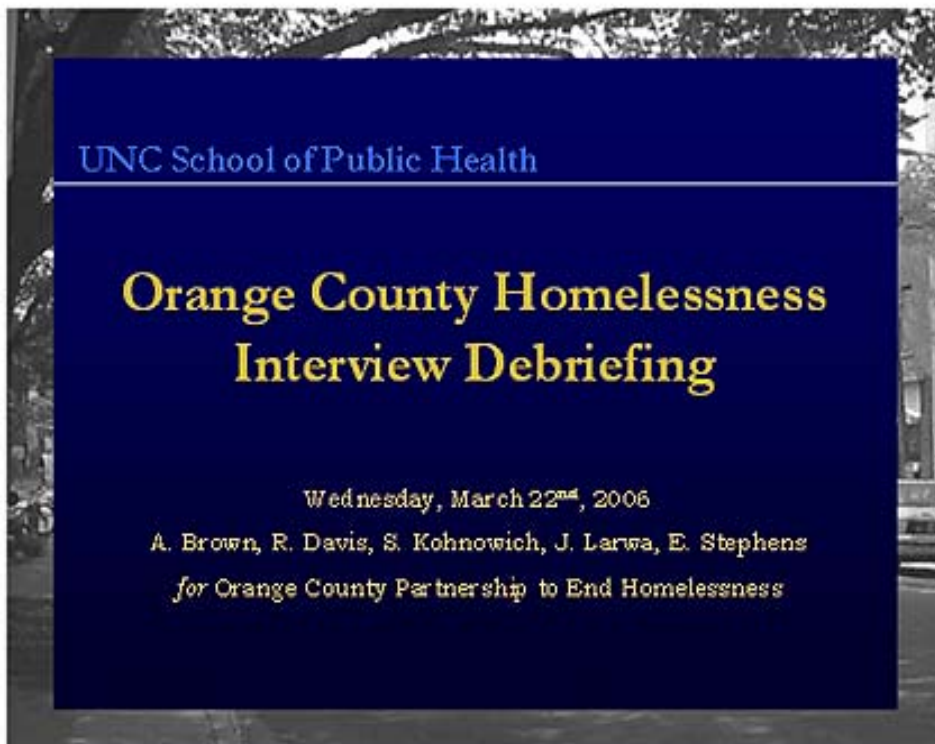
		<p>community members.</p> <p>3. Quality assurance and advocacy would help community members receive the needed care.</p> <p>4. Inflexible funding restricts service provision to individuals.</p>		<p>fundraising, to provide specialized services not included in grants or federal funding.</p> <p>6. Increase communication among service providers to increase knowledge of existing services, decrease work-related frustration, and facilitate supportive relationships.</p>
<p>Domain: Discharge Planning</p> <p>Theme: The lack of collaboration in discharge planning and a lack of appropriate facilities burdens service providers and limits success for the homeless population.</p>	<p>Trigger: Used quotes from service providers.</p> <p>Discussed using ORID and Forcefield Analysis</p>	<p>1. There needs to be more services in place for institutions to discharge their clients to.</p> <p>2. There is a lack of appropriate and affordable housing for institutions to discharge their charges to; this results in people not always being discharged into stable/rehabilitative</p>	<p>1. Have service providers who are using the housing first model or a model similar to the housing first model, document their outcomes both successes and failures and report back to other service providers possibly at a Community Initiative meeting.</p>	<p>6. Have training for service providers about the housing first model.</p> <p>7. Make more efforts to support Club Nova because it is a successful housing first model and it is facing hard times.</p> <p>8. Discharge people into more stable and rehabilitative environments that</p>

		<p>environments causing them to cycle back through the institutions they came from.</p> <p>3. There is a core group of people who regularly cycle through these services and institutions. These high risk individuals would be a good place to start to focus increased resources to help keep them stable and not tying up extra resources.</p>	<p>2. Have service providers to document inappropriate discharges and send their concerns to their legislatures.</p>	<p>shelters cannot always provide; however, there is a lack of these places.</p> <p>9. Create more affordable and transitional housing for people to be discharged to.</p> <p>10. The county needs to focus their resources on high risk individuals who consistently utilize institutions to help them become more stable and prevent them from returning to these institutions.</p>
<p>Domain: Prevention</p> <p>Theme: More prevention strategies are needed that target families and individuals at risk of becoming homeless.</p>	<p>Trigger: Used quote from service provider.</p> <p>Discussed using SHOWED</p>	<p>1. Those who are doubled-up/at risk need services to prevent them from becoming homeless.</p> <p>2. There has been an increase in people seeking services to help prevent them</p>	<p>1. Speak to key players about raising the living wage.</p> <p>2. Have the new Boys and Girls Club work with children in foster care to give them a</p>	<p>7. Adjust the city and county's living wage to be more livable.</p> <p>8. Identify high risk individuals and get them comprehensive/wrap around services.</p>

		<p>from becoming homeless due to high housing costs, the livable wage not being livable, health care costs, etc.</p>	<p>positive environment to interact in and provide mentors.</p>	<p>Possibly create teams of church members and service providers to work together to help out individuals so that no one person or organization is not stretched too thin allowing them to pool their resources.</p> <p>9. Create transitional housing for people who are being discharged from certain institutions who need more structure before trying to live on their own.</p> <p>10. Ensure foster children stay connected to services as they “age out.”</p> <p>11. Strengthen emergency services need to help people out with rent, utilities, car, etc.</p>
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				12. Offer financial classes or counseling to people about how to budget their money.
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Appendix B



Methodology

- Understanding Community:
 - Volunteer work
 - Community meeting attendance
 - Review of secondary data
 - Review of focus group data
 - In depth interviews

Methodology

- 32 interviews conducted
 - 16 homeless/formerly homeless
 - 13 service providers
 - 3 community members

Methodology

- Transcription:
 - 32 interviews transcribed
 - 12 focus groups transcribed
- Coding:
 - Utilized Atlas.ti system
- Theme Development:
 - Analyzed pooled data
 - Identified prevalent issues to define themes

Identified Strengths: Orange Co.

- Progressive Community
- Abundant Resources and Services
- Church Involvement



Identified Strengths: Homeless Population

- Courageous
- Resourceful
- Resilient



Identified Domains

- | | |
|------------------------|-------------------------|
| ▪ Housing | ▪ Continuum of Services |
| ▪ Community Engagement | - Connecting |
| - Partnerships | - Successful Care |
| - Perceptions | ▪ Employment/Education |
| ▪ Basic Necessities | ▪ Transportation |
| ▪ Discharge Planning | ▪ Prevention |


Housing

- Low living wage
- High housing costs
- Not enough affordable housing units
- Rent subsidies

Housing

- Lack of affordable housing, combined with non-livable wages, creates a barrier to ending the cycle of homelessness.

"The wage around here is low and rent is high; if you get a job it's either pay your rent or buy food"



Community Engagement: Perceptions of Homelessness

- Assumptions of causes/effects of homelessness
- Inadequate community understanding
- Lack of opportunities for positive interaction



Community Engagement: Perceptions of Homelessness

- Stereotypes of homelessness create tension between homeless persons and the surrounding community.

"If you sit next to people they get up and move away; I guess they think it's a disease or something"



Community Engagement: Partnerships

- Formal and Informal providers
- Getting everyone to the table



Community Engagement: Partnerships

- Community partnerships need to be strengthened to ensure successful service provision.

*"It's hard to move from your individual program
to a combined force"*

Basic Necessities

- Access to Phone
- Shelter Address
- Groomed Appearance
- Documentation
- Adequate Health Care Services

Basic Necessities

- Inadequate access to essential resources creates a barrier for homeless persons to secure employment.

"You know homeless people we really don't have nice clothes, nice hair do's, and that can make a difference when you go for a job"



Discharge Planning

- Lack of appropriate places for discharge
- Lack of collaboration for re-entry



Discharge Planning

- The lack of collaboration in discharge planning and a lack of appropriate facilities burdens service providers and limits success for the homeless population.

"People are being discharged . . . to environments that are not rehabilitative or appropriate"



Continuum of Services: Connecting

- Getting into services
- Reaching those who need services



Continuum of Services: Connecting

- Services are available, but only to those who are regularly using or know how to navigate the service delivery system. Therefore, many who are homeless "slip through the cracks."

"The problem is that [services] aren't advertised, so unless you hear about it from someone else, you don't know there's help"



Continuum of Services: Successful Care

- Program structure
- Case management needs



Continuum of Services: Successful Care

- Homeless individuals' unique ways of achieving success are often limited by standardized eligibility requirements and delivery structures.

"I don't think there's any cookie cutter model that's going to work for everyone"



Employment/Education

- Lack of education and/or skills
- Living wage not "livable"
- Criminal records



Employment/Education

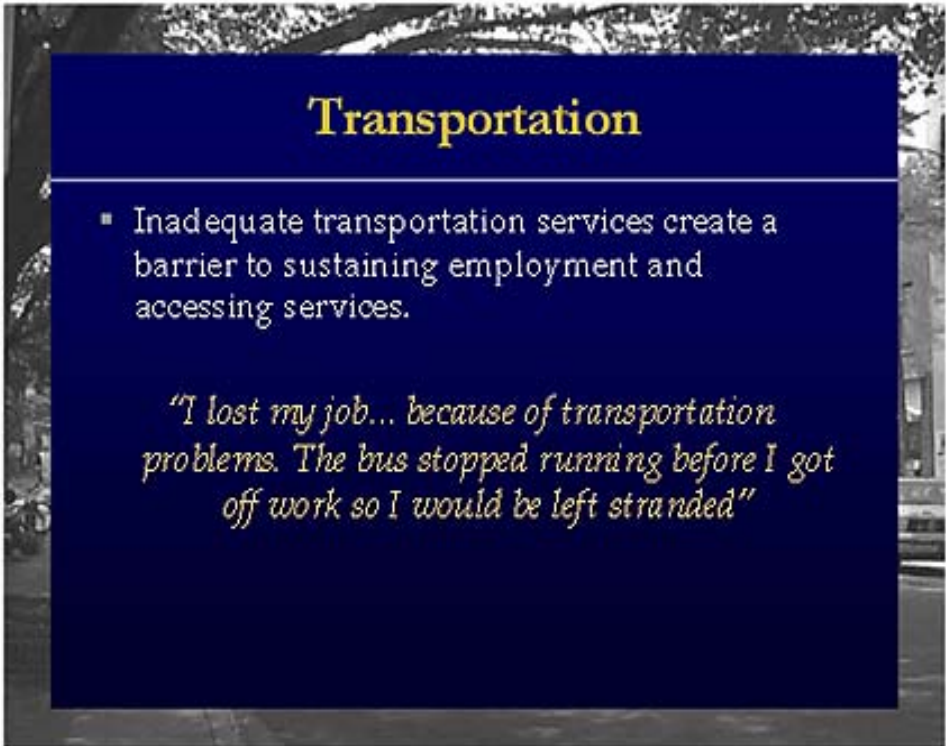
- People who are homeless do not have relevant skills training and employer support to become employed, remain employed, and plan for the future.

"I don't think I could get a much better job right now because of my education"



Transportation

- Bus system geared to college students
- Limited access
- Limited availability (after hours and between counties)



Transportation

- Inadequate transportation services create a barrier to sustaining employment and accessing services.

"I lost my job... because of transportation problems. The bus stopped running before I got off work so I would be left stranded"



Prevention

- Identifying and serving “at risk”
- Doubled up



Prevention

- More prevention strategies are needed that target families and individuals at risk of becoming homeless.

“I see more people living in debt and more people who were living on the edge, falling off the edge. I believe that if things keep going the way they are we will be seeing more people who we never would anticipate seeing homeless.”

Identified Domains

- Housing
- Community Engagement
 - Partnerships
 - Perceptions
- Basic Necessities
- Discharge Planning
- Continuum of Services
 - Connection
 - Successful Care
- Employment/Education
- Transportation
- Prevention

Appendix C

COMMUNITY FORUM: SEEKING SOLUTIONS FOR ENDING HOMELESSNESS

This Forum, a component of the development of a **Ten-Year Plan to End Homelessness**, is being sponsored by the Orange County Partnership to End Homelessness, a broad coalition of community groups and government officials. We seek to involve a wide number of participants and new stakeholders in order to solicit personal action steps and community-wide solutions to effect change and assist in the goal of ending homelessness.



THURSDAY, APRIL 27TH

Dinner being served at 5:45pm
Forum events beginning promptly at 6pm

A.L. Stanback Middle School

Located at 3700 NC Hwy. 86-S in Hillsborough

**ALL INTERESTED MEMBERS OF THE COMMUNITY
ENCOURAGED TO ATTEND.**

Childcare, door prizes and information about community resources will be provided. To arrange transportation, call Orange Public Transportation at 245-2008 before 5pm on Tuesday, April 25th.

Appendix D

For immediate release
April 20, 2006

Contact: Tara Fikes
919-245-2490

*COMMUNITY FORUM
SEEKING SOLUTIONS FOR ENDING HOMELESSNESS
THURSDAY, APRIL 27, 2006*

Community encouraged to participate.

The Partnership to End Homelessness, a broad coalition of community groups and government officials will sponsor a forum to develop action steps and solutions for ending homelessness in Orange County. **The Community Forum on Homelessness will be held Thursday, April 27, 2006 from 6-9pm at A.L. Stanback Middle School located at 3700 NC Highway 86 South in Hillsborough, NC.** Dinner, door prizes and information about community resources will be provided. Transportation and childcare can be arranged. All interested members of the community are invited to attend.

The purpose of the Orange County Partnership to End Homelessness is to address the following goals:

- To educate the community by dispelling myths and putting a face on the homeless;
- To develop a long term plan to end homelessness in Orange County; and
- To encourage personal responsibility by inviting the community to address this issue individually.

The Forum is a component of the development of our local Ten-Year Plan to End Homelessness. The purpose of the Forum is to develop personal action steps and community-wide solutions that will effect change and assist in the goal of ending homelessness. We seek to involve a wide number of participants and new stakeholders including homeless individuals, consumers, community agency representatives, businesses, congregations, volunteers, civic clubs, neighborhood associations, elected officials, public employees, students, University officials and concerned citizens. Attendees will participate in small group discussions on the following topics:

- Housing
- Basic Necessities
- Community Perceptions
- Community Partnerships
- Discharge Planning
- Prevention
- Employment/Education
- Transportation
- Connecting to Services
- Successful Models of Service

These topics were identified as recurring themes throughout the County during a series of nineteen focus group sessions held in late February and early March 2006. In addition, an UNC-student team identified these themes during an intensive community assessment that involved individual interviews with people who are homeless or previously homeless, service providers and community members.

To arrange transportation, call Orange Public Transportation at 919-245-2008 by 5pm on Tuesday, April 25, 2006.

Appendix E

ORANGE COUNTY COMMUNITY FORUM:

SEEKING SOLUTIONS FOR ENDING HOMELESSNESS

**Thursday, April 27, 2006
A.L. Stanback Middle School**



Sponsored by the Orange County Partnership to End Homelessness and the UNC School of Public Health



Dear Community Member

The Orange County Partnership to End Homelessness and the UNC School of Public Health Assessment Team welcome you to this community forum which was created through the following events.

In March 2005, a broad coalition of community groups and government officials joined together to create the Partnership to End Homelessness in Orange County, with the goal of creating a Ten-Year Plan To End Homelessness.

A Steering committee was established to set policy direction for this goal in November 2005. From January to March of this year, J-QUAD and Associates, LLC, a consultant firm hired by Orange County, conducted nineteen focus groups throughout the county in an effort to engage the voices of a broad cross-section of citizens in informing the Steering committee's decisions.

In October 2006, students from UNC's School of Public Health were invited to participate in the committee's efforts. The students have volunteered, attended committee meetings, reviewed secondary data, and conducted in-depth interviews with 32 community members, 16 of which have experienced or are experiencing homelessness. This information, in conjunction with J-Quad's focus group findings, was used to identify the community's most common reoccurring themes.

Tonight's goal is to discuss and identify action steps for addressing these issues in the community. Although there are many more issues that can be and will be addressed in this process, tonight is an effort to involve all citizens of Orange County in creating personal and community solutions to the specific issues identified by the students' data and research. We hope you leave this forum feeling that you have been, and will continue to be, a key part of Orange County's commitment to address the issues of homelessness.

Sincerely,

The Partnership & UNC Public Health Assessment Team

AGENDA

5:45pm

Dinner

6:00pm-6:10pm

Opening Remarks

Moses Carey and Nathan Milian, Co Chairs of the Partnership to End Homelessness

6:10pm-6:25pm

Forum Overview

UNC Public Health Students

Raffle

6:25pm-7:25pm

Small Group Session (first theme)

7:35pm-8:25pm

Small Group Session (second theme)

8:25pm-8:35pm

Full Group Report Back

Closing

Raffle

“Door prizes will be raffled at the beginning and end of the night. Keep your ticket!”

TONIGHT’S SMALL GROUP DISCUSSIONS

There will be five small group discussions tonight on the following topics. Each participant will attend one of the five groups below and discuss both topics listed:

Small group #1

**Housing
&
Basic Necessities**

Small group #2

**Community Engagement- perceptions of homelessness
&
Community Engagement- effective partnerships**

Small group #3

**Continuum of Services-connecting to services
&
Continuum of Services-providing successful care**

Small group #4

**Employment/Education
&
Transportation**

Small group #5

**Discharge Planning
&
Prevention**

SMALL GROUP #1

WILL DISCUSS THE FOLLOWING THEMES:

Housing

Lack of affordable housing, combined with non-livable wages, creates a barrier to ending the cycle of homelessness.

“The wage around here is low and rent is high; if you get a job it’s either pay your rent or buy food”

Basic Necessities

Inadequate access to essential resources creates a barrier for homeless persons to secure jobs.

“You know homeless people we really don’t have nice clothes, nice hair- dos, and that can make a difference when you go for a job”

SMALL GROUP #2

WILL DISCUSS THE FOLLOWING THEMES:

Community Engagement: Perceptions of Homelessness

Stereotypes of homelessness create tension between homeless persons and the surrounding community.

“If you sit next to people they get up and move away; I guess they think it’s a disease or something”

Community Engagement: Partnerships

Community partnerships need to be strengthened to ensure successful service provision.

“It’s hard to move from your individual program to a combined force”

SMALL GROUP #3

WILL DISCUSS THE FOLLOWING THEMES:

Continuum of Services: Connecting

Services are available, but only to those who are regularly using or know how to navigate the service delivery system. Therefore, many who are homeless “slip through the cracks.”

“The problem is that [services] aren’t advertised, so unless you hear about it from someone else, you don’t know there’s help”

Continuum of Services: Successful Care

Homeless individuals’ unique ways of achieving success are often limited by standardized eligibility requirements and delivery structures.

“I don’t think there’s any cookie cutter model that’s going to work for everyone”

SMALL GROUP #4

WILL DISCUSS THE FOLLOWING THEMES:

Employment/ Education

People who are homeless do not have relevant skills training and employer support to become employed, remain employed, and plan for the future.

“I don’t think I could get a much better job right now because of my education”

Transportation

Inadequate transportation services create a barrier to sustaining employment and accessing services.

“I lost my job...because of transportation problems. The bus stopped running before I got off work so I would be left stranded”

SMALL GROUP #5

WILL DISCUSS THE FOLLOWING THEMES:

Discharge Planning

The lack of collaboration in discharge planning and a lack of appropriate facilities burdens service providers and limits success for the homeless population.

“People are being discharged . . . to environments that are not rehabilitative or appropriate

Prevention

More prevention strategies are needed that target families and individuals at risk of becoming homeless.

“I see more people living in debt and more people who were living on the edge, falling off the edge. I believe that if things keep going the way they are we will be seeing more people who we never would anticipate being homeless.”

REPORT BACK AND NEXT STEPS

To end the forum, all groups will return to the main room to briefly report back on their created action steps. At this time, all participants can sign up to be involved in any group’s future planned activities.

.....

Beginning May 27th, you will be able to review a document containing all themes, action steps, and contact information for the project at the following website:

<http://townhall.townofchapelhill.org/homelessness>

**You can also contact the Orange County Housing and Community Development
Department at:
(919) 245-2490**

**A final report by the UNC Public Health students of their entire project will be available by
June 1st at the following website:**

<http://www.hsl.unc.edu/phpapers/phpapers.cfm>

The action steps and information generated tonight will also be reviewed and used by the Partnership to End Homelessness in formalizing Orange County’s Ten-Year Plan To End Homelessness.

GROUND RULES for SMALL GROUPS

- 1. Listen to others and show respect for their opinions**

2. **One person speaks at a time**
3. **Share participation time evenly**
4. **Address the idea, not the person**
5. **Allow the facilitator to guide the discussion**
6. **Everyone is equal in this room**

SPECIAL THANKS

We'd like to thank the following businesses and organizations for their generous support of the forum:

Brick Alley Books
Chapel Hill Sportswear
Cup of Joe
Fingers and Toes Spa and Salon
Flower Patch
Food Lion
Harris Teeter
Johnny T-Shirt
Kelsey's Restaurant
Larry King Chevrolet/Buick

Mediterranean Deli
Morehead Planetarium
My Secret Closet
Newburg Automotive
Saratoga Grill
Tupelos Restaurant
UNC Student Stores
Village Diner

SPECIAL THANKS

A SPECIAL THANK YOU FROM THE STUDENTS

THANK YOU...

to all the community members and service providers who have participated in interviews and focus groups for this project.

to the individuals who are experiencing or have experienced homelessness that were willing to share their stories with us. We thank you for your honesty, courage, and trust.

to IFC and the Food For All program for providing volunteer opportunities to us.

to the Partnership Work Group and Steering Committee for allowing us to participate in the Ten-Year planning process

to Billie Guthrie (from OPC Mental Health) and Stan Holt (from the Triangle United Way) for their support and encouragement of our project.

NOTES

NOTES



“This community is full of people who can rally if they get behind a cause”

Appendix F

Paired Topics

Group 1

Housing

Lack of affordable housing, combined with non-livable wages, creates a barrier to ending the cycle of homelessness.

Basic Necessities

Inadequate access to essential resources creates a barrier for homeless persons to secure jobs.

Group 2

Community Engagement: Partnerships

Community partnerships need to be strengthened to ensure successful service provision.

Community Engagement: Perceptions of Homelessness

Stereotypes of homelessness create tension between homeless persons and the surrounding community.

Group 3

Discharge Planning

The lack of collaboration in discharge planning and a lack of appropriate facilities burdens service providers and limits success for the homeless population.

Prevention

More prevention strategies are needed that target families and individuals at risk of becoming homeless.

Group 4

Continuum of Services: Connecting

Services are available, but only to those who are regularly using or know how to navigate the service delivery system. Therefore, many who are homeless “slip through the cracks.”

Continuum of Services: Successful Care

Homeless individuals’ unique ways of achieving success are often limited by standardized eligibility requirements and delivery structures.

Group 5

Employment/ Education

People who are homeless do not have relevant skills training and employer support to become employed, remain employed, and plan for the future.

Transportation

Inadequate transportation services create a barrier to sustaining employment and accessing services.

Appendix G

-Full list of volunteer activities and committees team members have been involved with over the 2005-2006 school year. The number of team members who participated in these events is in parentheses.

Volunteering

IFC Community House

11-9-05 (5)	11-12-05 (1)	11-14-05 (1)	11-19-05 (1)	11-26-05 (1)
11-30-05 (5)	12-3-05 (1)	12-10-05 (1)	1-14-06 (1)	1-21-06 (1)
1-28-06 (1)	1-30-06 (5)	2-4-06 (1)	2-11-06 (1)	2-18-06 (1)
2-25-06 (1)	3-4-06 (1)	3-11-06 (1)	3-18-06 (1)	3-25-06 (1)
3-30-06 (5)	4-1-06 (1)	4-8-06 (1)	4-11-06 (1)	4-12-06 (1)
4-15-06 (1)	4-18-06(1)	4-22-06 (1)	4-25-06 (1)	4-29-06 (1)
4-30-06 (4)	5-2-06 (1)			

Project Homestart

3-4-06 (1)	4-12-06 (1)	4-18-06 (1)	4-19-06 (1)	4-24-06 (1)
4-25-06 (1)				

Food For All Program

1-16-06 (2)	1-19-06 (1)	1-26-06 (1)	2-9-06 (2)	2-23-06 (1)
3-2-06 (2)	3-6-06 (1)	4-20-06 (1)		

Point in Time Count

1-10-06 (3)	1-19-06 (2)	1-25-06 (2)
-------------	-------------	-------------

Club Nova

11-12-06 (2)

Committee Meetings

Town Council Meeting

4-10-06 (3)

The Partnership to End Homelessness Work Group

10-17-05 (2) 10-27-05 (3) 1-18-06 (2) 2-8-06 (2) 2-23-06 (1)
3-13-06 (1) 4-4-06 (2) 4-18-06 (2) 4-28-06 (2)

Community Initiative to End Homelessness

11-17-05 (2) 1-19-06 (2)

Partnership to End Homelessness Steering Committee

11-10-05 (3) 1-11-06 (2) 3-22-06 (5)

Appendix H

Demographic Information of Interviewees

Service Providers	African American	White	Total
Male	2	4	6
Female	1	6	7
Total	3	10	13

Community Members*		African American	White	Latino	Native American	Total
Male	Homeless	3	2	0	0	5
	Formerly Homeless	2	0	1	0	2*
Female	Homeless	3	2	0	1	6
	Formerly Homeless	1	2	0	0	3
Total Number Completed		9*	6	1*	1	16*
No Show Interviews		7				

*One interviewee was counted in two demographic categories

Citizens	African American	White	Total
Male	0	1	1
Female	0	2	2
Total	0	3	3

Appendix I

Homeless Community Member Interview Guide

1. Opening

- *Thank you* for taking the time to meet with me/us. We recognize that your time is valuable and we appreciate your participation.
- We are graduate students from the UNC School of Public Health. A requirement of our graduate program is that we partner with a community in North Carolina to conduct a community assessment. This means we are working in Orange Co. to identify its strengths, weaknesses, and future directions. We are interested in the whole community of Orange Co, but especially the homeless. The information we gather will be summarized and shared with the community. In addition, we will present our results to the community at a forum that will be held in the spring.
- The purpose of speaking with you today is to find out about your thoughts and experiences of homelessness in Orange Co. We are interested in your opinions. There are no right or wrong answers. If there are any questions you do not wish to answer, please let us (me) know. You may stop the interview at any time.
- *Time*: This interview should last about 60 minutes.

2. Confidentiality

- Your comments will remain confidential. We will be reporting summaries of the comments made by community members but will not identify who said what, nor will we identify the names of the individuals we interview.
- We would like to take notes and tape record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Feel free to not respond to any question we ask, or hit the “Stop” button on the tape recorder at any time. After we are finished using the tapes for this class, the cassettes will be erased or destroyed. Is this okay with you?

3. Ground Rules

- **Right to refuse**: If at any time while we are talking you do not want to answer a question, you do not feel comfortable, or you would like to end the interview, please feel free to let me/us know.

Do you have any questions about anything I've said so far?

Geography

1. What area is home? What does home mean to you?
2. Length of time in Orange County....
3. What is your primary means of transportation?
Probe: How do you go shopping, shelter soup kitchen
4. Think of a few people closest to you...what is their relationship to you, and do they live nearby?

Causes of homelessness

4. What do you think are some of the reasons why people are homeless?
5. If you feel comfortable talking about this...how about in your case (causes of becoming homeless)
Probes: How long homeless?
How many times?
Where have you lived? Living conditions, location....

Family and Community Life

6. Tell us a little about your family.
7. Do you have any children?
8. Tell us about how being homeless has affected your relationship with your family and/or child(ren)
9. What are the main ways you and your friends make money?
10. What employment opportunities do you think are available to you?
11. What are the differences in employment opportunities for people who are homeless compared to people who currently live in a home?
12. How do you get the basic necessities you need?
13. What do you and your friends do for fun? (Recreation)
14. What role does religion or spirituality play in your life?
15. How do you feel the different racial groups get along in the community? (If the racial groups aren't obvious in answer – ask!)
16. Describe the relationship between people who are homeless and people who are not homeless in this community. Probe: how do others perceive you, how do you feel about them?

Strong Points / Assets

17. Who do you turn to when you need someone to talk to? When you need advice? Or information?
Probe for clarification on who? Describe relationship/role etc.
18. How does word get around about good shelters, kitchen and health care,
Probe: rumors, good information, useful?

Problems and Needs

19. What are the special needs (major issues) of _____ in the homeless community?
Women? Men? Children? Elders?
20. What are some health concerns that people who are homeless have?
Probes: chronic illness,
Mental health (depression),
STD,
Drugs and alcohol

Violence and injury
Healthy food

21. Can you tell me about certain times in which service agencies met or did not meet your needs?

How about other official agencies?

Probe: Tell us about how your experiences have been at the shelters.
(safety, hospitality), with health care (trying to see a doctor),
with welfare/social work/section 8

Problem-Solving/ Decision Making

22. How do people who are homeless in your community solve problems, make decisions?

Probe: Services and businesses used and not used by homeless.

23. Describe what communities you are a part of.

Probe: Do you feel you are a part of the larger Orange County community?

Changes over time

24. Since you have been homeless, how have conditions changed? OR

How have conditions changed for homeless people over the last few years?

Probe: Services (types), attitudes, access to services

25. What changes do you hope to see in the next few years...for your personally?
...for your community?

Closing

26. What else would you like us to know about being homeless in Orange County?

Referrals

27. If you were going to organize your community to address homelessness, what solutions might you propose?

28. Who else do you recommend that we talk to?

29. Would you be willing to introduce us?

Forum

“We plan to have a forum in late March where people who are homeless, service providers, and other people in the area can get together to share ideas. We’ll be letting people know what we’ve learned about the community.”

What do you think would be a good place for us to meet?

What time of day/day would be good to meet?

Would you be willing to help invite people you know or help organize?

How can we get in touch with you?

What kind of event would people come to?

Who should we invite to attend?

How should we get the word out about the forum? (Please tell you friends)

Thank you very much for your participation!

Appendix I

Service Provider Interview Guide

4. Opening

- *Thank you* for taking the time to meet with me/us. We recognize that your time is valuable and we appreciate your participation.
- We are graduate students from the UNC School of Public Health. A requirement of our graduate program is that we partner with a community in North Carolina to conduct a community assessment. This means that we are working with agencies in Orange Co. to identify its strengths, weaknesses, and future directions. We are interested in the community of Orange Co, but especially the homeless. The information we gather will be summarized and shared with the community. In addition, we will present our results to the community at a forum that will be held in the spring.
- The purpose of speaking with you today is to find out about your thoughts and experiences from having worked with the residential and homeless members of Orange Co. We are interested in your opinions. There are no right or wrong answers. If there are any questions you do not wish to answer, please let us (me) know. You may stop the interview at any time.
- *Time*: This interview should last about 60 minutes.

5. Confidentiality

- Your comments will remain confidential. We will be reporting summaries of the comments made by community members but will not identify who said what, nor will we identify the names of the individuals we interview.
- We would like to take notes and tape record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Feel free to not respond to any question we ask, or hit the “Stop” button on the tape recorder at any time. After we are finished using the tapes for this class, the cassettes will be erased or destroyed. Is this okay with you?

6. Ground Rules

- **Right to refuse**: If at any time while we are talking you do not want to answer a question, you do not feel comfortable, or you would like to end the interview, please feel free to let me/us know.

Do you have any questions about anything I've said so far?

4. Services

- Tell us about your agency. What services do you provide? *Probe*: Source of funding, how many clients do you serve
- How would you describe the people who utilize your services? *Probe*: geographical information, SES, ethnicity etc.
- How do you define homelessness?
- Do you know of any different groups within the homeless population?
- What criteria must people meet in order to be eligible for your services?
- How do you inform the people in your service area about your services?

- What barriers do people face when trying to access your agencies' services? Why? Are there groups that tend to be difficult for your agency to reach? *Probe*: geographic, transportation, cultural, language
- What other agencies provide services to the residents of the communities you serve? What kinds of services do they provide? How successful are they?
- How does community politics affect this population and your work? *Probe* :businesses, elections, etc.
- What barriers do you perceive from funding agencies/local government?
- What are the strengths and weaknesses of collaborative partnerships regarding homelessness in Orange County?
- What is your agency's stance on housing being dependent on meeting service requirements? (If you feel comfortable answering, do you agree or disagree with this?)
- Do you think homelessness can be ended in 10 years?

5. The Community

- How do you feel Orange county's history influences the homeless in Orange county?
- How do the different cultural and ethnic groups interact within the homeless population? *Probe*: tensions, open conflict, resentment
- What is the current economic situation in Orange County? How do you think this affects the homeless community? *Probe*: unemployment, opportunities for low-skill employment
- What would you say are the strengths of the communities that you serve?
- What do you think are the greatest needs of the homeless in your community?
- What is the local government doing to address homelessness?
- What are private citizens or citizen groups doing to address homelessness? *Probe*: church/religious groups
- What kinds of community projects have been attempted to address those needs in Orange county? How successful were they? Why?
- If you were going to try to do some type of community health project in Orange County, who from the community would you try to involve? Why? *Probe*: groups or committees with useful skills and knowledge, key community leaders
- Is there anything else that you can tell us about the homeless community?

6. Documents

- Does your agency have any written information that would be helpful for us to read?

7. Community Forum

Do you have recommendations for the:

- Place
- Day of the week
- Time of day
- Format
- Who to invite (community members, service providers, homeless)

- How to publicize
- Who should serve on the planning group

We would like to send you information on our community forum in the spring. Could we have your address for this purpose?

THANK YOU AGAIN FOR YOUR PARTICIPATION

Appendix I

General Public Interview Guide

7. Opening

- *Thank you* for taking the time to meet with me/us. We recognize that your time is valuable and we appreciate your participation.
- We are graduate students from the UNC School of Public Health. A requirement of our graduate program is that we partner with a community in North Carolina to conduct a community assessment. This means we are working in Orange Co. to identify its strengths, weaknesses, and future directions. We are interested in the whole community of Orange Co, but especially the homeless. The information we gather will be summarized and shared with the community. In addition, we will present our results to the community at a forum that will be held in the spring.
- The purpose of speaking with you today is to find out about your thoughts and experiences of homelessness in Orange Co. We are interested in your opinions. There are no right or wrong answers. If there are any questions you do not wish to answer, please let us (me) know. You may stop the interview at any time.
- *Time*: This interview should last about 60 minutes.

8. Confidentiality

- Your comments will remain confidential. We will report summaries of the comments made by community members but will not identify who said what, nor will we identify the names of the individuals we interview.
- We would like to take notes and tape record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Feel free to not respond to any question we ask, or hit the “Stop” button on the tape recorder at any time. After we are finished using the tapes for this class, the cassettes will be erased or destroyed. Is this okay with you?

9. Ground Rules

- **Right to refuse**: If at any time while we are talking you do not want to answer a question, you do not feel comfortable, or you would like to end the interview, please feel free to let me/us know.

Do you have any questions about anything I've said so far?

Background

1. Please tell me about your involvement in the community (job, volunteer, etc.)
5. Length of time in Orange County
3. Throughout your various roles in the community what is the extent of your contact with those who are homeless?

Perception of Homelessness Issue

4. How would you define homelessness
Probe: Ask about doubled-up, transitional housing, etc?
5. What do you believe to be the cause(s) of homelessness?
6. How do you feel the issue of homelessness affects Orange County?
Probe: Ask about panhandling, crime rates, use of resources, economics
7. Do you feel homelessness is a major concern for Orange County?
Probe: About how many people do you think are homeless in the area? In comparison to surrounding counties is it more or less of a concern?
8. Describe the relationship between people who are homeless and people who are not homeless in this community. Probe: how do others in general perceive those who are homeless?
9. How does homelessness affect you personally and/or professionally?
10. Have you noticed any change in the population of those who are homeless over time (increase in numbers, change in age, gender, race, etc.)?
Probe: If you have noticed a change, what do you feel is the cause of that change?

10-Year Plan to End Homelessness

11. How does Orange County's history affect the issue of homelessness in the county?
Probe: Is it more or less difficult being homeless in Orange County as compared to other surrounding counties?
12. Are you aware of Orange County's 10 year plan to end homelessness?
Probe: Ask details of their knowledge of the plan.
13. What would it take to end homelessness in Orange County in the next 10 years?

Ideas for Ending Homelessness

14. One plan for ending homelessness is the concept of "housing first". This is the idea of providing housing as the first priority, and then ensuring necessary supports are in place to sustain that housing (like employment, substance abuse services, mental health services, etc). This is in contrast with the approach that people need to be "housing ready", which means they have services in place before they obtain housing. What are your thoughts on these two approaches?
15. What, if any, responsibility does the community (average everyday person) have in helping to decrease or end homelessness?
16. What are ways that community members can become involved in ending homelessness?
Probe: Do you feel that it's the job of ordinary citizens to be involved? What, if anything would inspire you to become involved with this issue? What would inspire others?

Closing

17. If you were going to organize your community to address homelessness, what solutions might you propose?
18. What tools or resources would be important for addressing the issue of homelessness?

Probe: What would you say you don't know about homelessness that you would like to know more about? What do you think the average person would need to know more about?

19. What else would you like us to know about the issue of homelessness in Orange County?

Referrals

20. Who else do you recommend that we talk to?

21. Would you be willing to introduce us?

Forum

“We plan to have a forum in late March where people who are homeless, service providers, and other people in the area can get together to share ideas. We'll be letting people know what we've learned about the community.”

What do you think would be a good place for us to meet?

What time of day/day would be good to meet?

Would you be willing to help invite people you know or help organize?

How can we get in touch with you?

What kind of event would people come to?

Who should we invite to attend?

How should we get the word out about the forum? (Please tell you friends)

Thank you very much for your participation!

Appendix J



**THE UNIVERSITY of
NORTH CAROLINA at
CHAPEL HILL**

TO:
DEPARTMENT:
ADDRESS:
DATE:
FROM:

**OFFICE OF HUMAN
RESEARCH ETHICS**

PUBLIC HEALTH INSTITUTIONAL
REVIEW BOARD (IRB)

501 ROSENAU HALL
CAMPUS BOX 7400
CHAPEL HILL, NC 27599-74.00

T 919.966.9347
P 919.966.6380
<http://ohre.unc.edu>

Rebecca Davis
Health Behavior and Health Education
CB# 7440
12/02/2005

A handwritten signature in purple ink, appearing to read "Andrea K. Biddle".

Andrea K. Biddle, PhD, Chair
Public Health IRB, Office of Human Research Ethics

IRB NUMBER: 05-2755
APPROVAL PERIOD: 12/02/2005 through 12/01/2006
TITLE: Action-Oriented Community Diagnosis-Homeless Population in
Orange
County
SUBJECT: Expedited Protocol Approval Notice-New
Protocol

Your research project has been reviewed under an expedited procedure because it involves only minimal risk to human subjects. This project is approved for human subjects research, and is valid through the expiration date above.

NOTE:

(1) This Committee complies with the requirements found in Part 56 of the 21 Code of Federal regulations and Part 46 of the 45 Code of Federal regulations.
Federalwide Assurance Number: FWA-4801, IRB No. IRB540.

(2) Re-review of this proposal is necessary if (a) any significant alterations or additions to the proposal are made, OR (b) you wish to continue research beyond the expiration date.

Appendix K



UNC
SCHOOL OF
PUBLIC HEALTH

University of North Carolina-Chapel Hill
Assent to Participate in a Research Study
Social Behavioral Form-Community Member interview

IRB Study # 5-2755

Form Version Date: 11/11/05

Title of Study: Action-Oriented Community Assessment

Principal Investigator: Rebecca Davis

UNC-Chapel Hill Department: Health Behavior Health Education

UNC-Chapel Hill Phone number: (919) 966- 3909

Co-Investigators: Andre Brown, Sasha Kohnwich, Jennifer Larwa, Erin Stephens

Faculty Advisor: Kate Shirah, MPH

Funding Source: No funding

Study Contact telephone number: (919) 966-5542

Study Contact email: davisra@email.unc.edu

What are some general things you should know about research studies?

You are being asked to take part in a community project. To join the study is voluntary.

You may refuse to join, or you may withdraw your consent to be in the study, for any reason, without penalty.

Research studies are designed to obtain new knowledge. This new information may help people in the future. You may not receive any direct benefit from being in the research study. There also may be risks to being in research studies.

Details about this study are discussed below. It is important that you understand this information so that you can make an informed choice about being in this research study.

You will be given a copy of this consent form. You can ask the researchers named above, or staff members who may assist them, any questions you have about this study at any time.

What is the purpose of this study?

The purpose of this research study is to learn about the experiences of being homeless in Orange County and how it affects individuals, their families, and the community

You are being asked to be in the study because we want your ideas on the strengths and needs of Orange County and its homeless population.

How many people will take part in this study?

If you decide to be in this study, you will be one of approximately 30-40 people in this research study.

How long will your part in this study last?

You will participate for about 1 hour during an individual interview.

What will happen if you take part in the study?

You are being asked to participate in an interview. You will be asked to talk about how homelessness affects your family and community. The interviews will be audiotaped, with your permission. Audiotaping will be stopped at any time you tell us to stop. You may also choose to respond or not respond at any point during the discussion. There will be no follow up interviews. You will be invited to attend a community meeting discussing our findings at the end of the project

What are the possible benefits from being in this study?

Research is designed to benefit society by gaining new knowledge. You may not benefit personally from being in this research study.

What are the possible risks or discomforts involved from being in this study?

We do not anticipate any risks or discomfort to you while participating in the interview. If any question asked makes you feel uncomfortable, you do not have to answer and can decide to stop participating at any time during the interview. Your decision to take part in this study will not influence any of the services you receive or might receive in the future.

How will your privacy be protected?

Participants *will not* be identified in any report or publication about this study. Although every effort will be made to keep research records private, there may be times when federal or state law requires the disclosure of such records, including personal information. This is very unlikely, but if disclosure is ever required, UNC-Chapel Hill will take steps allowable by law to protect the privacy of personal information. In some cases, your information in this research study could be reviewed by representatives of the University, research sponsors, or government agencies for purposes such as quality control or safety. You do not need to reveal your true name and may use a made up name. All notes and audiotapes containing your interview responses will be stored in a locked cabinet at the School of Public Health and will be destroyed in May 2006 at the conclusion of the study.

Will you receive anything for being in this study?

You will not receive anything for taking part in this study.

Will it cost you anything to be in this study?

There will be no costs for being in the study.

What if you have questions about this study?

You have the right to ask, and have answered, any questions you may have about this research. If you have questions, or concerns, you should contact the researchers listed on the first page of this form.

What if you have questions about your rights as a research participant?

All research on human volunteers is reviewed by a committee that works to protect your rights and welfare. If you have questions or concerns about your rights as a research subject you may contact, anonymously if you wish, the Institutional Review Board at 919-966-3113 or by email to IRB_subjects@unc.edu.

Participant's Agreement:

I have read the information provided above. I have asked all the questions I have at this time. I voluntarily agree to participate in this research study.

Signature of Research Participant

Date

Printed Name of Research Participant

Signature of Person Obtaining Consent

Date

Printed Name of Person Obtaining Consent

Appendix K



UNC
SCHOOL OF
PUBLIC HEALTH

University of North Carolina-Chapel Hill
Assent to Participate in a Research Study
Social Behavioral Form-Service Provider Interview

IRB Study # 05-2755

Form Version Date: 11/11/05

Title of Study: Action-Oriented Community Assessment

Principal Investigator: Rebecca Davis

UNC-Chapel Hill Department: Health Behavior Health Education

UNC-Chapel Hill Phone number: (919) 966- 3909

Co-Investigators: Andre Brown, Sasha Kohnwich, Jennifer Larwa, Erin Stephens

Faculty Advisor: Kate Shirah, MPH

Funding Source: No funding

Study Contact telephone number: (919) 966-5542

Study Contact email: davisra@email.unc.edu

What are some general things you should know about research studies?

You are being asked to take part in a community project. To join the study is voluntary.

You may refuse to join, or you may withdraw your consent to be in the study, for any reason, without penalty.

Research studies are designed to obtain new knowledge. This new information may help people in the future. You may not receive any direct benefit from being in the research study. There also may be risks to being in research studies.

Details about this study are discussed below. It is important that you understand this information so that you can make an informed choice about being in this research study.

You will be given a copy of this consent form. You can ask the researchers named above, or staff members who may assist them, any questions you have about this study at any time.

What is the purpose of this study?

The purpose of this research study is to learn about the experiences of being homeless in Orange County and how it affects individuals, their families, and the community

You are being asked to be in the study because we want your ideas on the strengths and needs of Orange County and its homeless population.

How many people will take part in this study?

If you decide to be in this study, you will be one of approximately 30-40 people in this research study.

How long will your part in this study last?

You will participate for about 1 hour during an individual interview

What will happen if you take part in the study?

You will participate in an individual interview. You will be asked to talk about how homelessness affects your community. The interviews will be audiotaped, with your permission. Audiotaping will be stopped at any time by your request. You may also choose to respond or not respond at any point during the discussion. There will be no follow up interviews. You will be invited to attend a community meeting discussing our findings at the end of the project

What are the possible benefits from being in this study?

Research is designed to benefit society by gaining new knowledge. You may not benefit personally from being in this research study.

What are the possible risks or discomforts involved from being in this study?

We do not anticipate any risks or discomfort to you while participating in the interview. If any question asked makes you feel uncomfortable, you do not have to answer and can decide to stop participating at any time during the interview. There is a possibility that information you share could lead to disciplinary action or the loss of your job if the information you provide to us is made public. We will make every effort to keep this from happening through our confidentiality and privacy procedures. Your decision to take part in this study will not influence any of the services you receive or might receive in the future.

How will your privacy be protected?

Participants *will not* be identified in any report or publication about this study. Although every effort will be made to keep research records private, there may be times when federal or state law requires the disclosure of such records, including personal information. This is very unlikely, but if disclosure is ever required, UNC-Chapel Hill will take steps allowable by law to protect the privacy of personal information. In some cases, your information in this research study could be reviewed by representatives of the University, research sponsors, or government agencies for purposes such as quality control or safety. You do not need to reveal your true name and may use a made up name. All notes and audiotapes containing your interview responses will be stored in a locked cabinet at the School of Public Health and will be destroyed in May 2006 at the conclusion of the study.

Will you receive anything for being in this study?

You will not receive anything for taking part in this study.

Will it cost you anything to be in this study?

There will be no costs for being in the study.

What if you have questions about this study?

You have the right to ask, and have answered, any questions you may have about this research. If you have questions, or concerns, you should contact the researchers listed on the first page of this form.

What if you have questions about your rights as a research participant?

All research on human volunteers is reviewed by a committee that works to protect your rights and welfare. If you have questions or concerns about your rights as a research subject you may contact, anonymously if you wish, the Institutional Review Board at 919-966-3113 or by email to IRB_subjects@unc.edu.

Participant's Agreement:

I have read the information provided above. I have asked all the questions I have at this time. I voluntarily agree to participate in this research study.

Signature of Research Participant

Date

Printed Name of Research Participant

Signature of Person Obtaining Consent

Date

Printed Name of Person Obtaining Consent

Appendix L

-List of focus groups held by J-Quad

- Monday, Feb. 20th 2 pm - Healthcare
- Tuesday Feb. 21st 8 am – Business
2 pm – Criminal Justice
7:30 pm – Homeless Community (Northern Orange)
- Wednesday Feb. 22nd 10:30 am – Non-Profit Housing Providers
7 pm – Homeless Providers
- Thursday Feb. 23rd 8 am – Business
7 pm – Homeless Community (Southern Orange)
- Friday Feb. 24th 9 am – Non-Profit Service Providers
- Monday Feb. 27th 10 am – Private Service Providers
7 pm – Congregations
- Tuesday Feb. 28th 11 am – Government (Northern Orange)
4 pm – Educators
7 pm – Government (Southern Orange)
- Wednesday Mar. 1st 10:30 am – For-Profit Housing Providers
7 pm – Housing, Advisory Board Members
- Thursday Mar. 2nd 12:30 - Congregations

Appendix M

CODE Book- Service Provider & Community Members

Italics: Information on how codes were used

Interviewee demographics (*Highlight and code entire interview*)

- Male / Female
- African American / White / Latino
- Community Member / Service Provider/ Citizen
- Homeless / Formerly homeless
- All Orange County, N. Orange, S. Orange (*Describes location of service / living*)
- Mental Health, Housing, Support Services/Other (*This describes the type of service provided by service provider interviewees. Support Services/Other includes things like food, utilities, transportation vouchers, clothes, general care/concern*)

(Organized alphabetically from this point)

Ten-Year Plan perceptions (*This generally answers the question in the interview guide about the 10 Yr plan, but it may also refer to people's opinion about eliminating homelessness in general*)

Access/Barriers to services (*Can include either things people are doing to improve access or things that are impeding access*)

- Transportation
- Language
- Information / Communication (*This can include outreach efforts, how people hear of services, or lack of adequate publicity*)
- Hours of service
- Waitlist
- Beliefs, attitudes, personal reservations (*This can include things like pride, distrust of system, disinterest in services*)
- Eligibility Criteria (*This answers the question of what the eligibility criteria are, they do not necessarily have to be stated as barriers*)
- Service needs/inadequacies (*When services are unable to meet needs or issues with staff*)

Demographics of Consumers (*Used for service provider interviews. May include race/ethnicity, family status, gender, age, income, education*)

Definition of Homelessness (*Code for those things included in definition*)

- Doubled up
- Substandard housing
- Sheltered
- Unsheltered
- Chronic

Discharge Planning

Economic Conditions

- Affordable Housing (*This refers to the current cost of housing*)
- Jobs/living wages (*This refers to the discrepancy between what people earn and what it costs to live, it can also refer to the state of the current job market*)
- Barriers to jobs/income
- Services provided (*Refers to job services and the like, double code as “Economics” and “Services Provided”*)
- Services utilized (*Job services CMs have used*)
- Needs (Needs) (*Use need code and double code “Economics” to indicate job needs, living wage needs*)

Families

- Children less than 18 (*Code for parent who indicates having a child under 18, may say if the kid(s) are with them*)
- Family unit (*If family is defined by participant, if given any significance*)
- Separation (*By own definition, if family is broken up or separated, or if not separated- as in close proximity, close relationship*)
- Other (*At discretion*)

Funding for Service Providers / Organizations

- Barriers
- Sources

Groups Within Homeless Community (*Generally answers the question why people are homeless, or may explain subgroups within the community*)

- Ethnic (*This would refer to differences in the way different ethnic groups experience homelessness; eg Latinos tend to double up*)
- Mentally Ill
- Substance Abusers
- OK being homeless
- Hard luck
- Transient / Chronic
- Not serviced

Health Concerns

- Substance abuse
- Mental health
- Hygiene
- Nutrition
- Chronic disease
- Disabilities
- Medication
- Insurance

History (*This refers to any changing conditions that have affected homelessness*)

- Changing demographics
- Changing workforce/employment

- University
- Growth/migration (*Can refer to patterns of development, people moving in, people moving out*)
- Affordable housing (*This refers to how the cost of housing has changed over time*)
- North vs. South OC (*Discussion of differences between the two parts of the county*)

Housing First Perceptions (*This generally answers the question in the interview guide about housing first, but it may also refer to people's opinions about linking services to housing*)

Perceived Community Strengths

- Orange County (*This refers to strengths of OC as a whole, it may also be used for services that currently exist and are described as being very good*)
- Homeless population (*Positive things about the homeless community as a whole, its cohesiveness, etc.*)

Perceived Community Needs (*Explicitly stated needs*)

- Orange County (*Can include services that are lacking*)
- Homeless population
- Groups (*Refers to needs specifically for women, men, kids, etc*)

Politics

- Atmosphere re: homelessness (*This describes the community's reaction to homelessness, either positive or negative*)
 - *N Atmosphere
 - *S Atmosphere
- Service Providers collaborations (*This describes how service agencies work together, and can include referrals, joint projects, etc.*)
- Citizens group (*This describes private citizens groups like churches, etc. involvement in homeless services / advocacy*)
- Leadership (*This describes how political or community leaders have gotten involved with issues of homelessness*)

Racial/Ethnic Interactions

Recreation

Religion/Spirituality (*What role spirituality plays in life*)

Resources (*Refers primarily to financial or service resources lacking or utilized*)

- Financial (*Includes disability checks, food stamps, pan handling, inheritance*)
- Needs (*As indicated by CM, double code*)
- Services Utilized
- Information (*How information is passed about resources*)
- Transportation

Services Provided (*This answers the question of what services a person provides, what other agencies provide services to the homeless population*)

- Mental Health
- Substance Abuse

- Housing (*Includes rent subsidy, affordable housing, rental assistance, eviction protection*)
- Support Services/Other (*This includes things like food, utilities, transportation vouchers, clothes, general care/concern*)
- Other health (*Health services other than mental health and substance abuse treatment*)
- Safety
- Social work/case management
- Employment / Financial Support
- Veteran services
- Family services
- Services for those with cognitive/physical disabilities

Support Systems (*Where interviewee indicates they get support*)

- Families (*Double coded*)
- Community
- Service Providers (*Gets support from case manager, etc.*)
- Other (*Sponsor or other support not in above*)

Team* (*This includes things that are said by the interviewee that indicate a need to the team, but are not stated as such. This also may include other things that strike us but are not part of our coding. Attach a memo whenever you use Team* to indicate why you selected it*)

Suggestions (*Specific ideas about services that would be good for the community but are not yet in place, specific problem-solving techniques*)

Forum

Secondary Data

Referrals

Appendix N

Suggestions from Community Members and Service Providers

Note: Below are additional suggestions recommendations for the 10 Year Plan not generated at the community forum. This information is excerpts from transcribed interviews with community members and service providers.

I think that one of our problems as service providers is that we say “I need help with homelessness” and it’s so huge and overwhelming to whoever you are talking to that they could shut you out. If we could say, “I need you to provide support for people to live at your church for one week in the week of July 12th, and it’s tangible then they can do that. And I think some times in human services maybe we’re a little guilty of our big picture. If I say I need you to feed 20 families over the next 6 months you’re more likely to say “Ok, as an organization we’re able to do that” but we can’t bite that big thing you gave us-it’s just too overwhelming and when will I know I’ve accomplished anything?

So we’ve been able to document numbers that way and [we’ve] done some specialty programs. It’s one day event where you bring in all the service providers- legal aid, medical center, veteran service officers so people can file for disability, employment, barbershop, clothing people. They can have medical screening, dental screening, get an ID, a haircut, shots,... The goal is to connect with veterans and treat them.

I think that Orange County should be planning right now how it’s going to extend sewer and water into rural areas in the county where more cluster housing could be created. If you don’t have it and you don’t upsize the zoning so that more cluster housing is available then you can’t have affordable housing. You can’t put a house on an acre and expect it to be affordable. So in order to do that well you have to have sewer and water.

I would love to see a match, a coaching program where business men and women are matched with homeless men and women and can mentor them in various ways and can get to know them on both sides of the aisle so that stereotypes are broken down and people can work with one another.

I think, and one of our volunteers suggested that, included in the Ten-Year planning process there should be resident volunteerism. Homeless individuals would be placed in businesses, and non-profits and religious institutions to volunteer. And we would even make that a requirement for those who stay longer with us. And what that will do in my opinion is get them to know one another, break some of the barriers that exist, the mythology that’s out there. It will introduce

people to job opportunities. We don't expose ourselves to people who seem different than we do.

Homeless representatives should be on every IFC committee and maybe other employees and business can include members of special populations that aren't usually included.

Suggest that all the decisions makers concerning this problem will ask the people affected what they want and need, and listen to that

One model that does work is the 'Healing Place' in Raleigh that is a model system which brings people up step by step by step regarding housing and employment. It's peer run and very little staff. They run it by themselves; they're hard/strict on each other and they are quite successful at what they do. This is a good option.

Some place like the healing place in Raleigh offers a way to support each other and gives them activities and things to do during the day so if you have something like that, it would be helpful.

There is a place that has a fantastic program in NC. It's called the Healing Place in Raleigh. I know. I'm a graduate... You have to attend classes. You have to attend meetings. You have a sheet that has to be signed every day. They feed you for nine months and they give you a room, and at the end, they find you a job.

[The Healing Place is a take and give program. In other words, they'll give you, but you have to give back once you graduate. The way I gave back was I taught classes to youngsters on alcoholism...So I gave back about 6 months of teaching to young kids, teenagers, about alcohol.

Maybe we need more services like TROSSA (in Durham) here. They train them to do jobs; they do painting, have a moving business, etc.

In Durham, they are trying to develop a certification system for people so that it can help people show that they've gotten to a certain level of achievement/proven themselves to be reliable for employment by certain trainings or their backgrounds helped out so they no longer have thousands of dollars of credit card debt or whatever.

A lot of the money that our clients spend is on car repair, it would be great to have a partnership

with somebody here that would give them a reduced price or do it for something...a barter system to repair their car.

Why can't we have policemen come up during lunchtime or dinnertime to just be with the guys? They're always seeing them when it's a problem...so let the guys understand that they're not the enemy.

In Wake County they located mental health workers in the shelter, they had separate areas of the shelter-one section for people who were actively using, not interested in treatment and just wanted a place to stay but in the same building, just on the other side they had a program that you signed on, you were assigned a social worker, they followed you through the whole process. You could stay there as long as it took to get things in place, you had a locker to store your things, you really had a chance to feel like you were moving through the system. And the people on the other side, just there to sleep, could see the successes happening.

Someone suggested that service providers develop relationships with landlords, such that they could help identify individuals at risk for eviction and work with providers to try to prevent eviction.

Some communities have an organization called Dress for Success that has only nice clothing for job interviews.

A merit program would be ideal as far as helping the homeless. If you come in and follow these rules and start your savings and your supervisor would kind of evaluate your performance, leadership eligibility, you know, then the men could graduate and maybe IFC would have some other places where the men could graduate into living on their own or even in it's own facilities like-they only have one TV and bedtime is 8pm. After 8pm it's lock down, for people to smoke they have to wait for the next morning, you're not allowed to eat or bring food in the building, etc. A merit system for people that's working and helping to keep the building clean, etc. so they can come in at 9 or 10 o'clock at night.

I would give some incentives, then you can lead by example. You can make it and get privileges if you do this and do this or you can just stay where you are. It's the same thing in life. If you don't try to keep up a job and get your self clean in here, well you ain't gonna get anywhere out there, are you? The same rules apply.

I think some camaraderie would be good. Some physical activities would be nice. Occasionally some of the managers do it, you know. But I would think like, say for instance, the guys that are

working-on Saturdays there isn't nothing to do here-during the week, the guys can put in \$10 dollars a week or something and the guys can take fieldtrips just like in school. Take a bunch of guys and go to the movies or go to the ball park. There should be activities so they don't seem so stressed out or stuck in

Every shelter should have substance abuse counseling and support groups because I think that's the number one problem with homelessness. If you can get people into support and start sharing they'll feel more comfortable not using, cuz they have someone to talk and vent their problems.

Most people do drugs because they have problems...people feel better once they let it out and feel like someone cares. And they feel the initiative to go out and look.

Day labor, day shelter. See like in Texas, they got a shelter like this and the shelter-the guys that got a bed and really want to work-they make you pay \$25 a week but they got a day labor place right there in the shelter and a van that takes you to work and brings you back that doesn't cost you nothing. That would be good.

Another barrier to getting a home or job is a past criminal record. There needs to be resources to help people back into the community and educate landlords and employers, as well as teach them how to talk about their past and how they are not the same person.

Affordable rental organizations could buy units and then offer them for rent; keep them off the radar...good not to advertise that units are for homeless or disabled people and good not to concentrate [a lot of these rental units] in one area.

We need to figure out how to be better advocates...come at it from a different perspective and...figure out how to ask them for help on how to make changes.

Denver has implemented a Ten-Year Plan and one thing they've done is use the faith community. They've asked every congregation, about 1,000 congregations, to commit to one homeless person or family and follow through with them to get them out of wherever they are and into permanent housing.

Service providers could develop relationships with landlords so they could help identify individuals at risk for eviction and work with providers to try to prevent eviction.

There needs to be more information about owning a home or more about what to do to obtain a

home; how to go about the first step and how much down payment it would take. There just needs to be something they teach you how to get out there and get started to do.

Year round school would help with not being able to afford babysitting and daycare.

I think you should delete the word homeless and homeless shelter. A simple shelter would be fine. You add the word homeless and you add more stereotype typical backlash to it.

Services are also needed for people who aren't mentally ill and who don't use substances.

I'm a fan of registering panhandlers. You have to go to town hall to get a license to panhandle; that capture point is a touch for service.

There are campaigns like "The more you give change, the more things stay the same" in Philadelphia and Real Change, Not Spare Change in Seattle. Give money to organizations that provide services, not to individuals themselves.

There's people who want to be homeless. And there's people that become homeless, they've made mistakes in life or whatever...some people are trying to get out of the shelter and they could use more help. The shelter can only give you so much. It's like Alcoholics Anonymous. You got a sponsor, right? Your sponsor is everything but your financial advisor. He's not going to give you money, but he'll advise you. But for you to carry it out, you've got to do it yourself. And that's what these guys need. They need that push. "Here, if you need help, call me". They don't have anything like that.

Appendix O

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Appendix P



THE UNIVERSITY
of NORTH CAROLINA
at CHAPEL HILL

SCHOOL OF PUBLIC HEALTH

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May 7, 2006

Dear Members of the Partnership to End Homelessness:

Having completed our research on homelessness in Orange County, this document summarizes our findings from the project. In addition to the document's information, this letter addresses our general recommendations for the continued planning process. Most importantly, the team recommends that the Partnership recognize persons experiencing homelessness as equal partners and prioritize their articulated needs in all aspects of the planning and implementing of the Ten-Year Plan. The plan cannot be effective without careful consideration of the persons it is designed to help.

The document provides a cursory look at the personal interests of those who experience homelessness, but is only the beginning to increased involvement and engagement of community members. The presented themes address corresponding issues of the community and service providers; however, they are not a comprehensive look at homelessness. Due to research limitations, we were unable to gain insight from Latino community members and those who are not utilizing services. Issues such as substance abuse, domestic violence, and mental illness were additional articulated concerns that were not explored in this document or in the forum, but are significant contributors to homelessness. Moreover, attention must be given to the obvious racial, educational, and economic disparities between persons experiencing homelessness and the service community. The inclusion of these populations and issues in the Ten-Year Plan requires a concentrated effort on behalf of the Partnership.

As the Partnership works to address this issue in its entirety, the team recommends that efforts be made to bridge the gap between service provider and community member perspectives to ensure that both groups' needs are met. We have enjoyed and appreciated this opportunity to assist in the development of the Ten-Year Plan to End Homelessness. Our experience with this process has been rewarding and we hope that our contributions help ensure success in Orange County's Ten-Year Plan.

Sincerely,

Andre Brown

Rebecca Davis

Jennifer Larwa

Sasna Kohnowich

Erin Stepiens

