

**HUD'S
HOMELESS ASSISTANCE PROGRAMS**

Rural Continuums of Care

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**U.S. Department of Housing and Urban Development
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RURAL CONTINUUMS OF CARE

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INTRODUCTION

BACKGROUND

Since the first Continuum of Care (CoC) competition in 1995, the number of grants awarded to rural areas has grown from 52 projects in 1995 to 565 projects in 2006.¹ Nine percent of the homeless population in the United States is located in rural areas² and since 1999, HUD has awarded 10 percent of annual CoC funding to rural area projects.³ Rural continuums are typically organized into a regional, state, or balance of state CoC system. However, some providers that serve those who are homeless remain outside of the systems. The same is true for some mainstream providers that serve homeless clients but do not focus on how their activities fit into the constellation of services that might be needed by a homeless individual or family.

PURPOSE OF THIS GUIDE

This guide discusses issues that pertain specifically to the rural homeless population and strategies CoC systems can use to address these issues and effectively serve the needs of homeless individuals and families in rural areas. The underlying factors that cause homelessness in rural areas are no different than those in urban areas. However, strategies for addressing homelessness that work well in urban areas may not be effective in rural areas. Rural homeless populations often are ‘unseen,’ spread out in remote locations. Although rural communities often pride themselves on ‘taking care of their own,’ the hidden nature of rural homelessness means that the issue is most often viewed as an urban problem and overlooked in a rural context. Moreover, resources and infrastructure for providing emergency services for the homeless and addressing underlying issues that cause homelessness often are scarce. Rural continuums must grapple with specific programmatic, funding, communication, and geographic constraints that more urban communities do not need to consider when providing services to the homeless or organizing a CoC.

This guidebook is designed for providers in rural communities who are interested in forming a new CoC or joining or improving an existing one. It shares tools, ideas, and strategies used by continuums across the country to overcome barriers specific to rural areas and effectively deliver housing and services in these areas.

DEFINITION OF HOMELESSNESS

For the CoC competitive homeless assistance programs, HUD defines a homeless person as “a person sleeping in a place not meant for human habitation or in an emergency shelter; and a

¹ Kinnaman, Marcy. (Fall 2007). “HUD and Rural Homelessness.” *Rural Voices*. Washington, DC: Housing Assistance Council.

² Burt, Martha R., Laudan Y. Aron, Toby Douglas, Jesse Valente, Edgar Lee, and Britta Iwen. (1999). *Homelessness: Programs and the People They Serve. Findings of the National Survey of Homeless Assistance Providers and Clients*. Washington, D.C.: Urban Institute.

³ Kinnaman, Marcy. (Fall 2007). “HUD and Rural Homelessness.” *Rural Voices*. Volume 12, Number 3. Washington, DC: Housing Assistance Council.

⁵ The HUD definition of a homeless person has evolved over time. This was the definition as of the publication date. Check current HUD guidance for additional information.

person in transitional housing for homeless persons who originally came from the street or an emergency shelter.”⁵

HUD’s definition of homelessness presents challenges in rural areas.⁶ In large part due to the lack of emergency shelters, individuals and families without permanent housing often live doubled up with family members and friends, or ‘couch surf’ from place to place, but with no place to call home. While most of HUD’s homeless-specific resources currently are not available to this population, rural continuums can tap into other federal, state, and local programs and funding that can help prevent this marginally-housed population from becoming homeless and move them into a stable housing situation. These resources are explored throughout this guidebook.

OVERVIEW OF THIS GUIDE

The chapters in this guidebook are organized as follows:

Chapter 1: Overview of the Continuum of Care System. This chapter provides a brief overview of the CoC system. It covers the CoC’s purpose, fundamental components of the CoC system, the McKinney-Vento programs funded under HUD’s annual CoC competition, and features specific to regional and balance of state continuums.

Chapter 2: Strategies for Raising Awareness and Preventing Homelessness. This chapter addresses how to increase awareness about the nature and presence of homelessness in rural communities. It also examines ways to prevent homelessness with strategies for keeping people in their homes and for transitioning people into new housing situations.

Chapter 3: Providing Services Through Rural Continuums of Care. This chapter explores ways to overcome the barriers to providing homeless services in rural areas. The chapter provides tips on how to overcome some of the most prevalent barriers to rural service delivery including the lack of transportation infrastructure, the shortage of available services, the shortage of decent affordable housing, and isolation (geographic and, for recent immigrant populations, linguistic and cultural). It also presents some rural service delivery models that other rural communities have effectively used.

Chapter 4: Resources for Providing Permanent, Transitional, and Emergency Housing. This chapter explores approaches to providing permanent, transitional and emergency housing in rural areas where there is often a shortage of capacity and financial resources. It also provides tips on how to find sources of funding, as well as cash match and in-kind resources.

Chapter 5: Data Collection: The Point in Time Count. This chapter examines strategies rural groups can consider when conducting their Point in Time counts. It also discusses ways that data sharing can help continuums serve their clients more effectively.

Chapter 6: Maximizing the Effectiveness of Rural Continuums of Care. This chapter examines three issues that are of particular relevance for rural groups involved in (or considering becoming involved in) a CoC. These include partnership building, communication and organization, and capacity building.

⁶ At the time this guidebook was written, legislation to amend the McKinney-Vento Homeless Assistance Act was being considered in the U.S. Congress. Subsequently, the Act was substantially amended with most new provisions to go into effect not later than October, 2010. One major change will expand who may benefit from McKinney-Vento grant assistance in rural areas to include individuals and families in dire housing situations, even if they are not literally homeless. This will eliminate challenges posed in rural areas by the current definition of homelessness.

CHAPTER 1: OVERVIEW OF THE CONTINUUM OF CARE SYSTEM

INTRODUCTION

This chapter provides an overview of the Continuum of Care (CoC) approach so that the remaining chapters can be read in the appropriate context. This guidebook is intended to explain how rural continuums can handle issues particular to rural areas in order to best meet the needs of their homeless population and prevent rural homelessness in the long term. Readers should be generally familiar with how a CoC works.

BACKGROUND

The Stewart B. McKinney Homeless Assistance Act of 1987, later renamed the McKinney-Vento Homeless Assistance Act, provides federal financial support for a variety of programs designed to assist homeless individuals and families. The McKinney-Vento programs are administered primarily by the U.S. Department of Housing and Urban Development (HUD), Assistant Secretary for Community Planning and Development, Office of Special Needs Assistance Programs. Since 1994, HUD has, in effect, required each application for funding be submitted as part of a single community-wide or region-wide CoC plan. This has been required in order to encourage comprehensive homelessness planning and coordination of homeless assistance programs. The CoC is designed to organize and deliver housing and services to meet the specific needs of people who are homeless and to move to stable housing and maximum self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness.

The four McKinney-Vento programs are described briefly below:⁸

- **The Emergency Shelter Grants (ESG)** program is the only one of the four programs that is administered through a non-competitive formula grant program. The ESG program provides homeless persons with basic shelter and essential supportive services. It can assist with the operational costs of the shelter facility and the administration of the grant. ESG also provides short-term homeless prevention assistance to persons at imminent risk of losing their own housing due to eviction, foreclosure, or utility shutoffs. Because the formula allocates a portion of the funds to states, and because prevention activities are permitted, this can be a valuable funding source for rural areas.
- **The Supportive Housing Program (SHP)** program is designed to promote the development of housing and supportive services to assist homeless persons in the transition from streets and shelters to permanent housing and maximum self-sufficiency. It provides the following:
 - Transitional housing, which helps homeless people move to permanent housing
 - Permanent housing for homeless people with disabilities

⁸ For more information see the Overview of HUD Homeless and Housing Programs section of the HUD Homelessness Resource Exchange (www.hudhre.info).

- Safe havens, 24-hour supportive housing that serves hard-to-reach homeless people with severe mental illness
- Supportive services for homeless people not living in supportive housing provided by the grantee or its sponsor
- Other types of innovative supportive housing for homeless people

SHP can be effective in rural areas, but funding is limited and the application process is highly competitive.

- **The Shelter Plus Care (S+C)** program is designed to ensure the availability of supportive housing opportunities for homeless people with disabilities and their families by providing them with rental assistance. S+C has a primary focus on persons who are seriously mentally ill; who have chronic problems with alcohol, drugs or both; or who have HIV/AIDS. Through this program, four types of rental assistance are available: tenant-based, project-based, sponsor-based, and SRO. S+C can be effective in rural areas but funding is limited and the application process is highly competitive.
- **The Single Room Occupancy (SRO)** program provides rental assistance to homeless singles to lease rehabilitated single room occupancy units. SRO housing is residential property that includes single room dwelling units that may contain food preparation and/or sanitary facilities. Alternatively, food preparation and sanitary facilities may be shared. Each SRO unit is intended to house only one eligible individual. The Section 8 SRO Program differs from regular tenant- and project-based Section 8 in that the rental assistance is targeted solely to SRO units with priority to homeless individuals. It often is not viable in rural areas where such units (typically old hotels and rooming houses) are not common.

CONTINUUM OF CARE ORGANIZATION AND PURPOSE

CoCs are most commonly organized around two main goals – planning for the homeless housing and service system in a community and applying for funding from the HUD’s competitive McKinney-Vento Act programs. To receive HUD McKinney-Vento funding, organizations must work through a local CoC. All continuum partners should be invested in these goals but depending on the partner, their roles can and should vary. Rural continuums, which often have a broad and very diverse partnership base, must handle the complicated task of organizing and building capacity among their partners while still being strategic and clear about the varying roles and responsibilities of each partner.

ESTABLISHING A CONTINUUM OF CARE

This guidebook recaps the key considerations and highlights issues that are of particular concern for rural groups in the process of establishing and building a CoC.

- **Defining a continuum’s geographic coverage:** Geography can play a significant role in determining how a continuum is organized. Deciding exactly where to draw the boundaries for a continuum can be a challenge in some rural areas. More coverage means more potential partners and resources. However, it also means more work to coordinate and potentially more divergent problems and interests if the terrain or issues are different in various parts of the geographic area. Rural groups need to weigh these pros and cons as they determine where to establish their boundaries. For established continuums, recognizing different needs and interests across the geographic area is essential for fostering effective collaboration.

- **Selecting a lead organization:** A strong lead organization is critical to the success of a continuum. A lead organization that has strong leadership, access to resources, and high visibility can provide a continuum with the credibility needed to attract broad-based participation in the community. Communities should, therefore, carefully review their choices, which include a homeless coalition, a government agency, or nonprofit leadership. Given the limited capacity and resources in many rural areas, it may be challenging to identify an organization that is ready and willing to take on this leadership role. However, doing so can be an important key to long-term success.
- **Identifying potential stakeholders:** Identifying potential stakeholders should be an ongoing effort for every continuum. One of HUD's primary goals for any CoC system is to have maximum participation in the planning process by all interested parties – including those from the public, private, and nonprofit sectors, and representatives of homeless subpopulations. While broad participation is encouraged, levels of participation among stakeholders may and should vary. An effective continuum should be able to explain clearly why a stakeholder should participate, the expected level of participation, and the anticipated outcomes of participation. In rural areas, identification of possible participants may require some creativity. Convincing isolated and dispersed groups to make the effort to participate may be challenging. But in the end, ensuring broad participation is an important way to reduce isolation and expand capacity in rural areas.
- **Creating a governance structure:** A successful CoC should have a year-round planning process that is coordinated, inclusive, and outcome-oriented. The expectation is that the process will be organized with a governance structure and a number of sub-committees or working groups. With limited capacity and resources, rural areas may select a small number of topics to tackle, and have only a few working groups. Nonetheless, those groups that are established will form the core of the continuum. At the same time, the work done by the committee members will strengthen relationships and can help build skills among the committee members.
- **Creating a Homeless Management Information System (HMIS):** HMIS provides communities with a tool to collect and analyze information about people using homeless service programs. By allowing communities to accurately calculate the size and needs of the homeless population as well as the outcomes of specific interventions, HMIS provides a means for tracking service and demand for homeless programs and understanding where improvements are needed. A rural area should select the components to be included in its HMIS based on its specific information needs, goals, and vision for its homeless service system. Basic HMIS components include client intake, case management, service tracking, information and referral, and a report generation tool.
- **Establishing a common vision and system-wide performance goals:** This step is critical to creating and maintaining a common sense of purpose and an action-oriented continuum. This common vision may be articulated through a mission statement and/or guiding principles that help focus a group's planning efforts. As continuums evolve, they may need to rethink their goals and objectives. As isolated rural providers come together, establishing a shared vision may be challenging. It is, however, a critical part of the process of establishing a well-functioning continuum.
- **Monitoring and measuring provider performance:** Finally, a continuum should monitor and measure the performance of providers within its system and how the system performs as a whole. This information is critically important for making strategic planning decisions. Rural providers accustomed to working alone and putting all of their resources into helping with the immediate crises faced by homeless people in the community may find this step

daunting. But it is essential for the long-term improvement of programs and services for homeless people in rural areas.

BENEFITS OF BEING PART OF A CONTINUUM OF CARE

The number of continuums covering rural regions has increased sharply since the institution of the CoC model. Rural communities have come to recognize that working together as a collective group allows funding to be used more efficiently and effectively and helps agencies and providers collaborate to address homelessness. The advantages of joining a CoC include:

- Rural communities can effectively compete for McKinney-Vento funding. For example, in Pennsylvania only a handful of rural projects in Pennsylvania received McKinney-Vento funding prior to 1997. Since then, through the CoC system and collaborative planning effort, over 160 different homeless projects have been awarded funding that totals close to \$88 million.
- Rural communities can coordinate a year-round process to plan for homeless services. Working in concert can help providers move from addressing immediate crises to finding ways to prevent homelessness and to move homeless individuals and families into long-term stable situations.
- A more diverse group of partners can work together as part of a continuum to help the homeless population. With continuum membership open to all stakeholders interested in addressing the issue of homelessness, from public agencies, to nonprofit organizations, to faith based organizations, to civic groups, rural communities can offer a larger array of better-coordinated services.

REGIONAL OR STATEWIDE AND BALANCE OF STATE CONTINUUMS OF CARE

One of the first steps in planning and managing a CoC is defining a continuum's geographic coverage. Continuum planning efforts may be organized at a number of geographic levels:

- Single city or county, or a city and surrounding county
- Rural areas in several, often contiguous, counties (i.e., regional CoC)
- Balance of state that excludes areas of the state already covered by other continuums
- Statewide

Because of their small populations, individual rural areas generally have relatively few homeless people within them. To maximize funding potential and take advantage of economies of scale, rural areas in most states, particularly larger ones, are covered by a Balance of State CoC system encompassing all areas in the state not already covered by other continuums. Small states may have a statewide continuum covering both rural and urban areas. A regional CoC system covering several counties may be appropriate in larger states where geography is such that it makes sense to divide rural areas into multiple CoCs.

There are a number of advantages to the statewide, regional, and balance of state CoC approaches available to rural areas. These CoCs are able to do the following:

- Increase awareness of the need for programs to address rural homelessness
- Increase access to critical housing and supportive services
- Increase funding prospects for the region by creating a 'critical mass'

- Bring additional resources to homeless programs through partnerships with state governments
- Build capacity, in that communities with more experience in homeless service systems can work together and share their expertise with less experienced communities

The goal of balance of state and regional CoCs is to coordinate homeless assistance programs in areas not covered by other continuums. While these planning efforts ensure critical coverage for communities that may not be linked to the networks of service providers found in larger cities, implementing and managing regional and statewide CoCs can be challenging. States and participating localities must come up with efficient organizational structures that allow broad participation in all aspects of the CoC process, from forming local planning groups, to soliciting applications, to setting priorities. In addition, balance of state continuums need to find ways to assemble data on the housing and service needs of homeless people in what are often non-contiguous parts of the state.

Forming statewide and regional CoCs helps ensure that small and rural jurisdictions receive funding to help develop viable homeless assistance projects.

CHAPTER 2: STRATEGIES FOR RAISING AWARENESS AND PREVENTING HOMELESSNESS

INTRODUCTION

Rural homelessness is sometimes referred to as an ‘invisible’ problem because of a pervasive lack of awareness that homelessness is an issue in rural communities. This is in large part due to the dispersal of the rural homeless population and the lack of obvious ‘street homelessness’ in rural communities. People taking shelter in seasonal hunting or fishing cabins, campgrounds, abandoned barns, trailers or in vehicles are simply not visible to the general public or government officials. This lack of visibility can make it difficult to engage the community to take action or to persuade government officials to invest public resources in affordable housing and services to the homeless. Raising awareness among the public and government decision makers is one valuable tool for ensuring the success of a Continuum of Care (CoC). The first section in this chapter describes strategies for accomplishing that task.

The second section of this chapter addresses homeless prevention. Many rural areas suffer from a scarcity of affordable housing options for their lowest income residents. Rental housing can be difficult to find in rural areas and much of the low-cost housing stock is in poor physical condition. In addition, in areas with high demand, it tends to be expensive. Given this constellation of conditions, an important strategy for addressing homelessness in rural areas is preventing it from occurring in the first place.

STRATEGIES FOR RAISING AWARENESS

Increasing Support

Rural continuums report that they focus on education and outreach efforts to both service providers and the community at large in order to garner financial, community, and political support to help the homeless population. Some recommended strategies to increase support for addressing the rural homeless situation include the following:

- **Utilize local media such as local TV news shows, radio, and newspapers to run stories and articles on the issue of rural homelessness.** This can be particularly useful when done in coordination with the timing of a Point-in-Time (PIT) count of homeless people. Continuums will want to consider which media outlets will be the most effective for getting the word out. Local newspaper and radio outlets may be more effective than TV outlets, which generally are geared towards larger communities and cities.
- **Initiate a public education awareness campaign to highlight the issue of homelessness.** For example, the State of Mississippi actively works to educate local elected officials and the public by distributing information on rural homelessness and providing informational booths at public events.
- **Lobby the local government and attract the backing of a well-respected politician who can bring attention to the issue.** Elected officials are more likely to increase their stake in the issue if they are engaged in the process of addressing the problem of rural homelessness. South Dakota has engaged their elected officials by asking them for possible solutions and documenting measurable results of programs funded by local elected bodies.

- **Personalize community outreach efforts with real stories of real people who have experienced rural homelessness.** Stories of homeless individuals who have died or individuals who became homeless as a result of domestic violence are particularly effective in evoking empathy and acknowledgment of the issue from the broader community and can serve as an entry point to get support for efforts to alleviate rural homelessness.
- **Lobby decision-makers with thorough and carefully collected and analyzed data about rural homelessness.** A state legislature and funding partners are more likely to respond and provide funding to a rural area if there is hard data to back up claims that rural homelessness is a significant issue. The Point-in-Time count and HMIS data are key tools in providing such documentation.

Raising Awareness by Personalizing the Statistics

In collaboration with Ohio University, a 3-county continuum in southeastern Ohio prepared a report of their PIT count and presented their findings at a dinner hosted by a continuum partner and attended by numerous public figures. During the presentation, individuals who helped complete the count shared the moving stories of several homeless individuals they had met. These stories put a human face on the statistics and had a striking effect on many in the audience. The concrete reality of these people's struggles convinced some skeptics that the problem of rural homelessness in their area is real and something that the community should address.

Maintaining Visibility and Attention Through Networking and Advocacy

State and local Public Housing Agencies, Rural Development Offices, and the State and local agencies that administer the CDBG and HOME programs are important players with regard to mainstream funding resources. Rural continuums can make it a point to meet with decision-makers in these organizations to advocate that funding and resources be dedicated to the deeply impoverished and homeless.

Continuums' success also can be greatly enhanced through the support of political figures. Keeping homeless-related issues on the public agenda, finding ways to support the continuum with complementary programs, and making political support and influence available when needed can all help a continuum serve its clients. In rural areas, political figures often are acquainted with many constituents, increasing the likelihood that continuum members will know them personally and be in a position to advocate for support. Rural continuums also can be vocal advocates and hold public officials accountable to make sure funding is delivered when promised.

Public awareness campaigns about rural homelessness can enhance support for appropriate housing and services. "Myth-busting" to let people know that there is homelessness in rural areas is important for garnering support. In many rural communities there is an inaccurate perception that homelessness is only a problem elsewhere. Public and political support can be greatly enhanced by highlighting concrete examples of 'deserving' local people who have become homeless. Making the issue a local one can be an especially effective strategy in rural communities accustomed to "helping their own."

Measuring Progress to Sustain Funding

Being able to quantify a program's success can help sustain funding for the program. It is difficult and often politically unpopular to cut off funding for a social program that is helping the

community. Data collection efforts that point to the success of a program are one effective way of proving its continued relevance and demonstrating the need for renewed funding.

In rural areas, continuums may not always have the capacity to measure progress in a formal way. Because rural providers tend to be jacks-of-all-trades, formal performance measurement expertise may not be readily available. Rural continuums have solved this problem in a variety of ways:

- Tap colleges and universities for assistance in designing and implementing an evaluation
- Obtain technical assistance from state or federal agencies that care about the continuum's outcomes and have in-house expertise or resources for hiring consultants with expertise
- Rely on basic data collection and presentation, which may be sufficient to document a program's activities without sophisticated techniques
- Provide simple, concrete examples of a program's effects on local families to illustrate progress

STRATEGIES FOR PREVENTING HOMELESSNESS

This section discusses strategies for keeping people in their homes, as well as strategies for helping people move to new living situations without going through a period of homelessness first.

Strategies for Keeping People in Their Homes

Because of the importance of homelessness prevention in areas with limited emergency shelter beds and few affordable permanent housing options, some rural continuums focus on providing support to keep at-risk families and individuals from becoming homeless in the first place.

Providing emergency housing assistance. Help paying for housing costs on an emergency basis can make the difference between a family staying in its home and becoming homeless. Rural continuums report providing three key types of homelessness prevention assistance:

- Assistance with rent or mortgage payments to avoid eviction or foreclosure
- Help paying for necessary utilities to prevent eviction and keep the home habitable
- Emergency repair programs, which are discussed in Chapter 4

An underlying theme for this type of program is that the support must be targeted to households that, with the help of short-term relief, will be able to maintain housing over the long term. Rural continuums that offer these types of programs stress that strategies to keep people in their homes do not make sense if they are only a "band-aid" for the short term. The continuum needs to provide what is necessary to ultimately help the household achieve financial independence, or else help them move into a permanently subsidized housing situation.

Supplying material and household provisions. Supplying material and household provisions can help ease a family's financial burden, allowing households living one paycheck away from homelessness to meet their housing expenses for the month.

To help ensure that an at-risk family is able to meet its housing expenses, continuums can do the following:

- Help meet regular, on-going needs such as groceries and personal hygiene products
- Help pay for seasonal expenses such as school supplies, wood for a fireplace, or winter clothing

- Help pay for one-time emergencies such as vehicle repair or funeral expenses that can upset a tight family budget
- Supply resources needed to aid in transitions such as clothes for an interview or short-term childcare during a job search

By tiding a family over, the continuum may allow the family to hold onto a unit that is more affordable than any alternative that they might find if they lose their existing residence.

Legal Support. Many low-income households at risk of becoming homeless are renters, even in rural areas where homeownership rates are relatively high. For these families, landlord-tenant mediation and legal support can mean the difference between homelessness and remaining in the unit. Mediation programs and legal service programs can be used to help such families work out terms they can manage with their landlords in order to avoid eviction. Similarly, for low-income homeowners who fall behind on their mortgages, it may sometimes be possible to work out an arrangement with the mortgage holder in order to avoid foreclosure and eviction.

Continuum partners in rural areas can focus on these prevention strategies to help minimize the number of individuals and families who will require homelessness services. Options for legal support may include the following:

- Legal aid organizations (most common in urban areas, but sometimes accessible in regional towns)
- Universities with law schools
- Pro bono contributions from local law firms

Strategies for Helping People Move to New Living Situations

Discharge planning programs for individuals re-entering the community from institutions such as mental health facilities, nursing homes, hospitals, prisons and the foster care system decrease the chances that these individuals will become homeless following their release. Mental health facilities and prisons often are situated in rural areas and without discharge planning a disproportionate number can end up homeless in the local area. For example, over the course of one year, a homeless program in Kern County, California – located in close proximity to several prisons – discovered that 32 percent of their homeless clientele were men under the age of 30 who had recently been released from prison, most following a felony drug conviction.

Discharge planning is a required component of the CoC application and an important prevention strategy. The process of developing a discharge plan should begin a few months before the individual is leaving a facility. A comprehensive discharge plan addresses the individual's employment and housing plans upon release and the family, community, and medical support services that will be available to the individual. Even where there is no regulatory obligation to provide assistance to the individual upon their release, discharge planning often can save resources in the long term.

A Broad Focus During Discharge Planning

In Nebraska, case managers are required to develop a discharge plan for all inmates being released without parole. This includes establishing where the individual will live, but also what sorts of employment opportunities will be pursued, and what kinds of support systems will be needed (e.g., counseling, substance abuse treatment, on-going therapy, or education needs). Supporting the inmate in developing proactive plans that consider many interrelated aspects of their lives can help the individual avoid falling into homelessness.

Some continuums have established standing committees within the continuum planning group to create discharge plans for individuals being released from institutions. Mainstream providers can be brought into this discharge planning process several ways:

- Agreements with health care providers to provide services to individuals with mental illness and substance abuse issues
- Arrangements to provide affordable transitional and permanent housing options to eligible individuals
- Arrangements to provide at-home meal and health care services to individuals who will be home-bound after release
- Agreements with area employers to provide employment opportunities to individuals leaving the child welfare system⁹

Discharge planning is important for individuals being released into the community anywhere in the country. However, it is particularly important in rural areas where affordable housing, employment opportunities, transportation options, and support systems may be limited.

⁹ Robertson, Peggy and Diana T. Myers. (June 2005). "Digest of Model Programs for the Homeless: Rural Outreach and Engagement and Housing First." Diana T. Myers and Associates, http://www.pahousingchoices.org/Model_Programs.pdf

CHAPTER 3: PROVIDING SERVICES THROUGH RURAL CONTINUUMS OF CARE

INTRODUCTION

In many ways, providing services to homeless people in rural areas is the same as providing homeless assistance anywhere. However, rural Continuums of Care (CoCs) face some unique circumstances that can affect the way services are provided. This chapter begins by presenting several models of service delivery that CoCs have found effective. It then outlines some of the barriers to service delivery that are of particular relevance in rural areas and goes on to discuss strategies for overcoming these barriers. Included are strategies for overcoming transportation barriers, client isolation, and shortage of services.

SERVICE MODELS FOR RURAL AREAS

All continuums must decide how to organize themselves so that they can provide effective outreach and deliver services to their homeless population. Rural continuums employ different service models depending on their size and the distance to health, housing, and social services. This section includes examples of various service models that rural continuums may consider as an approach to service delivery:

- Centralized services model
- Specialized services model
- Hub and spoke model

Rural continuums may find that a combination of these service models is best suited to their needs.

Any of these three models can be enhanced by combining it with case management. Having a case worker link an individual to the services he or she needs and remain engaged until the individual obtains a stable housing situation is key to successfully moving people out of homelessness. This role is especially important in rural areas because providers generally are few, information about available services often is scant, and transportation barriers typically are significant. Good case management can help clients obtain the full range of services for which they are eligible, and can minimize the effort required to assemble those resources.

Computerized and telephone contacts can help ensure that clients are sent to a location where they can get help the first time, without making multiple stops and being rejected or denied service.

While the small number of providers in rural areas can be a limitation to providing services to the homeless, it can have an advantage with regard to case management and the continuity of care. In rural areas with small networks of providers and small communities, it is likely that individual providers will know each other personally. The small number of players also can make it possible for providers to keep close tabs on the individual clients served.

When providers are not closely linked, or clients seek assistance from disparate organizations, information systems such as the Homeless Management Information System (HMIS) can allow data about individual clients to be exchanged efficiently across the continuum. Basic HMIS components include client intake, case management, service tracking, information and referral, and a report generation tool. A community may choose to broaden the scope of its HMIS by including components beyond homelessness. Using an HMIS system as a case management

tool helps ensure that rural homeless individuals get the care they need each time they are served without redundant efforts and wasted resources. By instituting a system that allows providers to check which previous services have been provided to a homeless client, the provider can ask the client specific questions and make more informed decisions about how best to address their immediate and long-term needs.¹⁰

Centralized Services

In some rural areas, it may be feasible to co-locate services in a single facility. One-stop shopping is a convenience that can greatly reduce the barrier to service posed by a need to find transportation and directions to multiple locations. It also can decrease transportation costs since clients do not have to travel to multiple locations for various services.

If services cannot be centralized in one building, continuums may try the next best solution: to centralize services so they are located in one town, or one area of town. Overall, this type of strategy can reduce transportation costs and time spent obtaining services.

Centralized service centers work well in smaller rural continuums and those where a regional town or urban center are located relatively close by. In more remote rural areas transportation difficulties may preclude clients from getting to the centralized service area.

Examples of Centralized Service Systems

A long, narrow county in the Northwest has found this centralization approach to be successful. A bus line that runs occasionally along the length of the county brings homeless individuals and families in need of services to the area's largest town. Service providers are located in the town, and provide everything from overnight shelter to health services, child care programs, and employment assistance. This county also collaborates with an adjacent county to provide more specialized services when necessary, and provides transportation to ensure that homeless clients can reach those services. The goal is a "seamless system." As one provider said, even with accessible transportation, "It takes an average of 37.5 hours per week for a homeless person to get basic services." Centralizing services helps this county minimize the transportation burden placed on its homeless population.

A health care program for the homeless in Burlington, Vermont provides mental health, substance abuse, case management, and primary care services all in one place. Although the services are offered in the state's largest metropolitan area, fully one third of the clients served are from rural areas of the state. By centralizing services in a concentrated area, homeless individuals and families are able to get the health care and social services they need through a single point of access.

Centralizing services may not be feasible or economical in the short term, but is something that rural continuums can work toward over the long term as part of their CoC strategic plans. In the immediate term, a rural CoC can centralize the referral system by allowing homeless individuals to work with one service provider to do the following:

- Find out about all of the services that are available to them through other providers in the continuum
- Set up appointments with other providers through a single point of contact

¹⁰ For more information on HMIS see the HMIS Implementation Guide (<http://www.hud.gov/offices/cpd/homeless/hmis/implementation/implementation.cfm>).

Centralized services, coupled with case management, can significantly reduce the burden on the homeless client who might otherwise waste time and energy traveling to service providers that may not be able to serve them. Facilitating such contacts also increases client commitment to seeking help and the likelihood that they will reach out for help again.

Specialized Services

Sometimes providers in far-flung parts of a rural area offer specialized services that could benefit clients from that entire broad service area. Rural continuums can set up large and diverse referral systems that put providers in one part of the service area in touch with homeless individuals in another area. This allows clients in sparsely populated areas to access all necessary services. Like the centralized service model, this specialized service approach can be set up in coordination with a case management system to ensure that clients receive appropriate referrals and support in making appointments. A drawback to this approach is the difficulty of arranging transportation.

Example of Specialized Service System

With a referral base covering 71 counties, Mississippi's state continuum has set up an extensive referral system that can connect homeless persons from one county to services in other counties to access everything from mental health services to job training and placement. For example, a hospital program for dually diagnosed persons in one county gets referrals from all over the state. While issues of distance must be overcome, the ability to access/leverage resources is greater, and collectively the amount of expertise in the group is greater.

Hub and Spoke Model

The hub and spoke model concentrates services in a central location, but uses mobile sources to take services out to remote locations. For example, a health department in Montana has been able to provide services in remote areas with centralized headquarters from which all services originate. The "hub" towns all offer mainstream health and social services to homeless individuals and families who already live or travel to these areas. As the hubs, these towns send service providers out in vans to provide services to homeless individuals and families located in remote areas (the spokes) lacking basic services. Mobile outreach can be advantageous in certain communities because unlike permanent facilities, they tend not to arouse Not-In-My-Backyard (NIMBY) sentiments among local residents. In areas lacking services altogether or where services cannot be provided by mobile outreach teams, providers may work in reverse, transporting the homeless population to locations where services can be provided.

This type of mobile service approach has the advantage of minimizing burden on clients by addressing the transportation issues. However, this model presents the challenge of ensuring that clients receive appropriate follow up care.

BARRIERS TO SERVICE IN RURAL AREAS

Some barriers to providing needed services to homeless people living in rural areas were alluded to in the earlier discussion of service models. This section summarizes the most prevalent barriers and subsequent sections describe strategies for overcoming them.

- **Transportation:** Large distances must be traversed to reach services that are few and far between and there are usually limited or no public transportation options available.

- **Isolation:** Rural areas can be isolating due to their expansiveness and/or sparse populations. People who are homeless often feel cut off, geographically and, for recently arrived immigrant populations, linguistically and culturally, from the services that are available in the area.
- **Shortage of Services:** Few homeless-specific providers are available in most rural areas and mainstream services can be difficult to access, spread over large areas, and often not structured to accommodate the homeless population.

These problems overlap. For example, the shortage of services nearby may mean that homeless individuals have to travel to a neighboring community to get the services they need, which can be difficult due to a lack of public transportation options. Similarly, geographic and linguistic/cultural isolation of homeless individuals in a community may exacerbate the invisibility of the population.

STRATEGIES FOR OVERCOMING TRANSPORTATION BARRIERS

A lack of transportation in rural areas and the concentration of services and shelters in more densely populated centers can make it difficult for people who are homeless or near-homeless to access the services and housing assistance they need. For example, an individual recovering from alcohol addiction might need the support of regular attendance at group meetings to remain sober, keep a job, and continue paying rent. If the individual lives in an isolated area, the lack of an automobile or a public transportation alternative may make it difficult or impossible to get to such meetings regularly.

As described in the following paragraphs, continuums can overcome these transportation-related challenges in a variety of ways to efficiently bring homeless people to the services or the services to homeless people.

Transportation Programs

Continuums can provide their own transportation options to the homeless population where public transportation is limited. Below are some strategies that continuums have used to increase access to transportation.

- **Van or bus service:** Some continuums have started their own transportation programs using a car or bus to literally connect homeless individuals to services. Continuums can partner with local nonprofits or other mainstream agencies to obtain access to a vehicle if they do not have the resources to purchase a dedicated vehicle. The Veterans Administration's (VA) model is one that continuums can also consider replicating. The VA has volunteer van programs, often staffed by retired veterans, to bring patients to medical appointments. The van usually picks up multiple patients at one time. Patients have to wait until all appointments are complete before they are driven home, but the VA often works with the facilities to bundle appointments.
- **Used car program:** Continuum partners can provide donated used cars to homeless individuals. With vehicles of their own, homeless individuals can drive themselves to homeless services. At the same time, owning a car removes a significant barrier to obtaining and maintaining employment, and expands the geographic range within which the individual can seek affordable housing. Some used car programs go a step further: one car program in Georgia helps maintain the car and pay for car insurance for a six month period, while a program in Wisconsin provides a refurbished car and gas vouchers.
- **Legal services:** Homeless individuals sometimes need help resolving legal issues in order to have their driving license privileges restored. Continuums can work with nonprofit

partners and legal service agencies to offer these legal services on a pro-bono basis. In areas with law schools nearby, continuums may be able to arrange for a pro bono legal services program staffed by student volunteers.

- **Motel referrals:** If the transportation to service providers and shelter is not immediately available or if transportation schedules require that a homeless individual stay overnight en route to a service provider, a continuum can provide motel accommodations. Working directly with area motels, continuums have established motel networks with referrals from hospitals, social workers or other continuum partners to provide and pay for overnight stays for homeless individuals.
- **Bus referrals:** In rural communities that lack needed services but have bus service, continuums can provide a bus ticket to transport homeless individuals to the nearest town or city providing the needed services. Social service agencies throughout Nevada, for example, have a set-aside to cover transportation costs to get homeless persons to service providers in Reno and Las Vegas. Some transit authorities may even be willing to donate bus passes or vouchers.

Advance Communication With Service Providers

Given the significant time and costs involved with connecting homeless individuals and families to the services needed in areas with limited transportation options, advance coordination with service providers, whether by email or telephone, can be an invaluable resource. This is especially important for homeless clients who do not have access to phones or computers, and therefore cannot readily coordinate for themselves prior to traveling to a provider location. Examples of effective use of technology to reduce transportation burdens include:

- **Clarifying in advance.** Before an individual makes the effort to find transportation to a needed service, a local service provider can help by determining the following:
 - Whether the individual is eligible for the service and whether the service offered is appropriate for the individual
 - If the provider has what the client needs (e.g., an appointment is available, the food pantry has food in stock)
 - What the client must provide (e.g., paperwork, records, identification to bring with them) and whether the client needs help obtaining these documents (e.g., access to a phone or computer; support in navigating bureaucracy to obtain needed records)
- **Confirming appointments.** The local service provider can reconfirm appointment times and ensure that the staff member who must provide a needed service will be available. In the event that something has changed, the local service provider can convey this information to the client.
- **Providing records.** Often, the local provider will have collected information about the client, including background data, an assessment of needed services, and a record of what services have already been accessed. With the client's permission the local provider can share this information. This reduces the burden on the new provider and the client, and can enhance the quality of the service provided. The HMIS system can be an important element of this strategy.
- **Coordinating services.** Sometimes clients need more than one service at a distant location, and making multiple trips increases the transportation burden. Local providers can sometimes work with their counterparts to help ensure that appointments are coordinated to allow the individual to take care of two or more needs during a single trip.

This type of coordinated communication can be one element of a centralized service model, or simply a service offered to facilitate linkages between homeless clients and services located in different locations. In either case, helping with coordination can significantly decrease the transportation burden on homeless clients. While it does not decrease the transportation difficulty, it does ensure that once the transportation barrier is overcome, the client will receive the needed services as efficiently as possible.

Mobile Service Units

As mentioned in the hub and spike model description above, mobile service units put providers and their services on wheels. Instead of requiring clients to find transportation to get to a service, health care providers, mental health providers, social workers, and others can bring much-needed services to their clients. This approach is used primarily in remote areas where services are not available and public transportation is limited or nonexistent. Mobile service is also valuable for reaching populations, such as recently arrived immigrant populations, that may be reluctant to approach service providers.

Mobile services have drawbacks. In particular, it is difficult to provide continuity of care through this type of system. However, providing key services through a mobile unit can allow a provider to begin establishing a relationship with a homeless client. Once such a relationship is established, the provider may be in a position to work with the homeless client to develop a plan for obtaining needed services on a more regular basis.

Taking Services to the Clients

A program in Minnesota established mobile support teams to provide rental assistance and support services. The service teams created mobile offices taking their phones, fax machines, printers and laptop computers with them to their clients. This mobility allowed the teams to cover large distances and provided needed services at no cost or burden to their clients.¹¹

STRATEGIES FOR OVERCOMING CLIENT ISOLATION

Client isolation contributes to the difficulty of offering effective service in rural areas. Two types of isolation are of particular relevance:

- **Geographic Isolation.** Homeless individuals and families in rural areas tend to be geographically isolated, making it difficult for providers to assist those in need of services. Congregate gathering places such as soup kitchens are less common in rural areas, making it difficult to find those who need assistance and to conduct outreach to encourage them to take advantage of those services that are available.
- **Linguistic and cultural isolation among immigrant populations.** Immigrant populations are often culturally and linguistically isolated from the general populace making it more difficult to reach these populations and provide needed services. Illegal immigrant populations in fear of deportation are even more isolated and correspondingly more difficult to reach.

Approaches to Outreach

Some people actively seek help when they become homeless. However, others shy away from the service system. Consistent outreach is an important element to ensure that a homeless

¹¹ Phillips, Sue Watlov. (Fall 2007). "Working Towards a Common Goal: The Minnesota Coalition for the Homeless." *Rural Voices*. Volume 12, Number 3. Washington, DC: Housing Assistance Council.

person gets engaged in the assistance available through the CoC – and stays engaged until the housing situation has stabilized. It can take a long time and multiple contacts with a homeless person who is resistant to or fearful before a relationship of trust has been developed and he or she becomes receptive to accepting the available help.

One way of facilitating engagement is to focus not only on the homeless person's immediate needs as assessed by the provider, but also on the specific needs perceived by the homeless person.¹² Helping them meet the needs they identify for themselves can help make them more receptive to future assistance. Service providers have found that they have better success at providing such necessary services as employment, health care, and enrollment in Federal, state and local assistance programs when outreach efforts first establish a connection of trust with the homeless individual.

Not all rural continuums have the resources to devote someone to full time outreach. But when concerted outreach efforts are possible, the payoff can be substantial.

Material Provisions Can Start Relationships

A case manager in a mental health clinic in Arizona began working out of her car and traveling throughout the county to serve homeless individuals and families. She established relationships with these clients by supplying material provisions such as sleeping bags, camping gear, and food. She also established contacts with the local hospital and social services agency and when necessary was able to transport homeless clients to obtain needed services. Such transportation was only possible, however, after establishing a trusting relationship with the clients – a connection that was facilitated by the material provisions she supplied.¹³

Service providers in other rural areas have followed similar approaches, taking supplies to clients in rural areas as a first step toward building a relationship. These providers use the connections they establish over time to help ensure that their clients receive consistent care and will be in a position to obtain permanent housing.

Rural CoCs have tried a variety of specific approaches to ensure that isolated homeless individuals from immigrant communities receive the services they need:

- In areas where the homeless immigrant population has limited English proficiency, providing an interpreter or a bilingual service provider, breaks down linguistic and cultural barriers, increases the quality of care, and reduces the fear associated with accessing these services.
- Visibly involving public figures who are connected to the target culture can be an effective strategy in building a relationship with a sub-population.
- Partnering with agencies that provide services to these populations is another way of reaching out to members of immigrant groups.

In rural areas where 'everyone knows everyone else's business,' community members are likely to know who is homeless or on the verge of homelessness. Rural communities tend to view

¹² Post, Patricia A. (January 2002). Hard to Reach: Rural Homelessness and Health Care. National Health Care for the Homeless Council. <http://www.nhchc.org/Publications/RuralHomeless.pdf>

¹³ Robertson, Peggy and Diana T. Myers. (June 2005). "Digest of Model Programs for the Homeless: Rural Outreach and Engagement and Housing First." Diana T. Myers and Associates. http://www.pahousingchoices.org/Model_Programs.pdf

themselves as close knit, take pride in their communities, and have a history of 'taking care of their own'. For all these reasons, community members are likely to take an interest in helping a fellow community member who has lost his or her home. In order to take advantage of this unique strength in rural areas, rural continuums can focus on outreach to community organizations to ensure that they have information about who to contact if they learn of someone who is homeless or on the verge of homelessness.

Identifying People Who Require Services

Local and state government agencies and nonprofit organizations often can do a great deal to identify the homeless individuals in their communities. Hospital staff, social workers, and other mainstream service providers are particularly good resources for identifying homeless individuals. There are several other sources that are likely to know where specific homeless individuals and families are located:

- Local law enforcement officials
- Other homeless and formerly homeless people
- Religious leaders
- School staff

Establishing networks to share this information with service providers who can meet these individuals' needs saves the time and energy a continuum would otherwise spend identifying its homeless clients, thereby freeing up resources to devote to the actual service delivery.

For example, homeless individuals with a physical or mental disability might reach out to access necessary medical services. To take advantage of this relationship, a continuum can link housing and service providers with key medical service providers. Staff at the medical facilities can be trained to identify potentially homeless or precariously housed patients and learn who to contact within the continuum to obtain homeless and support services for such families or individuals.

Law enforcement officers are another example of an important resource for housing and service providers who work with homeless populations. In some instances, such officers may be able to transport an individual or family in crisis to a service provider. In other instances, the officer may be able to alert the provider that an individual in need of assistance is to be released from custody, allowing the provider time to arrange for the transportation needed to assist the individual.

Disseminating Information about Available Services

Lack of awareness about available services is a great barrier to effective service delivery. Making mainstream and homeless-specific providers fully aware of all of the services offered through the continuum will allow them to connect their homeless and near-homeless clients with all available supportive resources. Steps some rural continuums have taken to ensure that information is widely available include the following:

- Conducting outreach and establishing relationships with providers who come into direct contact with those who are homeless or at risk of becoming homeless to educate them about the services offered by the continuum
- Compiling up-to-date lists of service providers, the particular services they offer, and current contact information

- Posting such lists to a central website, distributing via a listserv, and/or providing them in hard copy
- Providing the lists not only to continuum members, but also to a wide range of other service providers in the community, including law enforcement, social service agencies, school staff, and religious communities
- Updating resource lists periodically (Distributing updated information serves as an opportunity to do additional outreach to remind those who come into contact with homeless clients about the available resources.)

If the continuum has a coordinator, that person is usually in a good position to ensure that these kinds of outreach activities concerning available services are conducted.

Community Partners

Local law enforcement officers and hospital social workers are important strategic partners in efforts to provide services to the rural homeless. These individuals are on the front line, and often encounter individuals in need, particularly those that are hardest to reach and reluctant to seek help. Continuum members can help by providing information about the emergency and transitional housing options available in their areas. Information about where homeless families and individuals can go to get basic services such as food, medical care, substance and alcohol abuse treatment, or even blankets if the individual is not willing or able to find shelter is also essential. This kind of coordination ensures that when front-line staff encounters someone who is homeless or near-homeless, they have the resources to connect that individual with the supportive services.

When a homeless individual does contact a provider it is important to seize the opportunity to educate him or her about all available services. The more homeless people know about the services available to them and how to access those services, the more able they will be to obtain help for themselves. Continuum partners should be encouraged to distribute this list whenever they serve a homeless client.

STRATEGIES FOR WORKING WITH MAINSTREAM PROVIDERS

Strengthening Relationships With Mainstream Providers

There are very few homeless-specific service providers in most rural areas. Due to a low concentration of homeless individuals and families in any given rural area, it usually is not cost effective for providers to serve the homeless population exclusively. Consequently, mainstream service providers in rural areas often provide multiple types of care to multiple populations, including the homeless population.

Whether formal members of the CoC or not, mainstream service providers often can benefit from information about the homeless services offered by others in the area as well as tips to keep in mind when serving a homeless client. Rural continuums can support their mainstream providers in serving homeless clients in a variety of ways, including the following:

- **Identify ways for mainstream providers to target services to the homeless and at-risk individuals most in need of the services.** For example, housing authorities can reach out to homeless families in an effort to ensure that those most in need obtain rental assistance.
- **Identify ways to match homeless and at-risk individuals with existing services for which they are eligible.** Continuums can work with mainstream providers to help identify clients that may be eligible for other services. For example, adding simple screening

questions to interview protocols can help staff at a food pantry or medical center determine whether a family has accessed all of the nutritional support programs for which it is eligible.

- Help mainstream providers analyze their programs to find ways to make them more accessible to homeless clients who may need the services. Homeless clients living in their cars, in encampments, or moving from place to place do not have an address and there may be other extenuating circumstances, such as mental illness, that complicate efforts to reach out to them. Successful rural continuums reach out to mainstream providers, helping them analyze and adapt their practices to more effectively serve the homeless population.

Mainstream Adaptation

At a mainstream job placement agency in the western United States, homeless clients were able to place calls inquiring about employment. However, for those with no telephone service, there was no way for potential employers to call them back. At the urging of CoC members, the agency adapted its practices and began offering call-back numbers through the agency's voice mail system as a special service for homeless clients without telephone service.

A strong relationship with the staff of mainstream service providers, clear information about how mainstream providers can best help those who are homeless or near-homeless, and regular communication are essential elements of establishing a mainstream service delivery system that meets the needs of the homeless population. There are a number of outreach methods rural continuums can consider to engage mainstream providers:

- Organizing training events, distributing pamphlets, and providing tools and tips via newsletters or listservs to give mainstream providers the information they need to more effectively address the needs of homeless clients
- Hosting luncheons, roundtable discussions, or other events that promote networking between mainstream and homeless-specific providers
- Scheduling face to face meetings with mainstream service providers to discuss how their particular services could be adapted or enhanced to better meet the needs of homeless clients
- Facilitating discussions about how mainstream providers can collaborate and coordinate more closely with each other and homeless-specific organizations to make the overall system more seamless for homeless clients
- Inviting mainstream service providers to join the CoC and formalizing their role in the planning and service delivery process
- Regularly communicating by phone and by email with individual mainstream providers about the status of individual homeless clients

Continuums can partner with mainstream providers in many areas. The upcoming sections discuss the following:

- Health, mental health and substance abuse services
- Job training and transitional employment services
- Domestic violence services
- Food and nutrition services
- Schools

Health, Mental Health, and Substance Abuse Services

Addressing myriad health issues including physical health, dental health, mental health, and addiction disorders is often difficult in rural areas because services to address these problems are few and far between, and rural populations tend to delay seeking health care, leading to more serious health problems, which can create additional strains for the health services delivery system. Rural areas usually do not have specialized services such as substance abuse treatment or mental health services and many times, the only available services are found at the local hospital's emergency room.

The majority of homeless individuals in rural areas are uninsured¹⁴. Often, homeless individuals and families have difficulty accessing those services for which they are eligible in part because they lack a stable address. Rural continuums can help homeless individuals and families obtain Medicaid by encouraging them to designate the provider as an authorized representative to receive Medicaid communication. This also helps ensure that the individual will maintain contact with the provider.

Enrollment in Medicaid is the first step, but it is not always a guarantee that health providers will be available to meet the medical needs of homeless clients. Due to lower Medicaid reimbursements in recent years, many specialists do not accept Medicaid coverage¹⁵. This may reduce an already-low number of available providers. Homeless individuals in rural areas may not be located near a participating health care center and when they are, there are often long waits to receive services and medications.

In addition, two-thirds of the rural homeless population report having a mental health or substance abuse problem¹⁶ and many require psychiatric referrals and psychotropic medications. These also can be hard to obtain even once they are enrolled in Medicaid. Psychiatrists, like other specialists, are in short supply and few will accept clients with only public health care coverage. Meanwhile, some primary care providers simply do not want to deal with patients who have emotional, mental health, or substance abuse problems.

Continuum partnership building is crucial when it comes to dealing with these health care accessibility issues in rural areas. Some health care practitioners may not understand the magnitude of need for medical services among the homeless population. Education and outreach can help convince these providers to offer services, and there are several way to accomplish this:

- Meet with health care providers to discuss the community's needs
- Conduct trainings about rural homelessness and health care related issues
- Establish relationships with individual providers and invite these providers to join the CoC

¹⁴ Burt, Martha R., Laudan Y. Aron, Toby Douglas, Jesse Valente, Edgar Lee, and Britta Iwen. (1999). *Homelessness: Programs and the People They Serve. Findings of the National Survey of Homeless Assistance Providers and Clients*. Washington, D.C.: Urban Institute. <http://www.huduser.org/publications/homeless/homelessness/contents.html>

¹⁵ Post, Patricia A. (January 2002). *Hard to Reach: Rural Homelessness and Health Care*. National Health Care for the Homeless Council. <http://www.nhchc.org/Publications/RuralHomeless.pdf>

¹⁶ Burt, Martha R., Laudan Y. Aron, Toby Douglas, Jesse Valente, Edgar Lee, and Britta Iwen. (1999). *Homelessness: Programs and the People They Serve. Findings of the National Survey of Homeless Assistance Providers and Clients*. Washington, D.C.: Urban Institute. <http://www.huduser.org/publications/homeless/homelessness/contents.html>

Once providers understand the needs of the homeless population, rural continuums can try to negotiate agreements to provide health care assistance and medications to homeless families and individuals at a reduced or free rate.

In addition, mainstream providers can sometimes include services to the homeless and those at risk of becoming homeless by remaining aware of the needs of this population as they structure their service delivery options. For example, visiting nurse programs that serve the elderly and those who are homebound for other reasons could be adapted to take services to homeless or near-homeless individuals as well. Mobile clinics can meet the needs of many who live in remote areas, but would be especially valuable for those who are homeless or at risk of becoming homeless and do not have the resources to travel to a central care location.

Adapting Mainstream Services to Homeless Clients' Needs

With a little creativity, rural continuums can help mainstream providers adapt their services in ways that allow them to serve homeless clients. For example:

- One homeless service program in Vermont partners with the mainstream Visiting Nurses Association to provide medical services to the clients it serves.
- An organization in Michigan offers intensive interventions to support individuals with serious and persistent mental illness. Although the group does not focus specifically on homeless individuals, staff is mobile and provides services at various locations such as restaurants, parks, and stores.

Partnering with schools to create school-based clinics or with immigrant groups to create health service centers for these groups are also possible approaches. Some states have even begun to develop telehealth and telemedicine initiatives that bring quality health care providers to persons living in rural areas remotely, by video or teleconferencing. This can be challenging in areas with outmoded telecommunications. But some rural continuums may be able to partner with local universities or hospitals to establish access to more up-to-date equipment.

Job Training and Transitional Employment/ Employment Assistance and Training

Unless a homeless person qualifies for permanent supportive housing based on disability, he or she has greater barriers to obtaining a permanent housing situation without steady, sustainable income. This makes job training and employment assistance a critical service in a CoC.

Homeless people, like the general population, may be unable to find jobs in a depressed area due to economic downturn. Moreover, rural areas often must confront the issue of seasonal employment and associated problems with homelessness. Even in places with stable economic conditions, the barriers faced by homeless individuals, as well frequent co-occurring conditions, make finding and keeping employment difficult. This means that special employment-related coordination is often needed in order to help rural homeless clients succeed.

Mainstream employment programs are typically the only employment resources available to homeless individuals in rural areas. However, mainstream agencies may not be well-versed in the special needs of the homeless population. Continuum partners can help by investing in training and technical assistance to educate mainstream employment service agencies about the special needs of the homeless population or by coordinating mainstream agency activities with other supportive services.

Coordinating Mainstream and Supportive Programs

The Saratoga County Rural Preservation Company (SCRPC) illustrates how active coordination of the kinds of services provided by a range of continuum providers can result in employment success for homeless clients.

SCRPC is an employment assistance program serving 5 rural counties in New York. The group offers services to veterans who are homeless or at risk of becoming homeless. The program strategically merges the resources of mainstream and supportive programs. State and county employment agencies play a key role, as do the state and county veteran's service agencies. In addition, however, local shelters and food banks also are brought in, as are links to medical services and the probation department (as appropriate). With intensive job-search training and follow-up support, SCRPC is able to ensure a high success rate and long-term results. Funding from the U.S. Department of Labor allows the SCRPC to offer the kind of intensive support these veterans need to stabilize their employment situations and emerge from homelessness.¹⁷

In addition to helping mainstream providers adapt to the needs of homeless clients, rural continuums can help prepare homeless clients to succeed in mainstream employment programs. More information about employment related strategies for homeless clients are discussed in detail in the guide entitled *Accessing Mainstream Employment and Income Support Programs*.¹⁸ Services that rural continuums have provided to homeless clients include the following:

- Providing equipment such as boots, hard hats, and tools, or work and interview clothing, to ensure that homeless persons have the fundamental tools needed to obtain employment
- Providing internet access so that homeless persons can search for available job opportunities
- Conducting resume writing workshops in preparation for job applications and interviews
- Providing call-back numbers for homeless persons so that potential employers have a point of contact for follow up
- Providing donated cars to homeless persons to remove a significant obstacle to obtaining and sustaining employment

Supporting Self-Sufficiency

Some continuums have encouraged religious organizations to shift some of their efforts away from the traditional service model of setting up homeless shelters and soup kitchens that meet homeless clients' daily needs. Instead, these faith-based groups have been asked to use some of their volunteer time and resources to develop and support car donation programs and other employment-related activities that will help homeless people provide for themselves over the longer term.

¹⁷ For more information, see http://www.nchv.org/hvrp_article.cfm?id=48

¹⁸ *Accessing Mainstream Employment and Income Support Programs*, (April 2008). HUD, "<http://www.hudhre.info>

Domestic Violence

In rural communities, the rate of domestic violence is higher than in urban areas.¹⁹ In addition, victims of domestic violence often are especially difficult to serve in rural areas for a variety of reasons. Many are isolated with their abusers and are especially vulnerable due to factors such as limited housing/emergency shelter options, long response times for emergency calls, lack of anonymity when seeking services, abuser social networking with local law enforcement, and inability to access resources due to lack of transportation.²⁰ In addition, the closely-connected nature of many rural communities may exacerbate the stigma associated with an abusive relationship. In extreme cases, victims may be forced to move to a distant community, losing jobs, family ties, and support systems in order to escape the abuse.

Rural continuums can help ensure that mainstream providers likely to encounter abuse victims such as law enforcement officers and hospital emergency room personnel are represented in the continuum, and that other providers build relationships with these partners to ensure that they receive the support and information needed to effectively serve abuse victims experiencing homelessness.

Partnering to Address Domestic Violence

Collaboration across agencies can enable a rural continuum to enhance services to victims of domestic violence. Such collaboration can produce tools for enhanced partnerships. For example, in a mountainous New Hampshire county, project activities funded by grants from the US Departments of Health and Human Services and Justice brought together service providers that assist victims of domestic violence from a range of perspectives and resulted in the following:

- Developing guides and protocols to establish standardized practices for serving victims of domestic abuse
- Training service providers to effectively implement those practices
- Facilitating multi-disciplinary discussions
- Offering cross-system training²¹

This project illustrates the kinds of progress that a continuum can realize when mainstream providers and providers that deal specifically with victims who are homeless come together with a shared purpose.

A key issue for providers who work with victims of domestic violence in rural areas is getting the word out to victims about how to get help. To address isolation among victims in rural areas, some providers have focused on creative forms of outreach. One provider put it like this: “She can’t take out a paper and jot down a number from a billboard while he’s driving the car.” This group has taken steps such as posting tear-off phone numbers inside ladies room bathroom stalls and printing the emergency phone number on the back of grocery receipts. These strategies can get the number into the victim’s hands in times and in ways that will not endanger the victim.

¹⁹ Lewis, S.H. (2003). *Unspoken Crimes: Sexual Assault in Rural America*. National Sexual Violence Resource Center: http://www.nsvrc.org/_cms/fileUpload/rural.pdf.

²⁰ National Coalition Against Domestic Violence. (2007). *Rural Victims of Violence*. <http://www.ncadv.org/files/ruralvictims.pdf>.

²¹ For more information visit The Greenbook Initiative at <http://www.thegreenbook.info/grafon.htm>

Food and Nutrition Services

Mainstream agencies that provide food and nutrition assistance often come into contact with clients who are homeless or at risk of homelessness, and are therefore in a good position to help direct those clients to other services provided by the continuum. Conversely, continuum members working with homeless or at-risk clients on other issues may be able to help ensure that the client takes advantage of all food and nutrition support programs available, freeing up resources to pay for other necessities.

Rural continuums report that developing and distributing a list of resources, including contact information, hours of operation, and basic eligibility information, is extremely helpful. In the food and nutrition context, a list of resources could include the following:

- Nutrition-related benefits (e.g., food stamps, WIC, free or reduced-price school meals)
- Cash benefits [e.g., TANF, Supplemental Security Income (SSI), Social Security Disability insurance (SSDI), as well as any state or county resources]
- Nonprofit or faith-based food programs (food pantries, hot meals)

A similar list of shelter and services available to homeless people who contact a food program is useful to those who operate food and nutrition programs.

Schools

In rural areas, where a large portion of the homeless population consists of families,²² schools offer an important mainstream avenue to identifying the needs of one of the most vulnerable homeless populations -- children. Public schools are located even in the most rural areas, and nearly all families with school-age children come into contact with this mainstream resource. The homeless liaison for the school district can be an important link between the continuum and homeless children and families within a given school district.

Within a school, many staffs are in positions to help identify children who may be homeless. However, homeless children often try to hide their housing situations, and school staff may not immediately notice warning signs. Attachment 3-A provides a sample list of 'red flags' that a continuum might advise teachers, counselors, nurses, and administrators to consider when assessing a child's housing status. None of these flags, in and of itself, is a sure sign of homelessness. But taken together they can help school staff identify homelessness as a possible factor in a given child's situation.

When school staff identifies a child who is homeless or precariously housed, they may sometimes wish to try to support the child and the family directly. For these situations, continuums can develop resource lists (hard copy or computerized) to help school staff identify appropriate resources. In other situations, school staff may instead link the family to the appropriate continuum providers to help them obtain needed resources such as additional food and nutrition services, shelter, clothing, medical and dental care, and the range of social services that families in crisis may require (e.g., employment assistance, emergency financial assistance, and transportation).²³

²² Vissing, Y.M. (1996). *Out of Sight, Out of Mind: Homeless Children in Small Town America*. Lexington, KY: University of Kentucky Press.

²³ For more information, see <http://www.ericdigests.org/1999-3/homeless.htm>

Attachment 3.1: Red Flags to Aid in Identification of Homeless Students

<ul style="list-style-type: none">• Attendance and enrollment in multiple schools• Chronic hunger or tiredness• Lack of motivation, direction, or desire• Little or no extracurricular participation• Expressed feelings of not belonging in school• Indicated boredom with school• Been retained a grade• Lack of acceptance by his/her peers• Poor social adjustment• Serious economic problems• Problems with sleeping during class• Failure to complete homework assignments• Untimely enrollment• Siblings that may be over protective of one another• Parents seem confused when asked about the last school or grade child was enrolled in• Tendency to exaggerate• Low income motel address on enrollment form	<ul style="list-style-type: none">• High absenteeism rate• Poor grades overall• Frequent health problems• More mobile than other students• Behaviors indicating social or emotional disturbances<ul style="list-style-type: none">➤ Low self-esteem➤ Disruptive• Lack of records<ul style="list-style-type: none">➤ Birth certificate➤ Immunization record➤ Pre-school physical➤ School records➤ Incomplete records• Frequent spells of day dreaming• Excessive tardiness• Unkempt appearance and frequent hunger• Insufficient or lack of adequate school clothing• Poor personal hygiene• Exhibited evidence of physical abuse• Poor or no contact between parent(s) and school• Shows reluctance to leave parent when left at school• Has no permanent address
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Source: <http://www.dpi.state.nd.us/title1/homeless/resources/identify.pdf>

CHAPTER 4: RESOURCES FOR PROVIDING PERMANENT, TRANSITIONAL, AND EMERGENCY HOUSING

INTRODUCTION

In rural areas, continuums face many challenges affecting their ability to assist homeless and at-risk clients, such as serving clients who are dispersed throughout the service area(s), a lack of service provider capacity, and a scarcity of financial resources. This chapter explores some of the approaches that rural Continuums of Care (CoCs) have taken in trying to serve clients in the face of these and other barriers. Specifically, the chapter looks at the following:

- Approaches to providing permanent housing in rural areas
- Approaches to providing transitional and emergency housing in rural areas
- Sources of funds in rural areas
- Finding and sustaining match resources

Each of these elements is important as continuums help ensure that their clients receive the supports they need to move to stable housing situations as quickly as possible.

PERMANENT AFFORDABLE HOUSING

Due to the limited availability of decent, affordable housing stock in many rural areas and the scarcity of funding sources to subsidize rents, housing opportunities for rural residents with very low incomes often are scarce. In some communities very little rental housing is available at all and in others, particularly those with "tourism value," prices are exorbitant. In rural areas where little new construction or substantial housing rehabilitation takes place, substandard housing can be a significant issue. While estimates vary, somewhere between 7 and 12 percent of the rental housing stock in rural areas is estimated to be substandard.²⁴ In addition, rural areas often face a shortage of housing development professionals, lenders to finance housing projects, and public water and sewer infrastructure needed to support new development.²⁵

The shortage of housing development professionals can be a particularly difficult issue for rural CoCs that want to develop or rehabilitate affordable housing units. It can be extremely challenging to transform service providers into housing developers because the specialized skills and knowledge that allow experienced affordable housing developers to succeed are not readily acquired in a short time. In many situations, it is more practical to create partnerships between housing developers and service partners. This may be done within the context of the consortium, or by partnering with groups that are outside of the continuum. In situations where no suitable housing developer partner is available and a service provider wants to embark on a development project, it is wise to carefully seek out someone with experience to provide guidance and technical assistance throughout the project.

²⁴ According to 2003 American Housing Survey, 1.5 million (6.6 percent) rural homes are substandard. According to the Housing Assistance Council (HAC), 12 percent of all rural homes are substandard.

²⁵ *A Primer for Beginning Rural Housing Developers* (1999). Washington, DC: Housing Assistance Council. <http://www.ruralhome.org/manager/uploads/Primer.pdf>.

The Need for More Affordable Housing

A mountain resort town in North Carolina has recently experienced the phenomenon of economic boom coupled with rising homelessness. Affluent second homeowners are purchasing housing stock in the town as vacation homes and living there only seasonally. This has resulted in a higher cost of living, higher taxes, and the second highest per capita rental costs in the entire state. Over the course of one year during this boom, the local homeless shelter saw a 28 percent increase in the number of homeless families.²⁶

In the face of these barriers, rural continuums use a variety of approaches to augment the supply of decent, safe and sanitary housing that is permanently available and affordable to low-income households. These strategies include enhancing the supply of affordable housing with new units; rehabilitating existing units; and providing rental assistance to help make existing units affordable to households with low and very low incomes.

New Construction of Affordable Housing

Ensuring an adequate supply of permanent affordable housing is essential to eliminating homelessness in rural areas. Construction of affordable housing can either serve homeless individuals and families directly, or can help indirectly by enhancing the overall supply of affordable housing in a community:

- **Targeting people who are homeless.** Sometimes continuums construct new affordable housing targeted especially for those who are homeless, either with or without supportive services attached. While this approach can be expensive, it ensures that the supply of affordable housing is augmented, provides affordable housing directly to the homeless persons in need, and helps ensure that appropriate services accompany the housing.
- **Augmenting the overall supply.** Other times, continuums can simply construct additional housing affordable to those with low-incomes. While the specific units constructed may not be used to house those who are homeless, augmenting the overall affordable housing stock can help ensure that affordable units will be available to those homeless families and individuals who need affordable places to live. Savvy rural continuums include augmenting the supply of low-income housing as part of a broader strategy for eliminating homelessness in their communities.

Permanent affordable housing is needed in many rural areas but it can be difficult to find a location with a water supply and a means of sewage disposal, as well as access to services, employment, and transportation. When deciding whether to commit to an affordable housing project, successful rural continuums consider factors such as these:

- **The local market.** In order to ensure that new permanent housing units will be filled, continuums must determine whether there is demand from a sufficient number of prospective tenants who both meet the income eligibility requirements and are able to pay the rent. This type of market study is required by many funders and lenders, and is a prudent first step before launching a permanent housing project. In areas where there is need for affordable housing but potential residents lack the means to pay, rent subsidies must be considered.

²⁶ Post, Patricia A. (January 2002). *Hard to Reach: Rural Homelessness and Health Care*. National Health Care for the Homeless Council. <http://www.nhchc.org/Publications/RuralHomeless.pdf>.

- **On-going rental subsidy source.** Many low-income tenants will require an on-going rental subsidy to stay in a permanent unit – even one with relatively low costs. To reach the lowest-income households, rural continuums need to seek out sources of funding to provide on-going rental subsidies.
- **Location.** Households emerging from homelessness often benefit from having access to employment centers and support services. This is often a challenge in rural areas, and continuums provide an important service when they work with developers to ensure that affordable housing opportunities are located near services and job centers. In particular, programs that provide housing for individuals with significant physical or mental impairments work best when located near supportive services unless special transportation arrangements are available.

Rehabilitation of Existing Housing (Homeowner or Rental)

Providing subsidies to help homeowners rehabilitate their housing units can help keep families in affordable housing. Without such subsidies, essential repairs may remain undone. In these situations, families may be forced to move to units they cannot afford in order to have decent housing. One technique commonly used by rural continuums is offering weatherization programs for low-income homeowners. These programs often can be flexible enough to allow low-income homeowners to repair storm windows, gutters, and roofs. HOME, CDBG and USDA program funds all offer other options for loan or grant funds to help rehabilitate rural housing units.

Rehabilitation programs can increase the available affordable rental housing stock for lower-income households. While units rehabilitated under various subsidized programs may not be affordable to someone who is homeless and jobless, adding to the affordable housing stock can take price pressure off of that portion of the housing market, and can help ensure that a larger supply of affordable units are available. Rehabilitated rental units offer a solid housing base for low and very low income households, especially when coupled with tenant-based rental assistance.

Rental Assistance (TBRA)

Tenant-Based Rental Assistance (TBRA) – a rental subsidy to help individual households afford rented housing units at market rates. Assistance may come in the form of rental assistance, utility subsidies, security deposits, and/or utility deposits.

TBRA can be an attractive choice in rural areas if there is available housing stock. It is flexible, can be used wherever the individual is located, and is a good alternative in areas where it is not feasible to build dedicated affordable housing.

Section 8 Housing Choice Vouchers

Like the HOME TBRA program, Section 8 Housing Choice Vouchers allow individuals and families to find their own rental housing on the private rental market. Low-income voucher holders are able to afford market-rate rents on a long-term basis through a subsidy paid by the program directly to the owner of the unit. Such vouchers are administered by Public Housing Agencies (PHAs). When available, they are an excellent way to help homeless people obtain stable housing in rural areas. However, Housing Choice Vouchers are not always an option.

PHAs that serve rural areas are relatively rare, meaning that in some rural areas Housing Choice Vouchers are not available. However, some statewide PHAs administer the Housing

Choice Voucher program for the parts of a state not covered by a local PHA.²⁷ Moreover, if there is no Section 8 program in a particular area, a rural continuum can ask the State PHA to consider implementing a “Balance of State” Section 8 program. A State PHA can serve the area covered by the rural continuum and can conduct outreach to applicants most in need, in order to prevent and alleviate homelessness.²⁸ Those most in need might include target populations such as families, veterans, victims of domestic violence, the physically disabled, individuals with mental illness or substance abuse problems, and individuals who have recently been discharged from public institutions. Targeting homeless people through its outreach may be especially useful for a PHA because those who are homeless typically have extremely low incomes, and at least 75 percent of the Housing Choice Voucher program funding must be used to assist people with incomes at or below 30 percent of the area median income.

Unfortunately, there are often long waiting lists for Section 8 housing vouchers. Moreover, rural areas typically have a limited number of rental units that are available at fair market rents, meet housing quality standards, and are owned by landlords willing to participate in the Section 8 program.

EMERGENCY AND TRANSITIONAL HOUSING

While the ultimate goal for a continuum is to ensure permanent, stable housing for all residents, emergency and transitional housing is an important part of the puzzle. Providing for these types of shelter is especially challenging in rural communities due to low concentrations of homeless clients.

The McKinney-Vento programs described in Chapter 1 are a valuable resource for ensuring that emergency and temporary housing needs are met, but they do have drawbacks for rural homeless providers:

- **Limited Prevention Funds.** Because of a scarcity of affordable housing and a lack of emergency and transitional housing, prevention is a key strategy for addressing homelessness in many rural areas. Homeless prevention, to a narrowly defined population, is an eligible activity under the ESG program. However, it may be difficult for rural areas to access ESG funding. The three competitively-funded McKinney-Vento programs (SHP, S+C and SRO) do not allow funding to be used for any kind of prevention services. Using these competitive funds to meet other needs, however, can allow other resources to be used for prevention programs.
- **Definition of Homeless.** The three competitively-funded McKinney-Vento programs (SHP, S+C and SRO) are reserved for those who meet HUD’s definition of homelessness, as described in the introduction to this guidebook. Due to the scarcity of emergency shelters and a strong tradition of taking care of one another in rural communities, many people without a home of their own live doubled up or “couch surf,” and therefore do not meet the current definition of “homeless” required for assistance under these programs. For this reason, a sizeable portion of the rural population without stable housing currently fails to qualify for assistance under the competitive McKinney-Vento programs.

²⁷ “Rural Housing Challenges: Meeting the Housing Needs of People with Disabilities in Rural Communities.” Opening Doors, September 2002, Issue 19. Published by Technical Assistance Collaborative, Inc. (TAC) and the Consortium for Citizens with Disabilities (CCD) Housing Task Force.

²⁸ For more information on the Section 8 Housing Voucher program and targeting populations refer to *Section 8 Made Simple: Using the Housing Choice Voucher Program to Assist People with Disabilities*.

- **Clients with Disabilities.** Two of the four McKinney-Vento programs – SHP (permanent housing component) and S+C – target permanent housing resources to homeless people with disabilities. However, of those who use homeless services in rural areas, only about 13 percent are individuals living with a disability.²⁹ Using these funds to the extent feasible can free up other resources to meet the needs of the non-disabled population.

Despite these limitations, McKinney-Vento programs can be used effectively in rural areas to help meet certain targeted needs. This is especially feasible when rural areas form CoCs and join forces, allowing them to submit more competitive applications.

Making Transitional Housing Work in a Rural Area

One rural continuum has successfully combined transitional housing for residents with a variety of special needs. They operate an 18-unit facility. Within that facility, 11 beds are funded with McKinney-Vento funds and serve as transitional housing for homeless single adults emerging from alcohol and drug in-patient treatment. This group has its own wing in the facility, which includes congregate living facilities, an office, and careful and intensive case management. In the same facility, separate units are set aside for those with chronic mental illness and/or physical disabilities who can live successfully in this type of setting. Together, the programs are of a large enough scale to manage effectively. With appropriate supervision, the result is “a clean and sober facility that is safe for families and children.”

SOURCES OF FUNDS FOR RURAL CONTINUUMS

Federal Sources

Federal funding for affordable housing in rural areas comes primarily from the U.S. Department of Housing and Urban Development (HUD) and the U.S. Department of Agriculture (USDA):

- **HUD funding** is administered primarily through government agencies at the state or local level. While much of HUD’s funding is targeted to urban centers, some funding can be used in rural areas.³⁰
- **USDA housing resources** are exclusively for use in rural areas and are administered by the office of Rural Development with locations in most states.³¹

With the exception of McKinney-Vento programs,³² HUD and USDA programs generally do not focus specifically on serving homeless clients. However, in many cases the programs can be used to assist those who are homeless or at risk of becoming homeless. The various programs also can be used to enhance the overall supply of affordable housing in an area, providing additional opportunities for households that are homeless or at risk of homelessness to access

²⁹ *The Annual Homeless Assessment Report to Congress.* (February 2007). U.S. Department of Housing and Urban Development Office of Community Planning and Development. <http://www.huduser.org/Publications/pdf/ahar.pdf>.

³⁰ For more information on HUD programs and funding see HUD’s website at www.hud.gov.

³¹ A list of Rural Development offices is available online at www.rurdev.usda.gov/recd_map.html. Links to RD programs are provided at http://www.rurdev.usda.gov/rhs/common/program_info.htm#top.

³² An overview of the McKinney-Vento programs is provided in Chapter 1. For more detailed information about these programs, see <http://www.hud.gov/offices/cpd/homeless/index.cfm>.

an affordable housing unit. Key programs for rural continuums to explore, other than McKinney-Vento programs, include the following:

- **HOME:** HOME funds are distributed each year to all states and participating jurisdictions (PJs). State HOME funds usually are administered by the State's Office of Community Development or a similar agency.³³ With States receiving 40 percent of the total available HOME funding each year, HOME funds are valuable resources for rural communities to build, buy, and/or rehabilitate affordable housing for rent or homeownership. Since HOME funds cannot be used to subsidize operation costs, HOME projects usually require an on-going subsidy in order to reduce costs far enough to serve the homeless and precariously-housed population.

HOME funds also can be used to provide tenant-based rental assistance to very low income households by providing a rent subsidy directly to the landlord, similar to the Section 8 voucher program. This can be an extremely effective use of funds for serving the homeless population in rural areas because it provides a direct subsidy for a rental unit in the community. HOME funds may be the only source of such subsidy since many rural areas do not have Section 8 programs.

- **Community Development Block Grant (CDBG) Program:** CDBG funds are allocated to every state and to entitlement communities primarily for activities that benefit persons with low or moderate-incomes. Rural areas do not qualify as entitlement communities but 30 percent of funding is allocated to states and must be spent in non-entitlement communities. Rural continuums can work to ensure that CDBG funds available to non-entitlement communities are targeted in ways that best meet the needs of the rural homeless and at-risk population. The CDBG program is flexible and can be used to fund various types of activities including, but not limited to, housing rehabilitation, new housing construction, land and building purchases, and public works, such as water and sewer lines.
- **Section 515 (USDA Rural Rental Housing Program):** This program provides low-interest loans to finance the purchase, construction, or rehabilitation of affordable multifamily housing or congregate housing for families, elders, and people with disabilities who have very low, low, or moderate incomes. While the program has been an important source of affordable housing in rural areas in the past, funding currently is limited. The subsidies provided under the Section 515 program often are not sufficient to make new units affordable for very low-income households and there is an ongoing shortage of Section 521 program funds to provide rental subsidy assistance to Section 515 tenants.³⁴ Without rent subsidy, Section 515 projects typically cannot meet the needs of extremely low-income and homeless households. They can, however, enhance the overall supply of affordable housing in an area.
- **Section 538 (USDA Rural Rental Housing Guaranteed Loan Program):** This program provides guaranteed loans (for up to 40 years) for housing developers to construct, acquire, and rehabilitate rural multifamily housing. Developers applying to a private financial institution for a loan to develop new housing are given lower interest rates in return for providing tenants with lower rents. This program provides housing for residents whose

³³ The HOME allocation for each state and locality can be found at www.hud.gov/offices/cpd/about/budget/budget02/index.cfm.

³⁴ "Rural Housing Challenges: Meeting the Housing Needs of People with Disabilities in Rural Communities." Opening Doors, September 2002, Issue 19. Published by Technical Assistance Collaborative, Inc. (TAC) and the Consortium for Citizens with Disabilities (CCD) Housing Task Force.

incomes are as much as 115 percent of the area median income. It therefore generally does not meet the needs of extremely low-income and homeless households. It can, however, enhance the overall supply of affordable housing in an area.

- **Section 811 Supportive Housing for Persons with Disabilities:** This HUD program provides funding to nonprofit organizations to construct, rehabilitate, or acquire supportive housing and is available to very low-income persons with a household member who has a disability. The program also provides on-going rental subsidies to the tenants to maintain affordability. While it can only meet the needs of households with disabilities, it is a viable resource for that portion of the rural population, including homeless persons with disabilities.
- **Section 8 Housing Choice Voucher program:** Income-eligible individuals and families are given a voucher and are able to find their own rental housing, including single-family homes, townhouses, and apartments. Housing choice vouchers are administered locally by Public Housing Agencies (PHAs). A housing subsidy is paid to the landlord directly by the PHA on behalf of the participating family. PHAs do not operate in all rural areas, but where they are present, CoCs can work to ensure that clients who are homeless or at risk of homelessness are able to apply for this type of assistance.
- **Project-Based Section 8 Voucher Program:** This program is a component of the Housing Choice Voucher Program. It works in essentially the same way except that the assistance is linked to a particular unit if the owner meets certain conditions (rehabilitating or constructing a certain number of units, or setting aside a certain number of existing units). Linking the assistance to particular units can be used as an incentive to encourage owners to provide more affordable housing in rural areas.
- **USDA Multi-Family Housing - Rental Assistance Program (Section 521)** Residents of multi-family housing complexes built under both the Rural Rental Housing Program (Section 515) and the Farm Labor Housing Program (Section 514) are eligible to apply for the Rental Assistance Program. While funding is limited and is available only to certain developments, rural continuums can help ensure that rental assistance is sought for these types of developments to enhance affordability for the lowest-income residents.

States, Counties, and Local Jurisdictions

Much of the funding available for addressing issues of homelessness through states, counties, and local jurisdictions come from Federal sources such as HOME and CDBG. Finding non-federal funds can be difficult in rural areas. Local government often has little funding to provide for homeless services or housing, and state and county resources may be spread thin. However, states, counties, and local governments that view homelessness as a priority can establish supplemental funds to serve homeless or at-risk families and/or to provide very low-income housing in rural areas. Community Action Agencies and multi-county PHAs are other possible resources for rural continuums. Continuum members can be active in encouraging such program administrators and helping craft funding systems that will work well for the area.

Examples of State Homeless Initiatives Funded With Non-Federal Sources

- In Utah, the state legislature has established a homeless trust fund, supplemented by individual contributions made on the state income tax form. Trust fund monies go to agencies that move people from homelessness to self-sufficiency. Eligible activities include the following: outreach, emergency and transitional housing, day centers, meals, and case management services.
- In Washington State, the Homeless Housing Assistance Act (HHAA) provides for surcharges on recording fees for real property documents. Funds collected are used to support low-income housing. Sixty percent of the revenue goes to counties and cities for very low-income housing projects. The other 40 percent goes to the Washington Housing Trust Account to support building operation and maintenance costs of extremely low-income housing projects.
- In Kentucky, the Affordable Housing Trust Fund (AHTF) has been variously funded through the Governor's Derby Breakfast, unclaimed lottery prize winnings, and fees on new mortgages, recorded deeds, and other instruments recorded by county clerks. The funds are aimed at helping very low-income households, including those on the verge of homelessness, meet their housing needs. They can be used as matching funds, or targeted to projects such as acquisition, rehabilitation and/or new construction of very low-income housing units.
- In Pennsylvania, the Homeless Assistance Program (HAP) is a \$25 million state-funded program that provides homeless prevention and services. Funds are provided as block grants to each county. Importantly for rural areas, the funding can be used to assist individuals who are living doubled up and for prevention efforts for those who are on the verge of homelessness. Approximately half of the total funding is used to provide rental assistance including rent, mortgage, utilities and security deposit assistance to prevent homelessness and most of the remaining funds are used for case management purposes for those who are homeless and those who are at risk of becoming homeless.³⁵
- In Florida, the Challenge Grant program authorized by the state legislature in 2001 provides funding to local CoCs to help them implement their strategic plans. Eligible grantees are the lead agencies for the continuums. In the first four years of the program, Florida has been able to expand geographic coverage of the assistance from 31 to 61 of the state's 67 counties. The program is funded by state general revenue funds and does not require any local match.³⁶

One advantage of state, county, and local funding sources is that they can be designed with few restrictions, allowing flexibility in meeting a wide range of needs. Rural providers report that having a source of funds that can be used flexibly to meet needs as they arise is extremely valuable. For example, one continuum in the Northwest has established relationships with front-line partners (hospitals, law enforcement officers) who encounter homeless people far from emergency housing services. These partners are empowered to arrange for temporary shelter in a motel. Flexible state funds are then used to pay for the motel bill when the client is transported to a location that offers emergency housing and other needed services.

Philanthropies

Rural continuums can benefit from researching the philanthropic community serving their geographic area. While foundations may be few and far between in rural areas, those that are present are often on the look-out for creative and meaningful ways to distribute their funds.

³⁵ *Pennsylvania's Rural Homeless Reality*. (November 2000). The Center for Rural Pennsylvania. <http://www.ruralpa.org/Homeless.pdf>.

³⁶ COSCDA Best Practice Brief: Florida's Challenge Grant. http://www.coscd.org/cafe/planning_Florida's%20Challenge%20Grant.doc

Some large, national foundations also have an interest in funding activities in rural areas. Continuums that are proactive about seeking out and soliciting funds from foundations often can obtain badly-needed funds for activities not supported by government sources.³⁷

An Unlikely Philanthropic Partner

The Rural Homeless Initiative of Southeast and Central Ohio (RHISCO) has obtained support from an unlikely-sounding source: the Osteopathic Heritage Foundations. The foundations have as their mission “to improve the health and quality of life in the community through education, research and service.” RHISCO has no specific connection to advancing osteopathic healthcare or osteopathic medical education and research. However, this homeless initiative does a great deal to enhance the health and quality of life of homeless and at-risk individuals in the community. That connection was sufficient to capture the attention – and financial support — of this foundation. For more information, see <http://www.endhomelessness.org/section/tools/rhisco>.

Writing grant proposals, ‘selling’ good ideas to foundations, and taking care of financial management and grant reporting requirements are specialized skills. Getting help from a continuum coordinator, experienced peer, or paid consultant may be helpful to rural continuum members that lack these types of expertise. Possible funding sources to help pay for these types of activities include state agencies (e.g., department of housing and community development); state and local funds (e.g., housing trust fund monies); and grants.

Colleges and Universities

Colleges and universities can be a source of support for rural continuums. Faculties often need to find research projects for their students. Students often need to find projects for classes or for community service credit. Internship programs sometimes can supply talented student labor. Continuum members can contract for services with university staff or students, but often they can arrange for volunteers.

Students and faculty can provide assistance in a variety of contexts. When approaching colleges and universities about possibilities for collaboration, continuums can consider a variety of activities:

- Helping with PIT counts
- Analyzing data
- Researching funding options
- Writing grant proposals
- Developing and implementing information technology solutions for data and record-keeping
- Organizing meetings
- Sending meeting reminders and taking minutes
- Following up on tasks assigned at meetings

³⁷ See the Foundation Center at <http://foundationcenter.org/> for a directory of foundations and an online search tool to find specific grant resources.

Nonprofit Organizations, Civic Groups, Businesses, and Religious Institutions

In rural areas, a great deal of community energy is invested in nonprofit organizations, civic groups, businesses, and religious institutions. Rural continuums have found that a key to success in working with these groups on the issue of homelessness is finding ways to harmonize the interests and resources of the local groups with the needs of the homeless community and the continuum providers. Sometimes these groups will be members of the continuum. Other times, active outreach and careful coordination can result in productive collaborations.

One important concept highlighted by successful rural continuums is the need to focus such efforts in ways that go beyond emergency help and work toward alleviating the root causes of homelessness. Volunteer-based home repair programs, programs to supply needed tools, paint and repair equipment, efforts to supply and maintain vehicles that allow people to get to and from employment, supportive job-readiness programs, and so on can all fit well into a rural culture of helping neighbors succeed.

For example:

- A nonprofit in the Pacific Northwest collaborates with the American Legion and area churches to provide winter seasonal shelter and food services for their rural homeless community. The churches use their kitchens to make hot meals, which they deliver to the American Legion where the homeless individuals receive temporary shelter. The churches also provide volunteer monitors to work overnight at the American Legion. Complementing the American Legion's mission, approximately 30 percent of the homeless served are veterans.
- In Washington State, a local newspaper conducts an annual fund drive by advertising in its own paper. This local business contributes the proceeds, amounting to over \$100,000 each year, to a nonprofit organization that serves the homeless. The nonprofit puts 100 percent of the proceeds to meeting the direct needs of the homeless, with no administrative fee charged.
- Habitat for Humanity³⁸ involves needy families in constructing or rehabilitating their own homes, with the help of volunteer labor and donated materials. This widespread program can make effective use of the rural tradition of helping neighbors in need.

FINDING AND SUSTAINING MATCH

Many funding sources require recipients to contribute matching funds. Each program has its own rules concerning eligible sources of match. Some require nonfederal money, while others will accept matches from federal funds or from in-kind contributions. Still others have requirements that vary depending on the grantee. For example, the Emergency Shelter Grants program, the Single Room Occupancy program, and the CDBG program do not require matching funds; the Supportive Housing Program requires a cash match that may be generated from local continuum partners or from other federal, state, or local grants; the Shelter Plus Care program requires that its rental assistance grants be matched with an equal value of supportive services for S+C clients; and the HOME program requires participating jurisdictions to match 25 percent of annual direct expenditures on HOME projects from contributions for affordable housing that can come from a wide variety of sources.

³⁸ For more information about Habitat for Humanity, visit <http://www.habitat.org/>.

Match requirements for specific programs are not unique to rural areas, and therefore are not discussed in detail here. Instead, this section discusses techniques that rural areas have used to fulfill match requirements for any of a range of programs that require match.

In a rural area with few obvious options for bringing in additional resources, the prospect of obtaining any type of match—whether cash or in-kind—may seem daunting. However, careful thought can help a rural continuum identify appropriate match. Rural continuums offer several tips for thinking creatively about match options:

- Mainstream agencies that provide services to homeless people are one possible source of match if those mainstream agencies augment their work with homeless people as a result of the program.
- In-kind contributions often are considered match and may include a variety of tangible items and activities such as staff services, donated items, and volunteer time. In-kind contributions are part of the local history and culture in many rural areas, and may be a viable match option.
- Presenting a specific need is often a good approach when soliciting involvement from charitable contributors. Continuums can approach foundations, nonprofit organizations, civic groups, businesses, and religious institutions with specific match needs as part of an overall outreach strategy to involve the broader community in addressing the issue of homelessness.

Rural continuums can take the following steps to maximize match potential:

- Take a careful inventory of what continuum partners are already doing that might be considered match. Remember to include in the inventory both cash and in-kind contributions from the following:
 - Federal sources
 - Other government sources
 - Private and nonprofit sources
- Analyze contributions that might be considered match, but that are provided by agencies that are not part of the continuum. (This may be a good flag that the group should be encouraged to join the continuum!).
- Brainstorm other possible ways that the community and service providers can get involved to provide match where it is needed.
- Develop a plan and work to build relationships in the community and among service providers to solicit involvement from possible match sources.

CHAPTER 5: DATA COLLECTION: THE POINT IN TIME COUNT

INTRODUCTION

To receive Continuum of Care (CoC) funding, continuums must conduct counts of the homeless population in order to help demonstrate and quantify need. A Point-in-Time (PIT) count must be completed at least once every other year. Conducting the PIT count can be particularly challenging in rural areas. This chapter discusses strategies for completing the count and collecting other data to document need in rural areas.

A PIT count is a one-day, statistically reliable, unduplicated count of sheltered and unsheltered persons who are homeless in a defined geographic area. Many rural areas have never conducted a homeless PIT count and therefore the full extent of rural homelessness in those areas has never been quantified. The PIT count is difficult to conduct in rural areas because few staff members are usually qualified and trained to complete it, homeless individuals are dispersed over wide geographic areas, and because of a scarcity of emergency shelters those who are often homeless live in areas that are difficult to find and/or access.

Despite these challenges, the PIT count is a crucial analytical tool for assessing need, allocating resources effectively, planning long term policy initiatives, and quantifying progress toward eliminating rural homelessness over time. The PIT count also is important because it quantifies a ‘hidden’ problem that many believe only exists in urban areas. Nothing can more effectively dispel the myth that homelessness is a non-issue in rural areas than hard data to the contrary. The PIT count is an opportunity to increase awareness and collective knowledge about the problem of rural homelessness and can help make the case for increased state and local funding for rural homeless initiatives.

To conduct the most effective PIT count possible, rural continuums may consider the following strategies:

- **Actively soliciting a wide range of partners to assist with data collection.** Rural continuums can recruit volunteers from local colleges and universities, mainstream service providers, homeless shelters, domestic violence shelters, food distribution centers, and job and family service agencies to help conduct the a count.
- **Keeping the count methodology as simple as possible.** This will increase the number of individuals qualified to assist with data collection and help ensure a higher response rate. The count methodology should be simple but also must effectively separate the literal homeless from the at-risk population and identify those that may have been previously counted.
- **Conducting workshops on completing the count for area volunteers and agencies.** Training participating volunteers and service providers increases consistency in the administration of the survey during the count and builds capacity over time. It is helpful to provide a printed copy of instructions for all interviewers to serve as a reference guide when they are working with their clients or out in the field searching for homeless individuals and families.
- **Offering a toll-free phone line dedicated to the count effort.** The phone line can provide technical assistance for volunteers and agencies participating to help complete the count

(particularly when conducting workshops is not feasible) and allow community members to provide tips on the whereabouts of homeless individuals in their area.

- **Talking to homeless and recently homeless individuals in the area.** Homeless and recently homeless individuals who are willing to cooperate can provide information about the location of other homeless individuals and may even be willing to accompany partners to help conduct the count.

Exchanging Goods for Information

Mississippi has found that they have been more successful in gaining cooperation for their counts when they have brought goodie bags filled with personal care items, food, and blankets to the homeless population they are counting. Homeless individuals often are more willing to talk and provide information, even the location of other homeless individuals, when they are offered something in exchange.

Rural continuums also may wish to consider designing a survey that is compatible with the Homeless Management Information System (HMIS). The continuum can then track aggregate data about the rural homeless and at-risk population as a whole as well as addressing client-level data and case management needs. This can be an effective tool for measuring performance and progress over time as well as for managing caseloads.³⁹

POINT-IN-TIME COUNT METHODOLOGIES⁴⁰

A one night blitz is usually not the most effective way to count the homeless population in rural areas because of the challenges associated with finding the rural homeless population, the large area that needs to be covered in many geographic regions, and the limited resources available to complete the count. PIT count methodologies that rural areas have used effectively to reach their 'hidden' population and overcome resource constraints are described below.

Conducting a Public Places PIT Count Over a Designated Period of Time

Regardless of the number of partners helping with the count collection, it is not usually feasible for a rural continuum to cover its entire geographic area in a single day. In rural areas where there are few homeless shelters and the rural homeless population is often located in remote areas, it is usually necessary to collect count data over a period of time. Collecting count data over multiple days ensures that there are enough resources to cover known places of congregation of homeless individuals, as well as seeking out individuals and families not located in these areas of concentration. For this approach to be successful in a rural context, the continuum needs to have a good sense of the locations where homeless people are known to congregate. Sources who are likely to be able to provide information about where the homeless population congregates or know where specific homeless individuals and families are located include local law enforcement officials, other homeless and formerly homeless people, religious leaders, school staff, and government and nonprofit service providers.

While extending the data collection period increases the chances of capturing data about more homeless individuals living in the rural areas covered by the continuum, it also increases the

³⁹ For more information on HMIS see the HMIS Implementation Guide <http://www.hud.gov/offices/cpd/homeless/hmis/implementation/implementation.cfm>

⁴⁰ For more information on Point-In-Time Count methodologies in rural areas refer to "A Guide to Counting Unsheltered Homeless People." (January 2008). Office of Community Planning and Development, HUD. http://hudhre.info/documents/counting_unsheltered.pdf

chances of duplicative counts. Consistent data collection can be achieved by asking all respondents where they were sleeping on a given night, and conducting the survey over a one week or two week period. To avoid duplication, the count survey should include an enumerating question that asks if the respondent has been asked these questions at any point in time since the count began.

Conducting a Service-Based PIT Count

A service-based approach asks all service providers likely to provide services to the homeless population in a given area to conduct interviews of people using the service over a specified period of time. The key to success with this approach is enlisting the full support of the right partners. Therefore, this effort should include not only providers that work specifically with homeless populations but also mainstream agencies including hospitals, government service providers (federal, state and local), nonprofit service providers, and religious organizations that the homeless and at-risk populations are likely to seek out.

In rural areas where homelessness is often ‘hidden,’ using the service-based approach eliminates the need to find the homeless population and can be a good alternative in areas where dedicated resources to reach out to the homeless population are not available. Since the service-based approach also involves completing the count over an extended period of time, the survey should include an enumerating question in order to avoid duplicative counts.

Combining a Service-Based PIT Count and Public Places Count

Rural continuums also can consider combining the service-based approach with a public places count. In areas with few service providers and a tendency among homeless individuals to fend for themselves rather than seek out help, some homeless individuals may never access available services so the service-based approach alone can be inadequate. The public places count can be targeted to areas where homeless people are known to congregate, but with so much remote area to cover the chances of missing a portion of the homeless population are high. By combining these two approaches, rural continuums can overcome the chief disadvantages of each.

The chances of duplicative counts are even higher when combining both approaches. When combining methods it is imperative to design data collection methods that avoid double counting respondents who may be interviewed twice. Including an enumerating question in order to avoid duplicative counts is a typical strategy for avoiding duplication.

Biannual Counts

HUD requires that continuums conduct their PIT count at some point during the last ten calendar days of January. Some rural areas find it worth devoting resources to completing two counts during the course of the year – one in the summer and one in the winter. This is particularly helpful in areas that experience significant changes in weather between seasons (e.g., extremes of hot in the Southern states and cold in the Northern states) and/or spikes in migratory workers to the area at different times of year.

Conducting Multiple Counts

In the rural areas outside of Las Vegas, the rural homeless population spikes during the summer months due an influx of migratory workers. Due to these migratory population patterns, Nevada conducts two PIT counts every year – one in January and one in the summer. Knowing what fluctuations to expect throughout the year allows the continuum to better plan for local cyclical needs.

ANNOUNCING THE COUNT

To ensure a successful count, rural continuums need to spread the word far in advance of the actual count. Announcing the count in advance helps locate homeless people through self-reporting and service provider reporting and allows time to recruit and train volunteers and partners to help conduct the count. Rural areas have used the following methods to get the word out:

- **Local media.** Newspapers and radio stations are effective tools to get the word out about an upcoming count effort. Continuums can work with newspaper and radio outlets to run an article or public service announcement about an upcoming count and accompany it with any information about how to participate and who to call to self-report. It may be more effective to tap local newspapers and radio outlets rather than major news stations (which are generally located in larger communities). Any outreach plan should carefully consider the local area when deciding which media outlets to use.
- **Mainstream providers.** Mainstream providers are important resources for providing homeless assistance in rural areas generally, and count efforts are no exception. Engaging mainstream providers to capture better count data and including them in count efforts from the start is important. Rural continuums can contact these agencies well in advance of the count, requesting that the agency (1) keep track of how to locate those who are homeless in the weeks prior to the PIT count if conducting a public places count, or (2) requesting that they administer a survey to their clients if using a service-based approach. Once these relationships with mainstream providers have been established, continuums can easily partner with them in future years. As an added bonus, collaboration on the PIT count also can serve as the basis for enhancing on-going relationships with participating mainstream providers.
- **Canvassing and mailing efforts.** Canvassing at local churches and service organizations and targeted mailing efforts can be an effective way to recruit volunteers to help conduct a public places count.
- **Local law enforcement.** Law enforcement officials in rural areas often are the first to come into contact with homeless individuals and families and are usually intimately familiar with what goes on in their local jurisdiction. Rural continuums should contact local law enforcement for tips on where to locate the homeless population and to coordinate availability to escort participating partners during a count to areas that might be dangerous or remote.

Rural Outreach for PIT Counts

Alabama begins publicizing their count four weeks in advance in order to help find the difficult-to-reach rural homeless population in their state. They request that anyone who is homeless call in, and then send out a team to interview the person or household. Other community members that may know of the location of homeless individuals also are asked to call in.

USING THE PIT COUNT FOR OTHER PURPOSES

During a PIT count, continuum members and volunteers are in contact with a larger percentage of the homeless population than at any point during the rest of the year. This is an opportunity that rural continuums, faced with limited resources and capacity, can leverage to (1) educate homeless individuals and families about the services available to them and (2) collect more

detailed information about the homeless and at-risk population in the area and the services that they have utilized in the past or may need in the future.

The extent to which a rural continuum may want to engage in such an awareness campaign and data collection effort will depend somewhat on the capacity of the volunteers and service providers completing the count. A continuum will have to gauge to what extent they can collect and provide additional information while still executing a successful count. Continuums may want to collect further data so they can gauge progress over time or they might want to collect data to assess the success of a recently-implemented program or outreach strategy.

Collecting Information about Homeless Services Accessed

For those who are currently homeless, rural continuums should consider collecting information about the services the homeless individual has accessed in the past, their disability history, and how long they have been homeless. Making this information available to all members of the continuum with HMIS access can help ensure that scarce resources are used efficiently, and that homeless clients are put in touch with all available resources.

Collecting Information about At-Risk Populations

The count also offers an opportunity to collect information about the at-risk population in the area. This is particularly important in rural areas where many of those without homes of their own nonetheless fail to meet the HUD definition of “homeless.”

When individuals who are identified for the PIT count do not meet the definition of “homeless,” rural continuums can collect information regarding people who are any of the following:

- Living doubled-up or ‘couch-surfing’
- At risk of losing their housing and the reasons for that risk
- Eligible for services that could help prevent homelessness
- Aware of the services available to them through the continuum

This information can be used to help prevent homelessness, for case management purposes, and for planning to help the continuum develop programs and services to more effectively meet the needs of the at-risk population.

Distributing Information about Available Services

During the PIT count, continuums mobilize substantial resources to find and contact people who are homeless or at risk of homelessness. Each of those contacts represents an opportunity to distribute information about available services to those in need. If the continuum has developed outreach materials listing of available resources, that information can be shared with individuals who are contacted for a PIT count.

CHAPTER 6: MAXIMIZING THE EFFECTIVENESS OF RURAL CONTINUUMS OF CARE

INTRODUCTION

This chapter examines three issues that are of particular relevance for rural groups involved in (or considering becoming involved in) a CoC:

- **Partnership Building.** Establishing effective rural CoCs requires building partnerships that work in rural areas, including recruiting and sustaining relationships with partner agencies. This chapter discusses strategies for partnership building and offers ideas about the kinds of partners to consider including in a CoC.
- **Communication and Organization.** Communication and organization can be challenging and time consuming in any organization. For rural continuums the challenges are magnified by distances, technologies, and a limited number of staff pulled in multiple directions. This chapter provides suggestions for effective communication in a rural continuum environment, and reviews ideas for ensuring that the continuum is organized effectively.
- **Capacity Building.** Having sufficient capacity to provide the services needed to address homelessness in rural areas also can be challenging. This chapter highlights best practices and capacity building success strategies.

Several barriers to service were discussed in Chapter 3 in the context of challenges serving homeless populations in rural areas. Some of those same challenges also affect organizations that provide services to homeless rural populations:

- **Transportation:** Large distances make continuum members' work more difficult. The time and expense involved in getting to clients in need of service or meeting with other providers is magnified when travel difficulty is greater.
- **Shortage of Services:** Services required by homeless populations generally are sparse in rural areas, and provider capacity typically is stretched. Providers often must serve as "jacks-of-all-trades," making it difficult to provide the quantity and quality of services needed.
- **Isolation:** Because of the shortage of services and the limited number of providers, people who provide services to homeless clients can themselves feel very isolated and without support.

These barriers can influence a continuum's effectiveness in serving its clients in many ways, and the chapter's recommendations include actions that address them.

BUILDING AND SUSTAINING PARTNERSHIPS

Developing partnerships helps build and sustain a network of relationships among the myriad players that contribute to solving the problem of homelessness. The partnerships developed through a CoC can help reduce providers' sense of isolation in the following ways:

- Developing strong networks among providers
- Enhancing service provider effectiveness through resource sharing, economies of scale, policy influence, and improved operational efficiency
- Strengthening both the capacity of individual organizations and the sector as a whole

One of the primary goals for any CoC is to have maximum participation in the planning process by all stakeholders. The level of participation will vary from stakeholder to stakeholder depending on the nature of the continuum and the relationship of the stakeholder to the continuum. Continuums can, however, do a great deal to build and sustain partnerships. This section discusses a variety of techniques for partnership building:

- Identifying a range of possible partners
- Conducting active outreach
- Keeping partners involved between meetings
- Publicizing the continuum's successes
- Making continuum participation fun and worthwhile

Identify a Range of Possible Partners

In most rural areas, few organizations are dedicated exclusively to serving homeless clients. Although the number of homeless services may seem small, successful rural continuums emphasize the importance of bringing a wide range of providers into the CoC. A surprising number of organizations offer services that are important to serving those who are homeless or at risk of becoming homeless. Some important community, health, and social service groups to consider working with at the state and local levels are listed in Exhibit 6-1. Not all of these types of organizations would have equal interest in or willingness to be involved in a CoC. However, being aware of the broad array of partnering possibilities can help strengthen rural continuums.

Exhibit 6-1: Candidates for Inclusion in a Rural Continuum

Political Leadership	Affordable Housing Developers
<ul style="list-style-type: none"> • Governor's Office • County Executives • Local City/Town Mayors • State, county, and local government representatives 	<ul style="list-style-type: none"> • Nonprofit housing providers • Builders/developers interested in affordable housing • Development corporations
Government Housing Agencies	Business and Funding Community
<ul style="list-style-type: none"> • Department of Housing and Community Development • USDA Rural Development • Public housing authorities • State housing finance agencies • State, county, and local, CDBG, HOME and low income housing tax credit agencies • State, county and local development and planning departments 	<ul style="list-style-type: none"> • Chambers of commerce/business owners • Lenders/Banks • Foundations • United Way
Government Service Agencies	Community Service Organizations
<ul style="list-style-type: none"> • Mental Health • Substance Abuse • Health/Medical Assistance • Income support (TANF, Social Security) • Employment • Corrections/Justice • Aging/Youth Services • Veteran's Services • Community Action Agencies 	<ul style="list-style-type: none"> • Local law enforcement • Hospitals • Schools/guidance counselors
	Nonprofit and Advocacy Groups
	<ul style="list-style-type: none"> • Homeless Shelters • Transitional housing programs • Supportive housing programs • Civic organizations • Religious organizations • Minority service programs • Disability organizations • Domestic violence programs • Legal services • Other nonprofit service providers

Conduct Active Outreach

Once potential partner organizations are identified, the next step is to reach out to engage them in the continuum. People prefer to be asked before joining an activity. Once asked, they are even more likely to join if they are encouraged to do so for a particular purpose and they see that their participation will offer benefits for themselves and their organizations. Developing an outreach and recruitment plan can help rural continuums ensure that they have wide and diverse membership. Strategies for successful recruitment may include the following:

- Identify and initiate contacts with key groups. When possible, identify the specific individuals within those organizations that should be approached and encouraged to participate.
- Explicitly invite those groups and individuals to participate in the CoC. Spell out what the continuum intends to accomplish, how the target organization fits in, and what the commitment to participate in the continuum will entail.
- Structure the continuum to allow different levels of participation and to let participants focus on the aspects of the continuum that most closely relate to their concerns.
- Be ready to explain how the CoC functions in a rural environment and why collaboration is important for achieving important goals for addressing homelessness in the area.
- Clearly articulate answers to potential partners' questions in advance. Know how you will 'sell' the continuum by describing the advantages the group's participation will bring to the target organization, as well as to the continuum, and the people served by the continuum.
- Pursue activities that lead to partnerships with organizations that are not currently part of the continuum. Building partnerships through shared activities is one good way to build relationships that may, eventually, convince the individual or organization that participation in the continuum is worthwhile. Even if they do not ultimately join the continuum formally, the established relationship can be beneficial to the service system as a whole.

Once a new partner agrees to join the continuum, it can be useful to formalize the relationship by developing a memorandum of understanding. This helps to codify the relationship, makes mutual expectations official, and generally leads to more successful long term partnerships. A sample memorandum of understanding is provided in Attachment 6.1. While the specifics will need to be adjusted to suit the particular situation in any given continuum, the basic outline offers a starting point for framing an effective agreement.

Keep Partners Involved Between Meetings

Continuum vitality is enhanced when partners stay connected to each other between meetings. This connection can be fostered in a variety of ways:

- Maintaining a directory of continuum members, as well as updating and distributing it regularly
- Establishing working groups to move the continuum forward between meetings by tackling joint project
- Encouraging partners with similar interests to join forces, either by sharing information/best practices or working on strategies to collaborate and support each other's efforts
- Sharing information regularly to maintain a focus on homelessness in general and the continuum in particular

Publicize the Continuum's Achievements

Partner organizations are more likely to want to remain associated with a continuum that is perceived as successful, while positive publicity can help make participation in the continuum attractive to new organizations.

Continuums can pursue a variety of techniques to get the word out about their achievements, including the following:

- Send tailored messages to individuals and organizations that the Continuum wishes to recruit, sharing the statistics and success stories that will be of interest to the target

audience. Email is the most economical method of sending messages, but postal mail is sometimes a good option.

- Disseminate written documents produced by the continuum or any of its members (e.g., strategic plans, mission statements, resource lists, tools to enhance service). Even if the readers do not join the continuum, they may adopt some of the ideas or use the tools to enhance services in the area.
- Take advantage of opportunities to report on continuum activities in public forums. In rural areas it may be possible to get access to forums such as town meetings and civic club activities.
- Cultivate relationships with local news media to ensure that continuum successes receive maximum media coverage. Recognizing individual contributions can be a good "hook" for a story, and seeing friends and acquaintances in the news can encourage others to participate.

Make It Both Fun and Worthwhile

In rural areas where service providers often are stretched and where continuum participants often must make a substantial effort to attend meetings at distant locations, it is essential to make the sessions rewarding in order to promote continued participation:

- To make sessions fun, arrange time for socialization and offer opportunities for networking. This strengthens relationships, and is particularly important for providers who see each other rarely because of geographic separation.
- To make sessions worthwhile in a substantive sense, provide training on topics of interest to the group and share tools that others have found useful in a rural environment.
- To make the time spent feel effective, use meeting time efficiently to accomplish the group's goals. Ensuring that the continuum is well organized and has excellent communication, as discussed in the next section, can do a great deal to minimize frustrations and make participation in a continuum feel worthwhile to its members.

One-on-One Relationship Building

Not all partnership efforts involve the full continuum as a group. One rural continuum member described how important it is to go out of one's way to get to know others on a personal basis. She makes an effort to establish connections with other rural providers by meeting over coffee and chatting on the phone. Despite the time and distance involved, she finds the relationship-building to be worth the effort. Overall, she noted that in small communities where everyone tends to know one another, there is a deep sense of all being engaged in the process. Fostering personal connections supports that engagement and enhances collaboration.

COMMUNICATION AND ORGANIZATION

A rigorous focus on communication and organization is critical to the success of rural continuums, in which physical distance between partners and a limited number of providers challenge effective operations. Strong continuum communication and organization achieves the following:

- Reduces the sense of isolation often felt by rural service providers

- Involves partners at all levels and across all areas so they feel a part of the decision-making process and have a stake in the outcomes
- Provides opportunities for peer-to-peer technical assistance, information sharing, and dissemination of resources and best practices, which is particularly helpful for rural providers who often are asked to wear many hats as they serve homeless clients
- Helps develop collaborative relationships that lead to efficient, quality care to clients

Some rural continuums have found it helpful to assign responsibility for communication with continuum members to a single point of contact. This helps ensure that communication is coordinated, responsive, aligns with the mission and the core values of the continuum, and is disseminated to everyone appropriately. When a designated coordinator is available, this person is the logical one to coordinate information dissemination and communication.

Face-to-Face Contact

Information technology allows continuums to communicate remotely but rural continuums still find it extremely important to convene face-to-face meetings. These meetings may take the form of round table discussions, conferences, or training sessions. Most rural continuums try to limit the number of in-person meetings to minimize the travel burden. Given the infrequency of in-person meetings, there are some key factors to consider when planning a face-to-face event:

- Plan well in advance to allow participants to block off time for the meeting, as well as required travel time.
- Consider the calendar, being careful to plan around holidays, special events, and seasons with extreme weather.
- For those who are not able to attend the meeting in person due to scheduling conflicts or travel budget issues, consider offering a call-in option.

When logistical or budgetary barriers prevent some continuum members from attending a meeting, regional representatives can be sent to act on behalf of the region's interests and report back to their stakeholders following the meeting. Alabama uses this model, conserving precious travel resources in the process. Alternatively, the continuum can use a 'circuit rider' approach. In Arizona, key staff members make the rounds to visit continuum members in 13 of the state's 15 counties, learning about the continuum members' perspectives, and sharing information as they go.

Some states find it effective to have their physical meetings in the same central location each time. In Utah, for example, the steering committee meets monthly in the same location and those who cannot attend in person have the option of participating by conference call. Other states find that it works better to change the location of each meeting so that all regions have the opportunity to attend and so that regions share the burden equally in terms of travel time and costs. Wisconsin uses this approach, holding meetings in different parts of the state so that providers have the chance to converse, network, and share their experiences in an informal setting as well.

The best approach for a particular continuum will largely depend on the continuum's geographic coverage and the available resources. Regardless, it is generally a good practice to provide telephone and/or videoconferencing capabilities so that those continuum members who cannot attend in person have the option of linking in electronically.

Real-Time Electronic Communications

Electronic communications are ubiquitous, but in rural areas – particularly those with large geographic spans and/or challenging terrain – they are particularly key to building and maintaining partnerships. To take advantage of such technologies, however, rural continuums must have access to the technology, have the ability to use it, and consciously build its use into regular communications.

The Challenge of Geography

According to one rural homeless program administrator, holding a meeting “may be a simple process when participants are located in the same area and can meet an hour or two for lunch. It is a different scenario when meeting regionally and participants must travel for three hours or so in order to meet.” Given this reality, electronic communications are key to ongoing collaboration.

A variety of real-time electronic communication methods are available for simultaneous group communication. The right choice will depend on the group’s needs, the equipment required, and the comfort level continuum members have with each technology. Options to consider include the following:

- **Conference calls** are an important tool in rural areas where meeting in person is geographically challenging. Teleconference services are convenient as well as relatively low cost. Many companies now provide conference call services and can be located easily on the internet. Once an organization has set up an account, conference calls can be scheduled as necessary and participants can call in to a toll-free number to join the call.
- **Web conferencing** allows participants to view slide presentations or documents on their own computer screens while participating in a conference call by phone. The presenter is able to control the image being viewed on all participants’ screens. With more advanced skills, participants can interact using their screens, for example by jointly editing documents. Appropriate software must be installed on each computer, and there is a fee to the originator for using the service.
- **Videoconferencing** is harder to arrange and more costly unless the appropriate infrastructure is in place. However, some continuums do have access to such facilities. Those that do not might consider getting such technology established as a possible long-term goal. Because of the costs involved, continuums would need to think creatively about ways to partner with other organizations to establish such a communications network.

Statewide Videoconferencing

In Iowa, continuum meetings are held via videoconferencing through the Iowa Communication Network. With more than 300 locations across the state and no need to travel more than 10 miles to connect, travel time and costs are nearly eliminated. The Iowa Communications Network is a state agency that administers a statewide fiber optics network enabling authorized users such as hospitals, state and federal government, libraries and schools to communicate using high quality information technology. For more information about Iowa’s Communication Network visit <http://www.icn.state.ia.us/>.

In order to be successful, conference calls and videoconferences, like face-to-face meetings, need to be well-organized and have a specific agenda. However, running a good conference call or videoconference is different from running a good meeting in some important ways. The following are some examples:

- For technologies with no real-time visual connection, it is important that participants receive the agenda and any written materials in advance of the call since materials cannot be handed out on the spot.
- Without body language to give visual cues, conference call leaders with no real-time visual connection have to work hard to get feedback from those on the phone to know whether everyone is tracking the conversation and has had a chance to express their views.
- If the meeting has some people physically together in a room and others in one or more remote locations, the challenge of keeping everyone engaged is even greater. Good-quality microphones are a must, as is making sure that those physically present do not dominate the conversation.

Establishing consistent procedures for following up with people who are not able to attend meetings is essential to keeping people involved. Ideas for such follow up include the following:

- Writing up and distributing detailed meeting minutes (via email, post, or listserv) shortly after the meeting
- Posting minutes on a collaborative website
- Having the coordinator (if there is one) touch base with each missing partner
- Assigning a 'buddy' to each missing partner and asking those individuals to touch base with those who were absent. This spreads the work load, but has the added benefit of ensuring that individual partners support each other and get to know each other outside of the meeting context

Real-time communication technologies also can facilitate one-on-one or small group communication:

- Instant messaging allows two or more users to type messages to each other in real time. An advantage of instant messaging over email is that users know instantly whether the person they are trying to reach has gotten the message.
- Voice-over-internet protocol allow free conversations among computer users. With an inexpensive camera attached to the computer, they also allow a visual image to be transmitted simultaneously.
- In the mass of new technologies, picking up the telephone can still be the fastest and most straightforward communication tool available.

While these forms of real-time, interactive communication are often desirable, current technology also facilitates the communication of information to a broader audience whenever needed. In between real-time conversations, group members can stay in touch through email, listservs, and websites. In the time between real-time conversations, email, listservs, and websites can help group members stay in touch:

- **Mailing list distribution.** One of the most basic, and most powerful, technological tools available to help a continuum collaborate with all its partners is the automated mailing list. An automated mailing list may consist of a formal, moderated listserv that participants must join, or it can be as simple as an email distribution list. These lists can be set up quickly and cost very little, if anything, to maintain. The biggest benefit is that they get to the recipient almost instantaneously.
- **Website.** Rural continuums sometimes can centralize information and make it readily accessible for remote partners by posting it to a website. Rather than developing their own

websites, some continuums have partnered with a state agency to use the state website to carry information or links including the following:

- Information on the work of the continuum
- Resources
- Plans and implementation
- Research and data
- Funding availability

The drawback to the website is that the intended audience must actively take steps to visit the site, while mailing lists automatically go to the intended recipients.

Electronic communication can be quick and cost effective. However, providers without email or web access need other channels of communication. A solution some continuums have used is partnering with local businesses and libraries to help partners gain access to broadband service. Old-fashioned mailing via the postal system is another option.

Rural providers have found that electronic communication can be used to foster a culture of information sharing, even among providers who may not be a formal part of the continuum. This might involve sharing an interesting and relevant news article or alerting others to a useful resource that is available online. Such periodic contacts can help build a sense of community and mutual support among providers who often work in relative isolation.

BUILDING CAPACITY

Although some individuals and organizations in rural areas have a great deal of capacity, providers in rural areas regularly note that a lack of capacity impedes service to the homeless. Rural providers report that this manifests itself in everything from lack of computer technology, to "thin" expertise in many substantive areas, to a lack of shared information about basic mainstream services available in the community. Of particular concern to continuums as they apply for funding are weaknesses in the areas of grant writing and grant management; interpretation of federal funding requirements; and the savvy needed to effectively apply for McKinney-Vento funds.

There are a number of ways rural continuums can build capacity. HUD makes numerous guidebooks and toolkits available on the Homelessness Resource Exchange, www.hudhre.info. You may also contact your local HUD office to request technical assistance in the form of a workshop individualized meetings be provided to your CoC. Additionally, relatively easy and low-cost first step is to build a list of the local mainstream resources available in each region covered by the continuum along with contact information, and distribute the information to all service providers in the service area. This not only lets providers know what resources are available, it also establishes a baseline on which to build further capacity.

Staff retention and staff quality issues can be significant obstacles to building long-term capacity in rural areas where pay is generally low. Similarly, it also can be difficult to attract affordable housing developers and professional resources to oversee housing construction, manage affordable housing projects, and provide supportive services as a component of housing. To attract high quality staff and experts in the field, rural continuums may need to actively solicit such involvement through outreach and education to affordable housing professionals who might otherwise not engage in working in rural areas.

There are several strategies to provide activities, resources, and support to strengthen the skills and abilities of providers in rural areas:

- Establishing a dedicated continuum coordinator
- Providing year-round technical assistance
- Building skills among jacks-of-all-trades
- Coordinating services in areas with diverse needs

A Dedicated State Continuum Coordinator

One effective way to build capacity in a rural continuum is by hiring a coordinator who works as a dedicated resource for all continuum partners. The coordinator is available to work at the local, regional, and state levels to coordinate agencies, sustain momentum, and keep the stakeholders at the table. Even if the position is not full-time, having a designated individual in a coordinating position can be extremely helpful to a rural continuum.

Dedicated Coordinator

Virginia has a staff person dedicated to addressing continuum challenges and to visiting partners throughout the state. The position is paid for by the State, and approximately 40 percent of the FTE dedicated to the Continuum, with heavier emphasis during the grant application process. Virginia continuum members report that a centralized coordinator has been an important key to success. Ongoing and concentrated efforts have led to better results than a model used previously, in which several different staff were assigned to managing different parts of the Continuum process.

Dedicated continuum coordinators have been used in a variety of ways in rural areas. Some of those that have been noted as particularly effective include the following:

- Fundraising and grant writing. Coordinators often spend more time on continuum duties during peak periods in the McKinney-Vento funding cycle
- Recruiting agencies not already involved in the continuum
- Serving as a resource that partners can reach out to at any time. This decreases the sense of isolation often felt in rural, remote areas and increases the collective institutional knowledge of the continuum

Hired Consultants

Unfortunately, many rural continuums lack the resources they would need to employ permanent full-time staff to augment their capacity. An important resource for many is the use of paid consultants for certain discrete tasks. Roles that consultants have played in rural continuums have included the following:

- Developing and coordinating the SuperNOFA application process

This can include assisting with the committee planning processes, training sponsors to develop strong applications, facilitating the rating and ranking process, and assisting with the formal application development and submission process

- Developing other funding applications and writing grant applications
- Providing technical assistance to support continuum members on particular issues

- Providing training to grantees and communities to help build capacity in local continuums
- Organizing and implementing homeless count surveys

This might include providing training to agencies and individuals involved in the homeless count; coordinating with state agencies, planning groups, and other continuums; and coordinating with HMIS management.

- Conducting research such as bed/unit inventories and gaps analysis
- Improving coordination and planning among continuum partners through tasks such as scheduling meetings, coordinating with continuum members for agenda/planning items, facilitating meetings, and assisting with the development of local plans to end homelessness
- Organizing and conducting project evaluations

Year-Round Technical Assistance

Focusing on providing technical assistance year-round can build capacity beyond the annual application preparation process. Rural providers have noted that technical assistance focusing on project administration, management, and performance, in addition to application preparation, is very important for building capacity and spreading technical expertise.

Rural continuums have implemented a range of innovative and promising ways to provide this year-round technical assistance. For example:

- **Requesting Technical Assistance from HUD.** HUD contracts with several technical assistance providers in each state to provide technical assistance at no cost to CoCs and grantees. Assistance can take the form of trainings and workshops or direct technical assistance visits, where the technical assistance providers work one-on-one with the grantees. Contact your local HUD office to find out more about the availability of such technical assistance.
- **Partnering with a Nonprofit:** A major nonprofit in Albuquerque has agreed to help small towns and communities in rural areas develop and manage permanent supportive housing projects as well as fulfilling federal paperwork requirements.
- **Building Local Planning Capacity:** Washington State passed the Homeless Housing Assistance Act (HHAA), which provides each county with funds for supporting planning groups and project activities to build long term capacity at the local planning level.
- **Toll Free Technical Assistance Phone Line:** In Iowa, a dedicated 800 number is available for agencies seeking technical assistance for activities related to completing annual progress reports, preparing project applications and ESG submissions, and drawing down funds from a grant.
- **Dedicated Housing Staff:** Specific staff members in Arizona have been assigned to provide technical assistance and offer consulting to any agency wishing to explore housing development options and learn about state housing resources and the application process to receive housing assistance. Before this technical assistance resource was available, most rural shelters and agencies were exclusively focused on service delivery rather than housing development and homelessness prevention strategies.
- **Training:** The CoC in Wisconsin provides training as requested by their continuum partners in conjunction with planning meetings at various locations across the state. Wisconsin has developed and delivered training modules on topics including mental health and drug abuse,

accessing social security benefits, and case management for case workers. The State also uses the trainings as opportunities to provide updates and share experiences.

Rural continuums may wish to consider these best practices to build capacity among their continuum partners:

- **Capitalize on Gatherings.** Occasions when rural continuum partners are together in one place are often few and far between. These occasions can be used to increase capacity by offering opportunities for technical assistance or skill enhancement.
- **Mentoring.** Rural continuums can systematically enhance capacity by teaming up an experienced person or group with one less experienced on a given topic. This type of mentoring relationship can facilitate a habit of information sharing for the more experienced person or group, while spreading knowledge to the less experienced person or group.
- **Partnering.** Capacity also can be enhanced by bringing in a wide array of partners. Each group bolsters the continuum's overall capacity. In order for a new partner to be integrated successfully, the partner should understand its role and responsibilities in the continuum, as well as getting a clear picture of other continuum members and the services they offer.

Jacks-of-All-Trades

Because of low population density, rural service providers often wear many hats. In an urban area, separate staff or even separate agencies might be responsible for assessing things like housing, nutrition, education, job-search, mental health, physical health, and substance abuse needs. In a rural area, in contrast, a single individual may be the client's primary point of contact for the continuum, and may have to consider this whole range of issues. Because no individual can be an expert in all fields that are potentially relevant to any given homeless client, these "jacks-of-all-trades" must do the best they can with what they know.

Because providers must wear multiple hats in rural areas, some rural continuums work to give those providers tools to help more effectively identify client needs. The agencies and individuals partnering in rural continuums can tackle this problem with a range of steps:

- Drawing on the partners' varied expertise to develop screening questions to help providers who encounter homeless clients do the best possible job of issue identification
- Building education components about various issues into regular meetings to help all members of the continuum become better-informed about a range of topics
- Holding educational lectures or workshops on 'hot topics'
- Distributing fact sheets, links, or informative articles via email, listservs, or mail

All of these activities can help deepen the understanding that multi-tasking staff have about a range of issues relevant to homeless service provision, and enhance their capacity to serve homeless clients. Providers without specialized training may still have difficulty accurately identifying certain conditions such as depression or schizophrenia, especially when a client has co-occurring conditions, where one condition may be masked by another. However, activities to educate such providers about particular topics that come up often in the homeless population can help improve their ability to steer clients to the right resources.

Service Coordination

One important challenge for rural continuums striving to build capacity, especially those that are spread across diverse terrain and areas of a state, is keeping in mind that the nature and causes of homelessness may be somewhat different in one rural area than in another. Rural

service providers emphasize that continuums must remain sensitive to these local features and determine which services to emphasize accordingly. For example:

- Areas with farming sectors may have a higher homeless population during the harvest season than any other time of the year due to the influx of low-wage workers - often immigrants with limited English proficiency. Providers in such situations plan to have 'surge capacity' during the harvest season, and strive to provide interpreters during that time of year.
- Areas in close proximity to a public mental health facility may be home to an unusually high percentage of homeless individuals who have a disabling mental health condition. Providers that serve such a population consider ways to augment their mental health care service capacity, as well as finding ways to offer access to appropriate prescription drugs.
- Areas with "luxury economies" (e.g., casinos, resorts) have a high proportion of low-wage service workers year round, often in an area with skyrocketing housing costs. Providers that serve these areas concentrate on their capacity to augment the stock of affordable housing.

Whatever the combination of circumstances, geographically dispersed communities are likely to have diverse capacity needs. Making continuum members aware of the extent of the diversity in their areas can be a challenge. Helping the group think creatively about ways to address the varied needs of the homeless populations in different parts of the continuum's service area can be even more challenging. However, through clear communication, careful planning, conscious cooperation, and a long-term view of the solution, a rural continuum can ultimately serve the needs of all of its community members.

Attachment 6.1: Sample Memorandum of Understanding⁴¹

I. BACKGROUND AND INTENT

This Agreement for participation in the development, implementation and management of programs to end homelessness in Insert region name is entered into between member agencies of the Insert Continuum of Care name Continuum of Care and Insert partner name.

Whereas, the Continuum has formally adopted a Continuum of Care Plan which sets forth several goals and objectives toward ending homelessness in the area; and,

Whereas, the sole purpose of this Memorandum of Understanding is to encourage cooperation between each member of the Continuum and Insert partner name, and to further detail the separate and distinct roles and responsibilities of each party with regards to the operation and implementation of projects to end homelessness in our community; and,

Whereas, each member of the Continuum understands that certain activities must be undertaken in order to meet federal, state and local requirements for funding; and

Whereas, each member of the Continuum agrees to:

- Participate in the HMIS/Service Point system so that data can be submitted to the Department of Housing and Urban Development and the Insert state agency name in the manner in which they prescribe
- Participate in each Point-in-Time Survey
- Advocate on behalf of the homeless community and participate in the Continuum's Homeless Awareness activities and in the Homeless Prevention activities
- Actively participate in the Continuum's committees. The member understands that participation in the Continuum is one of the review criteria establishing priorities for funding
- Provide accurate data to the Continuum in a timely fashion as determined by the Continuum. Accuracy and timeliness of data is understood to be of critical importance to funding agencies such that failure to provide the data in such a fashion could result in unpleasant consequences
- Act as a liaison with the community at large and with their respective agencies to provide information about the Continuum's activities
- Participate in the development of the evaluation and selection criteria to determine priorities for the Continuum
- Participate in funding opportunities following state and federal criteria
- Work with other agencies in the community to prevent a duplication of effort and services to serve the needs of the homeless
- Work with the Continuum and Insert partner name to ensure that there are no gaps in service to the homeless or at risk of homeless population in our community; and

⁴¹ Source: Muskegon County Homeless Continuum of Care Network, <http://muskegoncoc.org>

Whereas, the Insert name of Continuum Continuum of Care is obligated by certain federal and state statutes to review and prioritize projects. Insert partner name will review the work of the Continuum and support its decisions.

II. GUIDING PRINCIPLES

Whereas, all parties under this Memorandum of Understanding jointly recognize that individuals with very low-incomes, and representing the specified target populations, are diverse in terms of their strengths, motivation, goals, backgrounds, needs and disabilities:

- Those individuals are members of the community with all the rights, privileges, opportunities accorded to the greater community;
- Those individuals have a right to meaningful choices in matters affecting their lives; and
- Input of the individuals shall be sought in designing and implementing services.

III. TERM

This Agreement will begin Insert date, and will continue until terminated in accordance with Section VII below.

IV. TERMINATION

The partners may terminate their participation with this Agreement for any reason by giving the other parties ninety (90) days prior written notice.

V. CONFIDENTIALITY

The partners agree that by virtue of entering into this Agreement, they will have access to certain confidential information regarding each other's operations related to the Continuum of Care's activities. The partners agree that they will not at any time disclose confidential information and/or material without the consent of that party unless such disclosure is authorized by this Agreement or required by law. Unauthorized disclosure of confidential information shall be considered a material breach of this agreement. Where appropriate, releases will be secured before confidential information on an Individual is exchanged. Confidential information will be handled with the utmost discretion and judgment.

VI. NONDISCRIMINATION

There shall be no discrimination of any Individual on account of race, color, creed, religion, sex, marital status, sexual orientation, age, handicap, ancestry or national origin in the operation of the apartments.

VII. SEVERABILITY

In the event any provision of this Agreement shall be found to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect the validity, legality and enforceability of the remainder of the Agreement.

VIII. AMENDMENTS

This Agreement may be amended only with the mutual written consent of the partners.

IX. CERTIFICATION OF AUTHORITY TO SIGN AGREEMENT

The persons signing this Agreement on behalf of the partners hereto certify by said signatures that they are duly authorized to sign this Agreement.