Calaveras County
Five Year Plan to End Homelessness
# Calaveras County

## Five Year Plan to End Homelessness

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Introduction to Homelessness in Calaveras County

Calaveras’s homeless are not as visible as homeless populations in urban areas. Our homeless frequently camp in remote locations hidden along rivers, in canyons or forested areas, or park older campers or vehicles out of sight. In addition, in the absence of a homeless shelter, homeless adults and youth in Calaveras County frequently “couch surf” for as long as a host will allow. The county’s geographic remoteness, expanse, and beauty helps to hide the growing homeless population and makes addressing this problem challenging. Our geography creates barriers to service. The population of 45,602* is spread out over a 1,000 plus square miles with more than 80% of our residents living in unincorporated communities along the main travel corridors. The most affordable housing is located in remote areas where wildland fires are a risk and supportive services are not available. There are miles of rolling hills, robust vineyards, and mountain communities above snow line. Much of Calaveras County is only accessed by two-lane winding roads where public transportation is very limited if available at all to assist citizens with accessing services in the county seat of San Andreas.

*US Census Data July 2018 Estimate
Challenges

Challenge 1: The number of homeless persons in Calaveras County is increasing.

<table>
<thead>
<tr>
<th>Homeless Count*</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>2019</td>
</tr>
<tr>
<td>36</td>
<td>186</td>
</tr>
<tr>
<td>34</td>
<td>101</td>
</tr>
<tr>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>34</td>
<td>176</td>
</tr>
<tr>
<td>15</td>
<td>133</td>
</tr>
<tr>
<td>21</td>
<td>53</td>
</tr>
</tbody>
</table>

(Data as continuously homeless for more than a year or homeless more than four times in three years.)

* Does not include “couch surfers” or homeless with a place to sleep on the night of the count. These numbers are from a count taken by volunteers on a single night in late January and do not accurately represent the true number of homeless persons in the entire county over the course of a year.

<table>
<thead>
<tr>
<th>Homeless Families with Children Enrolled in the CalWORKS Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
</tr>
<tr>
<td>532</td>
</tr>
</tbody>
</table>

* Does not reflect homeless without children or not enrolled in the CalWORKS program. Homeless singles, unaccompanied youth 18-24, and seniors are not represented in this count.

Other Calaveras Entities Reporting an Increase in Homeless

Sheriff’s Office
Mark Twain Medical Center
Office of Education
Community Based Organizations (food and assistance services)
Faith Community
Private Enterprise

An overall estimate of the number of homeless in Calaveras, along with information on age, location, contributing factors to homelessness, is not available at this time. So while the population of homeless is growing, by how much and why is not known, making it all the more difficult to propose solutions.
Challenge 2: There is a critical lack of emergency beds and affordable housing inventory in Calaveras County.

**Emergency Shelter**

*Calaveras has no emergency shelter.*

The county relies on limited funding for short-term motel stays and referrals to neighboring county shelters --when there is room. These measures do not adequately meet the need and if those served by these temporary measures do not find permanent housing, they are at risk of returning to homelessness again.

**Bridge Housing**

*Calaveras has only one transitional house. It provides housing for only 5 individuals.*

Transitional or bridge housing, is temporary housing that allows a longer stay than emergency sheltering in order to allow the homeless person or family time to address barriers to permanent housing.

**Permanent Housing**

*Calaveras has critically low housing inventory. This is acutely true for units that are affordable.*

With only 329 units available for rent --regardless of affordability (as reported in the County’s 2019 Housing Element), the housing shortage has resulted in a highly competitive housing market, driving rents up and giving potential landlords no reason to take tenant risks when renters with good jobs, good credit and stable histories are readily available.

**Affordable Housing**

*At $1,345 per month, nearly half of Calaveras cannot afford the fair market rent of a 3 bedroom.*

HUD defines housing affordability as housing (rent or mortgage and utilities) that costs less than 30% of household income. Families paying more than 30% are considered “cost burdened” and may have trouble paying for other necessities such as food, or medical care. The 2019 Fair Market Rent for a 3 bedroom unit in Calaveras is $1,345 requiring an annual income of $53,796 or about $26 per hour. The median household income in Calaveras is $54,800.

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**Calaveras housing is affordable compared to Central Valley and Bay Area housing. Our close proximity to these high rent markets combined with the beauty and charm of the county has resulted in more than 30% of our housing stock being captured for vacation homes and are represented in Calaveras 2019 Housing Element as vacant and not available.**
Challenge 3: There are limited housing support services.

**Navigation/Housing Identification**

*Calaveras does not have a Housing Navigator Specialist to navigate this competitive housing market.*

Calaveras assigns housing navigation duties to case managers in addition to their other Case Management duties. In this current housing market and with the homeless population as clientele, the level of support needed to secure permanent housing is considerable. Landlords are reluctant to rent to those who have been homeless when there are plenty of potential tenants with good jobs, stable histories, and good credit available. Time and specialized skill is needed towards recruiting potential landlords, negotiating leases, providing tenant education, and managing landlord relationships when issues arise to insure housing retention.

**Case Management**

*Calaveras does not offer Housing-Focused Case Management to the homeless.*

County Case Managers through Behavioral Health and Cal Works assist clients with finding the resources they need to stabilize their lives. This will include basic needs such as food, clothing, employment, transportation, and even hygiene are met, as well as finding support services for legal issues, mental health or substance use, child care and parenting supports. Housing Focused Case Management allows a specialized case manager to assist the family to focus exclusively on identifying barriers to securing and retaining permanent housing and then addressing these barriers. Support and progress on these barriers is tracked through management of a Housing Stabilization Plan. Without this assistance, housing barriers do not receive the priority attention needed to overcome obstacles to permanent housing. When a homeless family finds housing without this specialized support (which is rare), they are more likely to return to a housing crisis as the core housing issues have not been identified and addressed.

*The National Alliance to End Homelessness reports that Housing Financial Assistance combined with Housing Support Services significantly reduces the length of time a family is homeless, results in homeless persons finding permanent housing faster and at lower rates than those who do not receive Housing Support Services.*
Challenge 4: Location, location, location

The Rural Challenge

*Calaveras is rural. Funding is not.*
All of the funding for addressing homelessness originates in urban areas. Therefore the understanding of what the problems are, and how to address these issues follow urban needs and practices. Funding is frequently allocated based on headcounts even though the percentage of the population in need may be the same or even more than in urban areas. This makes it difficult to compete for resources needed to address homelessness. Additionally, smaller counties have fewer staff that take on multi-faceted responsibilities as compared to our urban colleagues who employ staff with specialized job duties. These additional responsibilities guarantee an impact on the depth of service that can be provided, including limiting the ability of staff to stay apprised of funding opportunities and compete for them.

*Calaveras is small, and our communities are even smaller. Anonymity is nearly non-existent.*
Even in a small community a person may not be known, but if they have been homeless, it most likely will be known throughout the community. The stigmas against homeless travel faster and deeper in small communities and contribute to a much more difficult journey towards finding permanent housing.

*Calaveras covers even the most remote nooks and crannies. Public transportation does not.*
Geography is the number one barrier remote rural communities face in providing services. Mountains and distances serve as islands in isolating homeless from the supports needed to overcome barriers. And in rural communities like ours, many of the homeless camp in these remote locations.

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Although housing costs are generally lower in rural communities, lower incomes and higher poverty rates make housing options simply unaffordable for many rural residents. In 2010, rural median incomes were 20 percent lower than the national median income. It should be no surprise, therefore, that rural communities are four times more likely than urban areas to have at least 20 percent of their population living in poverty. — National Rural Housing Association
Calaveras Homeless Plan

Coordinated Entry
- Crisis
- Domestic Violence
- Disaster

Bridge
- Sober Living
- Behavioral Health
- Housing Barriers
- Housing Delays

Permanent
- Prevention
- Rapid Rehousing
- Supported

Support Services
- Navigation

Case Management
- Affordable

Workforce
Strategies to End Homelessness

Priority 1: Coordinate Homeless Data Collection and Planning

Actions

County Program Homeless Data
1. Identify programs/departments to collect data (include law enforcement, education, human services, public health, mental health, etc.
2. Identify data to collect (needed for analysis and reporting:
   - HUD, HMIS, HCD, Behavioral Health, other reporting entities;
   - contributing factors such as mental or other health issues, substance use, post hospitalization or incarceration, legal issues, credit; referrals through continuum of care and exit)
3. Review and edit all program intakes to collect data needed in HMIS compliant formats
4. Identify and train intake staff for all depts. Including stigma reduction training
5. Identify and train 2-4 county staff to manage data input in to HMIS
6. Identify staff and schedule to review and analyze data and submit summary outcomes, concerns and recommendations

Non-County Homeless Data
1. Identify County staff to collaborate with CoC in PIT Count annually
2. Identify county staff and/or members of Homeless Task Force to collect, research, and analyze and summarize non-county homeless data.
3. Identify non-county entities that interface with homeless
4. Work collaboratively with non-county entities to collect data

Facilitate Annual Homeless Strategic Planning and Review

Priority 2: Increase Emergency, Bridge, and Permanent Housing Inventory

Actions

Develop Emergency Sheltering within Calaveras County
1. Pass an Emergency Shelter Declaration
2. Develop Scattered Site Emergency Housing
3. Research opportunities for a family emergency shelter.

Develop Bridge/Transitional Shelter
1. Research Bridge/Transitional Sheltering Best Practice Models
2. Research Funding Opportunities for Bridge/Transitional Sheltering
**Increase Permanent Housing Inventory for Rapid Rehousing and Supported Housing Programs**

1. Inventory Rapid Rehousing Housing or Housing Assistance
2. Inventory Supported Housing and Housing Assistance
3. Identify gaps
4. Research opportunities to develop Permanent Housing, including Shared Housing
5. Explore partnerships for braided funding to cover above Fair Market Rents not covered in existing programs

**Increase Affordable Housing Inventory -- Workforce and Subsidized**

1. Partner with Planning and Building Departments to identify needs, and strategies
2. Research factors impacting affordability such as rising insurance costs

**Priority 3: Enhance and Expand Housing Support Services**

**Actions**

1. Identify Case Management Needs
   - Stabilization
   - Housing-Focused
   - Housing Navigation
     - Separate from Case Management
     - Contract with Realtors to Represent Landlords
     - Incentivize Landlords and Roommates
     - Landlord/Roommate Outreach Brochures
   - [ ] Research Opportunities
   - [ ] Pursue resources to expand or enhance Housing support Services

**Priority 4: Strengthen Community Collaborations**

**Actions**

**Coordinate Community Data Collection and Analysis**

1. Map Program Points of Interface With Homeless
2. Create/Update Intakes for HMIS Compatibility
3. Identify HMIS Data Entry Staff
4. Train for HMIS Implementation

**Coordinate Referrals at Point of Entry**

1. Coordinated Entry System Training
2. Coordinated Entry System Planning
Create Information Sharing Medium
1. Calaveras County Homeless Task Force
2. Calaveras County Homeless Strategic Plan
3. Develop Website Sharing of Resources

Strengthen or Pursue Collaborative Projects
1. Create a community education plan
2. Host a community forum
3. Develop a media plan to keep the public aware of progress/challenges as they emerge
4. Develop a plan to reduce stigma for residents experiencing homelessness
5. Advocate for funding for Supportive Services and Administration of Housing Programs
6. Engage in CoC Projects:
   - Membership and Committee Work
   - Coordinated Entry System
   - HMIS
   - Regional Project Funding
   - Sharing: Service Information, Housing Opportunities, Best-Practices
7. Collaborate with Stanislaus Housing Authority Projects:
   - No Place Like Home Housing
   - Veterans Housing
   - Affordable Housing Projects
8. Partner with Sierra Hope on Projects:
   - HEAP Housing Management
9. Partner with ATCAA on Projects:
   - Cal Works HSP
10. Collaborate with Community-Based Organization Projects
    - Resource Connection
    - Dignity Health
    - Agencies Serving Veterans
    - Agencies Serving Seniors
    - Agencies Serving Youth
11. Partner with Public Agency Projects:
    - Law Enforcement
    - Office of Education
    - Public Health
12. Collaborate with Faith-Based Organization Projects:
    - Shower Ministries
    - Laundry Ministries
13. Provide Leadership to Calaveras Homeless Task Force
   - Shared Assessment of Local Needs and Resources
   - Shared Strategic Planning
   - Shared Consensus Building
   - Partnered Program Development
   - Shared Trainings
   - Shared Community Outreach
   - Shared Stigma Reduction
   - Invite Media Representatives and Calaveras County Realtor Association

**Priority 5: Pursue Emerging Opportunities to End Homelessness**

**Actions**

1. Dedicate staff time to research emerging housing opportunities, program development and application preparation
2. Provide staff with training on housing program development, application preparation and outcomes focus
3. Provide staff with housing research responsibilities a list of State and Federal sites to monitor as well as a list of partnering community-based organizations, faith-based organization and departments within the County, including Planning, CalWORKS, APS, CPS, Mental Health, Education, Law Enforcement, Health Department, Veteran Services, Sierra Hope, Resource Connection, DRAIL, Catholic Charities, Senior Center, and the Continuum of Care
4. Schedule regular quarterly meeting for housing program line staff, housing program development staff and leadership to discuss emerging opportunities, prioritize opportunities to pursue, and create an action plan for next steps.
5. Dedicate resources to application preparation
6. Coordinate program managers, line staff, and the fiscal department for program implementation if funded.
## Resources to End Homelessness in Calaveras County

### Existing Housing or Housing Assistance

#### Emergency

<table>
<thead>
<tr>
<th>Program</th>
<th>Provider</th>
<th>Serves</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary Housing Assistance</td>
<td>HHSA CalWorks</td>
<td>CalWorks families with children</td>
</tr>
<tr>
<td>Housing Support Program</td>
<td>HHSA CalWorks</td>
<td>CalWorks families with children</td>
</tr>
<tr>
<td>Domestic Violence Shelters</td>
<td>Resource Connection</td>
<td>Families with children, singles males or females fleeing violence</td>
</tr>
</tbody>
</table>

#### Bridge/Transitional

<table>
<thead>
<tr>
<th>Program</th>
<th>Provider</th>
<th>Serves</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision House</td>
<td>Behavioral Health</td>
<td>Referrals from Behavioral Health</td>
</tr>
<tr>
<td>Transitional Housing Rental Assistance</td>
<td>Resource Connection</td>
<td>Victims of domestic violence, sexual assault, elder abuse</td>
</tr>
<tr>
<td>Promise House</td>
<td>Crossworks Ministries</td>
<td>Young adult women with up to one small child</td>
</tr>
</tbody>
</table>

#### Permanent—Homeless Prevention or Rapid Rehousing

<table>
<thead>
<tr>
<th>Program</th>
<th>Provider</th>
<th>Serves</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homeless Prevention</td>
<td>Sierra Hope</td>
<td>Households at Federal Poverty Level with documented proof of income and rental agreement and/or utility shut off notice</td>
</tr>
<tr>
<td>Rapid Rehousing</td>
<td>Sierra HOPE</td>
<td>Households, individuals and families with children, who are homeless. Income eligibility up to 80% of area median income depending on grant funding source.</td>
</tr>
<tr>
<td>HSP</td>
<td>CalWorks</td>
<td>CalWorks families with children</td>
</tr>
<tr>
<td>HEAP</td>
<td>CoC/HHSA</td>
<td>Low-Income Homeless</td>
</tr>
<tr>
<td>HOPWA</td>
<td>Sierra Hope</td>
<td>Housing Opportunities for People with AIDS—HIV positive individuals or families, under 80% of County Median Income</td>
</tr>
<tr>
<td>Veteran Families Support</td>
<td>Catholic Charities</td>
<td>Homeless or At Risk Of Homeless Veterans and their families</td>
</tr>
</tbody>
</table>

#### Permanent—Supported Housing

<table>
<thead>
<tr>
<th>Program</th>
<th>Provider</th>
<th>Serves</th>
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</thead>
<tbody>
<tr>
<td>Full Service Partnership</td>
<td>Behavioral Health</td>
<td>Behavioral Health Referrals</td>
</tr>
<tr>
<td>No Place Like Home Round One Calaveras Court</td>
<td>Behavioral Health</td>
<td>Behavioral Health Referrals</td>
</tr>
<tr>
<td>Permanent Supported Housing</td>
<td>Sierra Hope</td>
<td>Homeless singles with permanent disability (mental or physical) with priority for chronically homeless—couples and families with children only as housing is available</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program</th>
<th>Provider</th>
<th>Serves</th>
</tr>
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<tbody>
<tr>
<td>No Place Like Home Round One Calaveras Court</td>
<td>Behavioral Health</td>
<td>Behavioral Health Referrals</td>
</tr>
<tr>
<td>Permanent Supported Housing</td>
<td>Sierra Hope</td>
<td>Homeless singles with permanent disability (mental or physical) with priority for chronically homeless—couples and families with children only as housing is available</td>
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</tbody>
</table>
Affordable Housing--Workforce and Subsidized Housing

<table>
<thead>
<tr>
<th>Program</th>
<th>Location</th>
<th>Serves</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choice Housing Voucher Program</td>
<td>Stanislaus Housing Authority</td>
<td>Qualifying Low-income, Waiting lists for most housing</td>
</tr>
<tr>
<td>Bear Mountain Apartments</td>
<td>San Andreas</td>
<td>Senior or disabled only</td>
</tr>
<tr>
<td>Casa Apartments</td>
<td>San Andreas</td>
<td>Senior only</td>
</tr>
<tr>
<td>Copello Square Apartments</td>
<td>Angels Camp</td>
<td></td>
</tr>
<tr>
<td>Creekside Apartments</td>
<td>San Andreas</td>
<td></td>
</tr>
<tr>
<td>Diamond Place Apartments</td>
<td>San Andreas</td>
<td></td>
</tr>
<tr>
<td>Foothill Village Senior Living Community</td>
<td>Angels Camp</td>
<td>Senior only</td>
</tr>
<tr>
<td>Murphys Senior Apartments</td>
<td>Murphys</td>
<td>Senior only</td>
</tr>
<tr>
<td>San Andreas Apartments</td>
<td>San Andreas</td>
<td></td>
</tr>
<tr>
<td>Sierra Meadows Apartments</td>
<td>Arnold</td>
<td></td>
</tr>
<tr>
<td>Angels Court RV Park</td>
<td>Altaville</td>
<td></td>
</tr>
<tr>
<td>Big Horn Mobile Home Park</td>
<td>Angels Camp</td>
<td></td>
</tr>
<tr>
<td>Castle Rock Estates Mobile Home Park</td>
<td>Valley Springs</td>
<td></td>
</tr>
<tr>
<td>Dunrovin Village Mobile Home Park</td>
<td>West Point</td>
<td></td>
</tr>
<tr>
<td>Gold Strike Village Mobile Home Park</td>
<td>San Andreas</td>
<td></td>
</tr>
<tr>
<td>Murphys Diggins Mobile Home Park</td>
<td>Murphys</td>
<td>Senior only</td>
</tr>
<tr>
<td>Oak Shadows Mobile Home Park</td>
<td>San Andreas</td>
<td></td>
</tr>
<tr>
<td>Valley Springs Mobile Home Park</td>
<td>Valley Springs</td>
<td></td>
</tr>
</tbody>
</table>

Existing Housing Support Services

Case Management—Housing Focused

<table>
<thead>
<tr>
<th>Program</th>
<th>Provider</th>
<th>Serves</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheriff’s Liaison</td>
<td>Sheriff’s Department</td>
<td>Homeless residents</td>
</tr>
<tr>
<td>Homeless Outreach</td>
<td>Behavioral Health</td>
<td></td>
</tr>
<tr>
<td>HSP</td>
<td>CalWorks</td>
<td>CalWorks families with children</td>
</tr>
</tbody>
</table>
## Case Management—Stabilization—Including Prevention and Diversion Services

<table>
<thead>
<tr>
<th>Program</th>
<th>Provider</th>
<th>Serves</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wellness Cabin</td>
<td>Behavioral Health</td>
<td>Adults recovering from mental health issues</td>
</tr>
<tr>
<td>HSP</td>
<td>CalWorks</td>
<td>CalWorks families with children</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Behavioral Health</td>
<td>Medi Cal Behavioral Health clients</td>
</tr>
<tr>
<td>HOPWA</td>
<td>Sierra Hope</td>
<td>HIV+ Individuals and their families</td>
</tr>
<tr>
<td>FSP</td>
<td>Behavioral Health</td>
<td>Medi Cal Behavioral Health clients</td>
</tr>
<tr>
<td>Supported Living</td>
<td>The ARC of Amador and Calaveras</td>
<td>Adults with intellectual and developmental disability</td>
</tr>
<tr>
<td>Veterans Services</td>
<td>Veterans Services</td>
<td>Veterans and their families</td>
</tr>
</tbody>
</table>

## Housing Navigation/Identification Services

<table>
<thead>
<tr>
<th>Program</th>
<th>Provider</th>
<th>Serves</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordinated Entry</td>
<td>Sierra Hope</td>
<td>Homeless or at imminent risk of becoming homeless</td>
</tr>
<tr>
<td>HSP</td>
<td>CalWorks</td>
<td>CalWorks families with children</td>
</tr>
<tr>
<td>Supported Living</td>
<td>The ARC of Amador and Calaveras</td>
<td>Adults with intellectual and developmental disability</td>
</tr>
<tr>
<td>Veterans Services</td>
<td>Veterans Services</td>
<td>Veterans and their families</td>
</tr>
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## Opportunities FY 2019/2020

<table>
<thead>
<tr>
<th>Resource</th>
<th>Provides</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>CESH Round Two</td>
<td>Housing System Support for CoC Members</td>
<td>Continuum of Care</td>
</tr>
<tr>
<td>HEAP Round Two</td>
<td>Housing Support for Homeless</td>
<td>Continuum of Care</td>
</tr>
<tr>
<td>NPLH Round Two</td>
<td>Housing Support for Behavioral Health Program</td>
<td>Behavioral Health</td>
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<tr>
<td>Housing for a Healthy CA</td>
<td>Housing Support for Health Programs</td>
<td>Health Programs</td>
</tr>
<tr>
<td>Home Safe</td>
<td>Housing Support for Elders at Risk</td>
<td>Adult Protective Services</td>
</tr>
<tr>
<td>Foothill Terrace</td>
<td>Affordable Housing</td>
<td>Stanislaus Housing Authority</td>
</tr>
<tr>
<td>Private Funding</td>
<td>Veterans Housing for those not meeting other program criteria</td>
<td>Veterans Services and Private Funders</td>
</tr>
</tbody>
</table>

### Trainings:
- Housing Administration
- Housing Development
- Housing Program Development
- Support Services
- Housing Staff Supports
Coordinated Entry System (CES)

Coordinated Entry is a process developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs. Coordinated Entry prevents homeless families from being lost in the system when looking for help by providing a one stop referral system that can assess and prioritize need and identify supports available. Calaveras County participates in Coordinated Entry through our regional Continuum of Care which includes supporting programs from Amador, Tuolumne, Calaveras and Mariposa Counties. In Calaveras County, the Coordinated Entry System hub is provided through Sierra Hope (209)736-6792.

Housing Management Information System (HMIS)

A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. The local Continuum of Care has developed an HMIS that complies with HUD’s data collection, management, and reporting standards. Calaveras County plans to insure HMIS Compliant Intakes are integrated in to our housing programs and to work collaboratively with the CoC on data entry and analysis.

Housing First

Housing First is a homeless assistance approach that prioritizes permanent housing as the first priority over other issues or needs a homeless person may have. Housing First promotes housing programs with low barriers to housing and does not screen out clients based on income, employment, criminal history, mental illness, motivation, disabilities or other common criteria used to deny housing. Two common Housing First approaches are Rapid Rehousing, which features short-term assistance, and Permanent Supported Housing, which features long-term housing assistance.
Rapid Rehousing

Rapid Rehousing is an intervention designed to help individuals and families that don't need intensive or ongoing supports to quickly exit homelessness and rapidly return to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.

Three Core Components of Rapid Rehousing:
• Housing Identification
• Move In/Rental Assistance utilizing Progressive Engagement
• Case Management: both Housing-Focused and Stabilization

Benchmarks of Rapid Rehousing Success:
• Reduced time homeless
• Nationally: less than 30 days unless there is low housing inventory
• Exit to Permanent Housing Increased
• Nationally: 80% exit to permanent housing if not high barrier
• Limited client returns to homelessness
• Nationally: 85% do not return to being homeless in the first year

Progressive Engagement

Progressive Engagement refers to a strategy of providing the least amount of temporary assistance needed to achieve immediate housing stabilization for homeless persons. Assistance that goes beyond one-time assistance will be progressively reduced on a case-by-case basis to insure continued housing stability, client engagement in solutions, and housing resources protected by providing no more assistance than is truly needed.

Permanent Supported Housing

Permanent supportive housing is permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability.

Bridge/Transitional Housing

Bridge/Transitional housing is a type of supportive housing used to facilitate the movement of people experiencing homelessness into permanent housing. Often this type of housing is offered to those who need time to address barriers to being able to obtain or retain permanent housing.
Case Management

Case Management is a client-driven collaborative process that involves assessment of needs as well as strengths, and developing plans to address needs, facilitate resources, monitor and evaluate progress, making adjustments to the plans as needed, and advocating for options and services for the client. Calaveras’s Homeless Plan will offer two types of Case Management with specific focuses as follows:

Stabilization Case Management

Focuses on: crisis intervention including diversion and homeless prevention, life skills, budgeting and finances, employment, transportation, mental health, counseling, substance use, legal issues, parenting support.

Housing-Focused Case Management

Focuses on: assisting homeless clients to identify housing barriers, develop a Housing Stabilization Plan specific to the identified barriers, providing or referring to services addressing housing barriers such as: credit repair, legal issues such as prior evictions or utility turn offs, tenant education, landlord or neighbor relationships, lease responsibilities, household budgeting.

Housing Navigation and Identification

Housing Navigators assist homeless persons with finding housing through an extensive knowledge of local housing programs, identifying and maintaining lists of available housing, recruiting landlords, negotiating leases and mediating landlord issues.

Stigma and Discrimination Reduction

Calaveras County supports stigma reducing practices such as Motivational Interviewing, Trauma Informed Care, and homeless inclusion on the Homeless Task Force. Housing assistance programs are multi-faceted demonstrating a deep understanding of the complexity of the population and that there is no stereotype of a homeless person.
Appendix B

Calaveras Homeless Task Force Members

Calaveras County Agencies

Health and Human Services
Behavioral Health/Substance Abuse
Human Services: Public Assistance/Social Services
Public Health
Veteran Services Office
Office of Education
Office of Emergency Services
Sheriff’s Office
Probation
Environmental Health
Calaveras-Mariposa Community Action Agency
Building Department
Planning Department
Economic Development
Administration

Community Based Organizations

Angels Camp Business Association
Sierra Hope
Motherlode Job Training
Resource Connection
DRAIL-Independent Living
Human Resource Council
Chamber of Commerce Leadership Program
American Legion Auxiliary
Self Help Legal Center for Amador and Calaveras County
Blue Mountain Coalition for Youth and Families
Common Ground Senior Services
Gold Country Alliance for the Mentally Ill (GCAMI)
Calaveras Community Foundation
The ARC of Amador and Calaveras
Habitat for Humanity
The Volunteer Center
Faith Based Organizations

Angels Camp
   St Patrick’s Church- Helping Hands Program
   Saint Vincent De Paul Program
   Crossworks Ministries- Promise House
Arnold
   Oak Circle Community Church
West Point
   West Point Community Covenant Church
Mountain Ranch
   Mountain Ranch Lutheran
Murphys
   Faith Lutheran
   First Congregational Church
San Andreas
   Saint Matthews Episcopal Church
Valley Springs
   Shepard of the Hills Lutheran
   Glory Bound Fellowship
Salvation Army

Health Care Community

Mark Twain Medical Center
MACT

Tribe

Tuolumne Me-Wuk
   Tribal TANF

Government Entities (non-county)

US Forest Service
East Bay Municipal Utilities District (EBMUD)

Out-of-County Partnerships

Stanislaus Housing Authority -Serves Region including Calaveras County
Continuum of Care (CoC) – Region includes Calaveras, Amador, Tuolumne and Mariposa Counties
Amador Tuolumne Community Action Agency (ATCAA)
California Institute for Behavioral Health Solutions (CIBHS)
# Appendix C

## Glossary of Housing Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>CalWorks</td>
<td>California Work Opportunities and Responsibility to Kids</td>
</tr>
<tr>
<td>CBO</td>
<td>Community Based Organization</td>
</tr>
<tr>
<td>CDBG</td>
<td>Community Development Block Grant</td>
</tr>
<tr>
<td>CDSS</td>
<td>California Department of Social Services</td>
</tr>
<tr>
<td>CDVA</td>
<td>California Department of Veteran’s Affairs</td>
</tr>
<tr>
<td>CES</td>
<td>Coordinated Entry System</td>
</tr>
<tr>
<td>CESH</td>
<td>California Emergency Solutions and Housing</td>
</tr>
<tr>
<td>CH</td>
<td>Chronically Homeless</td>
</tr>
<tr>
<td>CHDO</td>
<td>Community and Housing Development Organization</td>
</tr>
<tr>
<td>CIBHS</td>
<td>California Institute for Behavioral Health Solutions</td>
</tr>
<tr>
<td>CoC</td>
<td>Continuum of Care – Federal program stressing permanent solutions to homelessness</td>
</tr>
<tr>
<td>CPD</td>
<td>Community Planning and Development</td>
</tr>
<tr>
<td>DHSS</td>
<td>Department of Health and Human Services</td>
</tr>
<tr>
<td>DV</td>
<td>Domestic Violence</td>
</tr>
<tr>
<td>EHAP</td>
<td>Emergency Housing Assistance Program</td>
</tr>
<tr>
<td>ESG</td>
<td>Emergency Solutions Program</td>
</tr>
<tr>
<td>FHEO</td>
<td>Federal Housing and Equal Opportunity (HUD Office of)</td>
</tr>
<tr>
<td>FMR</td>
<td>Fair Market Rent</td>
</tr>
<tr>
<td>HA</td>
<td>Housing Assistance (CalWorks)</td>
</tr>
<tr>
<td>HCD</td>
<td>California Department of Housing and Community Development</td>
</tr>
<tr>
<td>HCV</td>
<td>Housing Choice Voucher Rental Assistance (formerly Section 8)</td>
</tr>
<tr>
<td>HEAP</td>
<td>Homeless Emergency Assistance Program</td>
</tr>
<tr>
<td>HEARTH Act</td>
<td>Homeless Emergency and Rapid Transition to Housing Act of 2009</td>
</tr>
<tr>
<td>HHSA</td>
<td>Health and Human Services Agency</td>
</tr>
<tr>
<td>HMIS</td>
<td>Homeless Management Information System</td>
</tr>
<tr>
<td>HIC</td>
<td>Housing Inventory Chart (used for PIT Count)</td>
</tr>
<tr>
<td>HMOIT</td>
<td></td>
</tr>
<tr>
<td>HOPWA</td>
<td>Housing Opportunities for Persons with AIDS</td>
</tr>
<tr>
<td>HSP</td>
<td>CalWORKS Housing Support Program</td>
</tr>
<tr>
<td>HUD</td>
<td>United States Department of Housing and Urban Development</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
</tr>
<tr>
<td>-------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>HUD-VASH</td>
<td>HUD Vouchers through Veteran’s Affairs Supportive Housing</td>
</tr>
<tr>
<td>MHSA</td>
<td>Mental Health Services Act</td>
</tr>
<tr>
<td>NAEH</td>
<td>National Alliance to End Homelessness</td>
</tr>
<tr>
<td>NAMI</td>
<td>National Alliance on Mental Illness</td>
</tr>
<tr>
<td>NIMBY</td>
<td>Not in My Back Yard</td>
</tr>
<tr>
<td>NOFA</td>
<td>Notice of Funding Availability</td>
</tr>
<tr>
<td>NPLH</td>
<td>No Place Like Home</td>
</tr>
<tr>
<td>PHA/HA</td>
<td>Public Housing Authority</td>
</tr>
<tr>
<td>PIT</td>
<td>Point in Time Homeless County</td>
</tr>
<tr>
<td>PSH</td>
<td>Permanent Supported Housing</td>
</tr>
<tr>
<td>RFP</td>
<td>Request for Proposals</td>
</tr>
<tr>
<td>RRH</td>
<td>Rapid Rehousing</td>
</tr>
<tr>
<td>Section 8</td>
<td>Housing Assistance Payment Program</td>
</tr>
<tr>
<td>Section 202/811</td>
<td>Programs for housing assistance to elderly or peoples with disabilities</td>
</tr>
<tr>
<td>SMI</td>
<td>Severely Mentally Ill</td>
</tr>
<tr>
<td>TA</td>
<td>Technical Assistance</td>
</tr>
<tr>
<td>VASH</td>
<td>Veterans Affairs Supported Housing</td>
</tr>
<tr>
<td>VI-SPDAT</td>
<td>Vulnerability Index-Service Provider Decision Assistance Tool</td>
</tr>
</tbody>
</table>
Appendix D
CIBHS 2018 Survey and Focus Groups Summary

Participants:
Predominately Calaveras Residents
Service Providers
Recipients of Services
Homeless or Previously Homeless

Findings:

Causes of Homelessness
91% Mental Illness
85% Substance Use
65% Poverty

Biggest Gaps in Resources to End Homelessness
75% Affordable Housing
52% Lack of an Emergency Shelter

Challenges to Acquiring Housing
94% Lack of Affordable Housing
89% High Rents
86% Lack of Living Wage Employment
57% Prior Evictions, Poor Credit, Criminal History
49% Landlord Issues

Proposed Solutions
75% Housing Navigation
67% Coordinated Entry/Improved Service Provider Collaborations
33% Increased Case Management
CIBHS developed a community-wide stakeholder survey in collaboration with Calaveras County and launched the survey on November 26, 2018 via Survey Monkey; paper copies of the survey were also made available to participants who were unable to complete it online. The survey remained open until January 2, 2019, at which time CIBHS closed the survey and aggregated the responses. Calaveras County shared the survey with stakeholders throughout the survey period and encouraged responses. All responses were anonymous and confidential. In total, we received 81 responses to the community-wide survey, 61 of which were completed online, and an additional 20 on paper. Eight respondents were currently receiving or previously received homeless services, while 12 were currently receiving or previously received Behavioral Health services; 12 respondents were family members or caregivers of someone experiencing or at risk of homelessness and/or mental illness. 83% of respondents either lived or worked in Calaveras County; the remaining respondents provided services to people experiencing or at risk of homelessness and/or mental illness in Calaveras County.
Data Analysis and Comments

What follows is an analysis of responses to each of the survey questions, as well as selected quotations that reflected the diversity of opinions stated. Because participants had the opportunity to write open-ended responses, they were able to list multiple answers, and thus the totals generally do not add up to 100%. In one case, answers were so varied that it was impossible to identify any major themes.

In your opinion, what are the three main causes of homelessness?

Mental Illness 91%
Substance use/drug addiction 85%
Unemployment/lack of jobs 83%
Poverty/lack of money 65%
Lack of housing/high rents 55%
In your opinion, what does Calaveras County do well in providing housing, homelessness, and behavioral health services in the community?

Access to resources 34%
Motel/hotel vouchers 27%
Benefits/entitlements 22%
Treatment/outpatient services 20%
Case management 25%
Living Room Peer drop-in center 16%
Food 13%
Don’t know 9%

Representative Comments:
“Calaveras County is really trying and making progress, thanks to leadership at HHS, the homeless task force, and participation in the CoC. HHS, including behavioral health, have made an impact despite the lack of places to put people, and have plans to develop more housing. Partnerships with non-profits and faith communities are being strengthened. BHS case managers have advocated for their clients and helped them to apply for assistance.”

“Case managers, eligibility workers and employment counselors do their best finding resources and guidance for homeless individuals.”

“Besides County services there isn't anything else. We don't even have a full time Psychiatrist on staff at the county. Grateful for what we do have, but it's clearly not enough to meet the needs of all citizens who seek services.”
In your opinion, what are the biggest gaps in housing, homelessness, and behavioral health services in the community?

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affordable Housing</td>
<td>75%</td>
</tr>
<tr>
<td>Homeless/emergency Shelter</td>
<td>52%</td>
</tr>
<tr>
<td>Jobs/employment</td>
<td>19%</td>
</tr>
<tr>
<td>Access to Information about resources</td>
<td>14%</td>
</tr>
<tr>
<td>Psychiatric services</td>
<td>7%</td>
</tr>
</tbody>
</table>

Representative Comments:

“Housing for low-income. Housing for persons with pets. Transitional Housing, Shelter housing, Safe camping site for those preferring homelessness.”

“The lack of housing support at every level: emergency beds, transitional/bridge housing, permanent affordable housing, permanent supported housing. A housing inventory in each category needs to be created with specific goals to increase in each category annually. Strategies for achieving these goals need to be created and assigned.”

“No homeless shelters in Calaveras, severe lack of sufficient low cost housing, low wages prevail, lack of sufficient quantity of behavioral health services.”

“No emergency shelters; lack of housing in general, lack of vacancies in affordable housing; no psychiatrists in the county.”

“Lack of affordable homes. Lack of housing for homeless. Lack of behavioral health services after hours.”
What do you think the County and other local service providers should consider when developing future programming for preventing or ending homelessness?

Responses to this question were quite varied, and no one answer garnered more than 3% of the responses. Overall, the trend was toward wraparound services that take into consideration the root causes of homelessness and the individual histories of each person. Communication and coordination of services in easily accessible locations close to transportation. Address community bias and stigma. Consider outreach and marketing strategies to let homeless people know where the resources are.

Representative Comments:

“Consider all different levels of an individual’s system, and not just on the ‘needs.’”

“1. I think they should consider ways to build affordable housing. 2. Work on a solution for faster, easier access to health care and BH care needs. 3. Address all aspects of the homeless population needs, not just housing. Look at the whole person; such as their physical, emotional, and spiritual needs as well.”

“Building two shelters, building affordable housing, changing public opinion on how they think and see the homeless and mentally ill.”

“There are many fragmented programs through federal, state, local, and community entities. Consolidate all programs in the county under one structure. Build a mental health facility that is staffed 24 hours a day. The county currently does not have a facility for consumers in crisis, leaving the hospital ER and/or law enforcement to deal with them. Provide more crisis intervention training to first responders. Attack the root of the homelessness problem for each individual. Don’t just throw money at social programs. Provide a facility for voluntary mental health/substance abuse treatment that does not cost the consumer or their insurance anything.”
How do you receive information about county and other services that are available for people experiencing or at-risk of homelessness or behavioral health challenges?

<table>
<thead>
<tr>
<th>Method</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>County offices/Resource Connection</td>
<td>45%</td>
</tr>
<tr>
<td>Meetings/presentations</td>
<td>41%</td>
</tr>
<tr>
<td>E-mails/web</td>
<td>38%</td>
</tr>
<tr>
<td>Don’t know how to access</td>
<td>32%</td>
</tr>
<tr>
<td>Newsletters/flyers</td>
<td>25%</td>
</tr>
<tr>
<td>Word of Mouth</td>
<td>13%</td>
</tr>
<tr>
<td>Continuum of Care</td>
<td>11%</td>
</tr>
</tbody>
</table>

Representative Comments:

“Emailed announcements/newsletters, and public presentations by organizations providing these services.”

“To the extent I do, it’s only by virtue of the fact that I work for the County.”

“Sporadically through county email. It is not really clear what the process is.”

“I have never received information on this.”

“Through NAMI affiliate newsletter. Information is not readily available.”

“Health and Human Services, Newspaper, flyers, peoples information, resources guides, the people here.”
What specific resources do you think are needed to improve consumer navigation through the system? What would make it easier for you to access information about available services?

<table>
<thead>
<tr>
<th>Resource Navigators/advocacy staff</th>
<th>72%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single-point of entry/one-stop shop</td>
<td>67%</td>
</tr>
<tr>
<td>Centralized searchable website</td>
<td>62%</td>
</tr>
<tr>
<td>Resource lists/printed Information</td>
<td>54%</td>
</tr>
<tr>
<td>Access to Computers</td>
<td>45%</td>
</tr>
<tr>
<td>More case managers/social workers</td>
<td>33%</td>
</tr>
<tr>
<td>Outreach and education</td>
<td>27%</td>
</tr>
</tbody>
</table>

Representative Comments:

“Updated lists of services from all areas of the county not just county based/paid services. Non-profits too.”

“Advocacy help, when you’re living in your car, or a tent and have no transportation, you shut down and can’t make decisions, you’re at a total low point and are in survival mode. Advocates are great to help people move through the system.”

“Make resources at a standard 6th grade reading level so folks can understand them regardless of educational attainment. Have a website/page that is easy to navigate and find. Lastly, a person/county worker than can help answer any question related to homelessness services/resources. This person would also be directly involved in implementing a homelessness improvement plan.”

“More patient/consumer advocates. People that know the system and understand what resources are available, and more importantly how to use them.”

“Health System Navigators. We have created a ridiculously complex healthcare "system" that often seems more like a collection of disconnected parts.”

“Maybe a county wide decision tree along with contact information of the service/program and listing the requirements. It would be helpful if there was a homeless services coordinator to keep resources active and provide information/resources as deemed appropriate.”
What makes getting or keeping housing in Calaveras County difficult?

Lack of available affordable housing 94%
Rents too high 89%
Lack of employment opportunities 86%
Past eviction/law enforcement involvement/poor rental history 57%
Landlord issues 49%

Representative Comments:

“High cost and scarcity of rental housing. The average cost of housing is much above the average earnings of low wage and even medium wage workers.”

“The high cost. The lack of development. Housing not created for single people only families. Higher senior population and less younger people coming in. Small population.”

“No jobs, not a lot of housing available, and what is available is expensive or landlords do not want children in their properties.”

“Available, affordable, safe places to rent. There is a lack of decent rentals for low income people to afford without having to go to the motel downtown san Andreas”

“I live in a rural community and there are no affordable rental properties, as many of the homes are second homes for those residing out of the area. I have heard the same complaint in other rural communities.”
What makes getting or keeping a job in Calaveras County difficult?

Lack of jobs that pay livable wages 93%
Transportation barriers 91%
Lack of job readiness/training programs 84%
Lack of affordable housing near employment 43%
Mental health/substance use issues 12%

Representative Comments:

“Reliance on low wage service industry jobs. Lack of "living wage" jobs. Generational reliance on the system is a part of rural poverty cycle. We see so many young people who don't know how to get or keep a job or even why they should. How to break this cycle?”

“Lack of jobs available. No adequate transportation to and from work because bus system is not adequate. No volunteer organization to facilitate carpooling.”

“Lack of technical and computer skills, and very importantly, lack of soft skills, i.e., written and verbal communication, customer service, motivation and desire to work hard, willingness to take initiative and responsibility, attention to appearance, organization skills, etc.”

“County's pay scale is low and cost of housing is high. That's why most commute out of county for work.”

“Minimum wage jobs that do not allow them to keep housing due to rental prices.”

“Pay scale is low, we need career technical/trade school programs, and increased outside investment in projects that attract & promote economic development stability.”

“Lack of jobs that pay a decent salary, distance to employment, lack of transit if one does not own a vehicle or ride share.”
What can be done to help better engage residents, community groups, elected officials, and the media around a common understanding of the problems and solutions associated with homelessness?

Community education on causes of homeless and possible solutions 74%
Share stories of homeless individuals and families to “humanize” them 66%
Hold public forums/meetings/gatherings to discuss the issues 59%
Marketing/PR campaign to shift public sentiment 53%
Opportunities for the public to interact with and get to know homeless people 48%
Articles in papers/newsletters 14%

Representative Comments:

“More publicity about the extent and effects of homelessness in our community. Those living in the more affluent areas are totally unaware of the impact of the issue, and feel unaffected. Have presentations by current or former homeless individuals/families discussing the reasons and realities of their situation. Encourage our citizens to volunteer for homeless services in order to experience for themselves the extent and seriousness of the problem.”

“Once the problems and solutions are identified, the lead agency responsible for tackling the homelessness problem in Calaveras County should mount a PR campaign focusing on public awareness and education.”

“Educating them on the reality of homelessness we are all a short way from being homeless lose your job, lose your house.”

“One suggestion is to remind people that those experiencing homelessness are people we know and are folks often like us including women with children and families. Those who have either experienced homelessness (or come very close to it) don’t often share that.”

“Collect data to show the extent of the problem so that you can get grants. Also, collect stories as those often hit home more often than statistics. Launch a campaign against homelessness with a community led task force and clear and obtainable goals.”

“Articles in news outlets (Enterprise, Pine Tree); public forums to discuss homelessness -- maybe in churches, community groups, near where homeless persons hang out.”

“More publicity about the extent and effects of homelessness in our community. Those living in the more affluent areas are totally unaware of the impact of the issue, and feel unaffected. Have presentations by current or former homeless individuals/families discussing the reasons and realities of their situation. Encourage our citizens to volunteer for homeless services in order to experience for themselves the extent and seriousness of the problem.”
Sometimes people experiencing homelessness encounter criminal complaints for activities associated with homelessness, such as sleeping, eating, sitting, and/or asking for money in public spaces. What suggestions do you have to address criminalization of homelessness in the community?

71% Educate law enforcement on how to work with homeless people, how to deal with SMI and where to find resources and services
66% Law enforcement should include behavioral health providers/advocates when interacting with homeless people
61% Identify a controlled location(s) where homeless people can be safe and have access to services
41% Address the need for more housing and jobs
38% Continue to criminalize their behavior

Representative Comments:
“Unfortunately, laws do need to be enforced and residents need to feel safe. If there are local ordinances that need to be reviewed and changed, that may help some with the criminalization. Also, approaching the homeless to refer to resources rather than to arrest them when possible.”

“Talk with them as humans in need. Not criminals. Assist in obtaining what is needed. MH, Substance abuse services, food, clothes.”

“Additional advocates (around the clock) who can work with the Sheriff's Department to run interference.”

“Don't criminalize it in the first place because it perpetuates the cycle of homelessness and doesn't address the problem directly. Instead of having a police officer harass the individual have a trained behavioral health person attend to the person which can allow for a discussion on what services that person might need. The officer can attend with the BH worker, but they shouldn't look like an officer. Most folks that are homeless have a BH issue and criminalizing is just putting those folks in what’s becoming the new psychiatric facility, which is jails.”

“Educate law enforcement, have them be included in part of the process to end homelessness, not criminalize it. Again launch a community campaign to help change community culture.”

“In order to incentivize the receipt of homeless services, homeless persons should not be engaging in criminal behavior. Criminal behavior should be a disqualifier. Behavior Heath Services should also be required for those with a diagnosis.”

“Have an identified safe camping space that is served by local resources.”

“I do not believe that any of these “sleeping, eating, sitting, and/or asking for money in public spaces” are a crime. Yet unfortunately, there are a few (may not really be homeless) who commit crimes while asking for help. I think if someone is loitering in a public place and creating a problem, then there needs to laws against this. But, if it is truly someone who is in need, there needs to be a place, easily accessible, for them to get linked to the resources they need.”

“Unsure. Public spaces might be set aside, but the issue of substance abuse and mental health issues are not addressed with this "band-aid" tactic. Housing and job creation, combined with homeless persons' self-motivation, confidence, and education must be targeted.”
In your opinion, would it be better to have housing for people experiencing homelessness and mental illness scattered throughout the community or concentrated in a few areas? Why?

Scattered 51%
Concentrated 48%
Both 1%

Representative Comments:

“Low cost or free housing needs to be scattered throughout the community, because if it is concentrated in a particular area, that area will assume an unfortunately negative association.”

“I like the areas concentrated. As a medical professional and accustom to providing home visits I see positive from persons helping each other as well as the providers able to see more people in the same amount of time if people are in close proximity.”

“I would recommend concentration to make it easier to provide services on-site and to ensure that resources are accessible.”

“I believe it should be scattered out thru the community; likely will be more accessable than have it in a few areas where it would be hard for them to go to. Also just because you are homeless do you need to be associated with people experiencing mental illness?”

“Why not both? We have very spread out and rural communities. Why not set up a program that offers alternative options. Set them up with community gardens, help them to regain a sense of accomplishment and worth.”

“Scattered throughout -- I'd hate to create a segregated zone as it's both offensive and probably likely to create repeat offenders and not contribute to change.”

“In my opinion it is not an either/or situation. I think having a centralized place that has wraparound services for folks to start off is a good idea so people can get what they need without worry of transportation. Additionally, however, there needs to be more integrated options as well to remove the stigma we associate with homelessness and mental illness.”

“Scattered; it offers more dignity and respect. They can feel like a part of a community and not continue with the stigma of being "homeless" and in the system.”

“Concentrated. Scattered will be difficult to deliver intensive case management necessary. Easier for law enforcement, transit system, NIMBY is real. Government Center Property is best.”
In your opinion, what would make the biggest difference in addressing homelessness in Calaveras County? What can county and city governments do to facilitate that change?

Provide Emergency/Temporary Shelters
Community Education to decrease fear and NIMBY issues
Build Affordable Housing
Provide comprehensive behavioral health and health services
Job Training/Education
Bring more employment opportunities to the County

“Increase accessible and affordable services available to the community. This could be present in a variety of way, transitional housing, affordable housing programs etc. Make sure decision makers and influential people are a part of the process in making it happen. Let the community led it with guidance, stakeholder input.”

“Put more money into housing for the homeless and initiate programs to help people end their homeless situation. Train mental health workers and volunteers about the devastating affects homelessness has on a person. It is perhaps one of the most isolating antisocial experiences a person can have. It alone can exacerbate or create a mental illness in a person.”

“An emphasis on funding & facilitating job training for both hard and soft skills. Having a homeless shelter available, especially in cold weather.”

“Economic diversity/growth with more educational and job opportunities + more affordable rental housing.”

“Educating the general public on who makes up the homeless population and engage community groups to help find solutions alongside governmental agencies. Maybe conduct some town halls throughout the county and invite former homeless victims to speak to their experiences and what helped them.”

“Civic and political leader involvement, job and housing creation, directed mental health and substance abuse strategies, and mentorships.”

“Open a shelter. Continue to build additional affordable housing units, continue to operate Transitional units for those with severe Behavior Health issues.”