



A Partnership of the City of Raleigh, Wake County,
Wake Continuum of Care and Triangle United Way

Forums and Focus Groups

*Preliminary Summary of Individual Suggestions & Recommendations:
A Report on the First Step in Creating the Plan: Public Input*

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June 15, 2004

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INTRODUCTION

A vital component of developing *Ending Homelessness – The Ten Year Action Plan*, is hearing from a wide variety of experts, stakeholders, and community members, including people who are homeless. To ensure this occurred, a series of four community forums was held, as well as a number of client focus groups at homeless shelters.

The forums were as follows:

An Education of Diversity - February 19, 2004
About the Plan & Breaking Down the Stereotypes

A Family of Homelessness - March 18, 2004
About the People: Focusing on Issues of Men, Women, Families, Youth, Immigrants/Refugees, Veterans

Reasons, Roles and Responsibilities – April 15, 2004
About the Problems: Focusing on issues of Alcoholism & Substance Abuse, Mental Illness, Hospital Discharge, Prison Release, Chronic Homelessness, Domestic Violence, Health – HIV/AIDS

The Structures of Homelessness – May 20, 2004
About the Programs: Focusing on Issues of Transportation, Jobs/Fair Wages, Training/Education, Housing, Organizational Structures

The public forums drew an average of 150 participants each, representing a broad cross-section of the community. The forums and the focus groups together produced an outpouring of literally hundreds of individual recommendations and suggestions. The purpose of this document is to present the ideas and recommendations in summary form. The detailed outline that follows was organized to fulfill the following four purposes:

- Share the tremendous range and number of ideas volunteered;
- Create categories and group together similar ideas in order to provide some structure to the presentation and to help guide next steps in “planning the plan;”
- Highlight priorities indicated by a number of people – this is done by using a bold font for these recommendations, followed by summaries of comments received; and
- List all of the programs and services that any forum or focus group participants indicated were helpful, along with the number of times they were mentioned. There are 96 of these!

The suggestions ranged from discrete actions to broad policy recommendations, including a number of innovative ideas. Some primarily involve redirection of resources and staff, or are readily achievable policy changes. Others require major new funding, dramatic changes in policy directions, and new ways of doing business for agencies and the community at large.

The areas most commonly highlighted by those attending the public forums and focus groups as key components to ending and preventing homelessness can be summarized as follows:

Focus on community buy-in/public awareness, including public education to overcome stereotypes and fears and teaching people the reasons for homelessness; a media campaign; strategies to encourage public involvement and volunteers; advocacy for more funding.

Provide services that are integrated, comprehensive, and readily accessible, including increased communication and collaboration between agencies, government, and churches; centralized referrals for housing and services; multiple services available in one location (“one-stop shopping”); continuity of care over time; more and better use of informal supports, including neighbors and faith-based efforts.

Change mainstream programs to increase flexibility, responsiveness, and service availability, including policy and structural strategies that reduce barriers to service; financing and tax policies that provide more resources for services and housing for those who are at-risk and currently homeless; provision of long-term support that increases or decreases based on individual need; more resources for staff training.

Address barriers to employment and a living wage, including a wide variety of employment training opportunities, both institutional and workplace-based; involvement of private employers in increasing work and training options; better public transportation; more affordable child care; and laws and policies guaranteeing a living wage.

Create more affordable permanent housing, and for a broader population, including a much greater number of affordable housing units; increased subsidies; more supportive housing with ready access to services and trusted helpers; incentives for builders/developers; zoning changes and set-asides; fewer restrictions and criteria in public housing; special efforts to house certain subgroups; innovative housing models for both rehab and new construction.

Attend to the unique needs of special populations, including people with mental illness and/or substance abuse problems, those in poor health, victims of domestic violence, families, youth, immigrants and refugees, persons released from jail or prison, and veterans. The many specific recommendations regarding these groups highlight the need for focused strategies for individuals and families with special needs, rather than a “one size fits all” approach.

It is apparent that Raleigh/Wake County has numerous resources to help people in need. Large well-established agencies and local grassroots programs; formal city and county initiatives and tiny but active church outreach groups. However, there is not enough to go around, especially in the vital areas of housing and employment. A coordinated vision backed by commitment to action is clearly called for. This is the charge of the Ten-Year Action Plan process.

Comments about DATA

- Rectify “disconnection of data”; accurate information is not reaching the policymakers such as RTA (Helen Wright Center Focus Group)
- Use data to demonstrate inefficiency/cost of supporting homeless people through many cycles of homelessness versus long-term solutions (Forum #4, *Organizational Structures*)
- Follow clients – use database, integrated system (Forum #3 *Mental Illness/Discharge Planning*)
- Make HMIS information more accessible to “those who need it” (Forum #4, *Organizational Structures*)
- Conduct a more accurate survey of homelessness; seek and then share information on causes of homelessness (Forum #4, *Organizational Structures*)
- Implement a centralized tracking system to aid agency coordination and planning for individuals (Forum #4, *Organizational Structures*)
- Make research findings and knowledge about what works readily accessible; educate public on what is needed, what works - 2 (Forum #3, *Mental Illness/Discharge Planning*; Forum #4, *Organizational Structures*)
- Conduct high school focus groups to collect anecdotal evidence on incidence of youth homelessness (Forum #2, *Youth*)
- Examine outcomes for states that pay for relative placement (Forum #2, *Youth*)
- Provide statistics about the relationship between substance abuse and homelessness (Forum #3, *Alcoholism/Substance Abuse*)

Comments about COMMUNITY BUY-IN/PUBLIC AWARENESS

Conduct public education to overcome peoples’ stereotypes and fears about homeless people and counteract NIMBY (Not in My Back Yard): Person-to-person contact to break down stereotypes; address misconceptions and encourage dialogue; sponsor a speakers’ bureau; incorporate discussion of homelessness into school curricula; hold community forums like this one; introduce the concept of “recovery” from homelessness, mental illness, and substance abuse; educate landlords about homelessness; provide opportunities for forum participants to continue the dialogue and keep in touch, perhaps through group email lists; website for the general public and organizations to learn about resources, provide educational information, chat rooms monitored by experts; submit a proposal for an anti-stigma program to the Fletcher Foundation; work to overcome the moral stigma of homelessness.

Initiate a media campaign: Potentially funded by A.J. Fletcher Foundation; use IOU (Involvement, Ownership, Understanding) approach; portray the many faces of homelessness: the “changing face” of homelessness; working people who are homeless; homeless children.

Implement strategies to encourage public involvement, volunteerism, individual commitment to end homelessness: Create an orientation, “how to” manual to help

congregations get involved; promote the concept of community ownership of the problem and community responsibility for the solutions; publicize how everyday people can make a difference; mobilize local efforts; get the business community involved; Change people's hearts toward homeless people; clone Jim and Barbara Goodman!

Advocate for increased attention/resources/funding: Demonstrate why homelessness harms the entire community; educate legislators about mental health and service needs; identify and educate funding sources; provide a plan and funding rationale; target 10 largest employers to focus on ending homelessness; carry out active homeless advocacy, protests; make the economic argument, so the public, the legislature, and city and county funders realize the cost-effectiveness of prevention; carry out grassroots lobbying with legislators; share personal stories; push the issue to the front of public consciousness; organize large group of advocates to speak to City Council about needs.

Educate public about specific factors contributing to homelessness: Teach people about domestic violence; address perceived fears and stigma about mental illness; educate the public about addiction/alcoholism – that it is treatable, that it is a disease; use D.A.R.E. anti-drug program in schools.

Comments about OUTREACH AND INTERIM HOUSING

Drop-in center, day shelter: Drop-in center with showers, phone, mailboxes, other basic services; welcoming place for a cup of coffee and folks providing encouragement and support; “activity center” offering needs assessments, referrals, activities, relaxation, sense of community; email, Internet, fax; with bathrooms, haircuts, counseling, classes; consider using Dorothea Dix property.

Transitional housing: For women coming from shelters; for single homeless women; use as base to connect people with needed supports, services, education, and training; for families, so they don't have to break up to be housed; caring staff who reach out residents and provide support; college dorm-type housing, with residents progressing towards independence, getting support to develop skills and positive habits; offering case management; structured apartment settings with different levels of supervision for people with mental illness; for families where abuse has occurred; provide incentives for more units; for young people transitioning into adulthood.

More shelters: Large shelter with “re-entry” programs; larger shelter for women with positive activities such as yoga, arts & crafts, socializing; shelters offering case planning, advocates, job help, budgeting, housing assistance; shelters more aimed at ending homelessness, with inspirational workshops, housing referrals, case managers, counselors, job-finding; use abandoned buildings; emergency shelter for women fleeing domestic violence; provide access to phones and computers; more Shelter + Care grants; mini-shelters; outside of downtown Raleigh; sufficient shelter for everyone now on the street; more social workers to help people move into more permanent housing.

Shelter for young people: For ages 18-25; assist with education, training and employment, help with transition to adulthood, independence.

- Provide information on what is available, but avoid coercion, encourage self-sufficiency (Forum #3, *Single Men*)
- Peer helping; one currently or formerly homeless person helping another - 2 (Forum #2, *Single Men*; Forum #3, *Alcoholism/Substance Abuse*;
- Increase proactive outreach, especially to people with mental illness – use a relationship-building effort (Forum #3, *Mental Illness/Hospital Discharge*;
- More Shelter + Care vouchers (Forum #3, *Mental Illness/Hospital Discharge*)
- Homeless hotline (Forum #4, *Organizational Structures*)
- Outreach services to engage homeless and mentally ill persons who do not seek services - (Forum #3, *Mental Illness/Hospital Discharge*)
- Dialogue between shelters; share “what works” (Forum #4, *Training/Education*)
- Provide shelter as a human right (Forum #4, *General Priorities*)
- Temporary housing rules are too strict (Forum #4, *Housing*)
- Temporary housing and congregational facilities do not help end homelessness (Forum #4, *Organizational Structures*)
- Create a Resource Guide for shelter staff (Forum #4, *Training/Education*)

Comments about PERMANENT AFFORDABLE HOUSING

Expand Low-cost, affordable housing: Safe, affordable on low incomes, great need to expand; energy efficient; accessible; a continuum of options, rent control based on income, housing customized for different situations/needs, specifically for disabled people.

Provide more supportive housing: Like Lennox Chase Apartments; supportive housing with case management, connections to medical, financial help; sober housing; public/private partnership strategies; for people with developmental disabilities; for individuals with serious and persistent mental illness; with round-the-clock support for people with mental illness; nursing care and other health services available on-site; for single women; shift funding from shelters to supportive housing; create agency to lead effort.

Expand Section 8 housing: Lobby against possible federal Section 8 reductions; eliminate 4-5 year waits for Section 8 housing; expand housing voucher program; use Housing Authority funding to develop more Section 8 apartments.

Institute incentives for builders/developers to create affordable housing: Lobby legislature for tax breaks for building affordable housing; county “home rule” approved by State Legislature, which would allow sliding scale impact fees for development of affordable housing; public policy support for deeper subsidies for affordable housing development; increase flexibility of zoning regulations; encourage or require large builders/developers to help small/new developers build affordable housing.

Encourage more affordable housing through zoning changes and set-asides: Mandate set-asides for low-income housing; change Raleigh zoning laws; require a percent of square footage

or a percent of units be dedicated to low-income housing; perhaps require a 10 to 15 percent set-aside; mandatory inclusion of affordable housing units in new development (see NYC guidelines).

Additional strategies to provide more affordable housing: Renovate abandoned downtown buildings; federal policy changes to create more housing and make housing authority policies more accepting of people with serious and persistent mental illness; corporate sponsorship of a building; in new developments, Section 8 home ownership; Habitat for Humanity join with churches to sponsor homes; use foreclosed homes; churches provide up-front capital for construction; create a non-profit management corporation to lease or purchase rooming houses for safe, drug- and alcohol-free housing; more renovations, creativity; a tax to build more low-income housing; Raleigh Housing Authority should create a priority for homeless people.

Recommended locations of affordable housing: In safe neighborhoods; in all areas of Wake County; affordable housing in nice neighborhoods; avoid areas with high crime; in areas other than Southeast Raleigh; create more housing programs that “mix with the community”; mixed-income housing.

- Housing First approach, for people with mental illness and/or substance abuse problems (Forum #2, *Single Men*; Forum #3, *Mental Illness/Hospital Discharge*)
- Housing providing peer support for women, such as apartments in the same complex, or a shared home with housemates of their choosing (Forum #2, *Single Women*)
- Housing options for those with bad credit – 3 (Salvation Army Focus Group; Forum #3, *Alcoholism/Substance Abuse*; Forum #4, *Housing*)
- State-supported rental assistance to supplement federal rental assistance program (Forum #3, *Mental Illness/Discharge Planning*)
- Low-income housing for single people who are not elderly- 2 (Helen Wright Center Focus Group; Forum #3, *Alcoholism/Substance Abuse*)
- Expand eligibility for housing programs to cover those who do not meet the “usual criteria” for assistance (Forum #3, *Alcoholism/Substance Abuse*)
- Housing and services provided together – 3 (Forum #3, *Mental Illness/Hospital Discharge*; *Jail/Prison Release*)
- Create opportunities for singles to share one apartment (but make matches carefully) (Forum #4, *Housing*)
- Prepare a “resource manual” to inform people about housing options, requirements and updates on changing policies for assistance (Forum #3, *Alcoholism/Substance Abuse*)
- Develop a housing model that splits a 4-bedroom house into 4 units, with a common kitchen (Forum #4, *Housing*)
- Cap landlords’ profits (Forum #4, *Housing*)
- Expand Wake County Supportive Housing Team (Forum #4, *Housing*)
- Explore innovative designs/materials for housing, e.g., prefab or modular structures, easily assembled (Forum #4, *Housing*)
- Encourage rehab, as opposed to new construction (Forum #4, *Housing*)
- Provide permanent housing for the lowest income groups; below 30% median family income - 2 (Forum #4, *Housing*)
- Explore the option of houses shared by more than one family (Forum #4, *Housing*)

- Provide training on how to maintain housing (Forum #4, *Housing*)
- Provide renters help paying security deposits; break security deposits into monthly payments -2 (Forum #4, *Housing*)
- Licensing acts are biased (?); need to be changed (Forum #4, *Housing*)

Comments about SERVICES AND SUPPORTS FOR PEOPLE WHO ARE HOMELESS

Improve interagency collaboration/communication: Communication between agencies/all groups involved/interfaith organizations; centralized referral for services and housing; agencies, churches and communities working together; use model of Civil Commitment Council; more interagency networking; help transitioning between programs; make a plan based on centralized coordination.

Offer multiple services/assistance in one place: One-stop shopping; increase continuum of care; address fragmentation by co-locating services; continuity of care; open central resource center with many services.

Specific Services and Supports:

- Housing with assistance with daily living as needed: money management, grocery shopping and cooking, work skills training, etc. (Raleigh Rescue Mission Focus Group)
- Access to computers for homeless people to seek employment (Helen Wright Center Focus Group)
- Aftercare for those with substance abuse problems and disabilities so they can have support to avoid further homelessness (Raleigh Rescue Mission Focus Group)
- Rehabilitation: education and training for work and community life, help facing “hard times” and overcoming obstacles (Raleigh Rescue Mission Focus Group)
- Reintegration help/support system for moving back into the community (Forum #3, *Alcoholism/Substance Abuse*)
- Provide group homes and ongoing care and guidance for homeless street people with serious mental illness (Salvation Army Focus Group)
- Provide one year of subsidized housing and daycare to get homeless families back on their feet (Salvation Army Focus Group)
- Intensive support services for newly-housed chronically homeless people (Forum #4, *General Priorities*)
- PTSD and panic/anxiety disorder treatment for homeless women with histories of sexual abuse and trauma (Forum #2, *Single Women*)
- Open “Healing Place” for women (Forum #4, *Housing*)
- More case management with trained case managers - 2 (Forum #3, *Health/HIV; Mental Illness/Discharge Planning*)
- Respite care for people with chronic illnesses who are homeless (Forum #3, *Health Care/HIV*)
- Provide bus vouchers for job interviews and first day of work ((Helen Wright Center Focus Group)
- Open more free health clinics (Forum #3, *Health Care/HIV*)
- Services and treatment for people who are homeless and have both health and substance abuse problems (Forum #3, *Health Care/HIV*)

- Mobile medical outreach for homeless persons - 2 (Forum #3, *Alcoholism/Substance Abuse*)
- Programs to counsel homeless youth on their own, inform them about services and safe places to stay, educate about drugs, alcohol, STDs (Forum #2, *Youth – 3*)
- Bring more education and employment help to shelters, other homeless locations. - 3 (Forum #4, *Training/Education; Salvation Army Focus Group*)
- Offer alternative health care options (Forum #3, *Health Care/HIV*)
- Design service responses for homeless people who have Alzheimer’s Disease (Forum #3, *Health Care/HIV*)
- A place for people who are homeless to recover from surgery (Helen Wright Center Focus Group)
- Free medical care, as homeless people can’t afford even low-cost care (Forum #2, *Domestic Violence*)
- Treatment, programs and ongoing monitoring for dually diagnosed homeless people (substance abuse and mental illness); also leads to physical decline – must attend to all three issues - 3 (Forum #3, *Health/HIV*)
- Provide group residences with medical care (Forum #3, *Health Care/HIV*)
- Offer more nutrition and treatment education (Forum #3, *Health Care/HIV*)

Teach life skills: To promote independence, self-sufficiency, help with community transition, budgeting, being a good renter.

Faith groups take a leadership role: churches should be informed on how to better help; churches sharing Christ and also love, kindness, friendship; provide individual spiritual counseling; provide clinical expertise/training to faith groups; churches should be involved in planning; bring homeless people to church; source of community outreach; they are the center of the community; every church should “take a radical approach to ending homelessness”; churches team with agencies.

Mentors, advocates, friends: “Adopt-a-Friend” program organized through churches; apartment neighbors check on newly housed homeless families/individuals, offer support; mentoring by formerly homeless people; offer emotional support and help with resource management; one-to-one support; help develop life skills; long-term mentoring.

- Offer services using the recovery model for people who are chronically ill, homeless substance abusers (Forum #3, *Alcoholism/Substance Abuse*;
- Promote Church in the Woods approach: go where people who are homeless are; offer support and understanding (Forum #2, *Homeless Men*;
- Consumer driven services: ask homeless people their opinions! (Forum #3, *General Priorities*)
- Legalize squatting (camping out) (Forum #4, *Housing*)
- Change city ordinances to protect civil and human rights of homeless people (Forum #4, *General Priorities*)
- Need to address mental health and substance abuse issues before any other support will be useful (Forum #3, *Alcoholism/Substance Abuse*)
- Serve those who cannot follow rules/structure; must deal with this population within homeless community (Forum #3, *Alcoholism/Substance Abuse*)

- Individual families should receive tax credits to “sponsor” a homeless person (Forum #3, *Domestic Violence*;
- Make zoning changes to enable those who want to live outdoors to stay in specific campgrounds (Forum #4, *Housing*)
- Focus on the 10% of homeless people who have no shelter at all (Forum #4, *Housing*)
- Use Dorothea Dix property sale proceeds as an endowment for homeless programs
- Establish a 12-Step Program for homelessness (Forum #3, *Alcoholism/Substance Abuse*)
- Funding for medications for homeless people -2 (Forum #2, *Single Women*; Forum #3, *Mental Illness/Hospital Discharge*)
- Expand training for staff working with homeless people (Forum #4, *Housing*)
- Prayer (Forum #3, *General Priorities*)
- Dignity (Forum #4, *General Priorities*)
- Hold voter registrations for homeless people (Forum #4, *Housing*)
- Partnership among churches to help immigrants who are homeless (Forum #2, *Immigrants/Refugees*)
- Work on creating more welcoming, accepting attitudes among health care providers (Forum #3, *Health Care/HIV*)
- Fund all counties to assist with efforts to combat homelessness (Forum #3, *Health/HIV*)
- Spanish church outreach to homeless Hispanic groups (Forum #2, *Immigrants/Refugees*)
- Ensure school continuity for children in homeless families who move between temporary places (Salvation Army Focus Group)
- Put homeless street people to work “doing anything to give them pride in working” (Forum #4, *Housing*)
- Promote church “mission trips” to local areas with homeless people who are immigrants (Forum #2, *Immigrants/Refugees*)

Comments about PREVENTION EFFORTS

A. Emergency Prevention Programs

- Provide pre-eviction help, at the point tenants have warning of potential eviction; assistance for those at risk of losing housing - 2 (Forum #2, *Families*; Forum #4, *Housing*)
- Increase foster homes available for temporary/emergency housing for youth (Forum #2, *Youth*)
- Ready access to legal assistance when a housing crisis occurs (SWSC Focus Group)
- Help for those not meeting typical program requirements, but in financial crisis and in need of help to avoid homelessness, e.g., single women with no children (Forum #4, *Housing*)

B. System Changes in Mainstream Programs to Prevent and End Homelessness

1) *Policy and Restructuring Recommendations*

- Single entity to coordinate all services (Forum #4, *Organizational Structures*)
- Decentralized service delivery (Forum #2, *Single Men*)

- Limit decentralized service delivery that is part of mental health reform plans (Forum #3, *Mental Illness/Hospital Discharge*)
- Don't require criteria and commitments for services and housing that "much of this population is unable to meet and keep." (Forum #2, *Single Men*)
- Consumer choice as a criterion for service development and provision; client leadership in planning services- 2 (Forum #3, *Mental Illness/Hospital Discharge*; Forum #4, *Housing*)
- Include more homeless and low-income people on agency Boards (Forum #4, *Housing*)
- Focus on risk factors for homelessness and barriers to stability for African-Americans (Forum #2, *Single Men*)
- Address racism (Forum #3, *General Priorities*)
- Reorientation of system so that resources follow the individual (Forum #3, *Mental Illness/Hospital Discharge*)
- Create a coalition of community experts (e.g., mental health advocates, legal experts, economists) so that all aspects of the issue are addressed in developing programs to end/prevent homelessness (Forum #3, *Mental Illness/Hospital Discharge*)
- More support and pay for direct service providers; frontline workers experience burnout (Forum #4, *Housing*)
- Use Dorothea Dix property for various levels of housing with supportive services along with a small business/office area for service providers; balance (Forum #3, *Mental Illness/Hospital Discharge*) commercial/revenue uses with needed housing types (*Individual Input*)
- Maintain a prevention focus on working poor people, often at high risk for homelessness; begin interventions earlier - 2 (Forum #3, *Alcoholism/Substance Abuse; Health/HIV*)
- Maintain local government's role in facilitating the plan to end homelessness (Forum #4, *Organizational Structures*)
- Make funding agencies accountable (Forum #4, *Organizational Structures*)
- Develop new public transportation infrastructure to benefit entire community, such as light rail (Forum #4, *Organizational Structures*)
- Support local farmers/businesses (Forum #4, *General Priorities*)

2) *Financing and Tax Strategy Recommendations*

Changes in taxes: Revise tax code to encourage job creation; raise taxes; it costs more not to have services people need; create fairer tax structure: progressive rather than regressive Tax breaks for "people performing services for low-income/homeless" people; raise property taxes to fund higher minimum wage; Change tax structure so wealthy (over \$200,000 per year) pay more for programs for poor and homeless people; Expand earned income tax credit; fund it through repealing federal tax cuts.

- Provide loans for those without means who are trying to make it (Salvation Army Focus Group)
- Use Fayetteville St. Mall Project money to help homeless people (Forum #3, *Domestic Violence*)

- Develop funding sources for health and mental health services beyond Medicaid, Medicare and private insurance (Forum #3, *Mental Illness/Hospital Discharge*)
- Require corporations/builders to invest in the community (Forum #4, *Jobs/Fair Wages*)
- “Supportive Services Trust Fund” (priority: organizations with leadership programs and/or clients in leadership positions) (Forum #4, *General Priorities*)
- Minimum percent of CDBG (Community Development Block Grant) funds allocated to address homelessness (Forum #4, *General Priorities*)
- New models for financing services and housing (Forum #4, *General Priorities*)
- Offer financial incentives for more businesses to locate in Raleigh (Forum #4, *Organizational Structures*)
- Examine expenditures; shift costs to more efficient/effective strategies (Forum #4, *Organizational Structures*)

3) *Program and Service Recommendations*

A. General

Additional funding directed to services, supports, and housing to prevent and end homelessness: Money; money for medication and rent; funds for case management; funding to hire more services providers; more money for social services.

Provide long-term support: Services that maintain support over the long-run, not just short-term crisis intervention; ongoing case management; trusting relationships with ongoing assistance.

- Improve discharge planning from hospitals, prison and the military; more creative discharge planning - 2 (Forum #3, *Mental Illness/Discharge Planning*)
- Agency to assist with credit problems (Salvation Army Focus Group;
- Free legal services (SWSC Focus Group – 2)
- Eliminate free food giveaways, which create dependence (Forum #2, *Veterans*)
- Make literacy education readily available (Forum #3, *Alcoholism/Substance Abuse*;
- Provide more training for workers in their forties, who cannot compete with younger workers (Forum #3, *Health/HIV*)
- Publicize programs and resources; make them easier to find (Forum #4, *Housing*)
- Create a suicide hotline other than 911 (Forum #4, *Organizational Structures*)
- Individualized services and support (Forum #2, *Single Men*)
- Public restroom, perhaps supervised for security reasons (Forum #2, *Single Men*)
- Rebuild family relationships (Forum #3, *Mental Illness/Hospital Discharge*)
- Train volunteers (Forum #3, *Mental Illness/Hospital Discharge*)

B. Mental Illness

Quality of services, treatment, and support:

- Allow for long-term commitments if warranted (Forum #2, *Overall Priorities*)
- Teach consumers about their mental illness and the possibilities of recovering for a better future (Forum #3, *Mental Illness/Hospital Discharge*)

- Realize that mental illness is a lifelong disability with the need for continuity of care over time (Forum #3, *Mental Illness/Discharge Planning*)
- Offer a range of services/supports that respond to changing needs of individuals with mental illness over time (Forum #3, *Mental Illness/Discharge Planning*)
- Go beyond seeing patients as having a “linear” disability (Forum #3, *Mental Illness/Discharge Planning*)
- Provide effective treatment programs for people with serious mental illness: sufficient time, supportive, hands on, peer driven (Forum #3, *Mental Illness/Discharge Planning*)
- Personal face-to-face follow-up by people consumers can trust (Forum #3, *Mental Illness/ Discharge Planning*)

Specific types of services, treatment, and support:

- Add more PACT/ACT (assertive community treatment) teams to work with people with mental illness- 3 (Forum #3, *Mental Illness/Hospital Discharge*)
- More wraparound service programs providing ongoing support for people with mental illness (Forum #3, *Mental Illness/Hospital Discharge*)
- Inpatient care alternatives to Dorothea Dix (Forum #3, *Mental Illness/Hospital Discharge*)
- Keep state inpatient psychiatric homes open (Forum #3, *Mental Illness/Hospital Discharge*)
- Create meaningful tasks, short of full-time employment – so people with mental illness can earn some money (Forum #3, *Mental Illness/Hospital Discharge*)
- Offer families caring for their relatives with mental illness respite care and family support (Forum #3, *Mental Illness/Hospital Discharge*)

Expand informal support for people with mental illness from community members: Weekly visits/calls, grocery drop-offs, to people with mental illness by the faith community; Train willing neighbors to call for help when a neighbor with mental illness is not doing well.

Improve discharge planning: Do not discharge to streets/shelters; better discharge training for social workers; discharge housing and treatment options for those with dual diagnoses; provide a safe, secure place for newly-released patients.

Provide therapeutic support through clubhouses: Offer psychosocial therapy, social activities, skills development, supportive employment opportunities.

- Use the Dorothea Dix property as a “multilevel services” location for people with mental health needs (Forum #3, *Mental Illness/Hospital Discharge*)
- More mental health professionals to help people succeed in the community (Forum #3, *Mental Illness/Hospital Discharge*)
- Train providers to understand role of PTSD (post-traumatic stress disorder) in mental health issues and relation to domestic violence (Forum #3, *Mental Illness/Hospital Discharge*)

- Develop positions for advocates/re-integration specialists for people with serious mental illness (Forum #3, *Mental Illness/Hospital Discharge*)
- Police training in how to work with people who have mental illness; increase police empathy - 2 (Forum #3, *Mental Illness/Hospital Discharge*)
- Make sure psychotropic medications are available for people in jail who need them (Forum #3, *Mental Illness/Hospital Discharge*)

C. Substance Abuse

- Create more inpatient substance abuse treatment options:** More alcohol treatment beds; there are only 8 medical detox beds in Wake County; substance abuse inpatient treatment that admits clients immediately; funding to enable inpatient treatment stays of longer than 7-10 days when needed; substance abuse treatment options for “hardcore users with multiple attempts at treatment and relapses who are *not* homeless.”
- Adequate assessment and treatment of substance abuse (Forum #4, *General Priorities*)
 - Provide a multi-service “Substance Abuse Center” offering substance abuse treatment, medical care, education (including GED), employment assistance, legal help, and links to affordable housing (Forum #3, *Alcoholism/Substance Abuse*)
 - More adolescent drug treatment, which is very limited (Forum #3, *Alcoholism/Substance Abuse*)
 - Increase alcohol and drug treatment programs (Forum #2, *Overall Priorities*)
 - Long-term treatment and case management (Forum #3, *Alcoholism/Substance Abuse*)
 - Provide /court system supports, addressing substance abuse problems prior to prison)
 - Peer support: classes taught by people who have been through a substance abuse program (Forum #3, *Alcoholism/Substance Abuse*)
 - Alternatives for police: substance abuse services rather than penalties or jail (Forum #3, *Mental Illness/Hospital Discharge*)
 - End war on drugs/increase treatment (Forum #3, *Jail/Prison Release*)
 - Provide outreach to substance abusers in the workplace to prevent job loss/homelessness (Forum #4, *Training/Education*)
 - Treatment, not prison, for people with substance abuse problems (Forum #3, *Alcoholism/Substance Abuse*)

C. Health Care

- Help with women’s medical problems and medication funding (Forum #2, *Single Women; Families*)
- More dental coverage and preventive dental care - 2 (Forum #2, *Veterans*; Forum #3, *Health/HIV*)
- Affordable healthcare in outlying residential areas (e.g., Fuquay-Varina, Zebulon)
- Medical insurance for single low-income men - 2 (SWSC Focus Group)
- Health care professionals volunteering their time (Forum #3, *Health Care/HIV*)
- More government funding for HIV/AIDS treatment (Forum #3, *Health Care/HIV*)
- Maintain support groups for diabetics (Forum #3, *Health Care/HIV*)
- Add nutrition programs to agencies (Forum #3, *Health Care/HIV*)

- Guarantee universal healthcare; not dependent on employment (Forum #3, *Health Care/HIV*)

D. Domestic Violence

- Expand and publicize safe services for individuals experiencing domestic violence; make options well-known- 2(Forum #3, *Mental Illness/Hospital Discharge*; Forum #3, *Domestic Violence*)
- Expand domestic violence beds/shelters (Forum #3, *Domestic Violence*)
- Increase safety, privacy of shelters; most are not hidden (Forum #3, *Domestic Violence*)
- Remove perpetrators of abuse so victims can stay in their homes - 2 (Forum #3, *Domestic Violence*)
- Harsher punishment for abusers (Forum #3, *Domestic Violence*)
- Crisis counseling centers for women in abusive situations or at risk of abuse (Forum #3, *Domestic Violence*)
- Increase funding for domestic violence agencies (Forum #3, *Domestic Violence*)
- Counseling for children who witness domestic violence and for men who witnessed domestic violence while growing up (Forum #3, *Domestic Violence*)
- Train agency caseworkers to be trauma sensitive; provide trauma therapists; educate providers about PTSD - 3 (Forum #3, *Domestic Violence*; Forum #4, *Housing*)
- PTSD (Post-traumatic stress syndrome) should be recognized as a disabling condition by the federal government, enabling eligibility for SSI benefits (Forum #3, *Domestic Violence*)
- Increase collaboration between domestic violence agencies and homeless provider (Forum #3, *Domestic Violence*)
- Collaboration among agencies to prevent domestic violence (Forum #3, *Domestic Violence*)
- Develop empathy in youth to prevent future abusers; anti-bullying education in schools – 2 (Forum #3, *Domestic Violence*)

E. Families with Children

Affordable childcare: Including for infants and for those working evening/night shifts; so people can work.

Strengthen supports and services for families and children: Full-time social worker for every public school; more on-site daycare at workplaces; funds to counsel youth on their own; focus on the problem of family violence; educate children to avoid violence; educate children early on about addictions, prison; support so parents can offer their children stable home lives.

- Family preservation services - 2 (Forum #2, *Families; Youth*)
- Early intervention to ensure that children of people who are homeless break the cycle (Forum #4, *Housing*)
- Stable access to health/dental care and school for homeless children (Forum #2, *Families*)
- Education/training for families (Forum #2, *Families*)

- More programs focused on mother-child reunification (Forum #3, *Jail/Prison Release*)
- Focus attention on children in homeless families; help them develop skills and motivation to avoid homelessness in the future (Forum #4, *Housing*)
- Interventions for children in families with a parent in prison (Forum #4, *Housing*)
- Identify and address childhood learning disabilities early on (Forum #4, *Housing*)
- More help for foster children, who often have special needs and are at risk for homelessness (Forum #4, *Organizational Structures*)

F. Youth

- Fund relative placement (Forum #2, *Youth – 2*)
- In-school day care for teen moms (Forum #2, *Youth*)
- Address needs of children transitioning into adulthood (Forum #2, *Youth*)
- School-based mentoring (Forum #2, *Youth*)
- Funds for youth services that are not Medicaid-billable (Forum #2, *Youth*)
- Character education (Forum #2; *Youth*)
- Don't label children in transition "homeless" (Forum #2; *Youth*)
- Address barrier of documentation for youth seeking employment (e.g., lack of birth certificate, SS#) (Forum #2, *Youth*)
- Places for youth to go; people to talk to - 2 (Forum #2; *Youth*; April 6 Focus Group)
- Solve the problem of children aging out of foster care; help them become functioning adults (Forum #4, *General Priorities*)

G. Immigrants and Refugees

Address language and cultural barriers: Language assistance, free English classes; ESL for refugees, Spanish for English speakers; Increase awareness of cultural differences, spread understanding about Hispanic culture; more culturally competent services, designed to respond to the needs/priorities of Hispanic people.

- Legal assistance, increased access to Legal Aid - 2 - (Forum #2, *Immigrants/Refugees*)
- Buddy program for employment; team up English speaker with Spanish speaker (Forum #2, *Immigrants/Refugees*)
- Change laws so immigrants will not fear being identified and can more readily obtain legal documentation; bring the INS into the discussion - 2 (Forum #2, *Immigrants/Refugees*)
- Hire more bilingual staff and translators for institutions, including government, non-profits and churches (Forum #2, *Immigrants/Refugees*)

H. Persons Released from Jail or Prison

Transitional programs to help ex-offenders to succeed in the community: halfway houses/transitional housing; life skills training, e.g., budgeting, renting; "bridge" employment programs providing training and jobs upon release; work release programs to promote work stable employment upon release; mentors; follow-up support; Department of Corrections housing specialist to coordinate transition from prison.

Reduce and remove housing barriers for ex-offenders: change HUD rules; increase housing options for those with felony records.

- Appropriate substance abuse treatment in prisons and jails (Forum #3, *Jail/Prison Release*)
- Large parole fees (?) mean that people who can't pay are set up for failure (Forum #2, *Single Me*);
- Change HUD rules to allow ex-offenders to live in HUD housing (Forum #3, *Jail/Prison Release*)
- Need to have housing available upon release (Forum #3, *Jail/Prison Release*)
- Offer incentives to employers and landlords to hire and rent to ex-offenders (Forum #3, *Jail/Prison Release*)
- Upon release, offer ex-offenders the opportunity to return to their home communities (Forum #3, *Jail/Prison Release*)
- More emphasis on accepting responsibility (Forum #3, *Jail/Prison Release*)
- Provide meaningful prison programs to help change behavior (Forum #3, *Jail/Prison Release*)
- Start family reunification process early enough so that offender can benefit from existing community housing programs (Forum #3, *Jail/Prison Release*)
- Develop community intervention options (diversion) other than arrest (Forum #4, *Education/Training*)

I. Veterans

- Job training (Forum #2, *Veterans*)
- Education (Forum #2, *Veterans*)
- Affordable housing (Forum #2, *Veterans*)
- Life skills training; being a good renter, budgeting, etc. (Forum #2, *Veterans*)
- PTSD treatment (Forum #2, *Veterans*)
- Benefits awareness (Forum #2, *Veterans*)
- Special focus on veterans needed (Forum #3, *Health/HIV*)

J. Transportation

Increased bus routes and expanded schedules: Seven days a week; serve areas outside Raleigh, such as Zebulon; regionalize system – serve all of Wake County, Durham/Orange/Johnston; buses need to come more often; Sunday buses; revamp routes to accommodate ridership.

Discounted or free bus tickets: More bus tickets available; discounted fares for homeless/indigent care *providers*; free public transportation vouchers for low-wage workers; provide more funds to non-profits to purchase bus passes for clients; provide bus vouchers to give to clients in need.

- Transportation to affordable housing apartments in Cary (Salvation Army Focus Group)
- Provide access to low cost, dependable vehicles (Salvation Army Focus Group)

- Assist with vehicle purchase/maintenance for low-income people - 2 (Salvation Army Focus Group;
- Transportation to medical appointments (Forum #3, *Health/HIV*; Forum #4, *Transportation*)
- Advocate for government subsidies for public transportation (Forum #4, *Transportation*)
- Educate bus riders to successfully use public transportation system (Forum #4, *Transportation*)
- Encourage broader mass transportation, e.g., train linkage to neighboring counties (Forum #4, *Transportation*)
- Provide bus transportation to more middle class neighborhoods, so that affordable housing options can be developed for people without cars (Forum #4, *Transportation*)
- Create walkable communities, e.g., Briar Creek, with range of housing, shopping, jobs (Forum #4, *Transportation*)
- Address harassment on buses (Forum #4, *Transportation*)
- Disability/Elderly/Medicare/Medicaid cards cannot be used on buses during peak hours (Forum #4, *Transportation*)

K. Employment and Training

Living wage: True living wage; significantly raise minimum wage; living wage for city, county and state jobs; pass a living wage ordinance for city and county contract work; require restaurants to pay minimum wage.

Involve the business community in job training/expanding employment

opportunities: Partnerships among business, banking, government, chambers of commerce, churches to create employment opportunities; mandate major city/county contractors participate in train-to-hire program (certain percent of new hires); tax credits to major employers for job training programs (e.g., Time Warner, Greg Poole, Progress Energy); provide tax breaks and more recognition for companies hiring people with disabilities short-term training certificate programs led by businesses; training in real life skills.

Additional job training/education strategies: intensive over short periods of time, training for career paths upward, education located near affordable housing; provide men with education to learn how to work; options for job skills training; job coaches; short-term certificates; centralized information on program deadlines/requirements, application procedures.

Training content: Training for skilled jobs, such as electrician vocational training; training for jobs paying above minimum wage; computer skills training; workshops focused on job skills and confidence-building; GED classes.

- Community-wide barter system (based on Emma Bucks Program, Emma, NC), whereby people provide services for others, earn credits, and cash them in for services/goods - 2 (Forum #2, *Families*; Forum #4, *Structures of Homelessness*)

- Small business loans for people whose credit history is not good enough to receive bank loans (Forum #2, *Single Men*)
- Mentors to help people maintain employment (Forum #4, *Training/Education*)
- Support groups for transition times between jobs (Forum #4, *Training/Education*)
- A network of employers willing to hire workers who are homeless and/or have criminal records (Salvation Army Focus Group)
- Set up “matching program” to encourage those with jobs to save money (Salvation Army Focus Group)
- Part-time work opportunities for those in recovery, which is too demanding for full-time work (Forum #3, *Alcoholism/Substance Abuse*)
- “Dress for Success” program, providing used clothes in good condition for interviews and the workplace (Forum #3, *Health/HIV*)
- Provide subsidies to enable retraining (Forum #4, *Jobs/Fair Wages*)
- Assist job-seekers to gain insight into their skills sets and adequate training to obtain a sustainable job (Forum #4, *Jobs/Fair Wages*)
- Address exploitation of temporary and migrant workers (Forum #4, *Jobs/Fair Wages*)
- Establish adult education centers throughout Wake County (Forum #4, *Training/Education*)
- Provide a trade school track at the high school level, to provide non-college bound students with employable skills (Forum #4, *Housing*)
- Increase wages for food preparation and service industry jobs (Forum #4, *General Priorities*)
- End illegal alien employment and outsourcing (Forum #4, *General Priorities*)
- Create a non-profit clearinghouse for temporary labor (Forum #4, *Organizational Structures*)
- Create a centralized “skills registry” to match workers with jobs (Forum #4, *Jobs/Fair Wages*)
- (Forum #4, *Education/Training*)
- Help people find jobs where they can be self-sufficient, and where growth opportunities exist (Forum #4, *Jobs/Fair Wages*)
- Provided targeted scholarships to Wake Technical Center (Forum #4, *Training/Education*)
- Develop apprenticeships with skilled tradespeople (Forum #4, *Training/Education*)
- Create program of “financial mentors” to help individuals learn “financial literacy” – budgeting, saving, managing money (Forum #4, *Training/Education*)
- Encourage large employers to subsidize employees (?) (like Cary’s housing program) (Forum #4, *Training/Education*)
- Fundraising projects (?) (Forum #2, *Single Women*)

L. Benefits/Income Supports

- Efforts to ensure child support from deadbeat dads (Forum #2, *Families*; Salvation Army Focus Group;
- Help obtaining disability benefits (Salvation Army Focus Group)
- Ensure that people moving into employment can still afford medications, don’t entirely lose medical benefit (Forum #2, *Single Men*)

- Reduce length of application process for disability, Medicaid and other benefits (Forum #3, *Mental Illness/Hospital Discharge*)
- Lift SSI earnings limit, so people won't lose all benefits once they begin working and becoming independent (Forum #3, *Mental Illness/Hospital Discharge*)
- Make SSI benefits available more quickly to people with serious mental illnesses (Forum #3, *Mental Illness/Hospital Discharge*)
- Provide transition funding for people awaiting SSI and Medicaid determinations (Forum #3, *Mental Illness/Hospital Discharge*)

PROGRAMS AND AGENCIES CITED AS POSITIVE/HELPFUL

1. AA, NA, CA
2. A.J. Fletcher Foundation
3. Aurora House (2) – when it was a partnership between CASA, WCHS and Urban Ministries
4. ATC
5. Caramore Community, Carrboro, NC – residential, vocational training for adults with serious mental illness
6. Cary Church of God – working with Hispanic homeless people to end homelessness
7. CASA (6) – partnered with an intensive treatment team; people with disabilities and mental illness; housing services; supportive housing; sponsors landscape business
8. Christian Fellowship
9. Church in the Woods – Meeting people where they are
10. Club Houses for individuals with psychiatric disorders: Derek's Renaissance House/Fountain House
11. Community Outreach Team
12. Community Resource Connections – providing information for all resources in different sections of Raleigh, with help from faith community
13. Continuum of Care (5)
14. Cornerstone (5) – Human services
15. Crisis Hotline
16. Dorothea Dix
17. Durham Rescue Mission
18. Emergency shelters
19. Emergency shelters for domestic violence
20. Emaus House (2) – supportive housing
21. Employment Security Commission
22. Ending Homelessness Forums/Ten Year Plan (4)
23. ESL Program – helping Hispanic community to learn English and be more competitive in society
24. Exodus – housing program
25. Faith community/church groups (4) – historically responsive to homeless people; downtown churches; interfaith agencies using voucher system(?)
26. Family, Youth, Inc.
27. Fisherman's Training/Interfaith Food Shuttle
28. Glory to Glory

29. Good Shepherd Ministries
30. Habitat for Humanity – Home ownership; requires sweat equity
31. Hargett House – transitional housing
32. Hargrove Center – drop-in center
33. Harriet’s Home – 12-month rehabilitation program for women ex-offenders; only 25% recidivism
34. Harrington Place (5) – transitional housing for up to 18 months; pilot housing program for people with mental illness; thrift store
35. Haven House Services (4) – scattered site housing, employment, links to mental health, continuum of care for children ages 12-21; John Baker Charter School; day facility for youth
36. The Healing Place (14) – assists with drug addiction, detox, legal services; helps with housing and jobs; offers 12-step program, helps men get off street, stay sober, and contribute to society; only 20% rate of relapse; works well with police; gains trust of homeless people; invites folks in from camps
37. Helping Hand (2)
38. Helen Wright Center (4) – help transition from Dorothea Dix; help “get meds right”; 75% of clients’ money put aside for housing
39. HOME – transitional home for men released from prison
40. Homeless Coalition (2) (same as “Homeless Working Group?”)
41. Homeless people – those who have lived on the streets for years and know how to survive (2)
42. Homeless Working Group (2)
43. Hope for the Homeless – student organization that donates foods from school cafeteria (what schools?)
44. Horizon Health Center – seeing more Veterans
45. HUD Section 8 vouchers (8)
46. Interact (3) – Including their community education efforts
47. Job Start – helps released offenders to find employment
48. Jubilee Jobs – Step-Up Ministries
49. Labor Finders – Jobs for homeless people
50. Lennox Chase Apartments (5) – Supportive housing
51. McKinney-funded programs
52. Mennonite Church – homebuying program
53. Mentoring programs (2)
54. New Bern House – Transitional housing with counseling
55. North Carolina Cooperative Extension – Program of housing rental-to-ownership
56. North Carolina State students – volunteer involvement
57. Open Door Clinic – Alleviates burden on ERs
58. Oxford Houses
59. PATH Outreach teams – outreach case managers looking to engage homeless people; SPMI outreach (3)
60. Pan Lutheran Ministries (4)
61. Passage Home (5) – faith-based housing
62. Police officers – intervening in domestic violence situations
63. Project Moore Square – feeds hungry people

64. Project Ready – Help kids re-enroll in school and get back on track
65. Raleigh Housing Authority
66. Raleigh Rescue Mission (7) – Job training, life skills, builds skills/confidence
67. Raleigh Transit Authority – studying ways to better serve community
68. Salvation Army (3) – Committed and organized
69. Single Portals – will help single moms find jobs and day care
70. Some schools – teaching strong values
71. South Wilmington Street Center (SWSC) (9) – Help with job-finding; groups for different needs; treat you well; offer counseling; help finding housing (2 comments: those not in the “program” do not receive as many services, opportunities)
72. Southlight (2) – Teaches survival techniques
73. Step Up Ministries
74. Substance Abuse Treatment Center (unnamed) – Detox, treatment, help maintaining sobriety, provided correct mental diagnosis and medication
75. Summit House
76. Supported Housing Team – importance of in-home services
77. Swinburne – multiple providers located in one place
78. Triangle Compassion Network – works with Mission Tree, generally offering capacity building grants for community programs
79. Triangle Family Services – program for abusers
80. TROSA – self-employment program in Durham; rebuilds cars and sells them cheaply
81. UNC Chapel Hill, Department of Psychiatry – expertise in schizophrenia and other mental illnesses
82. United Way 211 information and referral program
83. Urban Ministries (3) – supported by faith community
84. Veterans Administration
85. Veteran’s Affairs Clinic on Sunnybrook
86. Voc Rehab (2)
87. Wake County Human Services (2) - Mental health, substance abuse and health services networks; “Ready to Rent” classes; Jack Rogers
88. Wake County Public Schools - homeless liaison
89. Wake Housing
90. Wake Interfaith Hospitality Network (4) – church-to-church housing; resources to increase stability
91. Wake Tech – GED Program
92. Wheels for Hope
93. Women’s Center (downtown) (5) – links clients with resources
94. Women Embracing Recovery
95. Work First (2)
96. WRAL and Jiffy Lube – sponsor drives for donations for people who are homeless

If you have questions or comments on Ending Homelessness – The Ten Year Action Plan, please feel free to contact City, County, Triangle United Way, and Continuum of Care partnership representatives:

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For more information see www.raleigh-nc.org select “Ending Homelessness”