



# Philadelphia's Ten-Year Plan To End Homelessness:

*Creating Homes,  
Strengthening Communities,  
and Improving Systems*

October 2005

Developed under the auspices of  
the Mayor's Task Force on Homeless Services

Co-Chairs:

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John F. Street, Mayor

# Letter from Co-Chairs

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Dear Civic Leader:

Philadelphia is a city of firsts - the first library, the first zoo, the first hospital. Now, with your commitment and leadership, we hope to be the first City to end homelessness. We cannot do it alone. We need partners in local, state, and federal government, as well as other sectors. We know what works. In 2002, Philadelphia was named by the United States Department of Housing and Urban Development as one of the seven "best practices" cities for addressing homelessness. This plan outlines the next steps in reaching this critically important goal of ending homelessness in Philadelphia.

Philadelphia is becoming a destination city, and our work to end homelessness has to be part of the overall economic and tourism agenda to make Philadelphia a preferred place to live, work, and visit. In the past seven years, we have reduced the number of people living on the street by 70 percent. Proven, successful programs - from permanent supportive housing to partnerships that result in jobs at livable wages - are now complemented by innovative new "housing first" approaches, in which housing is provided immediately and services are brought on-site.

However, even as we have made tremendous strides in helping thousands of Philadelphians to overcome homelessness, too many men, women, and children continue to become homeless each year. To truly end homelessness, we have to take a two-pronged approach to both prevent and also address the problem as it is today. To truly end homelessness, we need safe, decent, affordable housing for households of all sizes; accessible healthcare; jobs at livable wages; and an education system that provides our children with the tools to compete in the knowledge economy.

Though this may at times seem an insurmountable task, even in an inhospitable economic and political environment, both the public and private sectors have been able to make real progress. This includes innovations like Community Behavioral Health, which reinvests Medicaid dollars to provide resources for addressing homelessness; the Philadelphia Housing Trust Fund, which raised small property-transfer fees to dedicate \$15 million to affordable housing; and the mental health consumer and disability movements, which created progressive policies and practices that help to integrate all people into every neighborhood and every aspect of our public and civic life. We need to build on this base of tenacity, dedication, and resilience, even in the face of harsh realities.

To make this plan real, we are committing our combined efforts and resources. More than 100 organizations - corporate, philanthropic, nonprofit, government, religious - have played a role in developing this plan. Philadelphia has a remarkable track record and history and we need to collaborate and persevere to achieve our purpose. The road remains long and the work is difficult. We cannot do it without you - we need every sector and community to play a part in this plan to enhance the life of every Philadelphian. The dedication and hard work of so many set an example for us redouble our efforts to realize our shared goal - to end homelessness in ten years. We look forward to the day when Philadelphia can add this to its long list of "firsts."

S. Mary Scullion  
Executive Director  
Project H.O.M.E

Pedro A. Ramos, Esq.  
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# Introduction & Vision

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In June 2004, Mayor John F. Street asked his Task Force on Homeless Services to create a ten year plan to end homelessness in the City of Philadelphia. **Philadelphia's Ten Year Plan to End Homelessness: *Creating Homes, Strengthening Communities, and Improving Systems***, grew from the collective efforts of more than 100 participants, representing government agencies, homeless service providers, housing providers, community development corporations, advocates, and individuals experiencing homelessness in this city.

Building off *Our Way Home: A Blueprint to End Homelessness in Philadelphia, Opening the Door to Let the Future In*, as well as the work of the Corporation for Supportive Housing, this planning process sought to involve a broad range of stakeholders — from inception through implementation and monitoring — to establish measurable and time driven objectives oriented toward the ultimate goal of ending homelessness.

Through collaboration and cooperation and led by the Mayor's Task Force on Homeless Services, all Philadelphians – residents, city agencies, housing and service providers, advocates, area businesses and foundations – will tackle those conditions and problems which lead to homelessness. Together, we will address the lack of decent affordable homes, jobs at livable wages, healthcare, and education. Together, we will make the city's neighborhoods resource rich, able to help residents confront challenges and gain skills locally. Together, transform the city's emergency shelters into a point of triage, not a destination. (The Mayor's Task Force will further empower homeless service providers by maintaining resource inventories.) Together, by rising to these critical roles and facing these challenges, we will end homelessness in Philadelphia.

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## List of Goals to End Homelessness

- Goal 1:** Open the “back door” out of homelessness—ensure that all Philadelphians have a decent, safe, accessible and affordable home.
- Goal 2:** Close the “front door” to homelessness—implement successful prevention strategies.
- Goal 3:** Ensure that no one in Philadelphia needs to live on the street.
- Goal 4:** Fully integrate all health and social services to aid in preventing and addressing homelessness.
- Goal 5:** Generate the political will, civic support, and public and private resources to end homelessness.
- Goal 6:** Build human capital through excellent employment preparation and training programs, and jobs at a livable wage.
- Goal 7:** Make shelters a dignified place for emergency assistance, not a destination.
- Goal 8:** Support families and individuals to promote long-term independence and prevent their return to homelessness.

# Introduction & Vision, cont'd.

## One Man's Experience

Sam is 31 years old and has been homeless on the street and in shelters since 1992, after "aging-out" of the child welfare system. In the five years before entering the city's new housing first initiative, he was in and out of shelter 134 times and had 18 inpatient admissions to drug and alcohol treatment or psychiatric inpatient treatment (averaging more than three inpatient admissions per year). Now in Home First, Sam has been housed for over seven months without any inpatient admissions and has had short periods of employment in that time.

Home First offered Sam an opportunity to have his own apartment without the constraints, rules, and regulations of a large shelter facility, and with intensive support services from a team of professionals who meet weekly in Sam's home. Sam attends weekly support groups and has worked with a psychiatrist who ultimately was successful in encouraging him to take his medication regularly. Sam truly enjoys the independence and respect the program has given him and credits Home First with saving his life.





### One Family's Experience

Crystal was 15 years old when the Department of Human Services (DHS) removed her from her abusive mother's home. She was unsuccessfully placed in several group homes before she was temporarily placed at 3902 Spring Garden, a homeless shelter and transitional housing facility for women, children and teen girls. Crystal was able to stay there for three months before being moved to another group foster care setting. By the time she was 18, she had lived in six additional foster care settings, but had been removed from all of them for behavioral problems. Because she was pregnant and had nowhere to go, DHS referred her to the same shelter. Notably, it was the first place that ever accepted her back after she had left.

At the shelter, Crystal received comprehensive case management and, after her baby was born, she attended the on-site Parent-Child Education Program, which provides mothers with appropriate parenting skills, in an interactive setting. Although Crystal was initially defiant, her case manager provided the unwavering support Crystal badly needed but had never received.

Less than a year after she arrived at the shelter, Crystal obtained subsidized housing through the Philadelphia Housing Authority (PHA). However, two years after she moved in, she was evicted for drug possession. She had become involved with an abusive, drug-dealing boyfriend and had developed a drug problem of her own. With no where else to go, she returned to the shelter. And once again, the shelter took her in.

Not surprisingly, Crystal demonstrated considerable anger, and she had a lot of trouble getting along with others and accepting authority. Her case manager stood by her and made sure she received drug treatment as well as professional counseling. Nearly two years later, Crystal felt ready to live on her own—with the continuing support of her case manager. She received a Section 8 voucher and has been in her home for almost ten years. She has been gainfully employed for the last eight years, and her children are thriving.

While the primary credit for Crystal's recovery belongs to her, she also credits the shelter for the stability and growth she has achieved in her life. The only member of her family of origin to secure permanent subsidized housing and employment, Crystal feels that the shelter staff made the difference for her because "they were always there when I needed them and they always saw the best in me."

# Current Conditions

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## It is time to create homes...

High-quality, stable, affordable housing is just a dream for too many Philadelphians. Year after year, the demand for accessible and affordable housing exceeds supply as incomes fail to keep pace with rising housing costs and housing production fails to keep pace with need.

In 2000, the city's poverty rate was twice the national rate (22.9 percent versus 11.3 percent); in 2002, unemployment in Philadelphia was also significantly higher than nationwide (7.5 percent versus 5.8 percent).<sup>1</sup> By 2003, nearly 225,000 Philadelphia households (more than one-third, or 37 percent, of the city's households) had low or extremely low incomes.<sup>2</sup> According to the National Low Income Housing Coalition, these households can at most afford to pay \$516 each month in rent – or just 50 percent of the city's fair market rent for a two bedroom unit (\$962). To fully afford that market-rate apartment, a worker earning the Minimum Wage would need to work 144 hours per week.<sup>3</sup> Not surprisingly, nearly three-quarters (72 percent) of extremely low-income households pay over 30 percent of their household income on housing and over half (52 percent) pay more than 50 percent; nearly half (46 percent) of low-income households have excessive housing cost burdens.<sup>4</sup> More than 31,000 households live in overcrowded conditions.

Consequently, the demand for affordable housing exceeds the supply by at least 60,000 units.<sup>5</sup> Making matters worse, particularly for households facing homelessness, the Continuum of Care (see Glossary) estimates a gap of more than 7,000 beds in permanent supportive housing for individuals and families. Last year, the number of new units under development (490) filled just 7 percent of this gap. At the same time, Philadelphia's wait list for Section 8 vouchers is currently 6,510 names long (and closed to any new applicants); the number waiting for public housing is 14,880.<sup>6</sup>



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# It is time to strengthen communities...

Individuals and families throughout Philadelphia often face a wide range of issues that put them at risk of becoming homeless. Serious mental illness, emotional distress and alienation, physical ailments, addictive disorders and disabilities are not uncommon. Domestic violence, under- or unemployment, the serious lack of jobs at a livable wage, or the lack of skills and knowledge necessary for self-sufficiency (including an awareness of applicable benefits and supports) are other typical challenges. In fact, one out of every three Philadelphia households lives in poverty.

Those in need often do not know where to find support and services in their community. When they do find services, too often these programs simply postpone homelessness rather than prevent homelessness. These programs frequently do not have adequate resources to meet existing need, much less the complex needs of those on the verge of homelessness. Even worse, a variety of public agencies and organizations do not have adequate exit strategies for individuals, families, and children leaving their care; many discharge their graduates directly to homelessness.

Despite these overwhelming needs, the resources for affordable, accessible and integrated housing, preventative outreach, and services for those facing housing crises are dramatically insufficient. While more funding is needed for bricks and mortar, additional resources also are needed for operation and service provision, and rental subsidies. And existing services and systems are too fragmented and difficult for individuals and families to successfully access in their communities and once in emergency or transitional shelter facilities.

For example, one of the critical priorities for ending homelessness is teaching all children the knowledge and skills necessary to become independent adults through our public education system. It is imperative that our schools provide educational and emotional support and services for vulnerable children and adults so that they can develop the confidence and ability, and acquire the required credentials, to secure and maintain employment to support themselves and their families.

Standing in the way of real change, though, is the fact that homelessness and poverty are not issues of significant importance to most Philadelphians. In the city and the region, the popular perception is that homelessness is simply a big, unsolvable problem, or alternatively that Philadelphia's homeless problem is solved by simply reducing the number of people living on the streets. Educating the general public and elected officials is necessary to change this thinking and to enlist area citizens and politicians in the fight to end homelessness.

# Current Conditions, cont'd.

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## It is time to improve systems...

The City of Philadelphia's Office of Emergency Shelter and Services (OESS) provides prevention and diversion services, relocation services, short-term shelter placement, case management, referral to alternative housing options, adult protective services, and transitional housing. Over the course of the year, OESS serves approximately 15,000 people in shelter. In Fiscal Year 2005, most people seeking shelter were men (72 percent) and identified as African American or Black (86 percent); nearly one out of every four shelter residents (22 percent) was under 18 years of age; 10 percent were children 5 years old or younger.<sup>7</sup> Of all households in shelter in April 2005, 13 percent included children under 18 years of age. The vast majority of families with children (94 percent) are headed by single parents.<sup>8</sup>

Emergency shelter is available for individuals and families who do not have any suitable and adequate nighttime residence and require shelter on a temporary basis. People who need emergency shelter can request help at the main OESS Intake Reception Centers seven days a week, 24 hours a day. The Reception Center for Single Men is at the Ridge Avenue Center. The Reception Center for Single Women and Families with Children is at the OESS office at the Salvation Army Eliza Shirley House. Once consumers are assessed, households are placed in the most appropriate, available emergency shelters, boarding homes, or other housing according to their needs.

All shelter residents receive comprehensive case management services. Transitional housing is available to households who need longer-term, supportive housing in order to successfully transition to permanent housing in the community. Households in need of permanent supportive housing in order to maintain their housing stability are referred to this resource (if it is available) through consultation with their shelter case manager.

In addition, the Department of Public Health (DPH) provides a number of primary and preventive medical services through on-site health centers at many shelters and transitional housing facilities. These centers and other DPH outreach services help make shelters safer, provide support to the families and individuals who are homeless, and promote longer-term independence.

However, the complex causes of homelessness pose a real challenge for service providers, particularly when efforts are not well coordinated between agencies and organizations. This makes effectively serving clients incredibly difficult, and is at least partially responsible for the lack of consistency among current services.

Residents tend to stay in emergency and transitional shelter facilities far too long, partly because Philadelphia does not currently have the right mix of emergency shelter, transitional housing, and permanent supportive housing beds: Just one-in-six households assisted in emergency shelter (or 17 percent) can be accommodated in transitional housing, only *one out of every ten* can be accommodated in permanent housing.<sup>9</sup>

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Many of those who are able to move to affordable housing typically do not receive enough aftercare to make their move a successful one. While homeless service providers are committed to providing aftercare services, aftercare programs are significantly under-funded and vary widely from one organization to the next.

When shelters and programs fail to provide an environment of respect where dignity can be restored and preserved (the case in some large city-sponsored shelters where case workers and staff do not have appropriate training), many individuals choose to live out on the streets. While the number of Philadelphians living on the street has been significantly reduced since 1997, on any given night, up to 350 people might be found sleeping on the streets of Center City and vicinity.<sup>10</sup>

Through a partnership between city offices and non-profit providers, street outreach services are offered to persons living on the streets who are unable or choose not to access OESS assistance through the standard intake process and reception centers. These services are coordinated through the Outreach Coordination Center (OCC).



# Goals for Making Our Vision Reality

## The Challenge:

*Philadelphia has a serious shortage of available, unsubsidized, affordable units and a never-ending wait for rental subsidies and public housing. In addition, the need for permanent supportive housing, as well as accessible housing, far surpasses supply.*

## The Response:

**Ending homelessness means creating homes: providing high-quality, accessible, affordable housing units for all Philadelphia households.**



Improving Systems

Strengthening Communities

Creating Homes

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## The Approach:

### **GOAL 1: Open the “back door” out of homelessness – ensure that all Philadelphians have a decent, safe, accessible and affordable home.**

- Objective 1: Increase the resources available for developing and managing accessible and integrated permanent affordable and supportive homes.
- Objective 2: Increase housing and service providers’ capacity to produce and oversee an adequate supply of housing that meets the needs of all Philadelphia residents.
- Objective 3: Increase the stock of high-quality permanent affordable and supportive homes, and ensure accessibility to residents and visitors with physical disabilities.
- Objective 4: Increase the number of rental vouchers and other housing subsidies available to Philadelphia households, including individuals with disabilities.
- Objective 5: Streamline the process of applying for permanent housing.

# Goals, cont'd.

## The Challenge:

*Too many vulnerable individuals and families are unaware of the important resources that do exist, and too many public programs discharge people into the homeless system or postpone rather than prevent homelessness. Today, fragmentation, insufficient resources, and lack of civic and political will, prevent service providers and city agencies from best responding to the varied needs of individuals and families at risk of homelessness.*

## The Response:

**Ending homelessness means strengthening communities: coordinating existing services, finding additional resources to fill gaps, and generating political will and civic support in the fight against homelessness.**



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## The Approach:

### **GOAL 2: Close the “front door” to homelessness – implement successful prevention strategies.**

Objective 1: Identify the primary reasons people experience homelessness, as well as those geographic areas and systems from which a high number of individuals and families enter homeless shelters.

Objective 2: Eliminate barriers to accessing community-based resources and services and public benefits.

Objective 3: Design, fund, and implement strategies (based on existing best practices) to better assist at-risk populations.

At-risk populations include but are not limited to victims of domestic violence; children in families as well as unaccompanied youth with or without their own children and youth who have recently aged out of foster care and the delinquency system; individuals recently discharged from prison or hospitals; veterans; people with alcohol or drug problems; individuals with a mental illness; families reunifying after Department of Human Services involvement; linguistic minorities; lesbian/gay/bisexual/transgender individuals; immigrants; and senior citizens.

Objective 4: Ensure that the unique and complex needs of at-risk children are addressed in a comprehensive and holistic manner.

Objective 5: Support and collaborate with the public school system to ensure that all Philadelphia students receive the education they need for independent adulthood.

# Goals, cont'd.

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Improving Systems

## **GOAL 3: Ensure that no one in Philadelphia needs to live on the streets.**

Objective 1: Expand street outreach services beyond Center City by developing community partnerships in areas of the city where street homelessness exists.

Objective 2: Expand street outreach services to currently underserved populations.

Objective 3: Eliminate fragmentation in health and social service delivery, including physical health, mental health, and substance abuse treatment.

Strengthening Communities

## **GOAL 4: Fully integrate all health and social services to aid in preventing and addressing homelessness.**

Objective 1: Identify all resources available to individuals and families at risk of homelessness throughout the city.

Objective 2: Implement a citywide plan to coordinate systems and services.

Objective 3: Strategically use data to track needs, document outcomes, and develop appropriate and effective programs.

Creating Homes

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## **GOAL 5: Generate the political will, civic support, and public and private resources to end homelessness.**

- Objective 1: Advise local officials on policy issues that impact service delivery in the community.
- Objective 2: Engage the public and motivate them to take actions to end homelessness and poverty by convincing faith communities, civic organizations and neighborhood-based organizations and groups to target and solve specific problems.
- Objective 3: Educate federal, state, and local representatives and persuade politicians on issues related to homelessness and poverty.
- Objective 4: Engage the philanthropic and corporate communities and motivate them to take actions to end homelessness and poverty by appropriately aligning their private resources to target and solve specific problems related to homelessness as outlined in the Ten-Year Plan.

# Goals, cont'd.

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## **GOAL 6: Build human capital through excellent employment preparation and training programs, and jobs at a livable wage.**

Objective 1: Improve and expand the content, scope and delivery of information about existing job training and job retention programs and services aimed at or available to the homeless.

Objective 2: Create the link between employer and potential employee (The Clearing House) where employer needs and standards are understood and communicated to participating providers, and where trusting matches can be made, managed and monitored. The vision is a new paradigm: an employer-shaped job development effort and a single point of employer contact.

Objective 3: Review and develop, through partnerships with existing providers, a more encompassing approach to job readiness preparation – programs that respond to the diversity, range and depth of human needs.

Objective 4: Create a centralized, recognized voice for homeless employment objectives – to advocate for regulatory reform, resource application adjustments, major employer participation, linking of housing and income supports to continuing education and employment and the creation of employment related programs for the homeless.



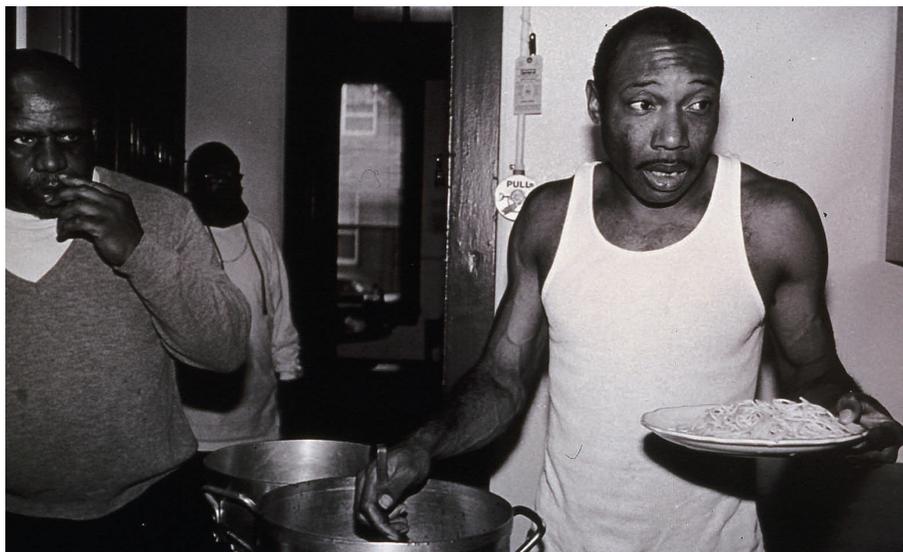
# Goals, cont'd.

## The Challenge:

*Once in the city's shelter system, too many individuals, families and children receive inconsistent, insufficient, or inappropriate services. As a result, many spend longer than necessary in emergency or transitional shelter. (Long shelter stays are also a function of the shortage of permanent supportive or subsidized housing units.) Even worse, others avoid the shelter system entirely, choosing instead to live on the street.*

## The Response:

**Ending Homelessness means improving systems: attacking the causes of homelessness and offering the right services to those in crisis in order to avoid shelter placement, reduce their length of stay in shelter, and prevent recidivism.**



Improving Systems

Strengthening Communities

Creating Homes

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## The Approach:

### **Goal 7: Make shelters a dignified place for emergency assistance, not a destination.**

- Objective 1: Transform Philadelphia's shelter system by appropriately specializing the city's facilities to meet needs.
- Objective 2: Improve and update shelter standards, and ensure quality and consistent application.
- Objective 3: Ensure that shelter staff members are sensitive to consumers' needs and situations, share a sense of community, and use a customer-service orientation.
- Objective 4: Make shelters safe and accessible for all, regardless of physical disability, gender identity, or status as a couple.
- Objective 5: Improve the effectiveness of initial assessments and ensure that individuals and families receive case management immediately as well as ongoing, high quality care.
- Objective 6: Improve the range and quality of services, and access to healthful alternatives, offered at emergency and transitional shelter facilities, and at supportive housing sites.

# Goals, cont'd.

Improving Systems

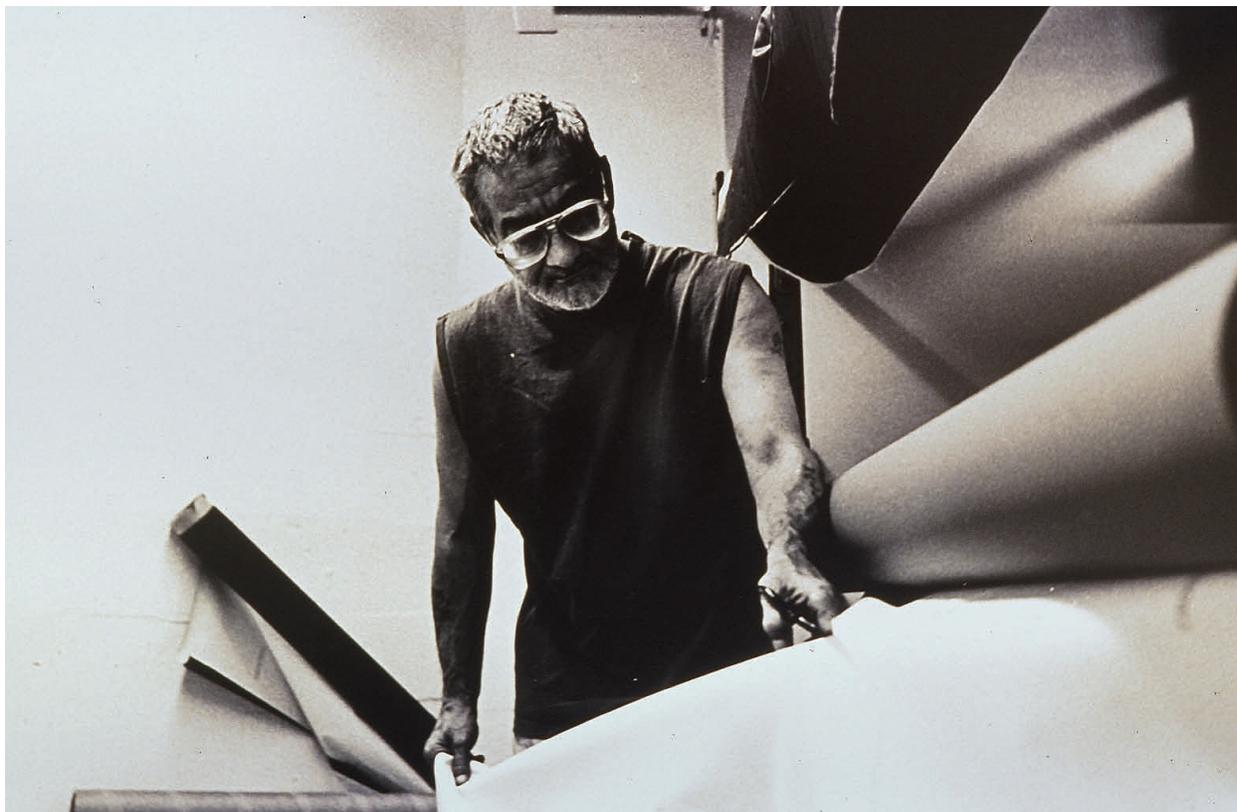
**GOAL 8: Support families and individuals to promote long-term independence and prevent their return to homelessness.**

Objective 1: Realign existing government funding to support after-care programs and on-going services for individuals and families returning to the community.

Objective 2: Link former shelter residents to community-based services by improving access to mainstream resources.

Strengthening Communities

Creating Homes





# Next Steps

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- STEP 1: **Receive the endorsement** of the Mayor’s Task Force on Homeless Services (May 20, 2005).
- STEP 2: **Obtain funding** to enable the Mayor’s Task Force to pursue the goals and objectives outlined in this plan (Ongoing).
- STEP 3: **Appoint an Action Leadership Team** to design, coordinate, and oversee the implementation of the plan’s goals around creating homes, improving systems and strengthening communities (September 2005).
- STEP 4: **Produce an Action Plan** with timelines, roles and responsibilities, for all tasks necessary to end homelessness in Philadelphia (December 2005).
- STEP 5: **Explore new resources to support the Action Plan.** Using a comprehensive analysis of all applicable government and foundation funding streams (prepared for this Plan by The Reinvestment Fund), the Action Leadership Team will identify potential sources of new or additional resources (Ongoing).

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**STEP 6: Work closely with existing efforts and coalitions** and receive the full cooperation of city departments to assist with ongoing implementation (Ongoing).

**STEP 7: Enlist an outside monitor** to review the implementation process and provide quality assurance on an ongoing basis (September 2005).



# Appendices

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## Footnotes

1. U.S. Census; Bureau of Labor Statistics.
2. *Year 29 Consolidated Plan*, 2003, p. 8.
3. *Out of Reach 2004 for Philadelphia County*, [www.nlihc.org](http://www.nlihc.org).
4. *Year 29 Consolidated Plan*, 2003, p. 9.
5. *Philadelphia's Housing Challenges: Why We Need a Housing Trust Fund*, <http://www.pacdc.org/TrustFund/about/housing%20challenges.htm>.
6. Housing Alliance of Pennsylvania.
7. Office of Adult Services.
8. Office of Emergency Shelter and Services.
9. *Year 31 Consolidated Plan*, 2005, p. 14.
10. *Year 31 Consolidated Plan*, 2005, p. 12.

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## Glossary of Terms

**Accessible Housing** - A home where an individual can do what they need and desire to do as independently as possible, regardless of any physical or mental disability.

**Affordable Housing** - Housing, either ownership or rental, either supportive or independent, for which a household will pay no more than 30 percent of its gross annual income.

**Aftercare** - Aftercare consists of services provided to homeless families and single adults who have left shelter, to assist them to become self sufficient and independent in the community.

**At-Risk Populations** - Victims of domestic violence; children in families as well as unaccompanied youth- with or without their own children- and youth who have recently aged out of foster care and the delinquency system; individuals recently discharged from prison; individuals recently discharged from hospitals; veterans; people with alcohol or drug problems; mentally ill individuals; families reunifying after Department of Human Services involvement; linguistic minorities; lesbian/gay/bisexual/transgender individuals; immigrants; senior citizens; and other vulnerable groups.

**Best Practices** - Strategies, activities, or approaches that have been shown through research and evaluation to be effective and/or efficient.

**Case Management** - Intensive and coordinated assistance is provided to single adults and families to address the issues leading to homelessness and the activities necessary for establishing self-sufficiency and independence.

**Chronic Family Homelessness** - A family is considered chronically homeless if the family 1) is homeless at the time of program intake and meets the McKinney definition of homeless for twelve consecutive months or more, or has had at least two episodes of homelessness in the past five years; AND 2) has either (for projects funded with Supportive Housing Program dollars) an adult or a child with a disability as defined by the federal definition, OR (for projects funded with Shelter Plus Care dollars) an adult with a disability as defined by the federal definition. This definition was locally established by the McKinney Public/Private Strategic Planning Committee.

**Chronic Homelessness** - Defined by the U.S. Department of Housing and Urban Development as at least one year of homelessness or “four distinct and sustained episodes of homelessness” over three years experienced by individuals with a disability.

**Community Behavioral Health** - With the institution of Medicaid Managed Care in Southeastern Pennsylvania, the City of Philadelphia created this organization whose goal is to administer payments to programs for the provision of behavioral health services to Medicaid eligible person.

**Consolidated Plan** - Represents OHCD's plan and corresponding budget for housing and community development activities, including: housing production, housing preservation, housing activities such as rental assistance and other activities for homeless persons and person with special needs, public and social services, employment and training and community economic development programs and services.

# Appendices, cont'd.

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**Continuum of Care** - A community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness.

**Corporation for Supportive Housing (CSH)** - CSH is a national organization that makes supportive housing understood, available, and effective. CSH provides high-quality advice and development expertise; makes loans and grants to supportive housing sponsors; and works to reform public policy to make it easier to create and operate supportive housing.

**Department of Housing and Urban Development (HUD)** - The United States Department of Housing and Urban Development, which is charged with increasing homeownership, supporting community development and increasing access to affordable housing free from discrimination.

**Department of Human Services (DHS)** - The City department that works to protect children from abuse, neglect, and delinquency and to ensure their safety and permanency in nurturing home environments. DHS also works to strengthen and preserve families by enhancing community-based prevention services.

**Discharge Planning** - A process designed to help individuals move appropriately from one system or level of care to another or to independence.

**Division of Social Services (DSS)** - The Division of Social Services (DSS) within the Managing Director's Office was created in 2000 by Mayor John Street to improve the quality of social services provided to the residents of Philadelphia. DSS brings together departments providing behavioral health, child welfare, public health, homeless, correctional, recreation and mental retardation services. The mission is to effectively anticipate, plan for and respond to the health and social needs of Philadelphia's children, adults and families through a more integrated and coordinated system.

**Emergency Shelter** - Defined by the U.S. Department of Housing and Urban Development as "Any facility the primary purpose of which is to provide temporary or transitional shelter for the homeless in general or for specific populations of the homeless."

**Extreme Housing Cost Burdens** - Generally defined as a situation in which a household spends more than 50 percent of its income for housing costs.

**Gender Identity** - As defined by the Philadelphia Fair Practices Ordinance, "Self perception, or perception by others, as male or female, and shall include a person's appearance, behavior, or physical characteristics, that may be in accord with, or opposed to, one's physical anatomy, chromosomal sex, or sex assigned at birth; and shall include, but is not limited to, persons who are undergoing or have completed sex reassignment."

**Home First Program** - Started in October 2002, this program offers the services of a multi-disciplinary Assertive Community Treatment (ACT) team – psychiatrist, nurses, and social workers – and subsidized permanent housing to 60 individuals who have long histories of living on the streets of Philadelphia.

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**Homelessness** - According to the federal Department of Housing and Urban Development (HUD), homelessness is the experience of sleeping in a place not meant for human habitation (e.g., the streets or an emergency shelter), or residing in an emergency shelter, transitional housing, or other supportive housing program.

**Housing First** - A homelessness-ending strategy in which people move directly from the streets or emergency shelter into permanent housing attached to supportive services. This is a new approach to ending homelessness that has already been demonstrated to be effective with transitioning individuals from chronic homelessness to permanent and housed stability.

**Mayor's Task Force on Homeless Services** - In January 1987, Mayor Goode created the Mayor's Public/Private Task Force on Homelessness, which includes homeless advocates, service providers, business people and city officials in its membership.

**Office of Behavioral Health/Mental Retardation Services** - This City agency offers mental health and mental retardation services, behavioral health services, and drug and alcohol abuse programs to all Philadelphia residents.

**Office of Emergency Shelter and Services (OESS)** - This is the City agency that contracts with approximately 35 shelter providers to provide temporary emergency housing (a bed, shared bath, and three meals per day) for homeless adults and families. OESS is responsible for identifying and referring eligible individual/families to the contracted shelter facilities.

***Opening the Door to Let the Future In*** - A 28-page plan to end homelessness by 2010, written in 2001. The document is available from the Philadelphia Committee to End Homelessness (802 N. Broad St., Box 15010, Philadelphia, PA 19130-0010, 215/232-2300).

***Our Way Home: A Blueprint to End Homelessness in Philadelphia*** - A 44-page document published in 1998 that outlined concrete policy recommendations in the areas of housing, jobs, shelter and services, and homelessness prevention. The document is available from the Blueprint to End Homelessness, a local civic organization (1207 Chestnut Street, Philadelphia, PA 19107, 215/851-1810)

**Outreach Coordination Center** - The OCC coordinates most of the city's outreach efforts, including a 24-hour homeless hotline, one comprehensive response team, two mental health specialty teams, two substance abuse specialty teams (one peer and one professional), and emergency backup from city agencies. The teams cover center city and west and southwest Philadelphia, where the majority of chronically homeless individuals who avoid shelters are found. In addition to these regular street "beats," OCC outreach workers respond to hotline calls from businesses, civic and neighborhood associations, and private citizens about homeless people in need.

**Overcrowded Housing Conditions** - A situation in which households exceed the legally-mandated number of residents per square footage.

**Permanent Housing** - Affordable housing which may be either rental or homeownership and which has no mandated limitation on length of stay.

**Permanent Supportive Housing** - Long-term, community-based housing with supportive services that enables special needs populations to live as independently as possible in a permanent setting. The sup-

# Appendices, cont'd.

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portive services may be provided by the organization managing the housing or coordinated by the applicant and provided by other public or private service agencies. Permanent housing can be provided in one structure or several structures at one site or in multiple structures at scattered sites.

**Prevention** - Early-stage interventions designed to alleviate the conditions which may lead to homelessness.

**Recidivism** - Relapse into a previous pattern of behavior, in this case homelessness.

**Section 8/Housing Choice Vouchers** - Rental assistance subsidies which enable a household to pay only 30 percent of their income for rent and utilities. The voucher covers the remaining housing costs. This program is funded by HUD and usually administered by local housing authorities.

**Shelter Plus Care** - The four components of this Department of Housing and Urban Development program include Tenant-based Rental Assistance; Sponsor-based Rental Assistance; Project-based Rental Assistance with or without rehabilitation; and Section 8 Moderate Rehabilitation Program for Single Room Occupancy (SRO) Dwellings.

**Subsidized Housing** - Housing that has financial support to make it more affordable to lower income households. That financial subsidy may come in the form of funds to offset development or pre-development costs, or assistance to pay for rental or operating subsidies.

**Supportive Housing** - Housing with services that enable participants to live more independently than they would otherwise be able to do. The type of services depends on the needs of the residents. Services may be short term, sporadic, or ongoing indefinitely.

**Supportive Services** - Services such as case management, medical or psychological counseling and supervision, childcare, transportation, and job training provided for the purpose of facilitating the independence of residents.

**Transitional Housing** - Temporary housing with services where individuals or families live for between 6 months and 2 years. During that time they receive case management services that prepare the household for independent living.

**Visitable Housing** - From the city's Consolidate Plan, all new construction housing development, should have at least one no-step entrance at either the front, side, back or through the garage entrance. All doors (including power/bathroom entrances should be 32 inches wide and hallways and other room entrances at least 36 inches wide).

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## List of Participants

In June 2004, Mayor John F. Street asked his Task Force on Homeless Services to create a ten-year plan to end homelessness in the City of Philadelphia. **Philadelphia's Ten-Year Plan to End Homelessness: *Creating Homes, Strengthening Communities, and Improving Systems***, grew from the collective efforts of more than 100 participants, representing government agencies, homeless service providers, housing providers, community development corporations, advocates, and individuals experiencing homelessness in this city.

Participants developed the plan's objectives during four well-attended planning meetings, where attendees joined one of seven formal work groups (Housing Production, Hard to Serve/Street Homelessness, Building Human Capital, Community Awareness and Engagement, Using Data, Shelter and Services, and Prevention and Collaboration). To gain consumers' perspectives on homelessness and homeless services in Philadelphia, Plan participants conducted focus groups and interviewed several consumers at a number of emergency shelters and transitional housing facilities throughout the city.

This dedicated group devoted many hours to generating the goals and objectives that comprise this Plan:

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# Appendices, cont'd.

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# Appendices, cont'd.

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Photos contributed by Harvey Finkle