Expert Brief: Efforts in the Mississippi Gulf Coast to Prevent and End Homelessness

Presenters

Mary Simons has served as the **Executive Director and CEO of Open Doors Homeless Coalition** on the Mississippi Gulf Coast since 2013. Open Doors Homeless Coalition is the Continuum of Care lead agency, the HMIS data lead, and the coordinated entry lead for the region. Mary earned a Master of Science degree in Marriage and Family Therapy with a concentration in Systems from the University of Southern Mississippi. Mary has worked over the last 20 years to help systems work more effectively for vulnerable populations. In 1998, she supervised a group home for girls, ages 5 to 10. In 2001, she assisted the Tennessee Department of Mental Health in developing community partnerships to serve persons living with mental illness in the least restrictive environment. The partnerships created 1,000 housing options and services for persons living with mental illness. From 2004 to 2013, she worked as an independent consultant, bringing communities together to develop housing and services for people who were chronically homeless or disabled. In 2015, she and the team on the Mississippi Gulf Coast effectively ended homelessness among Veterans. The community has sustained the progress for over two years and are now focusing on ending homelessness for all in south Mississippi.

Jaszmen Hawthorne is a **Transition Navigator at the Mississippi Department of Child Protection Services** and has been with the agency since 2015. Initially a frontline investigator, Jaszmen currently works with the Independent Living program, after interning in the same capacity during her undergraduate studies. Jaszmen's work is informed by her personal experience of aging out of the state's care in 2011 and experiencing homelessness. As part of her position, Jaszmen oversees a "break program" through a local group home that houses college youth who have no place to go when the campuses close, and works with select campuses that will allow youth to remain in the dorms during the shorter breaks. Jaszmen also assists the youth in utilizing all foster care services they are eligible for, including aftercare funding and the education and training voucher. She focuses on assisting youth to push past stereotypes and not allow their circumstances to become them. Jaszmen also dedicates a great deal of her personal time to serving the community, including at-risk youth populations and anyone experiencing homelessness. Jaszmen harbors a deep passion for community service, teens aging out of care, and people experiencing homelessness. Jaszmen has a degree in Social Work from Jackson State University. She expects to complete her Master of Social Work from Louisiana State University next month.

Our Community

The Mississippi Gulf Coast includes the six southern-most counties of Mississippi: Harrison County, Hancock County, Jackson County, George County, Pearl River County, and Stone County. The

participating jurisdiction cities in our community are Gulfport, Biloxi, Pascagoula, and Moss Point. The population of the region is 384,000 people. The most prominent sources of employment are in hospitality and service (casinos and hotels), the military (Keesler Air Force Base, the Naval Construction Battalion Center/Seabees), shipbuilding (Ingalls Shipbuilding), and off-shore oil drilling (Chevron). The poverty rate in southern Mississippi is 26%. Even so, Mississippi is a very generous state: According to Philanthropy Magazine in 2012, it is second only to Utah in per capita giving. On any given night, there are 346 people who experience homelessness in the Gulf Coast region. Most people can be found sleeping in wooded areas or on beaches. Over half are living unsheltered. Over 1,200 families have been identified through local school systems as doubled up in any given school year. Annually, over 3,000 people seek assistance from the homelessness services system in south Mississippi.

Our Progress

The Mississippi Gulf Coast region has made significant strides toward the goal of ending homelessness locally. In 2013, Open Doors Homeless Coalition successfully created a coordinated entry process that assesses the service needs of individuals and families experiencing homelessness, triages them for appropriate and available housing opportunities, and makes referrals to community-based housing services to meet their needs. We began this effort by focusing on ensuring that people with the highest needs were being prioritized for available permanent supportive housing, and have since expanded our coordinated entry process to include assessment for and referral into all homelessness programs in the region. Given our large geography, anyone in the Gulf Coast region who is seeking assistance can access a coordinated entry hotline by phone. All local outreach staff are trained and equipped to connect to the coordinated entry hotline.

Our community effectively ended homelessness among Veterans and has sustained that progress for over two years. We connect nearly 200 Veterans experiencing homelessness to housing opportunities yearly, as confirmed through both the federal confirmation process and the Built for Zero initiative. We do this through strategic partnerships with the Gulf Coast Veterans Health Care System, the three Supportive Services for Veteran Families (SSVF) providers, and other community-based nonprofit partners. Our group meets monthly to case conference the needs of Veterans who have fallen into homelessness so that they can be connected to housing and services quickly.

We have been translating strategies that led to our success on Veteran homelessness to our efforts to end homelessness for other populations. Through our coordinated entry process, we have increased our focus on assessing individuals for their severity of need and prioritizing for permanent supportive housing accordingly. As a result, our community is seeing reductions in the number of people experiencing chronic homelessness with disabilities. In the last six months, we have driven down the number of people experiencing chronic homelessness listed on our by-name list from 49 to 24 individuals. Additionally, through an Olmstead settlement, the state created the Choice Program to support people with serious mental illness to move into less restrictive environments within the community. This created a flexible pool of housing resources to serve people with high vulnerability who may not yet meet the definition of chronic homelessness, but who do require support.

Due to a recent spike in the number of youth and young adults experiencing homelessness in the Gulf Coast region, our community participated in the second round of 100-Day Challenges to drive progress toward ending youth homelessness. We focused on developing strong partnerships between housing programs, health care, child welfare, juvenile justice, employment, education, and other community-based services. As a result, we connected 51 youth and young adults experiencing homelessness to housing opportunities in 100 days and created 78 transition plans for youth aging out of the juvenile justice or child welfare systems. The transition plans work to prevent homelessness during the move from care to independence. A multi-disciplinary team continues to meet monthly to case conference and find solutions for youth and young adults who fall into homelessness. This work has resulted in a deepened relationship with the child welfare system.

Our Challenges

Emergency Shelter and Crisis Housing

There are 27 emergency shelter beds in the six-county catchment area covered by the Gulf Coast region that are not dedicated solely to people who are fleeing domestic violence. While we know what works to end unsheltered homelessness, we do not have adequate supply of emergency shelter or other crisis housing to move individuals experiencing unsheltered homelessness into safe shelter while permanent housing is being sought and secured.

Housing Opportunities and Aftercare for Youth Aging Out of Foster Care

While attention has been given to improving transition planning for youth and young adults aging out of the child welfare system, there continues to be an insufficient stock of housing opportunities, both bridge and permanent housing, to meet the needs of young people. Additional resources need to be secured through HUD's Homelessness Assistance Grants program as well as through the prioritization of HUD's mainstream housing programs.

Substance Use Treatment

As in many other rural communities, there is a need for expanded treatment options for people struggling with substance misuse, including opioid use disorders. Support is needed to expand treatment, including inpatient detox and medication assisted treatment, for people experiencing homelessness or currently receiving housing assistance, such as permanent supportive housing.

Families Living Doubled Up

As the Gulf Coast region continues to strengthen its response to homelessness, we lack the resources needed to expand our efforts to prevent families that are living doubled up from entering into homelessness throughout the region.

Serving People Fleeing Domestic Violence

In order to end homelessness among families with children, we must be able to address the needs of people fleeing domestic violence. Currently, our law enforcement, court system, and service providers

lack the training needed to understand and effectively address the needs of these families. Too often, families experiencing domestic violence or disputes are court ordered to move to domestic violence shelters, which can be retraumatizing and can contribute to ongoing housing instability. More support and funding is needed to use rapid re-housing to relocate families who are in crisis, or to support stabilization in their current housing, if and when it is safe and appropriate to do so.

Our Recommendations

Ending All Types of Homelessness

1. Ensure that the goals to end homelessness are prioritized across federal agencies and offices within agencies. For example, additional support is needed from HUD to promote opportunities for prioritizing and targeting vouchers for high-need populations, including youth exiting foster care, and to prioritize mainstream housing for non-chronically homeless single adults.

Ending Youth Homelessness

2. Expand existing aftercare supports and strengthen the transition to adulthood and independent living for youth formerly in foster care.

Ending Chronic Homelessness and Homelessness among Other Single Adults

3. Increase access to substance use and mental health treatment for people experiencing or who formerly experienced homelessness in rural areas by expanding targeted funding to serve the Medicaid-eligible population and people with no insurance.

4. Support innovative models that integrate current and formerly homeless individuals into the workplace and connect them with opportunities to obtain meaningful employment, especially for individuals with limited or sporadic work histories. This would also help to expand the availability of entry-level jobs and support pathways to economic mobility for young people and other first-time job seekers.

Ending Family Homelessness

5. Consider funding the Department of Education's Education for Homeless Children and Youth Program to support local homeless education liaisons in every school, and provide training on the McKinney-Vento requirements in schools.

6. Target eligible prevention funds for families who are identified as experiencing homelessness and are doubled-up to obtain housing, so children can learn in the healthiest environment.

7. Consider expanding training funded by the Department of Justice for police officers and judges in best practices for addressing the needs of survivors of domestic violence and their children, promoting opportunities to maintain tenancy where possible.