



The Cost of Homelessness in Oklahoma City

April 1, 2009 to March 31, 2010

This report was produced for the Oklahoma City Planning Department
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EXECUTIVE SUMMARY

In the summer of 2009, the City of Oklahoma City Planning Department hired Spangler & Associates, Inc., to conduct a study with a limited scope and one over-riding goal: to determine how much is spent on services for the homeless population in Oklahoma City by both public and private entities. This was done at the behest of the Mayor's Homelessness Action Task Force as a part of their work on the 10 Year Plan to Create Lasting Solutions Update and to better inform the community of what the annual cost of serving our homeless population is.

Spangler, along with the City Planning Department, organized a meeting of interested parties in July 2009, which led to the formation of the Cost Study Committee that met almost monthly for the past year at the Downtown Library. The Cost Study Committee guided the process of data collection and study parameters, tested the analysis and recruited participants. For the purpose of this study, homelessness was defined by the place the person or family was living (in shelter or transitional housing for homeless persons, or on the streets or encampments – places not meant for human habitation) or the circumstances that led to their homelessness (i.e., individuals and families fleeing domestic violence).

The Study covered the period from April 1, 2009 to March 31, 2010. More than 40 agencies and organizations contributed data. Key findings include the following:

- The total cost of homelessness was \$28,746,094.
- Emergency shelters and hospital emergency rooms combined accounted for more than 50% of the overall costs.
- The cost of law enforcement (county jail and police) and first response (fire and Emergency Medical Services Authority) was \$2,581,252.
- One chronically homeless man cost more than \$160,000 during the one-year study period in emergency room visits, jail and police interactions, and EMSA transports. He was not served in the homeless system during that time.
- 59% of the dollars that were spent came from private sources (individuals, foundations, hospitals, faith-based organizations, United Way, etc.), and 41% came from public sources (federal, state and local government).

Completion of this report would not have been possible without the active input of all of the Cost Study Committee members. The collaboration and dedication of this group was the guiding force in structuring and closely reviewing the outcomes and conclusions. We are pleased that the process of studying shared data during this past year has led to more participation in the homeless data system and a greater understanding of the shared work we are trying to accomplish.

BACKGROUND

Understanding homelessness is the key to solving homelessness. Studying social, economic and personal information about homeless individuals and families in our community helps us to promote effective housing and services to help families and individuals move out of homelessness as quickly as possible and thrive in permanent housing.

The City of Oklahoma City and a network of homeless and mainstream service providers are dedicated to generating and exchanging information about homelessness in and around the city. For the past eight years, the City of Oklahoma City, the Homeless Alliance and the Coalition for the Needy have conducted an annual Point-in-Time (PIT) count of homeless persons in our city. That process provides an annual snapshot of numbers, characteristics and trends. The 2010 PIT count showed that 1,128 homeless people live in Oklahoma City, including 79 families (with 41 children) and 890 individuals (264 chronically homeless). Although the numbers remain substantial, for the first time in eight years, the 2010 PIT count reflected a decrease in the number of homeless individuals and families. The number of chronically homeless individuals also decreased. Another first: this year, the most commonly identified special condition among adults responding to PIT surveyors was substance abuse, topping mental health issues for the first time in the history of the PIT count.

In 2003-2004, the Coalition for the Needy developed a ten-year plan to end chronic homelessness in Oklahoma City. The Oklahoma City Council adopted that plan, *Homes for the Homeless – 10 Year Plan to Create Lasting Solutions*, in July 2004. In 2008, the Plan was updated and expanded to include the recommendations from the Mayor's Homelessness Action Task Force. This Plan drives the efforts of the Coalition for the Needy and the Continuum of Care (CoC) Committee; each summer the Coalition and the CoC Committee review the city's progress, highlight accomplishments and set one-year goals.

One directive from the Mayor's Homelessness Action Task Force was to quantify the costs of homelessness in Oklahoma City. In the summer of 2009, the City of Oklahoma City Planning Department hired Spangler & Associates, Inc., to conduct a study with a limited scope and one over-riding goal: to determine how much is spent on services for the homeless population in Oklahoma City by both public and private entities.

Spangler, along with the City Planning Department, organized a meeting of interested parties in July 2009, which led to the formation of the Cost Study Committee that met almost monthly for the past year at the Downtown Library. The Cost Study Committee guided the process of data collection and study parameters, tested the analysis and recruited participants. Early on, they adopted the Mayor's Homelessness Action Task Force

definition of homelessness for the Oklahoma City Cost of Homelessness Study: A person is considered homeless when he or she resides in one of the three places described below:

1. Places not meant for human habitation, such as cars, parks, sidewalks, and abandoned buildings;
2. An Emergency Shelter; or
3. Transitional housing for homeless persons who originally came from the streets or Emergency Shelters.

For the purpose of the Cost Study, the committee also considered individuals and families fleeing domestic violence to be homeless. By using this rather narrow definition of homelessness, the Cost Study Committee studied only those persons who had nowhere else to turn. Although many more individuals and families are precariously housed or are “doubling up” by staying with friends or relatives, the scope of this study did not permit an accurate projection of the number of persons/families precariously housed or to study their costs.

The following organizations or non-profit agencies provided the leadership and direction for the Cost Study Committee. Members of the committee included representatives from the Oklahoma City Planning Department, Oklahoma City/County Health Department, Oklahoma County Social Services, Oklahoma Department of Human Services, Oklahoma Department of Mental Health and Substance Abuse Services, Oklahoma Office of Disability Determination, Oklahoma Department of Health, Oklahoma City Police Department, Oklahoma City Public Schools, Oklahoma AIDS Care Fund, Homeless Alliance, Catholic Charities, City Care, City Rescue Mission, First Step for Women, Healing Hands, Neighborhood Services Organization, Salvation Army, Upward Transitions/Travelers Aid and Red Rock. Several of the members also serve on the Governor’s Interagency Council on Homelessness (GICH). Also, the Downtown Library staff were very generous with their monthly meeting space and logistical help.

The Cost Study Committee extends a special thanks to the following people who not only participated on the committee, but spent extra time working on methodological issues and data analysis.

Jane Ferrell
Shelly Kuhn
Leann Davis
LeAnn Tyson

Tom Jones
Randy Webb
Dana H. Chism

Jon Lowry
Katrina Garcia
Marisa New

Jay Barnett
James Mullins
John Williams

Chapter 1: Costs

The Cost of Homelessness Study (Cost Study) used data from the time period beginning April 1, 2009 and ending March 31, 2010. The intention of the study was to gain a better understanding of the costs of homelessness as well as the number and types of services utilized and the sources of funding for those services. The Cost Study Committee also gathered information about the number and characteristics of the homeless persons served. This is the first study of its nature for Oklahoma City.

TOTAL COST OF HOMELESSNESS IN OKLAHOMA CITY

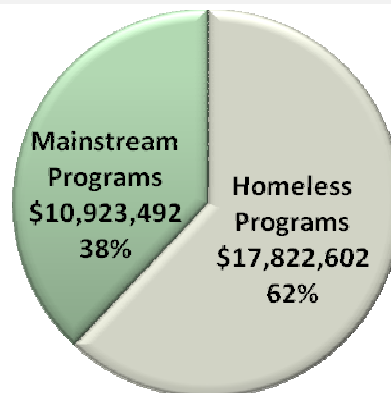
Total Cost			
Cash	In-Kind	Volunteer	Total
\$25,583,553	\$2,116,012	\$1,046,529	\$28,746,094

Number of Participating Agencies: 44
(24 Homeless, 20 Mainstream)

Study Period: April 1, 2009 to March 31, 2010
(12 months)

Total Volunteer Hours: 65,408

The time and money spent annually to serve the needs of the homeless should guide the community to closely examine more effective ways to direct funding toward the number one goal of ending homelessness in Oklahoma City.



Agencies were asked to group their spending into three categories: cash, donated (in-kind) items, and volunteer hours. Volunteers performed a variety of duties, from serving food and refurbishing apartments to legal counseling and dental care. For the purposes of this study, volunteer hours were calculated at a value of \$16/hour, which is the most recent calculation for Oklahoma used by the U.S. Department of Labor. Cash expenditures eclipsed all other types of expenditures.

Expenditures	Cash	In-Kind	Volunteer	Total
Emergency Shelter	\$7,433,078	\$1,034,636	\$252,889	\$8,720,603
Homeless Housing Programs	\$4,789,788	\$169,334	\$664,768	\$5,623,890
Medical	\$6,145,045	\$16,615	\$16,256	\$6,177,916
Law Enforcement	\$1,710,488	\$0	\$0	\$1,710,488
Mental Health/Substance Abuse	\$1,679,704	\$0	\$0	\$1,679,704
Education	\$1,260,920	\$89,999	\$19,888	\$1,370,807
Food	\$54,291	\$774,343	\$44,200	\$872,834
First Responders	\$870,764	\$0	\$0	\$870,764
Day Shelter/Drop-In Resources	\$828,945	\$0	\$12,592	\$841,537
HMIS	\$229,851	\$0	\$0	\$229,851
Material Assistance	\$179,181	\$31,085	\$0	\$210,266
Transportation	\$187,324	\$0	\$0	\$187,324
Legal	\$106,473	\$0	\$35,936	\$142,409
Case Management	\$107,701	\$0	\$0	\$107,701
Total Spending	\$25,583,553	\$2,116,012	\$1,046,529	\$28,746,094

Fig. 1 Total Spending

*Mainstream programs serve a mix of homeless and non-homeless clients.
Homeless programs serve homeless clients almost exclusively.*

Spending Breakdown All Categories

Total \$28,746,094

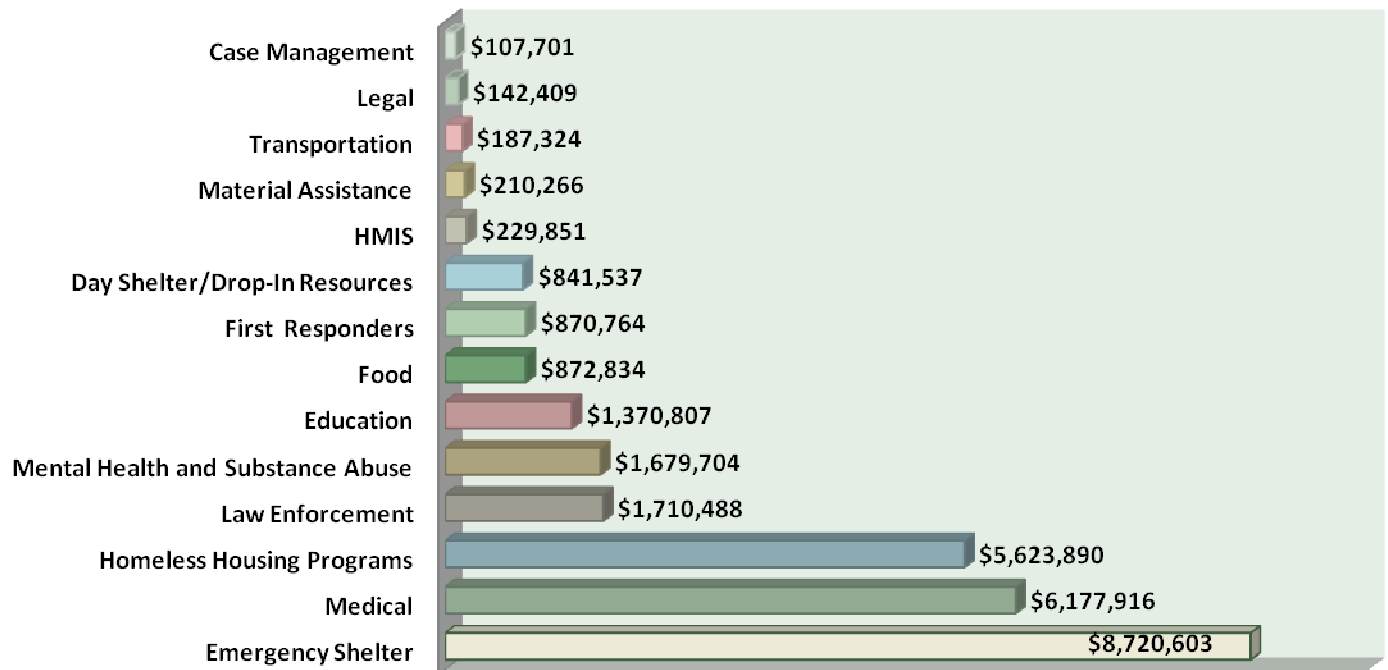


Fig. 2 Breakdown of Total Spending during Study Period by Category

COSTS ASSOCIATED WITH EMERGENCY SHELTERS

Total Cost			
Cash	In-Kind	Volunteer	Total
\$7,433,078	\$1,034,636	\$252,889	\$8,720,603

<p>Percentage of Total Spending: 30%</p> <p>Number of Participating Agencies: 10</p> <p>Number of Bed Nights: 296,427</p> <p>Average Cost: \$29.42/bed night</p> <p>Total Volunteer Hours: 15,806</p>	<p>\$10,738</p> <p>The average cost of providing one shelter bed for a year.</p>
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Oklahoma City spends more on Emergency Shelter than on any other service for homeless people. The total cost for Emergency Shelter in Oklahoma City during our study period was \$8,720,603 for approximately 296,427 bed nights. That was a daily average of 812 shelter beds in use each night of the year.

Emergency Shelter is short-term lodging for people who are without other housing alternatives. In Oklahoma City, the shelters provide congregate living space to men, women

and families in separate places. Some family shelters provide a separate room for each family. The length of stay varies from one night to more than a year. Some local shelters aim to serve a particular sub-population (people with severe mental illness, people fleeing abuse, pregnant women, the elderly, etc.), but most provide shelter to the general homeless population based on their family status: youth, single adults or families. None of the shelters serves individuals or families headed by adults who are actively using or abusing alcohol or other drugs.

Due to the the community's historic emphasis on temporary shelter instead of longer-term housing solutions that address other needs of homeless persons, many shelters now provide a wide range

One Shelter Story

ML is a 28-year-old white female who has been homeless for about four weeks. She has no spouse or children, and this is her first homeless experience. ML lived and attended college in Okmulgee and was in Amarillo, Texas when she became homeless. She has been staying at the Salvation Army for four weeks and is looking for a restaurant job. The Posted Jobs Board at Goodwill is helpful, she said.

of services to help the people they serve. At a minimum, every shelter provides services to meet the immediate needs of homeless people, including safe lodging, access to basic services (such as showers, toilets, and laundry facilities), food, clothing and material assistance, and opportunities to enhance life skills. Beyond these basic services, a great degree of variation exists regarding the on-site availability or linkages to community-based services that assist a person or family in ending their homelessness. These services could include case management, housing and employment resources, medical and dental care, mental health assessments or treatment, and substance abuse assessment or treatment services. The cost of providing these services has been included in overall cost figures for the agencies that provided them; subsequently, their cost-per bed figure is significantly higher than those agencies that provide only basic services.

Few shelters in town serve homeless families: YWCA serves families headed by women who are escaping domestic violence; Salvation Army and City Rescue Mission serve homeless families; and Birth Choice's Rose Home serves pregnant women and women with babies or very young children. Combined, the shelters have the capacity to serve roughly 38 families (with a total of 119 family members) at a time. For a complete list of shelters and their primary populations, see Appendix Five.

COSTS ASSOCIATED WITH HOMELESS HOUSING PROGRAMS

Total Cost			
Cash	In-Kind	Volunteer	Total
\$4,789,787	\$169,334	\$664,768	\$5,623,899

Percentage of Total Spending: 19.6%

Number of Programs: 24

- 12 TH Programs
- 9 PSH Programs
- 3 Homeless Housing Assistance Programs

Total Volunteer Hours: 41,548

Homeless housing programs include transitional housing, permanent supportive housing, and homeless housing assistance programs.

There are currently three types of housing programs for homeless people in Oklahoma City: 1) transitional housing (TH); 2) permanent supportive housing (PSH); and 3) homeless housing assistance (HHA). This does not include public housing or Section 8/Housing Choice vouchers administered by either the Oklahoma City Housing Authority or the Oklahoma Housing Finance Agency (the statewide public housing authority), which target low-income persons whether they are homeless or not. Following is a detailed overview of each type of housing that was included in the study.

Transitional Housing (TH)

Total Cost:	\$2,753,481
Percentage of Total Spending	10%
Total Number of Bed Nights:	186,901
Average Nightly Bed Count:	512
Average Cost of Bed Night:	\$14.73
Average Annual Cost of One TH Bed:	\$5,376

The total cost for TH in Oklahoma City during the study period was \$2,753,481 for 186,901 bed nights. That equaled a daily average of 512 shelter beds in use each night of the year.

TH is time-limited (up to 24 months) temporary housing and services for persons who have multiple barriers to obtaining housing. In Oklahoma City, TH programs target homeless persons recovering from substance abuse (Pershing Center), persons with mental illness and/or HIV/AIDS (Red Rock), male veterans (Friendship House and Phoenix House), families with children or pregnant women (NSO and Catholic Charities), persons with HIV/AIDS (Winds House, RAIN Oklahoma), or women escaping domestic violence (LCDA and YWCA). One program (NSO's Carolyn Williams Center) serves transition-aged youth who are 18 to 24 years old. Most of these programs provide case management, life skills enhancement, material assistance, and housing resources. The most common admission criteria is a sobriety requirement.

It is important to note that there is no consensus within Oklahoma City about the definition of TH. For example, City Rescue Mission

considers its Bridge to Life program to be TH, although it differs from typical TH programs in its facility design and level of client autonomy. It combines the congregate living of an Emergency Shelter with the longer length of stay and emphasis on building stability, which is more consistent with TH. Due to the hybrid nature of the program, this Cost Study classifies all City Rescue Mission beds as Emergency Shelter. Alternatively, Hand Up Ministries, which provides shelter and housing for men and women who have been convicted of sex offenses, is considered TH by the City's Continuum of Care Committee, although its purpose is to help people overcome legal problems. Further, HUD's Rapid Rehousing program (funded through Homelessness Prevention and Rapid Rehousing) is considered TH by HUD. However, since the program does not provide actual physical housing units (it provides temporary cash assistance and case management), this Cost Study categorizes the program as Homeless Housing Assistance.

** For a complete list of transitional housing programs and their primary populations, see Appendix Six.

One Transitional Housing Story

LT is a 50-year-old black woman who has two grown sons. She grew up in Oklahoma City, was married for ten years, and worked downtown at the First National Bank and the Sheraton Hotel. Most recently, she worked in a shoe store. Then, she told us, "I got sick with my chemical imbalance so I couldn't take care of myself anymore." She moved in with her mother and started receiving medication from Red Rock. Eventually, her mother became senile and they "couldn't take care of each other," so her mother moved into senior housing, and LT moved into Parkview Place, Red Rock's TH facility.

For two years, LT stayed at Parkview Place before moving, three months ago, into a Section 8 apartment where she continues to receive regular services from Red Rock and to make routine visits to North Care. She returns to Parkview Place to do her laundry and see people she knows.

LT's biggest worry is not having enough money to do all she needs to do. She gets \$27 in food stamps every month and \$674 from SSI. Red Rock provides some food and clothing.

Permanent Supportive Housing (PSH)

Total Cost:	\$2,532,277
Percentage of Total Spending	9%
Total Number of Unduplicated Clients:	346
Total Number of PSH Beds Available	302
Average Cost per PSH Client:	\$8,613

Permanent Supportive Housing (PSH) is specially designed to help homeless persons with disabilities that create barriers to sustaining housing. It is non time-limited housing with integrated wrap-around services for persons who are homeless and have disabling conditions. It differs from TH in three ways: 1) tenants of supportive housing pay rent and sign leases, 2) duration of stay is not limited; and 3) eligibility and continued participation are not predicated on improvement or elimination of the symptoms of the disability. Integrated services vary by the needs of the residents but can include basic healthcare, mental healthcare, support for recovery from addiction, case management, employment services and training.

One PSH Story

CH was working as a kitchen supervisor and head cook when she became disabled. Medical bills piled up; she lost her job; and she sought shelter at Salvation Army. For the past four years, she has been living in a duplex at City Care's Westlawn Gardens, where she is currently the president of the Westlawn Gardens Neighborhood Association. On any given day, you will find CH at Pershing Center, where she often cooks lunch and dinner for staff and residents and fills in occasionally as front desk receptionist.

The primary populations for PSH are individuals – and heads of families – with chronic disabilities such as severe mental illness, substance abuse, co-occurring mental health and substance abuse, severe physical illness (including HIV/AIDS), and physically fragile seniors. These persons are likely to need support or services at varying levels for extended periods. Because the need for a certain level of support increases or decreases according to circumstances (e.g., when mental health medications are effective or when they cause problems; after a person has successfully finished a substance abuse program or when the person relapses), individualized services are provided so tenants are not required to participate in a regimen of services. Instead, tenants sign standard leases with separate service agreements. Typically, case managers are assigned to each tenant and coordinate the services as they are needed. Supportive services are provided on site or through partnerships with community-based agencies off site, depending on the needs of the individual. The most commonly cited admission criterion for these programs in OKC is a sobriety requirement.

In Oklahoma City, PSH housing types vary in their designs and target populations, but most are small densities of apartments or townhouses that are private or shared by a roommate. A few larger shared apartments (with up to four people) or shared houses are also available.

Homeless Housing Assistance

Total Cost:	\$338,132
Percentage of Total Spending	1%
Total Number of Unduplicated Clients:	104
Average Cost per Client:	\$3,251

In Oklahoma City, three programs currently provide homeless housing assistance (HHA), and two of the three are new HUD programs: HPRP and VASH (see below). During the Cost Study period, these programs accounted for only one percent (1%) of homeless spending. Due to the cost effectiveness and successful housing results, however, more federal funding is anticipated for these programs in the coming years.

HHA programs provide temporary or longterm assistance with rent, deposits, utilities, and other housing costs for individuals or families who are homeless. In Oklahoma City, the three existing HHA programs are funded by federal HUD dollars and offer a range of assistance:

Housing Opportunities for Persons with AIDS (HOPWA) provides housing assistance and other help to persons with HIV/AIDs in Oklahoma, some of whom are homeless. During our study period, the Oklahoma AIDS Care Fund reported serving nine homeless individuals in Oklahoma City.

Homelessness Prevention and Rapid Rehousing (HPRP), which started in October 2009, offers one to twelve months (average is six months) of help to homeless families in Oklahoma City. Any family who enters a shelter in Oklahoma City is quickly assessed to determine their eligibility and suitability for the program. During the study period, 48 individuals in 19 households received assistance through HPRP.

Veterans Assistance with Supported Housing (VASH) provides housing vouchers and case management for homeless veterans and their families. During the Cost Study period, 38 homeless veterans were housed through VASH vouchers.

COSTS ASSOCIATED WITH MEDICAL CARE FOR HOMELESS PERSONS

Total Cost			
Cash	In-Kind	Volunteer	Total
\$6,145,045	\$16,615	\$16,256	\$6,177,916

Percentage of Total Spending: 21%

Number of Participating Agencies: 8

Total Volunteer Hours: 1,016

Medical costs include four hospitals, one homeless medical program, a dental program, the Oklahoma County Pharmacy and HIV/AIDS services.

Medical care for homeless individuals and families was the second greatest expense during the Cost Study period, and although we were able to capture many of the major costs (e.g. hospitals and Healing Hands Healthcare for the Homeless), an entire network of free or sliding-scale medical work is provided by faith-based institutions and consortiums of medical providers that we were not able to include (for further explanation, see Methodology/Medical Data, page 38). Some of the area shelters provide medical care, also. Those costs were included in the shelter costs.

Data was collected from four area hospitals, one dental clinic, the Oklahoma County Pharmacy, the State Department of Health's HIV/AIDS division, and Healing Hands. Hospitals accounted for 82% of the total; Healing Hands accounted for another 14%. The totals do not include Medicaid reimbursement dollars. Costs were calculated as follows:

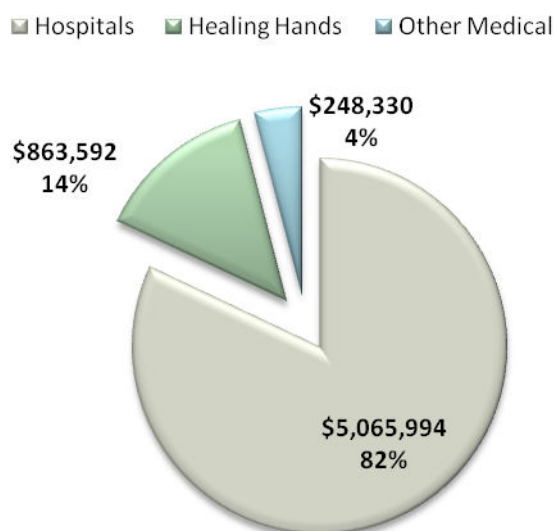


Fig. 3 Total Cost of Providing Homeless Patients with Medical Care

Hospitals

Total Cost:	\$5,065,994
Percentage of Total Spending:	18%
Total Number of Patients:	2,055
Average Cost per Patient:	\$2,465

The City/County Health Department collected data from four area hospitals: St. Anthony, OU Medical Center, Integris Southwest, and Integris Baptist. The costs these hospitals reported did not include costs that were reimbursed through Medicaid, private insurance or other means. Mercy Hospital was unable to participate due to a major change in their data system that coincided only with the latter part of the Cost Study period. Data included the number of visits for emergency services, inpatient and outpatient care; the cost of each visit; age, race and gender of patients; and date of service. From this, we extracted the following information:

2,055 Homeless Patients Served in Hospitals

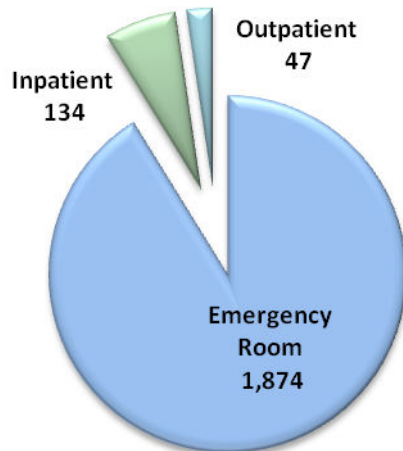


Fig. 4 Total Number of Homeless Served by Area Hospitals

Total Hospital Costs

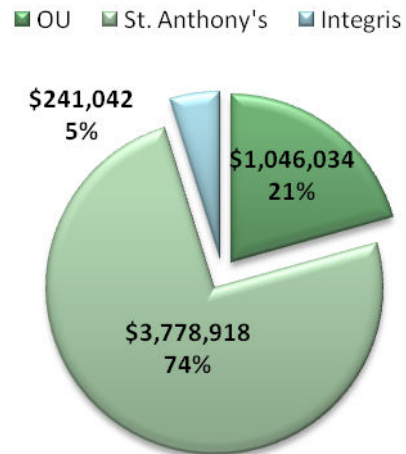


Fig. 5 Total Cost of Serving Homeless Clients
Integris data includes Integris Southwest and Integris Baptist.

Healing Hands

Total Cost:	\$863,592
Percentage of Total Spending:	3%
Total Number of Unduplicated Clients:	2,172
Total Number of Visits:	12,516
Average Cost per Client:	\$398
Average Cost per Visit:	\$69

Healing Hands provides preventive and primary health care services to homeless persons of all ages. Healing Hands also offers comprehensive case management services to seek employment, housing, eligibility for other assistance, i.e., food, reduced rent, utilities, etc.

Other Medical Services

- **Neighborhood Services Organization (NSO) Dental Clinic**

Total Cost:	\$138,951
Percentage of Total Spending:	0.5%
Value of Volunteer Hours	\$16,256 (1,016 Hours)
Total Number of Unduplicated Clients:	125
Total Number of Visits:	679
Average Cost per Client:	\$1,112
Average Cost per Visit:	\$205

The NSO Dental Clinic offers a full-service dental clinic that charges a minimal fee for its services. Clinic services include exams, x-rays, fillings, cleanings, extractions, partials and dentures. The Dental Clinic served at least 125 homeless clients during the study period and averages more than 4,000 patients a year throughout the state.

- **Oklahoma Department of Health HIV/AIDS Care**

Total Cost:	\$64,020
Percentage of Total Spending:	0.02%
Total Number of Unduplicated Clients:	10
Total Number of Visits:	569
Average Cost per Client:	\$6,402
Average Cost per Visit:	\$113

The Oklahoma Department of Health, HIV/STD Services, provides a range of services to Oklahomans across the state who have AIDS or are HIV positive. Services include medical assistance, case management, mental health and substance abuse treatment, and prescription assistance. Most of their clients are not homeless.

- **Oklahoma County Pharmacy**

Total Cost:	\$45,359
Percentage of Total Spending:	0.02%
Total Number of Prescriptions:	2,088
Average Cost per Prescription:	\$22

The Oklahoma County Pharmacy is able to provide free prescriptions to very low-income individuals from medications donated by pharmaceutical companies or purchased at a reduced cost.

COSTS ASSOCIATED WITH MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES

Total Cost			
Cash	In-Kind	Volunteer	Total
\$1,679,704	\$0	\$0	\$1,679,704

Percentage of Total Spending: 6%

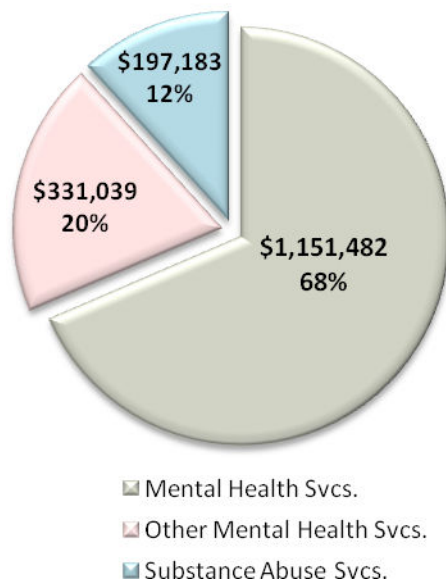
Number of Programs: 19

Number of Duplicated Clients: 5,422

**ODMHSAS served 5,422
duplicated homeless clients in 19
programs**

Only about six percent (6%) of spending during the Cost Study period went to mental health and substance abuse services for homeless persons. Given the results of the latest PIT count, the demand greatly outweighs the resources.

Mental Health and Substance Abuse Services Total Spending \$1,679,704



Mental Health Services

4,741 duplicated homeless clients

- ◆ Northcare
- ◆ Red Rock
- ◆ Hope

Other Mental Health Services

404 duplicated homeless clients

- ◆ Latino Community Development Agency
- ◆ The Referral Center
- ◆ Specialized Outpatient Services

Substance Abuse Services

277 duplicated homeless clients

- ◆ Turning Point
- ◆ Care for Change
- ◆ Catalyst Common House
- ◆ Catalyst Outpatient
- ◆ COPE
- ◆ Eagle Ridge
- ◆ The Harbor
- ◆ Jordan's Crossing

Fig. 6 Mental Health and Substance Abuse Services Breakdown by Type Total spending: \$1,679,704.

COSTS ASSOCIATED WITH LAW ENFORCEMENT

Total Cost			
Cash	In-Kind	Volunteer	Total
\$1,710,488	\$0	\$0	\$1,710,488

Percentage of Total Spending: 6%

Number of Police Runs: 6,164

Number of Homeless Jail Days: 2,074

Jail costs are calculated at \$75/day

Run costs are calculated at \$252.33/run

Police officers and other “first responders” (EMSA and Fire) in Oklahoma City play a primary role in the lives of people living on the streets, many of whom may be publicly intoxicated or trespassing on public or private property. As a result, the county jail houses a number of homeless people. Not only is this approach costly, but it does not link people with the services that they need to move into housing and recovery.

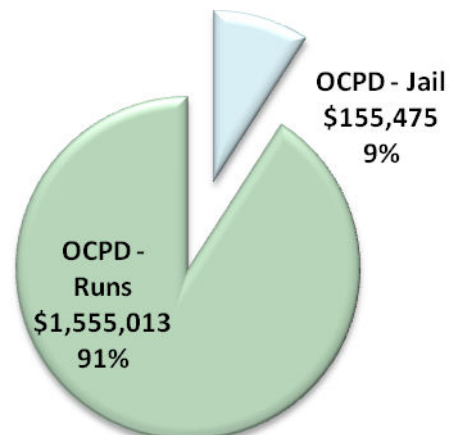


Fig. 7 Total spending for law enforcement includes the cost of police runs involving homeless individuals and the costs associated with jailing homeless inmates.

The monthly average number of police runs was 518, and the average jail count was 173. March 2010 had the highest incidences involving police runs (760), while the highest jail count (204) was in September 2009. The lowest incidences of police activity involving homeless individuals was in November 2009 (325), and the lowest jail count (164) was in October. The highest number of homeless individuals in County Jail (13) was on September 29, 2009. According to our data, no homeless individuals were in jail on Christmas Day.

COSTS ASSOCIATED WITH FIRST RESPONDERS

Total Cost			
Cash	In-Kind	Volunteer	Total
\$870,764	\$0	\$0	\$870,764
<p><i>Percentage of Total Spending: 3%</i></p> <p><i>Total EMSA Cost: \$635,535</i></p> <p><i>Cost of One EMSA Transport: \$435</i></p> <p><i>Total OKC Fire Cost: \$235,229</i></p> <p><i>Cost of One OKC Fire Run: Variable</i></p>			
<p><i>Total Number of OKC Fire Responses</i> 1,708</p> <p><i>Total Number of EMSA Transports</i> 1,203</p>			

EMERGENCY MEDICAL SERVICES AUTHORITY (EMSA)

EMSA responded to 1,461 different calls and transported 961 homeless clients 1,203 times, which means that 82 percent of EMSA calls resulted in the patient being transported to a hospital.

Age	Total # Transports	Total # Homeless Patients Transported
17 and Under	26	26
18-30	180	142
31-50	560	435
51-61	304	246
62 and Over	129	108
Unknown	4	4
Total	1203	961

Fig. 8 EMSA's Total Number of Transports Involving Homeless Individuals by Age

OKC Fire

OKC Fire responded to 1,708 calls involving homeless individuals. There were 841 EMS rescue calls for a cost of \$118,262. Fifty-seven false calls cost \$7,349; 315 "good intent" calls cost \$41,003; and 461 general service calls cost \$62,992.

Call Type	Number of Incidents	Cost of Calls
EMS: Rescue	841	\$118,262
Explosion: No Fire	2	\$303
False	57	\$7,349
FIRE	19	\$3,365
Good Intent (no Fire)	315	\$41,003
Hazardous Condition	13	\$1,954
General Service	461	\$62,992
Total	1,708	\$235,229

Fig. 9 OKC Fire Department's Total Number of Reported Incidents Involving Homeless Individuals by Call Type

COSTS ASSOCIATED WITH EDUCATION

Total Cost			
Cash	In-Kind	Volunteer	Total
\$1,260,920	\$89,999	\$19,888	\$1,370,807

<p>Percentage of Total Spending: 5%</p> <p>Number of Programs: 3</p> <p>Number of Unduplicated Clients: 3,265</p> <p>Units of Service: 109,893</p>	<p>Participating Education Service Agencies:</p> <ul style="list-style-type: none"> • Positive Tomorrows • Youth Services of Oklahoma County (YSOC) • OKC Public Schools
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The total cost of educational help for homeless students during the Cost Study period was \$1,370,807, which was about five percent (4.8%) of the total. Figures include information from the Oklahoma City Public Schools, Positive Tomorrows and Youth Services of Oklahoma County's Supporting Kids in Independent Living (SKIL) program.

Under the federal McKinney-Vento Act's Education of Homeless Children and Youth program, Oklahoma City's public schools are required to ensure that homeless children and youth have equal access to the same free, appropriate education, including preschool education, provided to other children and youth. This includes providing homeless children with transportation to and from school and the shelter.

Positive Tomorrows also provides K-5th grade classroom education and resources for precariously housed and homeless children in Oklahoma City, as well as case management for their parents. The SKIL program, provided by Youth Services of Oklahoma County, offers a separate program for high school youth who have been emancipated from their families.

COSTS ASSOCIATED WITH FOOD

Total Cost			
Cash	In-Kind	Volunteer	Total
\$54,291	\$774,343	\$44,200	\$872,834
Percentage of Total Spending: 3% Number of Programs: 2 Regional Food Bank: 162,042 pounds City Care Breakfast: 34,175 meals		Many food pantries and meal sites had to be excluded from the study because they could not separate homeless and mainstream service costs.	

Many food programs are available for poor and homeless persons living in Oklahoma City – some are provided on a regular schedule at fixed locations and some deliver irregularly at rotating locations. The Cost Study Committee looked at the value of the pounds of food provided by the Oklahoma Regional Food Bank to homeless programs and then subtracted the amount the programs paid back to the Food Bank (we included those costs in the costs of the programs themselves). The only other source of data for this category came from City Care’s daily downtown breakfast, because they were able to estimate the percent of the costs for homeless persons. At least four shelters serve food to non-homeless people as well as homeless ones (City Rescue Mission, Grace Rescue, Jesus House and Salvation Army), but we figured those costs into the shelter programs.

COSTS ASSOCIATED WITH OTHER SERVICES

Total Cost			
Cash	In-Kind	Volunteer	Total
\$1,639,476	\$31,085	\$48,528	\$1,719,089

Percentage of Total Spending: 6%

Number of Programs: 10

Number of Volunteer Hours: 3,033

Other services include:

- *Transportation*
- *Case Management*
- *Homeless Management Information System (HMIS)*
- *Day Shelters/Drop-In Resources*
- *Material Assistance*
- *Legal Services*

Transportation

Total Cost: \$187,324

Total Number of Rides 149,775

- **Metro Transit (bus and taxi):** 122,400
- **H.Net Express:** 27,375

Cost per Ride \$1.25

Case Management

Total Cost: \$107,701

Homeless Alliance Coordinated Case Management \$107,701

- **Number of Unduplicated Clients** 500

Homeless Management Information System (HMIS)

Total Cost: \$229,851

HMIS \$229,851

Day Shelters/Drop-In Resources

Total Cost: \$841,537

West Town (under construction) \$688,845

Catholic Charities – Sanctuary \$152,692

- **Sanctuary Unduplicated Clients** 366

Material Assistance

Total Cost:	\$210,266
Upward Transitions/Travelers Aid	\$186,240
• UT/TA Service Units	3,154
Community Action Agency (CAA)	\$24,026
• CAA Unduplicated Clients	799

Material Assistance includes case management, utility and rent assistance, retrieval of legal documents, out of state ID retrieval, food and clothing pantry, and non-narcotic prescriptions.

Legal Services

Total Cost:	\$142,409
Legal Aid Services of Oklahoma	\$88,937
• Legal Aid Total Clients	394
Trinity Legal (67% Volunteer Value)	\$53,472
• Trinity Total Clients	79

CHAPTER 2: FUNDING SOURCES

At the conclusion of the study period, participating agencies were asked to report on the sources of their cash funding in order to compare the amounts and types of public and private funding sources. The total cash amount spent differs slightly among agencies because a few agencies were not able to match study period dates exactly.

Less than half (41%) of the reported cash funding for homeless services came from public sources – Federal, State, County, and City – and 59 percent (59%) came from private sources.

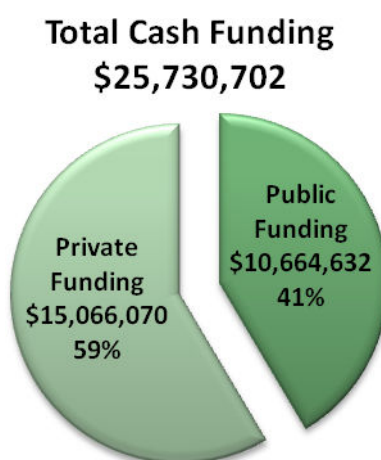


Fig. 10 Percentage of Public and Private Sources of Cash Funding

	Public Funding	Private Funding	Total Budget
Emergency Shelter	\$866,513	\$6,956,376	\$7,822,889
Homeless Housing Assistance	\$3,602,703	\$1,187,820	\$4,790,523
Medical	\$787,721	\$5,203,289	\$5,991,010
Education	\$414,900	\$683,108	\$1,098,008
Food	\$7,000	\$47,328	\$54,328
Mental Health and Substance Abuse	\$1,679,704	\$0	\$1,679,704
First Responders	\$2,425,777	\$0	\$2,425,777
Law Enforcement	\$155,475	\$0	\$155,475
Day Shelter/Drop-in Resources	\$188,845	\$640,100	\$828,945
HMIS	\$193,785	\$36,066	\$229,851
Material Assistance	\$20,526	\$189,740	\$210,266
Transportation	\$187,324	\$0	\$187,324
Legal	\$61,304	\$87,597	\$148,901
Case Management	\$73,055	\$34,646	\$107,701
Totals	\$10,664,632	\$15,066,070	\$25,730,702

Fig. 11 Total Reported Public and Private Sources of Cash Funding

Public Funding Sources

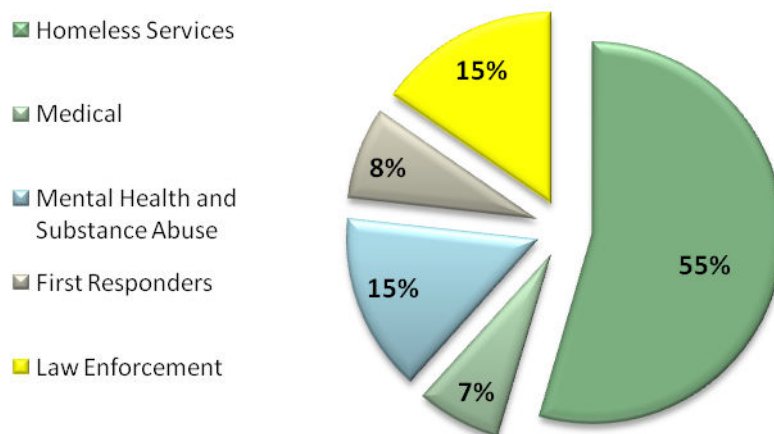


Fig. 12 Public Sources of Funding Divided by Service Type

Private Funding Sources

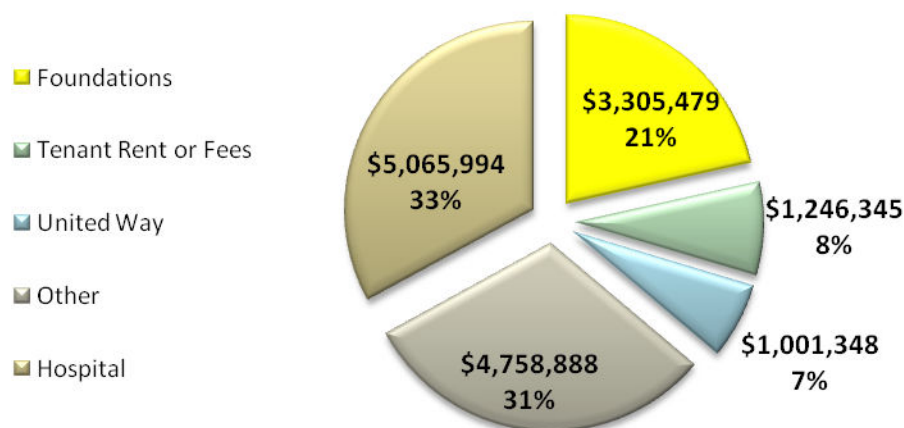


Fig 13 Private Sources of Funding Divided by Provider Type

Private funding came from a variety of sources. Other sources include individuals, special events, faith-based dollars, and funding from unspecified sources. About 70% of private funding (excluding Hospitals) went to Emergency Shelters.

CHAPTER 3: POPULATIONS, PORTRAITS AND PATHS

While many homeless people utilize shelter and housing programs, healthcare, transportation and other programs aimed to help homeless people, many others live by their wits and their luck on the streets, in camps and in cars – places not meant for human habitation. We interviewed 29 of those individuals, some with children, at the Downtown Library during Oklahoma City’s annual Point-in-Time count of homeless people in January, 2010. We also interviewed one family and three individuals who had received help from the homeless services system; City Care provided success stories of one couple and an individual who moved from homelessness to stable housing. Following are excerpts from some of those interviews.

INTERVIEWS

Chronically Homeless Individuals

- **JO** is a 27-year-old white male who has been homeless “off and on” for nine years. He said he slept outside the night before the interview. JO says food stamps are very helpful to him, and he visits churches six to seven days a week for help. JO sold blood/plasma six times in the last year for income and spent four to six months in jail or prison last year.
- **EC** is a 44-year-old white male who has been homeless “off and on” for 10 years. EC was with his him and said he uses drugs or alcohol. EC gets the most help from the Salvation Army and Jesus House in the form of clothing and daily meals.

EC receives income from Day Labor jobs and food stamps, and is trying to receive unemployment benefits. He works 40 hours a week at minimum wage in general labor but would prefer to work at “something that gives a good name.” EC has a bank account and used a low limit credit card three times in the last year. He said he visited the Emergency Room nine times and a state mental health hospital four times in the last year.

- **LP** is a 56-year-old black woman who is originally from Hugo. She caught a bus to Oklahoma City when she was fourteen so that she could find her father, an OKC police officer. The reunion did not go well, and she ended up doing drugs and living on the street. “I was so wild,” she said. She spent 8 months in jail “about twenty years ago.” LP has a lot of issues – she was raped at age 8, has been diagnosed as bipolar and as having split personality disorder, as well as a serious substance abuse problem. Her family are all deceased, and she has no support network outside of Red Rock.

LP came to Red Rock while she was in her forties and stayed twice in the Parkview program before moving into the Lodges permanent supportive housing program. “They fed me, protected me and helped me when I got raped again – even though I was full of drugs. They wanted to get me into rehab, but I fought it and fought it. I wasn’t the type to go by rules. What made me really clock down – they showed me love. They took me for who I was. They pulled me over.”

For the past seven or eight years LP has lived in her own Section 8 apartment at NW 63rd and May, close to a Dollar Store, grocery stores, thrift store, etc. “I pays all my bills, keeps my body clean, help others get

into Red Rock housing. They (Red Rock) still come check on me,” she said. They still help with clothes, bus passes and special services. LP’s pastor’s wife helps her with her banking and bill paying. Her income comes from SSDI and food stamps (\$26 per month).

During the study period, LP went to the emergency room once and had check-ups at a doctor’s office. She goes to Red Rock for therapy two or three days a week and is currently going to a dentist, who is pulling her teeth.

Homeless Youth

- **ME** is an 18-year-old white man who has been homeless in Oklahoma City for one week after being homeless in Dallas for two months. He said he came to Oklahoma City for a court date and can’t get back to Dallas. He said he has a problem with alcohol or drug use.

ME is staying at City Rescue Mission now and might try to go back to school with help from CRM; he has a high school diploma. In Dallas, ME had a job preparing apartments for move-ins, but he has no job in Oklahoma City. He has used a pawn shop many times in the past year to make money and on the day of the interview tried (unsuccessfully) to sell plasma.

In the past year, ME has been to an Emergency Room three times and spent two months in inpatient detox. A few days before this interview, he went to the mental health Crisis Center, where he was not admitted.

Veterans

- **MK** is a 55-year-old Native American male who said he had spent the night on the street behind North Care. He has been homeless for two years. MK is a veteran and was honorably discharged. He told us he uses drugs or alcohol.

MK said he gets the most help from the Veterans Administration and the Indian Clinic, and he goes to the Jesus House or Salvation Army when it gets cold. He has had three different minimum wage jobs in the last year and has worked nights at the Cox Center as a “set-up/tear down” worker. He would prefer to work as a house painter or commercial painter. He has no bank account and does not want one.

MK went to the Emergency Room once in the last year, and spent 10 days in the hospital due to an infection on his foot. MK wishes there were more opportunities for work, and he would like it if there were a shelter where night workers could sleep during the day.

- **BD** is a 53-year-old black man who served honorably in the US military from 1977 to 1981. He spent most of his life in the Tulsa area, where he was a heavy equipment operator and football coach, owned a home, worked in his church and abused cocaine for many years. After a divorce, he lost his house and moved into an apartment, which he lost at age 50 when he was “busted” for cocaine use. He lived with his daughter for awhile, but “there were too many drugs” in the area, and he did not want to go back to jail (where he had spent nine days). He said, “You can’t start a life of crime at 50. I’m afraid of jail.”

Two years ago, BD came to Oklahoma City for a VA program to help him with his drug abuse; 21 months ago he moved into Red Rock housing. For the last 16 months, he has shared his story with clients of the Referral Center, gone to AA regularly and attended church and Bible study.

He is now in Section 8 housing (for a year) and still comes to Red Rock sometimes for company. His income comes from SSDI, Medicaid, food stamps and some medical help from VA.

"I'm a whole new person. I was a bully and I was a thief. I was a taker, and now I'm a giver. Now I'm the son, father, brother I wanted to be."

During the study period, BD went to the Emergency Room once and visited Red Rock monthly. "This is my home," he said. He has also used the VA dentist once.

Families

- **CW** is a 38-year-old white woman who now lives with her seven-year-old daughter in a private apartment. They have been there for about five months; it is paid for through funds from a legal settlement. CW's daughter attends school at Positive Tomorrows and is hoping to remain eligible for the program for another school year.

CW has been homeless – moving from couch to couch – since she was thirteen years old. She said that in other people's homes she "always feel like an outsider, like I don't fit in." She grew up in Chicago, and came to Oklahoma City in early 2009. She has been diagnosed with major depression and bipolar disorder, has physical mobility issues and also thyroid problems, high blood pressure and perhaps diabetes. Her daughter has been diagnosed with ADHD and asthma.

CW and her daughter moved into City Rescue Mission in March 2009 and entered the Bridge to Life program immediately; she graduated in January 2010. The daughter attended school at Wilson Elementary, where the teachers had a lot of difficulties with her; she was determined unable to read or write and was recommended to repeat a grade. At the beginning of the 2009-2010 school year, CW put her in the Positive Tomorrows program where the little girl is reading ahead of grade level and "doing fine." CW gets case management and transportation to physical therapy and is clearly worried when she considers trying to live on her own without their help.

CW has a monthly income from SSDI and is a Certified Nursing Assistant (CNA) with job experience. She says when she gets her health issues under control and her daughter gets older, she expects to work again part time as a CNA.

During the study period, CW went to the Emergency Room six times and to a doctor 18 times. She goes to North Care on a monthly basis for medication management. This year, CW had all her teeth pulled and was fitted for dentures. At this point she is without health insurance as she no longer qualifies for Healing Hands (she isn't homeless); she is no longer eligible for Medicaid through TANF; and her Medicare coverage for her disability does not start until July. This is causing her a lot of anxiety, and she is not taking all of the medicine she has been prescribed.

PORTRAIT OF ONE HOMELESS MAN

Cost for Study Period	
Police/Jail	\$7,855.92
EMSA	\$110,248.00
Emergency Room	\$42,175.57
Total	\$160,279.49

Many homeless individuals and families access mainstream resources through their homeless system case manager, shelter or housing program. Most homeless people are eligible for one or more mainstream resource, and accessing those resources can lead to the ability to acquire and maintain stable housing. Others, however, do not access the homeless system at all and instead rely solely on the mainstream system for help. Malcolm Gladwell described a chronically homeless man in Phoenix who, over the course of time, had cost the mainstream system more than \$1 million. Gladwell's conclusion: some problems are cheaper to solve than to manage (*The New Yorker*, Issues 2006-02-13 and 20).

**One Chronically Homeless Man
Study Period Total \$160,279**

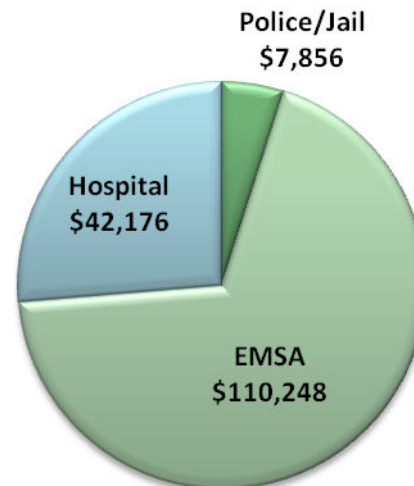


Fig. 14 Total Cost of EMSA, OKC Police and Jail, and the OKC Fire Department during Study Period

We found a good example of this in Oklahoma City. In an interview room at the County Jail, we met a 65-year-old white man who has lived near downtown Oklahoma City his entire life. He had been staying in the jail for several days, withdrawing from alcohol. Bruises and sores were evident on his thin arms; his wrist was shackled to a metal table; and he maintained an expression of confusion during much of the conversation.

The County Jail keeps records of arrests from the time the system was computerized in 1989. Since then, the man had been arrested 434 times. In the past ten years (April 2000 to April 2010), he was arrested 369 times, 95% of the time for public intoxication or trespassing on

public or private property. During our study period, this man was arrested 24 times, costing the City of Oklahoma City \$7,856.

Police Costs (Jail + Run)			
Year	Time Frame	Number of Arrests	Cost*
1	4/1/09 to 3/31/10	24	\$7,856
2	4/1/08 to 3/31/09	30	\$9,820
3	4/1/07 to 3/31/08	41	\$13,421
4	4/1/06 to 3/31/07	61	\$19,967
5	4/1/05 to 3/31/06	56	\$18,330
6	4/1/04 to 3/31/05	37	\$12,111
7	4/1/03 to 3/31/04	19	\$6,219
8	4/1/02 to 3/31/03	81	\$26,514
9	4/1/01 to 3/31/02	15	\$4,910
10	4/1/00 to 3/31/01	5	\$1,637
	Subtotal 10 years	369	\$120,785
	4/1/90 to 3/31/00	65	\$21,276

Fig. 15 *Cost equals \$75 per day for jail plus the cost of a police run (\$252.33) = \$327.33.

EMSA staff know this man, also. Their data show that they transported him to a medical care facility 554 times in the past seven years (April 2003 to April 2010); 98 of those times occurred during our study period. EMSA estimates the total cost for these services for this one man at \$439,622 for seven years; \$110,248 during our study period.

EMSA Costs			
Year	Reporting Year	# of Runs	Cost of Runs
1	2009-2010	98	\$110,248
2	2008-2009	73	\$55,617
3	2007-2008	103	\$76,596
4	2006-2007	96	\$70,841
5	2005-2006	71	\$52,198
6	2004-2005	86	\$63,126
7	2003-2004	15	\$10,997
	Subtotal 7 years	542	\$439,623

Fig. 16 Total Number of EMSA Runs for One Man and Associated Costs from April 1, 2003 through March 31, 2010 (Cost is actual. Rates went up in July 2009.)

We were able to find this man's cost records at two of the seven area hospitals: St. Anthony's and OU Medical Center. St. Anthony's reported that they saw him in their Emergency Room 40 times during our study period for a cost of \$30,575. EMSA records show they took him to Integris South five times during our study period, but we could not find him in their cost records. OU Medical Center's records for the first eight months of the study period show they served him in their Emergency Room nine times for a cost of \$11,600. EMSA records show they took him to OU 47 times during the whole study period, so it is likely that the actual cost to OU was much higher than the amount we were able to identify. Also, while this man has multiple health problems in addition to his chronic alcoholism, during the Cost Study year hospital data showed only Emergency Room visits – no inpatient or outpatient services. Sometimes, there was no charge, as he left before being seen.

There was no evidence that this chronically homeless man received help from the homeless service system during the Cost Study period; he was not found in Oklahoma City's HMIS system any time since 2003, when the current system was implemented. The Cost Study Committee surmises that this man is not being served in the homeless system because he will not (or cannot) stop drinking and has not been interested in following the rules as they currently exist. While the person we studied may or may not be typical in his length of time homeless and in his level of interaction with the police, EMSA and emergency rooms, his is actually quite a common experience for many chronically homeless persons in Oklahoma City (there were 264 of them in the January 2010 PIT count).

Making recommendations is not under the purview of this study. However, the Cost Study Committee did want to make reference to a type of supportive housing that targets chronically homeless persons like the one we studied. According to several national and regional studies in the past ten years, the Housing First model of permanent supportive housing (which does not require sobriety or mental health stability) has an average success rate of about 75% (meaning the people stay in the housing for more than 12 months) and has been shown to decrease the level of hospitalization, incarceration and crises, thereby saving many public and private dollars. The average cost of one Housing First unit of permanent supportive housing is about \$10,000.

CHAPTER 4: STUDY METHODOLOGY

Most homelessness cost studies that have been conducted in the past ten years utilize sophisticated local Homeless Management Information Systems (HMIS) information to identify and track comparable cohorts of study participants. They spend a year or so identifying cohorts, developing instruments and laying out study parameters. Then they gather data for 12 to 36 months and take another year to review, analyze and report on the findings. Most of these studies compare the expenses and service utilization rates of homeless persons before and after they are housed. However, due to the limited time frame (one year) of our Cost Study, the finite number of agencies contributing reliable data to HMIS, and the relatively small population from which to pull cohorts, study architects concluded that a comparison study was not feasible.

The Oklahoma City Cost Study Committee, formed in July 2009, began its efforts by making lists of potential data sources, recruiting and meeting with potential participants, and determining priorities. We decided to look at three basic elements – use (number of people served, type and number of service units provided), cost (cost per service and overall cost) and demographics (age, race and gender).

In most cases, we worked with a primary contact person at each participating agency to ensure that Cost Study parameters, client counts, and service cost data were consistently reported. Costs were collected using a standardized data collection instrument (see Appendix Three) to ensure that all aspects of program operations, services provided as part of residential programs, and program administration were included. We collected information on sources of funding and made sure that the sources and costs balanced, as a check on the total costs. We also sent monthly reminders, invited all participants to monthly Cost Study Committee meetings, and made individual contact (in many cases, we made several contacts) via phone, email or personal visits with each provider.

All homeless costs were based on actual dollars spent, plus the value of in-kind donations and a calculated value for volunteer hours during the Cost Study period of April 1, 2009 through March 31, 2010. According to the U.S. Department of Labor: Bureau of Labor Statistics, the dollar value of a volunteer hour in Oklahoma in 2007 was \$16.19 (*Private Sector*). We used \$16 for the Cost Study. The formula was: Dollar value + In-kind value + Calculated value of volunteer hours = Total Cost.

The Cost Study Committee indicated an interest in determining a “cost per client” figure based on the number of unduplicated clients served by each agency and their overall utilization of program services. We were confounded by several issues—the myriad and disparate types of services offered across categories and within even one visit to an agency;

inconsistent methods of tracking units of service across agencies and within agencies; and our inability to accurately track non-duplicated individual client-level utilization of service units. Therefore, we were unable to estimate the average value of a unit of service.

DATA SOURCES

The study relied primarily on four types of data. Each data source and the process for obtaining the data are described in the subsections that follow.

1) Homeless Management Information Systems (HMIS) Data

HMIS data are collected, analyzed and maintained by the Homeless Alliance on behalf of the Oklahoma City Continuum of Care Committee. HMIS data are client-level data that record demographic details and program utilization for all persons served by agencies participating in the HMIS. In Oklahoma City those programs include transitional housing, permanent supportive housing and a Healing Hands program funded through the HUD Continuum of Care. It also includes the programs that are funded with HUD Emergency Shelter Grant (ESG) funds: Homeless Alliance's Coordinated Case Management Program, Upward Transitions/Travelers Aid Transitional Housing program, and Sunbeam's Senior Shelter. The YWCA receives ESG funding for their Emergency Shelter for women and families escaping domestic violence, but they are prevented by state law from entering this data into the HMIS system. The city's largest Emergency Shelter, City Rescue Mission, began entering HMIS data shortly before the Cost Study period began. When possible, we used HMIS data to verify "numbers served" data from the participating programs.

2) Homeless Program Cost Data Collected Directly from Providers

While HMIS provides information on client use of participating homeless programs, HMIS does not record costs associated with each program. Within the community of providers of homeless services, no standardized unit costs based on funding reimbursements or other estimates are available. Therefore, the major source of information for this study came from cost and use data collected directly from the providers. Utilizing a standard form developed and approved by the Cost Study Committee, providers were solicited for information beginning in late August. They were asked to provide monthly reports of their total costs – including cash, in-kind support and volunteer help – and information about the number of people they served and the number of "units" of service they provided. For most homeless service providers, a "unit of service" is one night in a bed. Programs that provided more than a bed (e.g., food, showers, laundry, case management) included the cost of the entire program in that unit. The unit costs represent all aspects of each program's costs: operating, leasing, services provided as part of the residential program, administration. Unless capital funds were spent during the study period, we did not include those costs in the formula.

3) Mainstream System Administrative Data Maintained by Local or State Agency Administrators

The third primary data source used for this study was administrative data from mainstream service systems. Mainstream systems are those that do not exclusively target people who are homeless. The primary mainstream systems that we attempted to include in the study were:

- medical, including clinics and hospitals
- mental health care and substance abuse treatment
- first responders (EMSA and fire department)
- law enforcement (police department and jail)
- legal services
- food bank
- education
- food stamps and TANF entitlements

We were able to obtain mainstream cost data from each of these systems, except from the Department of Human Services for food stamps, TANF, and the free or reduced-cost medical clinics that abound in our city. We used the mainstream administrative data to track mainstream utilization and the costs associated with that utilization for the twelve months of our study period.

- Medical Data

The Oklahoma City/County Health Department (OCCHD) agreed to request, collect, aggregate, sort and report on Emergency Department and Inpatient Services data from the six major OKC hospitals (we did not request information from Children's Hospital). In the end, we received 12 months of data from St. Anthony, Integris Baptist and Integris Southwest, and eight months of data from OU Medical Center. Mercy installed a new software system during the study period and was not able to participate.

The Health Alliance for the Uninsured agreed to request data from their member clinics, but they were unable to collect information specific to homeless clients (they do not record who is homeless and who is not). However, the Central Pharmacy, which is the satellite location for the Oklahoma County Pharmacy (operated by the Oklahoma County Social Services Department), provided monthly data on their services.

The State Department of Health, HIV/STD Services Division of Care Quality provided a year of information on individuals they served who were homeless and HIV positive.

The Veterans Administration shared information on their TH programs for homeless veterans but were not able to provide information about their medical programs.

- *Mental Health and Substance Abuse Services Data*

The Oklahoma Department of Mental Health and Substance Abuse Services provided monthly information on the costs and number of homeless persons served by each of the programs funded in Oklahoma City. That included information from the Crisis Center. However, there are many other public and private mental health and substance abuse treatment services that we were unable to capture, because they do not track whether or not their clients are homeless.

- *First Responders and Law Enforcement*

In Oklahoma City, three groups comprise the first response to emergencies: EMSA, OKC Fire and OKC Police. In many instances, all three respond together. For the purposes of the Cost Study, representatives from the three groups, along with the State Health Department, met regularly to develop a coordinated method of identifying services to homeless people. The representatives first identified the parameters of four police reporting districts (RDs) where most, if not all, calls involved homeless persons. The service areas encompassed Jesus House, City Rescue Mission, Salvation Army, Nazarene Mission and Goodwill, but they excluded the Civic Center and the Myriad Gardens. Traffic accidents were not counted.

EMSA provided monthly printouts that included the type of calls, responses, number of patients, transports and costs. The Fire Department provided printouts with the date of service, street name, type of incident and description of incident. The Police Department manually tracked calls on the first, twentieth and thirtieth of each month, the first Tuesday, second Thursday, and third Saturday that did not fall on the above dates. Also, the Police Department representative examined the Crisis Intervention Team (CIT) reports on a monthly basis in order to identify the number of homeless persons who were helped.

For the Oklahoma County Jail, identifying the number of homeless served meant getting a daily count of homeless individuals in lock-up on the sample days. The sample day totals were then averaged and used to determine a monthly total. Additionally, since the data collection process did not begin until September, OKC Police could not provide actual data for April through August 2009, and an average of the proceeding months was applied.

- *Legal*

Legal information was provided by Legal Aid Services of Oklahoma and Trinity Legal Services. Both agencies serve low-income clients and were able to isolate costs associated with serving their homeless clients.

- Food

The Oklahoma Regional Food Bank provided monthly lists of all of the homeless programs they serve in Oklahoma City. The lists included the donation in pounds of food, the value of the food, and the amount the program paid for the food. We subtracted what the agencies paid (which was included in the individual agency costs) from the value of the food to get the cost to the Food Bank. Much of the food was donated by the USDA, so it was counted as in-kind. In order to get the cost of City Care's breakfast, City Care provided a monthly list of the cost of the program with the numbers served, utilizing the standard cost study data collection form.

- Education

The Oklahoma City Public Schools have a homeless liaison, paid for and required by the federal McKinney-Vento legislation. This liaison identifies homeless children (defined to include children in families without a fixed address – i.e., “couch” homeless) and serves them during the school year. Data was provided for the 2009-2010 school year. Positive Tomorrows and Youth Services of Oklahoma County used the standard cost study data collection form.

4) Personal Interviews with Homeless and Formerly Homeless Individuals

The Cost Study Committee felt it was important to collect anecdotal information from a collection of homeless and formerly homeless individuals in order to provide this report with actual faces or “portraits” of the persons we have been studying. Toward that end, we conducted four sets of interviews:

- During the January 29, 2010 Point-in-Time count, we selectively interviewed 29 currently homeless persons who were at the Downtown Library that day.
- In May, 2010, we interviewed four formerly homeless people who were then living in permanent supportive housing.
- City Care's Pershing Center provided us with two portraits of a couple and an individual who are living in their transitional housing program.
- We interviewed and completed an administrative record check on one chronically homeless man who is well-known in the law enforcement and medical communities.

STUDY CHALLENGES

The Cost Study process brought together a wide variety of homeless and mainstream service providers who share a commitment to helping Oklahoma City's homeless community but do not often collaborate to reach a common goal. Because homeless services in OKC are dedicated to maintaining comprehensive records, the Cost Study Committee was able to collect and analyze a substantial amount of information in a relatively short period of time, and we are confident that the numbers provided are accurate. However, we encountered numerous challenges in our data collection process that narrowed the overall scope of the study and ultimately restricted the amount of information included in the Final Report.

Homeless Numbers – Many participating agencies do not track individual client data; for our purposes, they were able to provide nightly bed counts but could not determine if the same clients are being served from day to day. Additionally, some of the agencies that provided monthly data were not able to provide unduplicated client counts for the study period. The study process inspired several agencies to develop better client tracking methods.

Homeless/Non-Homeless Client Numbers – Many agencies that serve both homeless and non-homeless clients have no way of separating their client numbers or of isolating the cost of serving only their homeless clients. Some food pantries, free clinics, and the Public Inebriate Alternative could not be included in the Cost Study for that reason.

Demographics – Most participating programs do not record demographic information; many that record demographic information do so only partially and sporadically. Few agencies were able to provide complete demographic data that matched their client numbers. Ultimately, the Cost Study Committee concluded that the partial demographic data collected was not sufficient to constitute a representative data set and should be left out of the Final Report.

Unit Costs – Services to homeless are many and varied, and developing a common definition for “unit of service” was not possible. Even within a service category, a unit of service can vary greatly from agency to agency, depending on the amount and level of services available on site. We developed and provided definitions and offered guidance but ultimately trusted the agency's judgment when calculating service units.

Funding Sources – In order to understand the level of support from each government category (i.e., Federal, State, County, City), providers were asked to complete a “Funding Sources” form that listed specific (and typical) grant and program categories. They were asked to provide the Cost Study Committee with information about the sources of all of the funding that they had reported on their cost study forms. Difficulties arose, as the totals

(taken from budgets) often differed from the actual amount spent during the Cost Study period, and in the case of public funding it was difficult to determine whether they were reporting the grantor or the original source of funding. For instance, each year interested providers apply to the City for HUD's Continuum of Care and Emergency Shelter Grant funds, but the source of the funds is HUD – a department of the federal government. Some providers called these City funds, and some called them Federal funds. We were not able to distinguish the original source of the mental health and substance abuse funding, although we know that some comes from Oklahoma state coffers and some passes through the state from the federal government. Because of this, we provided a general estimate of the percentages from each area instead of a detailed description of the source.

Private funding sources were less challenging, although we believe the amount identified as coming from Faith Based Sources was probably higher than reported. Some providers used the Individual Donor category to list faith-based contributions, and some used it to record fundraising events, etc. Others left the categories blank.

Definitions – The definition of homelessness adopted by the Cost Study Committee was less broad than that used by OKC Public Schools. This was resolved by noting the difference in the Education Data Section of this report (page 40). The definition of transitional housing was also an issue resolved as described in that section (pages 12-13).

CHAPTER 5: STUDY CONCLUSION

First, a lot of money, services and volunteer time are being spent to help homeless people in Oklahoma City. \$28,746,094 is at least 30% more than the most optimistic of the Cost Study Committee predicted. It is more than twice the number that was presented to the Mayor's Homelessness Action Task Force three years ago.

Second, most of that money (more than 50%) pays for Emergency Shelter and hospital emergency rooms. Our homelessness system revolves around those two places. Often times, people who are too sick to stay at the shelter are taken to the hospital, where they are released without housing as soon as possible. This is not only terrible for the health and well-being of the homeless people being served this way, but it is also disruptive and dangerous for others in both the shelters and the hospitals. Moreover, it does not make sick people well, and it does NOT stop people from being homeless.

We found, without much trouble, one man who had been homeless for twenty years or more, who cost the community more than \$160,000 in one year. It is clear that the current system does not provide a housing option, such as Housing First permanent supportive housing, that is appropriate and sustainable for this man and others like him.

The cost study period itself was a little unusual, in that it encompassed months when the state and city budgets were being reduced, unemployment was higher than usual, and there was more federal funding available from the American Recovery and Reinvestment Act . The Homelessness Prevention and Rapid Re-housing (HPRP) Grant provided a chance to coordinate housing assistance funds and case management for households on the verge of homelessness and to rapidly re-house families in the homeless shelters. There were also special housing vouchers for homeless veterans and their families. HPRP began in November 2009, so the data was just beginning to come in when the study period ended. The presumption is that these programs will have an impact on the numbers of homeless households and in the length of time they are homeless.

Oklahoma City funders and providers have come a long way in terms of coordinating services and referrals and collaborating in ways that share and stretch resources, but such inter-dependence remains difficult and uncommon. The WestTown Resource Center, when operational, should aid in these efforts.

Finally, while we were heartened and grateful for the degree of data sharing that we encountered in this project, it was dramatically clear that data sharing in general is not yet the norm, even among homeless service providers. The Homeless Management Information System (HMIS) is not currently used as a tool to share program and participant information.

APPENDICES

- Appendix 1: Participating Agencies
- Appendix 2: Committee Members
- Appendix 3: Data Collection Instruments
- Appendix 4: Documentation for Valuing Volunteer Time
- Appendix 5: Emergency Shelter Detail
- Appendix 6: Homeless Housing Detail
- Appendix 7: Homeless People Sketches
- Appendix 8: Success Stories Shared by City Care

Appendix 1

Participating Agencies

Homeless Programs

- | | |
|---|---|
| <ul style="list-style-type: none">• Catholic Charities• City Care• City Rescue Mission• Community Enhancement Corporation• First Step Men & First Step Women• Grace Rescue Mission• Hand Up Ministries• Healing Hands• Homeless Alliance• HOPE• Jesus House• Latino Community Development Agency | <ul style="list-style-type: none">• Neighborhood Services Organization• Positive Tomorrows• RAIN Oklahoma• Red Rock• Rose Home• Salvation Army• Sunbeam Family Services• Upward Transitions/Travelers Aid• Veterans Administration• Winds House• Youth Services of Oklahoma County• YWCA |
|---|---|

Mainstream Agencies and Organizations

- | | |
|--|---|
| <ul style="list-style-type: none">• Community Action Agency of Oklahoma City• NSO Dental Clinic• Emergency Medical Services Authority (EMSA)• Health Alliance for the Uninsured*• Integris Hospitals (Baptist and Southwest)• Legal Aid Services of Oklahoma• Metropolitan Library System*• Metro Transit• Oklahoma AIDS Care Fund• OKC Fire Department• OKC Police Department | <ul style="list-style-type: none">• OKC Public Schools• Oklahoma City/County Health Department• Oklahoma County Social Services• OK Department of Health• OK Department of Mental Health and Substance Abuse Services• OU Medical Center• Regional Food Bank of Oklahoma• St. Anthony Hospital• Trinity Legal Services• United Way of Central Oklahoma• Veterans Administration |
|--|---|

*Helped with the study but did not provide data

Appendix 2

OKC Cost of Homelessness Study Committee Members

- | | |
|---|---|
| <ul style="list-style-type: none">• Sheila Alexander, Positive Tomorrows• Linda Baker, First Step for Women• Laurie Barbour, HPRP Coordinator• Jay Barnett, OCPD• Dana Chism, Upward Transitions/Travelers Aid• Leann Davis, City Care• Angela Dickson, Catholic Charities• Nicole Diehl, OSDH• Reina Escalante, Neighborhood Services• Jane Ferrell, GICH/OKC Planning Department• Katrina Garcia, City/County Health Department• Susan Geurin, GICH/Healing Hands• Christi Jernigan, OK County Social Services• Ashley Jones, Salvation Army | <ul style="list-style-type: none">• Tom Jones, GICH/City Rescue Mission• Barbara Kidder, OKDHS• Shelly Kuhn, OKC Planning Department• Jon Lowry, Oklahoma City/County Health Department• Kelly McMinn, ODMHSAS• Janet Miller, Salvation Army• Sunshine Schillings, OK AIDS Care Fund• Dan Straughan, Homeless Alliance• Noel Tyler, GICH/DDD• LeAnn Tyson, Red Rock Behavioral Health• Tammie Vail, ODMHSAS• Randy Webb, City Rescue Mission• Marisa Wells, GICH/OSDH• Nicole Wilson, OKCPS• Kim Woods, Homeless Alliance |
|---|---|

Appendix 3 Data Collection Instruments

Agency Name _____ **Program Name:** _____

Month: _____

Budget Information

Service Cost Calculation

Monthly Budget	In-Kind	Volunteer	Total Budget	Total # Served	Cost Per Person	Total # Visits	Cost Per Visit
			\$0.00		#DIV/0!		#DIV/0!

Age - Single Persons

Age	Male	Female	Trans-gendered	Total
62 and over				0
51-61				0
31-50				0
18-30				0
17 and under				0
Total	0	0	0	0

Age - Persons in Families

Age	Male	Female	Trans-gendered	Total
62 and over				0
51-61				0
31-50				0
18-30				0
17 and under				0
Total	0	0	0	0

Racial/Ethnic Information

Race	Male	Female	Trans-gendered	Total
Asian				0
Black				0

Hispanic				0
Multiple				0
Native American				0
White				0
Total	0	0	0	0

Sources of Cash for Programs Serving Homeless Persons
Oklahoma City Cost of Homelessness Study
April 1, 2009 to March 31, 2010

Please provide the following information for the twelve-month period of April 1, 2009 through March 31, 2010:

Agency Name: _____ Program Name: _____

Total Program (**Cash Only**) Income for 4/1/09 to 3/31/10: _____

Total Dollars (**cash only**) committed to housing and/or services for
the homeless received from Government Sources:

Source	Amount
Federal Grants (please specify)	
HUD Continuum of Care	
HUD Emergency Shelter Grant	
HOPWA	
Other HUD	
Medicaid or Medicare	
Other Federal	
State Grants (please specify)	
County Funds (please specify)	
City Funds (please specify)	
Social Services	
Total	\$

Total Dollars (**cash only**) committed to housing and/or services for
the homeless received from Private Sources:

Source	Amount
Faith-Based Institutions	
Private Foundations	
Individual Donations	
Tenant Rent or Fees	
United Way	
Other	
Total	\$

OKC Cost of Homelessness Annual Data Form

Agency Name: _____

Program Name: _____

Cost Information (4/01/09 - 3/31/10)

Service Cost Calculation

Cash	In-Kind	Volunteer	Total Cost	Total # Served	Cost Per Person	Total # Units of Service	Cost Per Unit of Service
			\$0.00		#DIV/0!		#DIV/0!

Income Sources

Federal	State	City	County	Private	Total
					\$0.00

Demographic Information

Age - Single Persons

Age	Male	Female	Trans-gendered	Total
62 and over				0
51-61				0
31-50				0
18-30				0
17 and under				0
Total	0	0	0	0

Age - Persons in Families

Age	Male	Female	Trans-gendered	Total
62 and over				0
51-61				0
31-50				0
18-30				0
17 and under				0
Total	0	0	0	0

Racial/Ethnic Information

Race	Male	Female	Trans- gendered	Total
Asian				0
Black				0
Hispanic				0
Multiple				0
Native American				0
White				0
Total	0	0	0	0

Appendix 4
Documentation for Valuing Volunteer Time
OKC Cost of Homelessness Study

US Dept of Labor: Bureau of Labor Statistics

Published by *Independent Sector* 2009

Oklahoma (Dollar Value of a Volunteer Hour* in 2007): \$16.19

National Average (2008): \$20.25

OKC Cost Study Value: \$16.00

**The value of volunteer time is based on the average hourly earnings of all production and nonsupervisory workers on private nonfarm payrolls (as determined by the Bureau of Labor Statistics). Independent Sector takes this figure and increases it by 12 percent to estimate for fringe benefits. The value of volunteer time presented here is the average wage of non-management, non-agricultural workers. (Independent Sector 2009)*

Dollar Value of a Professional Volunteer Hour: TBD by the professional but only when performing professional services (e.g. medical services, legal services, accounting, etc.)

It is important to remember that when a doctor, lawyer, craftsman, or anyone with a specialized skill volunteers, the value of his or her work is based on his or her volunteer work, not his or her earning power. In other words, volunteers must be performing their special skill as volunteer work. If a doctor is painting a fence or a lawyer is sorting groceries, he or she is not performing his or her specialized skill for the nonprofit, and their volunteer hour value would not be higher. (Independent Sector 2009)

Appendix 5 Emergency Shelter Detail

Emergency Shelters in Oklahoma City*

Agency	Capacity (in beds)	Primary Population
Individuals		
City Rescue Mission	354	Single adults and families
First Step Women	40	Single women with substance addictions
First Step Men	87	Single men with substance addictions
Grace Rescue Mission	120	Single men
Jesus House	75	Single adults with mental illness
Red Rock	6	Youth
Rose Home	2	Pregnant women over 18; women with babies
Salvation Army	54	Single adults and families
Sunbeam	10	Older adults; medically fragile
YWCA	20	Single women and families who have experienced domestic violence
Subtotal	768	
Families with Children		
City Rescue Mission	30	Single adults and families
Rose Home	15	Pregnant women over 18; women with babies
Salvation Army	44	Single adults and families
YWCA	30	Single women and families who have experienced domestic violence
Subtotal	119	
TOTAL	887	

*Source: Housing Inventory Chart (HIC), 2009 Continuum of Care Exhibit One

Appendix 6 Homeless Housing Detail

Transitional Housing in Oklahoma City*

Agency	Capacity (in beds)	Primary Population
<i>Individuals</i>		
City Care Pershing Center	60	Individuals recovering from substance abuse
Hand Up Ministries	100	Individuals with sex offender status
Neighborhood Services Organization	14	Transition aged youth
Phoenix House	18	Male veterans
RAIN Oklahoma	7	Persons with HIV/AIDS
Red Rock	26	Persons with mental illness and/or HIV/AIDS
VA Friendship House	20	Male veterans
Winds House	11	Persons with HIV/AIDS
YWCA	1	Women escaping domestic violence
Subtotal	257	
<i>Families with Children</i>		
Catholic Charities Transitional Housing	39	Families
Latino Community Development Agency	19	Spanish-speaking families escaping domestic violence
Neighborhood Services Organization	36	Women with children
Upward Transitions/Travelers Aid	11	Families
YWCA	22	Women with children escaping domestic violence
Subtotal	127	
TOTAL	384	

*Source: Housing Inventory Chart (HIC), 2009 Continuum of Care Exhibit One

Permanent Supportive Housing in Oklahoma City*

Agency	Capacity (in beds)	Primary Population
Individuals		
Community Enhancement Corporation	64	Individuals recovering from substance abuse
City Care	24	Disabled individuals
HOPE Shelter Plus Care	50	Male veterans
HOPE Supportive Housing	32	Persons with HIV/AIDS
Neighborhood Services Organization Palo Duro	22	Persons with mental illness and/or HIV/AIDS
Red Rock	24	Male veterans
Subtotal	216	
Families with Children		
Homeless Alliance	56	Families with disabled head of household
HOPE	16	Families with mentally ill head of household
Red Rock	3	Families with mentally ill head of household
YWCA	11	Families with disabled head of household escaping domestic violence
Subtotal	86	
TOTAL	302	

*Source: Housing Inventory Chart (HIC), 2009 Continuum of Care Exhibit One

Appendix 7

Homeless People Sketches

Chronically Homeless Individuals

- **JN** is a 62-year-old white woman who has been homeless “off and on” for three years; this time she’s been homeless for four months. She said she has a mental illness and was also hit on the head recently and spent a week in the hospital for that, after going to the emergency room. She stays at City Rescue Mission and also receives assistance from Sister BJ’s and “lots of churches.” She complained that case managers have lost her paperwork so she is having difficulty getting a social security card that would be necessary to obtain food stamps and housing. She says she uses mental health services from City Rescue Mission.
- **JR** is a 58-year-old black man who had spent the previous night in the woods south of downtown. He has been homeless for seven months this time and has been homeless three times in the last three years. He has no spouse or children with him and was living in a boarding house on Third and Kentucky in Oklahoma City when he became homeless this time.

JR suffers from arthritis, hypertension, and has had periods of mental illness, but “not lately.” He has been receiving medication from Healing Hands for four years, and he goes to the Jesus House and Salvation Army for food. He occasionally stays at City Rescue Mission for 30 days at a time but has to leave because he does not want to join their jobs program. He stays at the Jesus House “if it’s freezing.”

- **JH** is a 55-year-old Native American (Choctaw) male. He slept the previous night under the Walker Bridge because he tried to get into the Jesus House but was told “it wasn’t cold enough.” He has been homeless since November 2008 after losing his home in Norman (73026), which he owned. Due to downsizing, he was laid off from the VA Hospital, where he worked for 19 years as an x-ray technician. Shortly after the layoff, he could not make his mortgage payment.

JH says that food stamps and the bus system are helpful, and he occasionally stays at the City Rescue Mission for 30-day stints. He visits Sister BJ’s pantry on Friday and Saturday and gets a sack lunch from St. Joseph’s Church on Tuesday, Wednesday and Thursday. JH visited the Presbyterian Emergency Room once last year to be treated for ulcers on his feet.

JH says he wants more employment assistance programs, and that he is interested in signing up for permanent supportive housing, but he “has no way to get there.”

- **CL** is a 50-year-old black male who has been homeless for six years. He uses alcohol or drugs and spent the previous night in a car. He was living in Oklahoma City (73102) when he became homeless. He works 16 hours per week “pulling trash” for minimum wage. He has no bank account, but he would like to, and he would prefer working as a “Floor Tech.”

CL gets the most help from churches, the Salvation Army, and Jesus House, where he receives shelter and clothes every other week. He visited the emergency room once and spent two separate days in jail in the last year.

Veterans

- **FH** is a 63-year-old white male who has been homeless for nine and a half years. He was living in St. Paul, Minnesota, where he owned a home, when he became homeless. FH served in the U.S. military from 1965 to 1971, and was honorably discharged.

FH says he receives the most help from Sister BJ's Pantry, where he gets food, clothing, accessories, and advice twice a week. He currently lists no sources of income, but he used to sell plasma twice a week.

FH says Oklahoma City needs to expand existing homeless services programs, including counseling, housing, and employment training. He says both food and medical help has been available.

Families

- **KS** is a black male of unspecified age who is with a seven-year-old daughter. This is his first period of homelessness, and he has been homeless for two and a half months. He spent the previous night with friends. He was living in Oklahoma City when he became homeless.

He receives the most help from Traveler's Aid, where he gets bus tokens once a week. He works in fast food for minimum wage 40 hours per week, and he also has income from food stamps and family and friends. He would prefer to work in a warehouse and wishes there were more job opportunities for homeless people in OKC. He has no bank account, but he has used check-cashing services in the last year.

KS visited the emergency room 20 times in the last year ("for shelter") and went to the dentist 10 times.

Appendix 8

Success Stories Shared by City Care*

A Second Chance to Contribute

- CH came to City Care's Pershing Center in August 2003. With close to nothing, CH was homeless and in need of a second chance to get back on her feet again. A year prior to her coming to Pershing, CH had a great job as the kitchen supervisor and head cook at the Salvation Army. During those days CH had little compassion for the homeless people whom she served. Little did she know, it wouldn't be long before she had a lot in common with them.

CH became ill and was hospitalized. The medical bills stacked up and she had nowhere to turn. She was forced to leave her job and was faced with a life that she had never dreamed of: one of homelessness. She eventually put her pride aside and returned to the Salvation Army, only this time seeking a bed on which to sleep.

While at the Salvation Army, CH was given the opportunity to enroll as a student at The Education and Employment Ministry (TEEM). While there, she was introduced to CityChurch in Oklahoma City. At that time CityChurch happened to have ties to City Care as the host site for City Care's homeless breakfast and food basket outreach programs. It is no surprise that CH was quickly invited to receive her second chance through City Care's Supportive Housing Program at Pershing Center.

CH moved to Pershing Center where she was a transitional housing resident for two years. She now lives in a duplex at City Care's Westlawn Gardens supportive housing program funded by HUD through the Oklahoma City Continuum of Care. CH's leadership role as a resident in the Pershing Center prepared her for a leading role in her neighborhood. CH is currently the President of the Westlawn Gardens Neighborhood Association.

CH states, "The Pershing Center has changed my entire life. I found out what it is to be *without* and now I have a big heart for people. I now have the compassion that I once lacked. I love to volunteer, doing anything I can to help others." The staff and residents completely agree with her voracious need to volunteer. On any given day, you will find CH at the Pershing Center helping where she is needed. She often cooks lunch and dinner for staff and residents and she is no stranger to the front desk as occasional receptionist.

From Homeless to Homeowner

- This is a story about two people who came together at a time in their lives filled with loss and heartbreak. VI was grieving the death of her husband as AL was coping with the loss of his mother only to bury his father 20 days after her death. Having grown up playing together and dating casually years earlier, it was only natural for these two people in mourning to take solace in one another. They weren't alone in their relationship, however. A third and very powerful partner was about to take them on a chaotic ride, testing their strength and their faith. Heroin pushed them all but to the brink of death.

VI and AL went out to grab a drink in September of 1994. It was from this point that they were inseparable. VI and AL were married April 4, 1995. They continued using drugs and it wasn't long before death came knocking at their door once again. August 28, 1995, AL's little brother died of an overdose. AL was now at an all-time low. They began using more heavily and AL lost his supervisor position at a local successful company.

In utter despair, VI and AL were jobless and had a growing addiction that was costing \$800 a day to maintain. They turned to a life of crime in order to fuel their habit. Shoplifting was their job. They got up every morning, took a hit of heroin, and set out to steal from one of the retailers in their long revolving list of targets.

VI and AL remember those days with disgust. In their memories are the normal families traveling the aisles of the supermarket, checking off items on their grocery list as they lowered boxes of cereal into their cart. These other families had full intentions of paying for their weeks worth of food while they undoubtedly spoke of their weekend plans to take their children to the zoo and have a picnic. VI and AL watched and envied the simplicity of the lives of such families, and wished they had the strength to put down the needle and leave this life of constant turmoil and anxiety in getting their next fix far behind.

In 1995, VI was going through withdrawal because she didn't have the money to buy heroin. Without medical attention during a withdrawal, the consequences can be life threatening. This was no exception. VI had a heart attack. This however, was not her wake-up call. After surviving her encounter with death, VI and AL once again picked up the needle.

In 1996, VI was sentenced to three years for possession of heroin. She served a year. During this year, AL continued to use and became ill with double pneumonia, which kept him hospitalized for a better part of VI's absence. Within two months of VI's release the two picked up their habit at full force. Shoplifting daily to pay their dealer continued as well.

In 2000, VI and AL were caught shoplifting. They were each given a sentence of five years for larceny of a retailer. VI tells of that day with absolute clarity and gives such vivid detail as if it happened yesterday. "We were handcuffed and in the back of the cop car. In silence we pulled to a stop light at 74th Street and Western. We were right next to a Suburban that had a bumper sticker that had three crosses on it and read 'Every Knee Shall Bend.' God was speaking directly to me. I was done. I turned to AL and told him this was it, no more."

AL remembers that day with the same vivid detail. "Prison wasn't a problem for me. I could jump through the hoops, do what they ask for a few years, no big deal. This time it was different altogether. I had finally found something that I couldn't live without: VI. We were about to be separated and I took full responsibility for what she was going through. In my mind, it was 100% my fault that VI was in this position and it absolutely tore me up. For the first time ever, I made a promise that I would spend the rest of my life keeping. Before we were taken from each other I said to VI, "I'm probably not going to get to see you for a long time. But, I love you. And if it takes the rest of my life, I promise I will make you happy.' It was at that point that I knew I was finished with drugs. I was finished with that life."

VI was released from prison in November of 2001. She began attending church and was told about a program in Oklahoma City that would be perfect for her. VI visited Mid-Town, the sober-living organization that Larry Bross founded, which has now evolved into City Care's Pershing Center. Upon visiting Mid-Town, VI was floored by the generosity and compassion she encountered. She was even a bit skeptical; after all, in her experiences she has found that if something seems too good to be true, it

probably is. Mid-Town, however, would be VI's first of endless idyllic situations that she now knows to be blessings: pure works of God.

AL was released from prison in April of 2002. He joined VI at Mid-Town and was also in awe of the chance he was given with this program. He tells of one of his first such chances with a sparkle in his eye. "Here I am, having just gotten out of prison, and I move into this place, away from the old reminders, with my sweetheart. The people wanted nothing from me; they wanted only to give and to help me help myself. I was overwhelmed! On top that, Larry gives me a key to a suburban with a trailer full of lawn equipment hooked to the back and says, 'Here, go mow these lawns.' Before, in my previous life, I would have taken this equipment and sold it! But, I was stopped dead in my tracks. This man, whom I looked up to very much, wasn't just giving me a key to a vehicle and a job. He was giving me something so much more precious and valuable! He had handed me his trust! Trust can be a powerful thing. I was determined to maintain that man's trust and be loyal to him. I mowed those lawns that day and went to bed that night with a sense of accomplishment that I hadn't felt in years."

VI and AL quickly became integral parts of the Pershing Center, both employed with positions that not only required their health and presence, but offered them a community of support and accountability.

"God has blessed us and continues to bless us!" VI continues. "AL and I were so fortunate to move into the residences provided by City Care that were newly built with no previous tenants. We were the first to move into the Pershing Center. I was able to pick out our room at the Pershing Center! Then, when the duplexes were built in the Westlawn neighborhood, we were given the opportunity to rent one. And now, we own our own home built by City Care! It truly is miraculous."

The Pershing Center is excited to celebrate 10 years of sobriety with VI and AL this month. It's been 10 years of rebirth, now living the kind of simple life they used to envy of families in the supermarket long ago. They are literally living their dream.

***Sketches written by a City Care Case Manager**