

**Concord Plan to End Homelessness**  
**Meeting Notes**  
**April 16, 2013**

**Committee Members Present:** Nicole Schultz-Price, David Frydman, Patrick Tufts, Susan Howland, Cathy Kuhn, Jerry Madden, John Hoyt, Shannon Swett Bresaw, Jerry Kingwell, Maureen Ryan, Dan Andrus, John Duval, Jackie Whatmough, Maggie Fogarty, Jim Bouley, Tim Sink, Ralph Littlefield

**Others Present:** Amy Lockwood (facilitator), Major Jerry Stinson, Jacob Wasag, Lorinda Gilbert, Jim Gilbert, and Curtiss Rude

**Recap of Major Trends**

The group spent a short time reviewing major trends in reducing homelessness: Rapid Rehousing, Housing First, etcetera. The group also briefly reviewed the major principles of the Collective Impact approach.

**Strategies Employed in Manchester**

Patrick Tufts described the creation of Manchester's Plan to End Homelessness, which has been very successful in achieving short term goals toward reducing homelessness. Some specific benefits Manchester has experienced through starting a Plan to End Homelessness include:

- Day center for homeless people
  - Streamlined access to services, people have a place to go during the day
- Day center cards to give homeless people who are panhandling – helped people do something constructive, in line with bigger goals
- Increased access to federal funding for the city (increased from about \$750,000 to about \$1.2 million)
- Easier access to foundation funding with a plan
- Better coordination of services – the plan helped service agencies find strategies that supported other goals rather than unintentionally distracting from them (i.e. feeding homeless people in parks)
- Centralized spot for service coordination

**Costs and Impacts of Homelessness in Concord – Populations and Issues**

The group discussed and then prioritized costs and impacts of homelessness in Concord. For the purposes of the discussion the group did not attempt to determine how closely each item is actually about homelessness vs. being a related symptom.

Also, it was noted this exercise was a brainstorm based on both professional experience and informal personal observations. To select actual priorities for the Plan, the group will need more information about options, costs, etc.

## **Populations**

### **High Priority Populations to Address** (marked high priority by 5 or more)

- Chronically homeless population
- Homeless families – with children
- People exhibiting criminal or threatening behavior
- People having to use the emergency response system to get basic needs like medical care met

### **Medium Priority Populations** (marked high priority by fewer than 5)

- People at risk of homelessness due to loss of income
- Short term emergency homelessness (for instance, a domestic violence situation with a person who is easily connected into a service system)
- Mentally ill people who are in and out of homelessness
- Ex-offenders
- Open drug users
- People doubled up with unrelated renters – increasing evictions and damages

### **Low Priority Populations** (marked as Aspirational or Medium priority by all, or not ranked)

- People doubled up with family
- Elders
- People with dual diagnosis of mental illness and substance abuse issues

## **Issues**

### **High Priority Issues to Address** (marked high priority by 5 or more people)

- Loitering people in downtown and other areas
- Mentally ill people on the street
- Homeless children:
  - Impacts of homelessness on kids in public schools – school hopping, behavior issues, increased likelihood of dropping out, etc.
  - Kids are the community's assets – lens for strategizing on addressing homelessness
- There is a huge amount of volunteer time and other resources directed to short term chaos so little is left to improve systems

### **Medium Priority Issues** (marked high priority by fewer than five people)

- Open drug use in public areas
- People sleeping in cars
- Victimization of the “harmless homeless”
- Criminal activity
  - Activity itself
  - Criminal records of recently released inmates preventing them from stabilizing with jobs, homes, etc.
  - Perceived criminal activity creating fearfulness
- Business loss of income
- The hardening of hearts to real needs by “less needy” people taking attention
- Aesthetics – people become leery about nice aesthetic features like fountains, benches, garden areas out of concern that they will be misused by homeless people
- Less resources/ quality of life for homeless/ others
- Cost of untreated substance abuse (actual cost, plus secondary impact of making it less likely a person will be able to successfully tap into support systems)

### **Lower Priority Issues** (marked as Aspirational or Medium priority by all)

- Self-limiting mindset in the community (avoiding creating a fountain)
- Loss of new business coming into the community
- Misdirected “helping” that ends up enabling people
- Visible homeless camps deter tourism
- “Cleanups” of camps end up wasting resources other nonprofits have donated to the cause, for instance, sleeping bags and backpacks
- Private property damage – for instance people’s homes near the Friendly Kitchen’s former site
- Recent high profile deaths of homeless people – strain on police resources, create increased fear
- Panhandling

### **Next Meeting**

#### *A Few Goals for Next Meeting*

- Narrow in on a set of priorities for the plan
- Determine who else needs to be involved
- Create a plan for engaging others

*Order to Achieve these Goals We Need:*

- A complete list of what is already here for resources
  - Who is and is not being served
  - Identification of gaps
  - Information on how the Continuum of Care might be a resource for the Plan
- Quantification of Homelessness Issue in Concord
  - A clearer picture of the homeless population in Concord: how many are chronically homeless vs. families vs. short term homeless, etc.
  - To what extent are homeless people in Concord coming from surrounding towns, and how does it relate to their policies and procedures? (Need to understand this in order to determine to what extent surrounding towns should be part of the Plan)?
  - Is it possible to determine whether homeless reduction efforts in Manchester and other communities is contributing to increase in homelessness in Concord?
- Add to the group: someone from the schools who can help with information about homeless children
- Costs to Concord Hospital and other health related costs to the community
- VNA perspective
- More information on the root causes of homelessness (expand on information from first meeting – need data specific to Concord)
- Get Congressional delegation involved?

**Next Steps**

- Social service provider members of the group agreed to meet to create the “asset map” of services in Concord, and a clearer picture of Concord homelessness.
- The next Steering Committee meeting will be at 6:30 pm on May 28 in the same location at Sulloway and Hollis.
- The small group will work on school representation in the project.