IL-NET T&TA Center

Innovations in Transition: Strategies to Engage Unhoused Consumers in Your Community   
Presented by Sarah Stroll

August 15, 2024

Live captioning by AI-Media   
  
MARY-KATE WELLS:   
Welcome everyone. We are going to give folks a moment to jump on, I hope everyone is having a good day so far.   
  
Alright. So, as I see the number of attendees increasing I'm just going to start with housekeeping today. Welcome to today's webinar, the webinar focus is on innovations and transitions, strategies for engaging on housed consumers in your community. My name is Mary cade Wells, I use the she/her pronouns, I am program director at the national Council on Independent living, or NCIL, NCIL is a partner with the (unknown term) and we support the coordination of these webinars, and I will be your moderator for today. So for, on slide three today's presentation is brought to you by the administration for community living at the United States department of Health and Human Services, in conjunction with the IL-NET. On the screen on slide four, IL-NET is operated by letter I LRU in collaboration with NCIL, APRIL and the University of Montana. And there are the logos on the screen of those organizations.   
  
Next slide? The IL-NET training and technical assistance Center provides training and technical assistance to centers for independent living statewide Independent living councils, and designated state entities.   
  
And before we jump into today's content, I have a few notes on accessibility. We have captions available today, if you click, "show subtitles," in your zoom bar menu you can turn them on. We also have captions running on an external link that we will put in the chat. You can use this link to open another page and adjust the font size, color, contrast, to your preferences.   
  
ASL interpreters are also present today, and should always be visible on the screen, as we are presenting and gallery view. Please let us know in the chat if you are unable to see the interpreters.   
  
We also have Spanish interpreters today, in order to access the Spanish interpreters go to your zoom bar on your screen and choose the language that you would like to hear the presentation and.   
  
And, finally, public chat is turned off, but you are able to chat with panelists during the presentation. We ask that you reserve the chat to ask questions on technical nature or accommodations. In order to engage and ask questions from our presenters, please use the Q&A box. You can access that on your zoo menu by clicking the Q&A tab, and you are welcome to submit your questions there throughout the webinar, but we will be answering any questions at the end of the presentation.   
  
You are also welcome to email me at mary-kate@ncil.org and you consummate your question there as well.   
  
-- Can submit your question there as well.   
  
As many folks know Zoom has been doing continuous updates, so there has been some accessibility barriers for folks joining by mobile device, so we do recommend folks join on a desktop or laptop computer to access full accessibility features. Next slide?   
  
So today's webinar as I mentioned is Innovation in Transition and we hope you will walk away today having learned how to identify and eliminate barriers within your CIL to prevent un-housed consumers from engagingâ€¦ That prevent CAL consumers from engaging in IL services. We are also going to share strategies for engaging and has consumers in your consume it -- in your community, and the role of information and referral, IL skills training, peer support, and advocacy and supporting consumer transition and housing and preventing institutionalization.   
  
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As always, we value your feedback. Toward the end of the presentation today we will share this evaluation link in the chat, but we do look at your feedback and we appreciated if you take a few minutes to complete the evaluation.   
  
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With all of that said, I'm going to invite our presenter Sarah Stoll community resource specialist Southwest Michigan, she will be our main presenter today, and during the recitation she will be inviting one of her consumers, Michael McDade to join the conversation.   
  
So Sarah, I'm going to hand it off to you to kick it off. So if you want to come offâ€¦ Awesome. Alright! Go ahead Sarah.   
  
SARAH STOLL:   
OK, so I am Sarah Stoll, I'm a certified community resources specialist at his ability network Southwest Michigan. A visual description of me is, I am a cis middle-aged woman, white woman, with straight shoulder length brown hair, and brown eyes. My pronouns are she/her, and I am wearing a white shirt today, and a burgundy cardigan, and I do identify as a person with mental health disabilities.   
  
So, the next slide?   
  
So, just a little bit about disability network Southwest Michigan. We are actually two centers for independent living, we have different funding sources, but we have the same CEO and board. How that happened was Berrien County, who (indiscernible) lost their director and the state asked our CEO to oversee these counties.   
  
So we serve eight counties in Southwest Michigan. We serve Kalamazoo County, Calhoun, St. Joseph, Van Buren, Cass, Berrien (unknown name) and (unknown name). And we have offices in St. Joseph, Calhoun, and Kalamazoo counties. We have about 30 employees, and about 80% of our staff and board have disabilities.   
  
Next slide?   
  
So just a little bit about Kalamazoo. We are going to focus on Kalamazoo today, because that is the county that I work in. But all these services are done in all of our eight counties.   
  
So, Kalamazoo, the metro area, is about 72,000 people. We are a college town, we have three colleges here, Western Michigan University, Kalamazoo College, and cornerstone University. That puts more burden and demand on affordable housing, due to the demand from the students.   
  
We are located between Chicago and Detroit on I 94, and like many other counties are a hub for human trafficking. We have a large shelter that can hold 400+ people, we get people from hospitals and treatment centers from all over the country, because the shelter generally has space, except in very cold weather.   
  
I've had customers from Washington state, Idaho, and Kentucky, just for a few examples, and I'm going to use the term customer for this presentation, that's what we call our consumers and clients are, so you will hear me say customer.   
  
I would estimate 4/5 people I reach and outreach are not from Kalamazoo. We also have several small shelters here, a rehab facility, and sober living housing.   
  
We do have a large number of people living in an encampment's and places not fit for human habitation, some of the reasons for that are shelter policies around Ellie -- LGBTQ+ customers, requiring sobriety, religious applications, and policies, such as attending a daily chapel service, not accepting service animals, pets, and emotional support animals, not being able to stay together as partners, or as a family, a barrier to staying at the shelter could be a criminal record, such as being on the lifetime sex offender registryâ€¦ I have quite a few people that have told me that there are just too many people into close of a proximity, and it makes them anxious. And just plain not accepting people with disabilities, or older adults, who, quote, can't take care of themselves. Unquote.   
  
We do have very good social services here but am like -- but like other communities Kalamazoo is overwhelmed. It can take weeks to see a case manager or receive services.   
  
We do have three agencies in Kalamazoo that work with housing, including our housing assessment and resource agency, or (unknown term), (indiscernible) on house to transition, such as skills, training, and filling out housing applications, or resources to find payments for things such as housing up legation costs. This is where we at disability network Southwest Michigan can come in, assisting and empowering customers with services other agencies do not provide. And I will discuss this later in the presentation.   
  
Something that recentlyâ€¦ Oh, I'm sorry. Next slide?   
  
So, something that is recently happening in our community is some issues with HUD, the housing and urban development program, and (unknown term) which is our State Housing Authority. As of July 1 MSHDA announced that due to budget shortages the housing development program voucher program will not release any new vouchers. And this is anticipated to be in place for about two years.   
  
All of the housing vouchers, or HCVwaitlist will be closed to new additions.   
  
No new names can be added via the preference list and no new evocations from those on the list will be accepted so people will fall off the waitlist as they come up for recertification.   
  
As you can imagine, this is going to be devastating to our own house community, in Kalamazoo County there about 450 individuals on the waiting list for the federal program, all with income levels between zero and 30% of the median area income.   
  
Next slide?   
  
So for people who are not familiar with CIL's or centers for an event living, these are our five core services that -- all CIL's provide. Information and referral, independent living skills training, advocacy, peer support, and transition services.   
  
As we have evolved as an agency we are seeing these core services overlap from having specific teams to do those specific core services, to most teams providing multiple services.   
  
And on the next slide of going to give examples of what we see as barriers to transition from homelessness to housing, and give examples of how CIL is using the core services can assist with this.   
  
So one of the biggest barriers is that we see is income. No income on low income. Especially with what is happening with the voucher moratorium. This is becoming a bigger and bigger about again.   
  
Examples of call services that can assist with low or no income could be using the call service of information preferable; giving the fables to an information about employment agencies. Independent living skills training, such as creating a resume, filling out job applications, interview skills or budgeting. And we also offer benefits planning services. So people can understand and get information on how employment might affect their benefits and insurance.   
  
We can also do information and independent living skills training, on how to ask for a job accommodation. And applying for disability. And I will say that the paperwork for applying for a disability is very overwhelming. It was overwhelming for me when I started doing this work; luckily I have colleagues who are very knowledgeable.   
  
One thing that we battle, and that I hear often, is that people do not want to file claims because they do not even want to bother. So we can give them the actual correct information, about the process of getting approved for disability and the process of applying.   
  
We also can provide information and pierce support with navigating systems. Systems speak their own language. So for example Social Security and the Department of human services. So we can practice what you will say to a worker when you are talking to them. We can talk about strategies for when you are upset with the worker, whether that would be grabbing a fidget toy, giving staff permission to talk on your behalf, and leave the officeâ€¦ Or what ever the customer feels will benefit them in that situation.   
  
And I will just give an example. I walked into an outreach site and there was a gentleman who was just screaming into the phone, at a Social Security worker. And he was doing a claims interview, and I said "Hey, can I help you with that?" And he was like "Yes, absolutely." So we went on speaker and he gave permission for me to be part of the interview, and I was able to interpret what the Social Security worker was actually asking him.   
  
So the interview went a lot smoother, and I actually had the Social Security work if I can be for being on the call. Because he was about to hang up on the customer.   
  
Another barrier that we see is criminal record. So we can provide information, and how to get expungement and of a federals to agencies that can assist with that. We can give them information on how to check the criminal history, such as (indiscernible) and you can get something cold and (unknown term). And some customers are surprised to find that their convictions have been expunged automatically. So something that they think might be a barrier to them, actually is no longer on record.   
  
We can also give them information for referrals to landlords that may be flexible with criminal convictions.   
  
Another barrier that we see is addiction history. We can give them referrals to people who may be more flexible, or to agencies who are focused on keeping people in the housing. We are very lucky to have an agency here in Kalamazoo that focuses on keeping people in housing.   
  
One of the challenges for youth transitioning specifically is that they can have no past experience and how to maintain the housing. So, to avoid future infections that might be necessary to work on those skills.   
  
An example is my coworker, also named Sarah, did some independent living skills training with a customer to write an advocacy letter to a former landlord, to give her at least a neutral landlord reference. Because she was getting a negative one. And she was able to obtain housing.   
  
Another barrier that we see is credit. That credit history, so we can do preferable to agencies and organizations that might assist. We have a credit unit in town that has a department that can assist with that. We can help them acquire independent living skills and credit repair and budgeting. So for example writing letters to the credit bureau to get negative things taken off your credit history.   
  
And also just talking about needs and wants. You know, I mean, the importance of being able to afford the things that you want in your life. Because our transitioning youth may not have any credit at all.   
  
Owing money to past landlords is a barrier. Customers who own money to landlords can lose their vouchers. So we can get referrals to agencies who might be able to assist in that, including churches. In my opinion charges are very underutilized of the source. And they are very helpful in our service area.   
  
One of our counties, St. Joseph County, also has an email group that will post and agencies will respond if they can assist with that.   
  
Lack of vital records is also another barrier. Our unhoused folks, they get lost, they get wet, their backpacks get stolen, and vital records are required to turn in a subsidized housing application. So we can provide skills or training on how to obtain those records, information on the documents that will be needed, the fables to other agencies that may pay for these all have scholarships. So right now in Kalamazoo County we are very lucky to have a vital record scholarship that people can access.   
  
Another barrier can be just the disabilities themselves. So, when I open cases, and I think my team would agree, one of the interesting goals that we frequently see is -- oh, I am sorry. My apologies.   
  
One of the frequent goals that we see that kind of supposed to be at the beginning was health goals. So getting appropriate medical treatment, so that we are able to get referrals to street medicine. We have a street medicine program that runs through the medical school here. Or community mental health. We can assist people in navigating their insurance, or other funds to obtain assistive technology.   
  
And then, we have the staff on my team that have done independent living skills training on how to write accommodation letters to landlords, for a neutral recommendation as I stated before. And also accommodation letters for the actual housing. So I have a customer who kind of just had to take the housing that was available at the time, but it had very very steep stairs. So she had fallen down the stairs. It was steep for me! Because I have been over there.   
  
So we worked on an accommodation letter for her. So when a downstairs apartment became available, she would be able to get that apartment.   
  
We can also work on empowerment, to advocate with a shelter for somebody who cannot stay that you to mental health or substance use disorder. Or the lack of needed physical accommodations.   
  
Navigating housing systems can be a struggle for unhoused customers. So we can give -- referrals and information about locating resources for application fees, first months event and deposit, information about completing housing accommodationsâ€¦ A lot of those housing applications are done online now so people might need assistance unlearning how to navigate that. Using a portal to pay event. I had a customer who was waiting for a landlord to come around and pick up the vent and she actually wound up getting an eviction notice because she was waiting and she was three months behind to get the rent cost to the landlord. So we had to help her learn how to use the portal online.   
  
So that brings me to the lack of access to technology. If somebody needs to pay their rent online, apply for housing or access to online social security account they may need some independent skills training about that.   
  
And then also, with the end of the conductivity program, we are seeing more and more people who do not have phones, so that is another bad again. Trying to connect people with getting the phone.   
  
So how is outreach started. At the end of the pandemic, the Social Security Administration started a program called the Vulnerable Populations Application Program. The acronym for that is in the VPAP. Social Security realized they weren't reaching the most vulnerable people who may not qualify for disability edifice, and Southwest Michigan was asked to be a partner agency and we started reaching out to our most vulnerable people with disabilities.   
  
So, about 30 to 60% of our unhoused people are disabled. When we started doing outreach, one thing happened was that we started identifying how that needs besides housing, that our CILs can assist with. It is kind of like peeling back the layers of an onion. The more we worked with a customer, the more need to be identified.   
  
So in addition to housing we found that customers had a goal to get a proper get healthcare, physical and mental health, employment, obtain vital records, food assistance, and the amount of people who do not have food assistance really surprised me. Because it is relatively easy to get. Although I feel like the lack of access to technology is a (indiscernible) as well.   
  
As the disability network we have a computer in our lobby that any of our customers can use. We also have phone books in our offices, so our customers can use that as well.   
  
So we really identified a need to be responsive to our community, and we know that CILs are responsible to that community needs, and the unhoused issue is one of the top issues in Kalamazoo right now. And we saw gaps in services.   
  
So invite now we are going to break to talk to our customer, Michael McDade. So Michael, are you one?   
  
MICHAEL McDADE:   
I am on now.   
  
SPEAKER:   
So Michael is our customer, he has been unhoused for (indiscernible) years and he is going to talk about some of the challenges he has faced. What were the circumstances that led you to your covered situation?   
  
MICHAEL McDADE:   
My landlord was getting older and his made to the demand passed away. So he could not go up and down the steps. So he sold 19 of his properties, and my apartment had to be one of the ones that he sold. So that led to me being homeless.   
  
SARAH STOLL:   
So how did you navigate your daily life when experiencing homelessness? What were some of the challenges you faced on a day-to-day basis?   
  
MICHAEL McDADE:   
Dealing with other people's problems. Sometimes you can be going through your thing, but other people have their problems, and you might be in their way, or they think you looked at them in the wrong way, so you've got a be able to maintain yourself to keep you from getting into anymore trouble then what you've already got into. You know? Like I said, sometimes you've just got to keep your mouth shut, (indiscernible).   
  
SARAH STOLL:   
OK, so Michael, what are some of the, this is Sarah again, what are some of the misconceptions or stereotypes about homelessness that you would like to dispel?   
  
MIKE DAVIS:   
People look at homeless people as being people who are not human, theyâ€¦ People running from the police, have police cases, drug addicts, just not a part of human society, which, that's not right. You know, regardless of whether or not we have imagine or nothing, we all deserve to be treated with dignity and respect.   
  
SARAH STOLL:   
I agree with that, this is Sarah, can we go to the next slide?   
  
So Michael, how has homelessness impacted your physical and mental health?   
  
MIKE DAVIS:   
While I can't really say, like a said, it was pretty rough before I was homeless, so that's the reason I was put on disability, so like I said, it didn't make it any better. You know, being homeless. Dealing with it the best that I can.   
  
SARAH STOLL:   
Could you move a little bit closer to your microphone? So this is Sarah again, what kind of support or resources do you feel are most needed to help in vigils experiencing homelessness?   
  
MICHAEL McDADE:   
More shelters, and more understanding people. A lot of people think that just because a person's homeless they can talk to him and treat him anyway they want to, but they can't, and it shouldn't be that way. So people that are homeless have to deal with that humiliation every day, you've gotta move from here, you have to leave from there, you really don't have any place to go, so therefore any place you can find some kind of place to relax or enjoy yourself and just unwind, it's hard to find.   
  
SARAH STOLL:   
What kind of support or resources do you feel like our most needed to help people experiencing homelessness?   
  
MICHAEL McDADE:   
It varies, it depends on the individual. Due to the fact that, you know, some people can't hear. Some people can't read, or write. So, you know, a lot of people are not gonna come up and tell you, "I can't read, I can't write, and I need this assistance." A lot of people are going to do that, because of pride. You know, it's just a variety of, you know, different things people are going to need help with. You know? And it's hard. Especially if you're a person that likes to keep yourself, anything about yourself personal.   
  
SARAH STOLL:   
You have to reveal a lot of information to every agency that you work with?   
  
MICHAEL McDADE:   
Yes, a lot of information that you don't want to give them.   
  
SARAH STOLL:   
Michael, how did you get connected to the disability network?   
  
MICHAEL McDADE:   
Oh we go back 15 years or so? I met you at another place with homeless people, and we talked and got to know each other, so well, 15 years later we are still going through it. It's an everyday process. And that's what I'm hoping, with this program that I'm going through now, even though I've been on it a few years I want to keen 'Dish With One Spoon Territory' keep in contact, (indiscernible)   
  
SARAH STOLL:   
So when I was at the (unknown term) center doing outreach and you walked up to me, what did you say to me?   
  
MICHAEL McDADE:   
Something like, "don't I know you from a couple years back?" And you're like, I remember you from other sheltersâ€¦ We just communicated, and after we communicated I asked you to be my counselor to help me find an apartment, you agreed, and thank God you did, so now I've got a place to stay, but, like I said, even once you get a place, you've still got a navigate through all the problems of just getting the place, getting a bed, pans, pots, dishes, it's real hollered -- it's really hard.   
  
SARAH STOLL:   
You said to me you were tired of living like that, your mother that?   
  
MIKE DAVIS:   
That too,   
  
SARAH STOLL:   
And that's what started the ball rolling   
  
MICHAEL McDADE:   
And like we said, I'm in my 80s, I don't want to die on the street, someone coming down the street finding me dead outside somewhere.   
  
SARAH STOLL:   
Yeah, because that happens.   
  
MIKE DAVIS:   
  
  
MICHAEL McDADE:   
All the time.   
  
SARAH STOLL:   
Can we have the next slide? So how did we at disability network support you in your housing journey?   
  
MICHAEL McDADE:   
Helped me fill out applications, bus tokens so I could get to different places to drop applications off, sometimes faxed them over to different organizations. It's really been a help to me.   
  
SARAH STOLL:   
And I know we were not the only agency that supported you, what were some of the other agencies that supported you, and what did they do?   
  
MICHAEL McDADE:   
Ministry of community, when you're homeless you can't put your eggs all in one basket, you've gotta go to if you differ in places to get the assistance, and sometimes it takes two or three different organizations to work with one person to get where he needs to be.   
  
SARAH STOLL:   
And know that you do have housing, because we are not closing your case right?   
  
MICHAEL McDADE:   
Please don't (Laughs)   
  
SARAH STOLL:   
(Laughs) So what are some of the other goals that you have now that you've gotten housing?   
  
MICHAEL McDADE:   
I know this might sound strange, I think I need to open up an insurance policy, because if I happen to pass away, who's going to bury me? So I need to, you know, work on that. Not only that, there's different things that, you know, because I'm getting older now. I might not be in a position to be able to keep my house clean, so I might need a tour provider or something. Life, you never know what you're going to go through in life, so therefore, I just have to be open to being able to deal with whatever comes my way.   
  
SARAH STOLL:   
I know you are frustrated, too, about furniture. I know that was a big frustration for you.   
  
MICHAEL McDADE:   
I'm still working on it! (Laughs)   
  
SARAH STOLL:   
Left Mac and then you talked to me about future employment as a possibility?   
  
MICHAEL McDADE:   
Yes, like as a, even though I'm on a disability, I'd still like to go through this program called AARP something? You work for three hours a week or something like that? To supplement your income a little bit? And it wouldn't affect disability.   
  
SARAH STOLL:   
And we have benefits planners here, when you're ready to do that, that can help you.   
  
MICHAEL McDADE:   
Thank you!   
  
SARAH STOLL:   
So is there anything else you'd like people to know or understand about the process of getting housing?   
  
MICHAEL McDADE:   
It's very hard. That's all I can say, it's very hard, it's not easy. Especially for a person with a low income in a small educational level. Because like a say, I never finished eighth grade, and I was in special education. I never did go to high school, so therefore that puts me in a bracket by itself, poor, and then educational skills very low.   
  
SARAH STOLL:   
Was there anything else you want to say about this? Housing? Disability network? Anything else?   
  
MICHAEL McDADE:   
I just want to let people know that there are agencies out here that help, and there's not a lot of them, but you gotta put the legwork and defined them and be persistent on trying to accomplish your goal.   
  
SARAH STOLL:   
Alright! While things for being with us today, I really appreciate you, and I'm sure we will see you again soon, right?   
  
MICHAEL McDADE:   
I hope so!   
  
SARAH STOLL:   
(Laughs) Alright, I'll see you soon. I don't know if you're gonna stay on, or if you're going to jump off, I know you have someone waiting for you.   
  
MICHAEL McDADE:   
All jump off!   
  
SARAH STOLL:   
Alright, I'll see you soon!   
  
MICHAEL McDADE:   
Thank you! And I think this organization for helping people!   
  
SARAH STOLL:   
OK! So one of the things that we are doing still is developing partnerships with other organizations. So we cannot work in silos anymore. Different agencies provide different services and we just really have to have that cooperation between agencies.   
  
My experience, when I started in this field, was just, you know, everybody wanted to keep the customers to themselves, and wanted to be the only ones working with the customer, meeting all their needs. It's just, at least, we hear, have not found that to be effective.   
  
So we cannot work in silos whether that's internally or externally. I know internally we've had customers who are working with multiple staff all at the same time all on different goals. I think we had one customer, recently, that was actually working with five different staff members on different goals. So, we found here at disability network that it's better when we work across teams, we are more effective then when we are staying in our own little spot.   
  
Also, some agencies can't do certain things because of their funding. They are limited in their funding. So we've actually had caseworkers from other agencies bring people here and say, "can you help me with this, because the other agency I'm working with, they can't bill Medicaid for this," for example. So can we assist them with this. One of the reasons I love working here at disability network is because we don't have that barrier. I've been able to be really flexible in what I can do, and I really have the support of my management team. I know my manager sometimes, probably, when I walk in her office wonders what I'm going to ask her now, but I think having support of management is really really crucial when you are trying to work on some of these barriers.   
  
So some of the types of agency connections we've made, I kind of lump them into categories because when I was working on this presentation I found that there were several categories that we fit. So the first agency connection, and I think the most important connection, is the shelters.   
  
So we do have a large overnight shelter here, a day shelter, a couple smaller shelters, we have a substance abuse treatment center and a sober living house.   
  
So, I had started going to the large shelter, and I was going during the day. Customers are not allowed in the shelter during the day, so I was only meeting with people by appointment with their caseworker. So the shelter got a new program director, and he reached out to me and said, "hey, we really want you to come back here, but we want you to come back here when people are actually here. So we want you to come at dinner time." So dinnertime starts at four and goes to six, so again, I'm lucky I have management that supports me, so on the 27th I'm going to start going to the shelter during their dinnertime. Which is outside my work hours, but they allow the flexibility here.   
  
The substance abuse treatment center, here, has also been a great partner. I do work with them by appointment, and I can come in and work on a variety of things, and also set up, you know, plans for when they are discharged from the treatment center. Because a lot of folks that are discharged from the treatment center are discharging into homelessness.   
  
The next category is criminal justice partnerships. It really surprises me how many criminal justice partnerships we've developed. We have a partnership meeting with the local police department where all local agencies work together and talk about our services, and the needs for the un-housed in our community. Kalamazoo actually started what they call a community resource team, which is two officers at a social worker, and they focus specifically on the on housed, and they are focusing on decriminalizing homelessness. So instead of writing tickets they are giving referrals to the agencies in the community that they feel like it can help the person.   
  
We also have a staff member here, her name is Holly, and she goes to the public defender's office once a week and she gets referrals from staff there, so she's able to work on people's goals, and she's a pretty passionate advocate. So she does a lot of things, like sit with people while they are doing community mental health intakes, she goes to court with him, she's very passionate about people getting their education in jail, so she's an advocate for that. So she does a lot of things there, and I know they would like to have her there more often.   
  
So it is kind of like the partnership meeting we have with the Kalamazoo city police, where we discussed the services. We do have clients there at that meeting so they can talk to you right there at the meeting if they have a need that they fake that we can assist with.   
  
We work with our community mental health in the jail. So I have a customer, she has mental health disabilities, and our local police department called and said that they had found her in an unsafe situation. And that she was telling them she could no longer stay at the motel that she was living at, and they had taken her to jail because she had a woman.   
  
So I was able to call and confirm with the motel that she could go back there when she was released from jail. And able to work with community health in the jail to make sure that she knew that she could go back to the motel once she left jail.   
  
We have also developed some health partners, and we are very lucky here, medical school, the Western Michigan University School of medicine has a street medicine outreach program. That focuses on our what unhoused. So we communicate with them very frequently with their customers. And we also partner with our community mental health you.   
  
And then there is some miscellaneousâ€¦ Sorry? Are we OK?   
  
MARY-KATE WELLS:   
Yes, we are OK.   
  
SARAH STOLL:   
We also have some relationship with the churches. There is one particular church in Kalamazoo that has a good relationship, and I go there very frequently and work with people on-site at the church. I will libraries are also a great place to be to customers. We do that here, and I know at the (indiscernible) office they do that.   
  
School partnerships, we can assist with customers who are still in school. And are unhoused. We have a customer who was living at the Mission, and being harassed. And so the (indiscernible) was able to call, and we were able to advocate with the shelter to get that person put of the property. So at least she is safe when she is on the property.   
  
And we are going to soon be starting a partnership with our local anti-human trafficking organization.   
  
So some tips for working effectively with our partners. We like them to the bag into the independent living philosophy, or at least be willing to work with it. We do get people from other agencies, staff, who will call us and ask us to call the customer. They will ask on the customer's behalf, and we have to explain that you know, we practised independent living philosophy so we need the customer to contact us.   
  
And you know, if they do not feel comfortable doing that on their own, we are happy to make a phone appointment with them or meet with them with the caseworker the next time they see the caseworker. So some agencies do things for people. We do not do things for people, we empower people to do things for themselves.   
  
Something else that is really important is establishing trust, honesty, and a place of positive intent. Some agencies just do not have an energy of trust that it is very difficult to do outreach with agencies that do not trust you. I have found myself in a situation where I have to do some advocacy with a customer, around the other agency, and they took that pretty personally and it wasn't my fault, and disability network was my fault, and so, I had to explain to them that one thing that we do here is empower customers to advocate for themselves. And that is not personal, it is just what we do.   
  
One question that I get sometimes is around agency values. What if an agency value does not fit with our values here at disability network Southwest Michigan? Why would you work with an agency that has policies that do not fit with our values?   
  
My personal thought on that is even all that can be true, we need to work with them in order to reach our most vulnerable customers. But we can take the opportunity to educate them about in Buddhism, and the independent living philosophy. And we can do things like connecting them to our community education presentations. We do send out a monthly communication failure to our partners, and we invite them to attend so that they can gain knowledge about our agency and what we do here. And how to refer to us.   
  
So, some beverages that we have identified and how to eliminate them. We found that we needed to meet people where they are. In the past, we have asked people to come to our office. And the location of our office is actually on the opposite side of downtown from where most of our unhoused people. They can have mobility disabilities, that make it hard for them to get to our office.   
  
Some of our unhoused folks, especially folks who are living outside, have accumulated a large amount of items that they keep with them. And they cannot leave those in order to come to our office. And it is not possible to bring those items with them, and if somebody has a bike or something of course we are going to let them come in. But two shopping carts is not for people to have to move across town.   
  
So I have even sat on the ground with a customer who was sleeping outside. And had two shopping carts and a top and a dog and a cat. And helped him to work on a Social Security application. And so we really come to where people are and do not expect them to come to our office.   
  
Transportation can be a barrier. $1.25 provides the bus is a lot of money if you have no or low income.   
  
There is institutionalism of being unhoused. When I need a shower at my house, I just kind of jump in whenever I want. And I do laundry whenever I want. And the house folks, they have to sign up to take a shower. They have to sign up to do laundry. They can sign up in the morning and it can take three hours for them to get called for a shower -- or do laundry. And maybe they miss an appointment with me because of that.   
  
What they have to do and what we have to do is respect their priorities. And offered to meet again. Sometimes they cannot find their way here, like I said.   
  
We are across town. So, some folks cannot find us, especially if they are new to the city. And then some of our unhoused folks live with in an eight block radius between our metric trental system and the river church which does a lot of outreach. Succumbing to our outreach is really out of their comfort zone.   
  
I do find however that when I meet with somebody in outreach a couple of times, they become more willing to come to the office. I think they just feel more comfortable.   
  
And like I said, that of telephones can also be a barrier. If people cannot call and cancel appointments. We just have to work with that. And one finger that we have found that is very helpful is to get releases to other local agencies, and I do not think Michael would mind if I use him as an example.   
  
Michael has a hard time keeping a telephone. So one of the ways that I keep contact with him is I emailed the staff at the day sheltered say "Hey, if you see Michael tell him I am looking for him." They are able to put that into the system and then when he checks in at the shelter, they can give him the message that I am trying to get a hold of him.   
  
If I do not have releases like that, that obviously that doesn't work very well. Another barrier that we have eliminated without each reach is agency hopping. So having to go from place to place to place. And when you are doing that outreach, you are able to team with the other agencies that may be on-site there. So at the day shelter for example, they have the legal aid, community mental health, they have some agencies that specialize in transition from incarceration. So it is a little bit easier for people when they are multiple agencies on-site that they might need to access.   
  
So how do we introduce ourselves in different settings? So, one thing that I like to do is I just kind of walk around and I talk to people. I introduced myself, I explain where I worked, I explain that we do not do things for you, we are going to empower you to do things for yourself.   
  
I can talk to them about how we define disability here at disability network. That is the ADA definition. But, we allow people to self identify. You do not have to prove to us that we have a disability. We take you at your word.   
  
One of the common misconceptions I have found from customers and other agencies is that people think they have to be receiving disability or SSI in order to work with us. And that is not true. We allow people to self identify as having a disability.   
  
I can talk about what -- are our core services. What are your goals? What kind of things do you think we can help with, to help you achieve your goals? People do not always jump up to work with us. But they know who I am and we are planting the seed. So if in the future they are ready to work on a goal, like Michael, they can come up to me or Holly or Kathy or whoever is doing our outreach, and say "Hey, I am ready." And that is exactly what Michael did.   
  
So some things that we have learned from outreach. There is a lot of stops and starts. Customers can start on a goal, and then they pause. They take a break, and they stop. They disappear. One offended that we say around here is that as soon as we close the case, the customer pop back up and we reopen the case. But that is just how it works. I will customers have to owned life circumstances and priorities.   
  
Sometimes they come back, sometimes they do not. Another thing that can happen is customers can achieve a goal, and then they pause or take a break and they stop. And they do not really go any further. And I have a customer who we assisted him with applying for disability, and he did get his disability. And when he told be that I said "What do you think about working on some housing?" And he was like "Sure!" And I have never seen him again. So we just have to respect what people are at and they know where we are and they know our names and they will come back if they are ready.   
  
Another thing is heavy up and wait. So, there is a wait list for everything. There is a wait list for housing. You have to wait for a decision on the disability or SSI benefit. You have to, you know, waits to find out if you got the job for the interview. So we really try to celebrate small victories. Because to a lot of our unhoused, the tunnel is long! They cannot even see the light. The tunnel is still long.   
  
The one thing that I did not realize was going to happen is how much peer support we need to provide. I will say to people "If you feel down or, if you want to quit, call me and I will be your biggest fan. Just the call. Look at what you achieved. You have gotten this gold under, now you are moving on to another."   
  
When we have cases we have a sheet where we write down the steps. Can you get a decent done by the next time you beat of us? So when people are done, we pull out that sheet, and we say "Look at the steps you have taken! You are almost there!" So that's my presentation, and I think, Mary Kay, you're going to go to questions?   
  
MARY-KATE WELLS:   
Yeah! Thank you so much Sarah and Michael, I think Michael has stepped away, but, yeah! I see some exciting questions in the chat and the Q&A. So Sarah, if it's good with you, I will ask some of those questions.   
  
SARAH STOLL:   
Sure!   
  
MARY-KATE WELLS:   
Awesome. One of the first questions I see is, I think you might have answered this during the presentation, but it says, what percentage of the customers have his ability? I think this was back when you were talking about outreach.   
  
SARAH STOLL:   
OK, so I don't know the exact percentage. So, I'm sorry, I can't provide that information. Information referral is a core service that does not even require someone to have a disability. You can access information referral without having a disability. Our other services, you know, do require that, but, you know, I'm sorry. I don't have a percentage. But I would say probably at least 85%? Of the people we talked to have his ability?   
  
Some people, to us, it would be a disability, but they don't recognize it themselves as a disability. For example, like diabetes. That's something that I've seen that people don't really recognize as a disability, but, you know, what we do at disability network, that would be a disability in our eyes. Soâ€¦   
  
MARY-KATE WELLS:   
Yeah. And I think you mentioned that when you were saying how you describe the services and how you all defined, which I think is common.   
  
So the next question says, "I am a resident of Alabama but originally from Michigan. How would you suggest that I engage my local independent living center regarding the on house to the way that you have in Michigan?" That's an interesting question.   
  
SARAH STOLL:   
Yeah, that is interesting.   
  
Like I said, that outreach started with our vulnerable populations application process with Social Security. If that would be something that would interest you in starting outreach, you can contact the Social Security Administration, I'm sure they would love to have more partners in that program.   
  
Like I said before, I just have really amazing managers that let me go where I need to go and do what I need to do. So just start creating those partnerships. Reach out to the organizations that you feel like you would best work with to do what you want to do and what services you want to provide. I have found most organizations are very happy to work with other agencies. That is something that I have seen change since I have been in this field. And you know, there is still occasionally an agency that is just really closed off. I kind of see that as a challenge. So if you can kind of get in there and get in with one person in the agency and develop that trust, once you have one person you can generally start to crack that agency and start working with them. So I would just say reach out to the partners that you want to have and see what services you could provide for those agencies.   
  
  
  
MARY-KATE WELLS:   
, And if I can add, CIOs are supposed to be responsive to their community right? Sarah, what you've been describing with your CILs... (indiscernible) I seen the chat someone shared with the hosts and panelists that they are in Alabama and work with the center, and provided contact info, so if that person who asked that question wants to provide your info in the chat to host and panelists, we will see if we can connect you to. Because that question was put in anonymously.   
  
SARAH STOLL:   
Definitely reach out, we will talk to anybody here, and we love to brainstorm with people. We went to a conference this summer with people, you are there to   
  
MARY-KATE WELLS:   
? We went to a conference this summer with people, like, from Hawaii, and Alaska, and it was here in Grand Rapids Michigan. So we need to work together as CIL's across the board, especially with our own house, they move around a lot, so getting with those other CIL's, getting people connected to the CIL they've moved into, that's really important. That's something I always work on with people at the rehab center. Getting them connected to the CIL that is in the community that they are going to go back to.   
  
MARY-KATE WELLS:   
That's awesome, and I think it's worth mentioning, I met Sarah Ata information and referral conference, and just through our networking and chatting we found that the overlap between information and referral and transition services and, you know, I was very excited we got to connect on that.   
  
We have another question, "when you reference shelters, are these only homeless shelters? Or do you have partnerships with DV shelters?" So domestic violence shelters   
  
SARAH STOLL:   
So yes we do have it mastic violence and human trafficking shelter here in Kalamazoo, they reach out to us quite frequently and we reach out to them as well. We will get people in our office that share with us that they have been trafficked, or they are afraid of somebody in the community and need to leave. So we work with them on that. And then we've also gotten referrals for advocacy from them. They have a customer who is housed in, not Kalamazoo County, but another County or CIL doesn't serve, and they reached out for advocacy because thatâ€¦ I don't like to say inmate or prisoner. That person was not receiving accommodations in the jail that she needed. She needed CART services and she was getting in trouble because she was deaf and she wasn't hearing the directions of the people telling her what she needs to do. And she was also not receiving CART services when she was meeting with the court. So our advocacy team was able to step in and advocate for her to get those services, and that was a referral from our domestic violence shelter.   
  
MARY-KATE WELLS:   
Thank you. Alright, let's see. I'm looking, we've got a couple different questions, I'll pause now before we go on a more questions, that we will put the evaluation link in the chat shortly, so I'm just going to do my first plug for, you know, if there's more topics like this that you want to hear, or, you know, here about, just let us know. Alright. So, next question isâ€¦ Someone asked about the slides, yes we will post the slides and a recording and transcript on the (unknown term) website and then put the link in the chat. Another question, "I live in a small town in Kansas, there's no shelter, or resources are very limited. Do you have this in your area? Or how do you work around this?"   
  
SARAH STOLL:   
Yes, absolutely. So out of our eight counties I would say we have for -- 4 that are rural counties, so there's just not a lot of surfaces available there like there is here in Kalamazoo. And then transportation in those counties can be a really big barrier as well, because you can't just walk places, right? You have to be driven or access, you know, some kind of service to be driven.   
  
So one of our staff who is down in (unknown term), she does outreach at the library, and I believe she goes once a week. So she's able to connect, and it's kind of affair where different agencies, and, you know, talk about their different programs, are available, I know Kathy, who is the one who does that, shall make appointments for people there. So she has to meet with them, something's going to take longer than an on the spot thing, she can make appointments.   
  
We have found libraries very helpful in our rural counties as far as being able to connect with people, because every community has a library. So you can always use the library as a meeting space. A lot of times libraries will have bulletin boards with lots of resources in the community, so I can snap a picture of that, or, you know, write things down on my way out. But really just trying to do what is easiest for the customer. Sometimes that is meeting in a sober living house in that rural community. And we are always digging for resources in those communities. So we are really trying to focus more outreach on our rural communities as well.   
  
MARY-KATE WELLS:   
Have you found, because Chelsea put a second comment in the Q&A, who asked a question, have you found any, you know, obviously meeting space is one important consideration. Are there any other resources that you have found helpful in rural communities?   
  
SARAH STOLL:   
So St. Joseph County has an email list, and email group, so people from different agencies will post their resources, as well as posting needs of their customers, so someone's about to get evicted, who has resources to help them? They didn't get the full amount from that apartment of human servicesâ€¦ And then people will reach back out. There was a question today about someone was seeking employment coming out of incarceration and was having difficulty finding employment, because of, you know, having felonies. And so being able to connect them to their local Michigan rehabilitation services was a possibility. And people had other ideas as well. So I would say, you know, try that. Reject agencies -- reach out to agencies in your communities, send an email saying you want to start this group, and connect with resources. So at least in that county that is something that has been very effective.   
  
MARY-KATE WELLS:   
Thank you. Alright I'm going to take a question from the chat. I know, we are getting a lot of questions, I hope we can answer as many as we can. So there's a question in the chat that was sent to the panelists, someone said, "I've put myself in unsafe situations at times. Any advice on how to do street outreach and keeping yourself safe?" That might be a whole other webinarâ€¦ I don't know if there's anything you want to say about that Sarah?   
  
SARAH STOLL:   
So when I was younger I did that as well. Now I try to meet people at places that I know are safe, like shelters. I don't feel comfortable going into encampments by myself, so I will connect with staff from agencies that do go into encampments, and either communicate with the customer for them, or, like, for example, I met with the customer. There was an encampment behind in Aldie, I don't know how many communities have Aldi, it's a grocery store, the customer wanted to connect there and I said I wasn't comfortable going into that encampment, and we met in the parking lot of the grocery store. So maybe finding a place close by that isn't so isolated? And then doing that communication with agencies that do go into encampments to see if you can find a good place to connect with those folks? Or even going into the encampment with somebody from a different agency that is more experienced in that situation then you are. Soâ€¦ I would encourage you to be safe. I think there are a lot of ways to be safe and still meet customer needs.   
  
MARY-KATE WELLS:   
So we have another question in the Q&A. Can you talk more about the importance of peer support and examples of how disability networking coverage is that?   
  
SARAH STOLL:   
We Talk about This As People to People. So for Me, I Can Connect with People. My Disabilities and Mental Health. I connect with people and share my experience of my disability, and encourage them. But I also connect with people just on aâ€¦ We are both people with disabilities, right? And we have experiences, because we have disabilities.   
  
So Michael, Michael was ready to quit, 100 times. And so, you know, just encouraging him, "This is what we have done. Look at you! We are so close!" Just that kind of thing. And just a lot of listening. Sometimes people just need somebody to listen to them and shared their experiences where Fred get that empathy. And that can really develop a lot of trust with you and to the customer, and you can establish that relationship.   
  
And then they may want to, you know, start working on some goals. So, I do not know if that answers the question. But I am just a cheerleader. I am here to be your fan! If you need to come in here on a walk in and talk to me, if you need to call me on the phone, I mean, I have people who have met their goals and I was not really working with us actively anymore but they still call and check in photos when they need a little encouragement. All they are feeling down or whatever.   
  
I like the fact that we have walk-ins here because that kind of eliminates the brevity of not having a telephone. So we have markings here four days a week, -- during our business hours people could just come in and be seen.   
  
MARY-KATE WELLS:   
I am going to do a plug for our Summit in September, when we are going to talk more about peer support, and examples of that. So stay tune for that as well.   
  
Alright. (indiscernible) supporting people to get out of this facility and navigating through an extremely bureaucratic system and getting their services in place is extremely challenging. Any experiences to share with this experience of expertise?   
  
So I wonder if you could focus your (indiscernible) of institutions or other incarcerations, going into homelessness. I want if you have any of the experiences shared on that topic?   
\   
SARAH STOLL:   
It is hard. It happened so infrequently. There is not a lot of difference in the process that I see. Just trying to put those pieces in place for them. Making sure that they have income. What homecare is available, that is not unlocked. If you are on Medicaid, it might qualify for a tour provider, for a few hours a week. Most Medicare does not pay for in-home help. But we do have programs like PACE. And the Michigan waiver program which is for people who are at a nursing home level of care, so I do not know if you have anything like that. But that could be helpful at times as well.   
  
So you go into a shelter, and work from there. Help and advocate to make sure that they are getting the technology and the help that they need from the shelter. And you can justâ€¦ Process of the income, the criminal record, eviction history, all that stuff. But you can do a lot of advocacy to make sure that they do get that needs met in a shelter.   
  
MARY-KATE WELLS:   
We do have a couple more questions, but I noted Lisa, you have talked a lot about your management, and how vital that is. And I was wondering, I am going to invite Lisa onto the screen, let me just pin you, if you wanted to speak a little bit aboutâ€¦ From your perspective in management. Because I do think having that support, to be flexible and to reallyâ€¦ I will stop talking.   
  
SPEAKER:   
IQ. Yes, you know, we are very supportive of Sarah and the work that she does. In information preferable, and you know, she is very intuitive to the needs of our community, and to the barriers. And reaching out to the agencies that provide the services to the unhoused and connecting with the unhoused people where they are.   
  
That is her initiative. And she comes to me, "Can I do this?" And we talk about the safety concerns, the time concerns, but she sees the need and we do everything that we can to meet that need. So long as we have staff capacity and it is safe to do that.   
  
So it has beenâ€¦ It has just been a joy to watch this all unfold because it leads to of opportunities. In our community. And she has been able to connect to partnerships in Kalamazoo, with our public safety, partnerships with other housing, also I was human trafficking coalitions locally. So we are just looking at ways that we can reach people with disabilities no matter where they are.   
  
SARAH STOLL:   
I am going to pull a question from the chat. For folks, again, (indiscernible) disability (indiscernible). Someone in the chat said "Do you feel like people prefer customers or over consumers?" I do not know ifâ€¦ If I've of you would like to chime in.   
  
SPEAKER:   
That is the language I have used as I was in the field. (indiscernible) when I hear they used customer. I always joke that consumer sounds like somebody is using something.   
  
But the other piece that I use is customer, to me, is they are choosing to work with us. It is like when you go to a store, you choose to go to that store. You are a customer of that store. So I guess my only comment to that would just be, I like how customer sounds like you are choosing. And you have choice. We want our customers to have as much power over their lives. I do not trust anybody who uses consumer. I think that is fine too.   
  
I do not know if Lisa was to say anything about that.   
  
SPEAKER:   
I think you explained it perfectly. And we know our database uses the words consumer, and all of our will report our consumer. And I think the decision to customers was made in our agency before either one of us came on board here. And the way it was explained to me is that consumer doesn't seem to have a negativeâ€¦ People that are consuming our energy and our time at our resources and we do not want our customers to think that that is a negative thing that they are coming here for services. And they are not consuming all of us. That is how it was explained to me.   
  
MARY-KATE WELLS:   
Awesome. So we have about five more minutes left with a couple more questions. I do want to ask to advance the slides, and to our evaluation like, to folks to take a look at before we end. But hopefully we can get one or two more questions.   
  
We have seen this question in the Q&A box. Greetings, new here, only been on the (indiscernible) side of things since June. Still trying to figure out how to do assessments without an assessment intake. Is there one that we could use, or we are supposed to build on our own?   
  
I am curious how you approach that. Because we have to do that intake. If a consumer wants to come on, and establish goals. So I do not know if you can speak that.   
  
SARAH STOLL:   
A certain data we need to keep because that data is asked for. I personally do not like to veto my story 100 times. (indiscernible) I was just at community mental health. And now I have to tell you. So one thing that I think is helpful is that when I first meet with somebody, I am having that conversation. And so, if you are on the phone with them, they will tell you stuff. So they will say "I am 57 years old." Or "I have ALS." So I try to listen and kinda pick those tidbits out of the conversation. So that I do not have to ask so many questions.   
  
I am pretty lucky in the fact that we are not required to ask a ton of questions. So we ask name, county, we can put in an actual birthdate, or we can put in an estimated age. And then we ask vase and agenda, and if they are a veteran. And how they connect with us. But sometimes you can pull that stuff out of just the conversation that you were having on the phone or in person. So that is what I try to do.   
  
SPEAKER:   
You are right. So much comes out in conversation, if you are just that as a listening participant in a two-way conversation. It is a listening and then you can put it all together. Because the last thing we want to do is have a form in front of us and be pulling in the form or checking boxes because then they are not an active listener with our customer.   
  
MARY-KATE WELLS:   
Before I asked our last question I do want to say just thank you so much to Sarah and Michael, and having this conversation with us, unfortunately we are not going to get to all the questions and comments. But, let's end with this light. Someone asked "In my area, libraries discriminate against people experiencing homelessness and will jump at the opportunity to trespass somebody prevented them from utilizing libraries public resources. What do you suggest for this issue?"   
  
SARAH STOLL:   
Lisa, I just saw your face. It happens a little bit here. For example, when library lacks free phone services like text. So if somebody is using that service they cannot do that at the library. I what hospital isâ€¦ Need a lot of advocacy, because if they catch when that you are unhoused in the emergency room, you are gone. Basically.   
  
So, just helping with that advocacy, communicating, and advocating for those community education presentations, which if you have not been to one of our community education presentations you need to come. We have such an amazing community education program. You know, I try not to look at things asâ€¦ I tried to look at things as how can I educate this organization? Can I come in a calm and kind of see your space? Can I talk to you about this, and maybe give you some tips?   
  
I think it is next week, there is a community meeting for the hospital, about meeting community needs. And I have something to say that. So just being a strong and get that you can be and just educating people as much as you can. And just making those connections, so the people at that space realize that you know, you are a trustworthy person. You are coming from a place of positive intent. And you want to establish that relationship with them. I think things become a little bit easier and that is why when I talk about working with other agencies and maybe do not share our values, sometimes those agencies really get their backup because they think you are going to judge them.   
  
Sometimes I do in my head. But, you know, if you come from that place of positivity, and we want to work with you, it is not easy. And not every organization is going to be open.   
So thank you everyone for coming, unfortunately I have to cut us off now.   
  
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