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Solutions for Family Homelessness Plan

Five-Year Update to the Trustees of the Carol Ann and Ralph V. Haile, Jr. Foundation

In response to the rise of family homelessness in Cincinnati, the Solutions for Family Homelessness Plan was released in 2015 by a collaborative group of organizations with a mission to end family homelessness: **Bethany House Services, Interfaith Hospitality Network of Greater Cincinnati, St. Vincent de Paul Society, The Salvation Army, Strategies to End Homelessness, and YWCA Greater Cincinnati**. These organizations and other community partners strategized and with input from homeless families, released a plan to make family homelessness rare, brief, and non-recurring.

Representatives from each organization have been meeting and working continuously since then to implement the strategies and tactics outlined in the plan, with support from a foundational gift in support of the plan from the **Carol Ann and Ralph V. Haile, Jr. Foundation**. Following the fifth anniversary of the **Solutions for Family Homelessness Plan**'s release, the collaborative is pleased to provide an update to the Trustees on our progress and to respectfully seek further investment to continue making a positive impact on family homelessness these significant initiatives:

- Emergency Assistance and Shelter Diversion programs are the most cost-effective and successful ways to prevent homelessness. However, too many families were turned away without assistance due to a lack of resources. The **Solutions for Family Homelessness** collaborative sought to expand Emergency Assistance and Shelter Diversion in order to prevent more families from ever experiencing homelessness. Through our work, the amount of available assistance has increased from \$900,000 in 2016 to \$2.4M today.
- The percentage of families who did not become homeless within two years after exiting Shelter Diversion went up 8 percentage points from 81% of those who exited in 2016 (the first full year of the plan) to 88% of those to exited the program in 2018. In addition, the percentage of eligible families seeking Emergency Assistance and Shelter Diversion who

ultimately receive assistance has increased. In 2016, only 19% of families who called for assistance received it, but thanks to increased capacity in the programs and new programs, in 2020 this percentage doubled to 38.6%.

- In an effort to identify additional types of assistance for families that result in stable housing, significant progress has been made in terms of accessing both TANF funds (see below) and the **Housing Choice Voucher** program on behalf of at-risk families. The number of referrals into the program that Strategies to End Homelessness receives has grown from 25 when the plan launched to 900 today.
- Beginning in 2019, Strategies to End Homelessness for the first time accessed Temporary Aid to Needy Families (TANF) funds which assists families at-risk of homelessness to maintain their own housing, preventing them from needing to enter an emergency shelter. More than \$225,000 of TANF funds were utilized during 2019-2020. The collaborative and **Strategies to End Homelessness** plan to solidify and expand access to such funds going forward.
- In order to streamline Emergency Assistance Aftercare services, referral processes and policies were implemented to ensure quick access among the collaborating organizations. The **Salvation Army** and **St. Vincent De Paul** have systems in place to assist exiting Shelter residents with tangible goods (i.e. clothing and furniture) to minimize a return to homelessness.
- All homeless services system data, including Shelter Diversion data, is captured in the community's shared **Homeless Management Information System (HMIS)**, Clarity. Data from the region's largest Emergency Assistance provider, **St. Vincent de Paul**, is shared with **Strategies to End Homelessness** so that it can be analyzed alongside other data. Efforts to secure data from other Emergency Assistance providers are ongoing.
- A subcommittee of the Solutions for Family Homelessness collaborative, the **Children and Youth Taskforce**, is charged with developing strategy and programming, creating system change, and networking with the sole focus of improving services for children and youth experiencing homelessness. Since 2015, the Taskforce has worked with a number of local child-serving organizations to provide the resources needed to identify and respond to instances of family homelessness or the risk of becoming homeless. The Taskforce began by incorporating this topic into existing community structures of

education and training to ensure that a large number of providers would receive the necessary information. The two prominent groups working cooperatively around early childhood issues are **Joining Forces for Children** and the **Consortium for Resilient Young Children**.

Both are high level collaborative projects that provide training on best practice approaches for young children. Representatives of each group are members of the task force and share content developed by the task force regarding children and homelessness to the planning groups. This content is then included in training to the majority of early childhood and child serving providers in our community.

Cincinnati Public Schools **Project Connect** has been a strong and consistent partner with the taskforce and has educated and heightened the awareness of the needs of children experiencing homelessness throughout the school system. As a result, transportation roundtables were instituted with homeless providers, Cincinnati Public Schools, and contracted transportation companies to improve transportation for children living in shelter. Other system changes included the addition of “Priority Preschool Enrollment” for children in shelters resulting in an increase of 40% preschool enrollment. Most recently, a Shelter Liaison position was created to provide a single point of contact between Cincinnati Public Schools and shelter families.

Family Services Capacity Building

Solutions for Family Homelessness organizations have made significant progress toward enhancing service delivery to families through employment of best practices, additional service components, and by providing professional development opportunities for case managers and others who work with homeless families.

Family-Centered Cross-System Case Management

The **Aftercare Program** is a shared vision of case management and homelessness prevention services among the collaborative organizations. The Solutions for Family Homelessness team raised funds, researched best practices, and implemented this new Aftercare program to decrease

the number of families that return to homelessness. Each family shelter has Aftercare Case Managers and Emergency Assistance Advocates at **Salvation Army** and **St. Vincent de Paul** providing services to Bethany House Services, Interfaith Hospitality Network of Greater Cincinnati, and YWCA. The Aftercare Program works to assist families who have exited from shelter or a housing program but are in need of emergency assistance or referrals to other supports so that they do not become homeless again.

Aftercare Success Measures: 317 families were served by Aftercare services through the end of 2019 with the goal of preventing them from returning to homelessness. However, in 2020, due to the tremendous amount of COVID-19 funding assistance available, approximately 140 families were served by our Aftercare services, since families received vital help elsewhere.

Training

A major initiative of increasing capacity in the system has been the trainings provided, including **Trauma-Informed Care Training**, for the entire homeless family services system. Since 2016, the **Family Housing Partnership** (made up of four of the six collaborative partners) has provided trainings that also offer continuing education credits.

Training Success Measures: Over the last four years the following training topics have been offered: 11 hours of Ethics/Supervision, 20.5 hours on Housing Issues, 28.25 on Best Practice techniques in Case Management, 10.75 hours on Community Access (working within the system to assist clients), and 12.5 hours focusing on Mental Health and Substance Abuse. Most recently the FHP provided a 3-hour training on Racial Equity for FHP staff.

Trauma-Informed Care

Since 2016 the collaborative has utilized Risking Connection, an evidence-based trauma-informed care modality with a train-the-trainer design. In addition to the training, significant progress has been made in all six partner organizations towards systemically applying trauma-informed care strategies operationally. In addition, shelter space is trauma sensitive, shelter

forms are aligned trauma-informed principles, and there is heightened awareness of and attention paid to staff trauma and its effects.

Adoption of a consistent means to measure and evaluate staff and service user interactions through a trauma lens, and ultimately connecting that data to employee evaluations is the goal. In addition, the analysis of supervisory and leadership adherence to a trauma-informed approach would deepen this progress and lead to long-term sustainability of the trauma-informed care model within each agency.

Trauma-Informed Care Success Measures: To date a total of 219 staff members at all the collaborative organizations completed the three-day Risking Connection Basic Training and a further 23 staff members completed the one-day Risking Connection training. A dozen staff members completed additional training to become trainers so that new staff can complete training in a cost-effective and sustainable way.

Child Services Coordinators

Another major piece of building capacity was to create **Child Services Coordinator** positions at each family shelter, four in total. Child Services Coordinators focus on the unique needs of children staying in shelter and use the brief time that a child is in a shelter as an opportunity to connect that child to services that will follow them after their time in shelter and positively affect their life going forward. From the beginning of the family's intake, each child is assessed to determine their specific physical, behavioral, mental health and educational needs. The Child Services Coordinators then work with each family through referral processes to access appropriate community resources to address each child's identified need.

Child Services Coordinators act as a liaison with the local school districts and **Cincinnati Public Schools Project Connect**, ensuring that children experience as little disruption in their education as possible. In addition, Child Services Coordinators plan and implement on-site children's programming that helps children make healthy life choices, build social skills, and expand their horizons through enrichment activities. They inform the **Solutions for Family Homelessness Child and Youth Task Force** about trends the families are experiencing to help that group

prioritize advocacy and policy change efforts. Finally, Child Services Coordinators have also been successful at identifying and securing group services that can be provided in shelters including parenting, educational, and supportive sessions.

All Child Services Coordinators are trained on the use of **Ages and Stages Questionnaire** (ASQ) – an assessment tool that tracks developmental progress for preschool age children and shows where intervention might be helpful. The Child Services Coordinators then work with each family through referral processes to access appropriate community resources to address each child’s identified need.

Recently, the outcome measures of the children’s services at each agency has been added to the Homeless Management Information System. The goal is to add these qualitative measures to the traditional **U.S. Department of Housing and Urban Development** outcomes that the system tracks so well.

Child Services Coordinators Success Measures: increase number of shelters with Child Services Coordinators. In 2015, there were two shelters with at least part-time Child Services Coordinators and since 2017 all four emergency family shelters have had Child Services Coordinators.

Due to the COVID-19 pandemic, 2020 was a challenging year for our clients in shelter or hotel/motel. Safety is our first priority. However, the Child Services Coordinators continued to work with the children in shelter to develop individual plans to address their unique needs, including connecting them to health services when necessary. Establishing a Medical Home (the “individuals have a usual place to go for healthcare” measure) is a priority for our Coordinators when children who come into shelter are not already connected. Having that connection is essential to a child’s development and overall health. In 2020 82% of children had a healthcare home.

Child Services Coordinators also work diligently to assist families in enrolling children into high quality early childhood programs. In 2020 55% of clients entered a quality education program.

Provide Quality Emergency Shelter

Due to the notable increase in family homelessness in the summertime, **Interfaith Hospitality Network of Greater Cincinnati** and **Bethany House Services** work to temporarily add to Cincinnati's emergency family shelter capacity by providing emergency shelter for approximately 8-10 additional families at a time throughout the summer months, usually May 1st through September 30th. This increase in shelter space typically shelters approximately 150 individuals every summer.

In direct response to the community need, **Bethany House Services** broke ground in 2021 on a new and life-changing shelter and comprehensive services center at the corner of Reading Road and Joseph Street in the heart of the Bond Hill community. This project will impact our community's poorest families through programs addressing homelessness prevention, emergency shelter, re-housing programs, and family stabilization after homelessness.

Consolidating seven buildings into one new facility, Bethany House will provide the best quality shelter accommodations and improve access to a full range of support services for every family served. The new space will allow for expanding onsite service, like medical and mental healthcare, employment services, counseling and educational programs.

Importantly, the new facility will be designed specifically for homeless parents and children. It will incorporate Trauma-Informed Care into its design, including private family bedrooms, common spaces for families, and interactive, age-based indoor enrichment areas and outdoor children's play spaces. These elements are shown to be effective for serving homeless families and minimizing trauma. The project has raised upwards of \$12,000,000. The goal is a move-in date for families in Fall 2022.

However, the average length of stay for families in shelter has gone consistently up. At one of the shelters, Interfaith Hospitality Network of Greater Cincinnati, the average length of stay was 42 days up from 30 a few years prior. And this is not unique to Interfaith Hospitality Network, the family shelter average length of stay in 2016 was 43 days and in 2020 it had increased to 48 days.

These longer lengths of stay reflect the increased difficulty in identifying and obtaining permanent, safe, affordable housing in Greater Cincinnati. As identified in the LISC/Xavier

University study released in 2017, Cincinnati is short 40,000 units of affordable housing for the lowest income categories of residents. We see this reality play out for the families that we serve.

Through the collaborative efforts of the Solutions for Family Homelessness **Child and Youth Task Force** we have been able to increase the number and quality of childcare referrals through coordination between shelter Child Services Coordinators and 4C for Children. We reduced the length of time children have to wait to get transportation from shelter to school from 5-7 weeks to 5-7 days and continue to have meetings between Cincinnati Public School transportation staff and shelter Child Service Coordinators in order to solve individual and systemic issues with transportation to school for children experiencing homelessness as they arise.

As a result of the changing needs due to COVID, these close relationships with Cincinnati Public Schools and Project Connect have expedited much needed supports for children and families including technology, access to helplines, specialized tutoring, and assistance for students with disabilities to ensure students continued their education remotely.

Family Housing Strategies

Coordinated Entry

Cincinnati's Coordinated Entry System began in 2016. It ensures that individuals and families experiencing homelessness have an equitable and centralized process for access to appropriate resources, in a person-centered approach that preserves choice and dignity. Coordinated entry ensures families receive the right intervention quickly and reduces the likelihood of future instability. Coordinated Entry utilizes standardized tools and practices, including the VI-SPDAT, an assessment tool that helps identify who should be recommended for each housing and support intervention identifying who is eligible and who is in greatest need of each intervention.

Additionally, the **Central Access Point Helpline**, the centralized shelter placement helpline families and individuals call to access emergency shelter, recently added a Risk Assessment tool when screening families for emergency shelter placement.

Subsidized Housing

In order to expand affordable housing opportunities, **Strategies to End Homelessness** engaged in a partnership with **Cincinnati Metropolitan Housing Authority (CMHA)** that reserves Housing Choice Vouchers for individuals and families that experienced homelessness and are good candidates for the on-going subsidy the vouchers provide. The first year of the partnership was 2015 and CMHA offered 25 vouchers and each year since, they have offered additional vouchers.

In 2021 **Strategies to End Homelessness** will allocate 900 vouchers to formerly homeless households, most of them families. When the plan launched, based on Fair Market Value, the vouchers provided to our families equaled approximately \$275,000 per year. Today, the impact of the vouchers is nearly \$10,000,000 per year.

Additionally, the number of families served annually in permanent supportive housing programs has averaged 261 families over the past five years. In addition, **Interfaith Hospitality Network of Greater Cincinnati** is developing further permanent supportive housing units for families and that will increase the number of units available by 26 by Fall 2022.

The project is an extension of the mission of **Interfaith Hospitality Network of Greater Cincinnati** to provide homeless families emergency shelter and hospitality through interfaith communities and to work with families to find and retain stable housing. **Interfaith Hospitality Network of Greater Cincinnati** has been providing services since 1991, working side by side with partners from the faith community to meet basic needs while offering professional wraparound services that change lives. They help moms, dads, kids, and their pets, move out of homelessness. In addition to shelter, they provide a full complement of ongoing housing and support programs that keep families permanently housed.

Interfaith Hospitality Network of Greater Cincinnati has successfully operated Permanent Supportive Housing in a scattered-site model since 2012, including partnership with private property owners in the Walnut Hills neighborhood.

Policy Change Strategies

Developing Affordable Housing for Families

The Solutions for Family Homelessness collaboration worked to increase affordable housing development by accessing federal pass-through funds through the City and County. **Interfaith Hospitality Network of Greater Cincinnati** received \$400,000 in HOME funding through the City of Cincinnati for a Permanent Supportive Housing Project for families.

One of the challenges in securing the development of family-sized affordable housing, is that costs per unit are naturally higher for 3 and 4 bedrooms than for 1 or 2. Current guidelines and funding sources available to projects awarded through the **Ohio Housing Finance Agency** (OHFA) favor those with lower per unit costs. While some progress has been made in getting family projects awarded through the Low-Income Housing Tax Credit process, such as the 26-unit building for families mentioned earlier, specific outreach to OHFA and other stakeholders on how they can better support development of affordable, family-sized housing has not.

Until now, the collaboration's efforts have been to expand and create opportunities to serve more families in need of immediate assistance through shelter, emergency assistance, aftercare, child enrichment services, better coordination of housing programs, and referrals for Housing Choice Vouchers.

The **Solutions for Family Homelessness** collaboration will develop a short list of recommendations that can be disseminated and shared on the state level with OHFA, as well as with stakeholders on efforts such as the Cincinnati Housing Trust Fund on why family housing must be supported and how specific policies can make that happen.

Eviction Prevention

In an effort to change the way funding is used so that families can access more proactive assistance, in 2018 the City of Cincinnati provided \$227,000 in funding for **St. Vincent de Paul** to help households facing eviction. Due to the success of the program, in May of 2020 the contract was amended to add another \$187,500. In the first year of operation (July 2019 – June 2020) St. Vincent de Paul helped 315 families with assistance. The initial funding only helped people with one month of rent plus fees but the contract amendment allowed for two months of rent plus fees enabling families to become more stable.

THEN vs. NOW

What the foundational gift in support of the **Solutions to End Homelessness Plan** from the **Carol Ann and Ralph V. Haile, Jr. Foundation** made possible in our Community is life-changing. And we are grateful.

THEN

- 25 CMHA Vouchers - \$275,000 value per year
- \$900,000 - Shelter Diversion Funding Available
- 19% - families who called and received assistance via Aftercare or Shelter Diversion
- \$2.4M – Rapid Rehousing Funding Available for individuals and families
- 82.3% - Percentage of families calling to seek shelter but turned away due to lack of capacity
- 2 Part-time Child Services Coordinators
- No Agency staff trained in Trauma-Informed Care

NOW

- 900 CMHA Vouchers - \$10,000,000 value per year
- \$2.4M - Shelter Diversion Funding Available
- 39% - families who called and received assistance via Aftercare or Shelter Diversion
- \$4.8M – Rapid Rehousing Funding Available for individuals and families
- 69% - Percentage of families calling to seek shelter but turned away due to lack of capacity
- All four Family Shelters now have Child Services Coordinators on staff
- 200+ Agency staff trained in Trauma-Informed Care
- 1 New Family Shelter set to break ground
- 26 Additional Permanent Supportive Housing Units for Families coming online

Engaging a Broad Spectrum of Funders

In addition to the funding mentioned throughout this update, the collaboration has been granted new sources of funding toward reducing family homelessness.

- The **United Way of Greater Cincinnati** now annually provides partial funding for Child Services Coordinators within the family shelter system
- CMHA Housing Choice Voucher subsidies made available to homeless and at-risk families
- The City of Cincinnati now provides Human Services funding to support Shelter Diversion services for at-risk families
- Since the plan launch, many local foundations and organizations have funded \$3M in initiatives called for in the plan, including in no particular order: Interact for Health, Christ Church Cathedral, Robert H. Reakirt Foundation, PNC Bank, Trustee, Jack J. Smith Charitable Trust, The Daniel and Susan Pfau Foundation, Wohlgemuth Herschede Foundation, Charles H. Dater Foundation, U.S. Bank Foundation, Difference Maker Legacy Fund, U.S. Bank Foundation, PNC Charitable Trusts, COHHIO, Marge & Charles J. Schott Foundation, Evelyn W. Dunn Charitable Trust, Agnes Nordloh Charitable Trust, SC Ministry Foundation, L&L Nippert Charitable Foundation, Lila L. Gallimore Trust, The Sutphin Family Foundation, The Andrew Jergens Foundation, James J. and Joan A. Gardner Family Foundation, Guardian Savings Bank, Chemed Foundation, and The Spaulding Foundation.

The **Carol Ann and Ralph V. Haile, Jr. Foundation** made a \$1,000,000 commitment over five years (2016-21) to launch the Aftercare and Trauma-Informed Care initiatives.

We respectfully request consideration of an additional 2-year commitment of \$200,000 (Year 1, 2022) and \$100,000 (Year 2, 2023) in order to continue the work of the Solutions for Family Homelessness Plan to prevent as many families as possible from experiencing homelessness in our community. In addition this funding will help to address the following:

Policy and Leadership

RACIAL INEQUITIES STRATEGY 1: Create an equity culture in family serving homeless and housing organizations.

THE ISSUE: Racism is a public health crisis, resulting in disparities in outcomes for people of color in every system functioning in our community. The social and economic injustices structured into our society, result in a disproportionate number of Black and Brown families experiencing homelessness in Cincinnati.

THE GOAL: Homeless and Housing Programs working with families will be equitably structured and operate with cultural competence and humility in order to ensure full participation and agency (self-determination) of individuals most impacted by homelessness.

Tactic A: Re-examine mission and values statements to include an explicit declaration of equity as the goal.

Tactic B: Educate, train and support board, leadership, staff and clients (e.g., cultural and linguistic competency and humility training, implicit bias, performance requirements, bylaws).

RACIAL INEQUITIES STRATEGY 2: Recruit, support, promote and retain diverse leadership, staff and volunteers.

THE ISSUE: Full inclusion and equity requires that people who have historically been disenfranchised be seated similarly in positions of decision-making power. The organizations directing and implementing Solutions for Family Homelessness are disproportionately white at the leadership levels.

THE GOAL: Leadership staff and boards of the family homeless and housing organizations will include an increased number of African American and people of color in numbers representative of the people served by the organization.

Tactic A: Implement specific recruitment and retention strategies to hire people who are African American and people of color for executive and senior leadership.

Tactic B: Provide explicit, funded support for African American and people of color on staff to participate in leadership development opportunities.

RACIAL INEQUITIES STRATEGY 3: Authentically engage and tailor services and practices to support communities of color.

THE ISSUE: The traditional emergency shelter and housing programs design is not effectively reaching all communities of color who are disproportionately affected by housing instability. Housing instability can be one more sign of maladaptive behavior due to trauma and is a result of institutionalized racism in our housing laws and economic structures. Unhealed trauma can lead to lifelong chronic health issues that then intersect with and exacerbate economic and social factors leading to homelessness. Building strong connections and participation in community health resources can aid a family's long-term housing stability.

THE GOAL: Refine program design and offerings to include full participation of all families affected by homelessness in order to achieve long-term housing stability.

Tactic A: Partner with families and organizations with credibility on health issues in the African American community to design and offer relevant services that increase sustainable, positive mental health outcomes for families who are at risk of or homeless.

Tactic B: Increase the capacity to effectively serve people who are immigrants.

Tactic C: Increase the multilingual capabilities of family homelessness and housing organizations.

Tactic D: Collect/report disaggregated data for performance management and outcome evaluation.

RACIAL INEQUITIES STRATEGY 4: Advocate for and implement anti-racist policies and practices that dismantle racism and advance equity.

THE ISSUE: Progress toward an equitable service system and equitable organizations can only be sustained if the policies and laws that govern services are changed to eliminate the racist and disproportionate negative effects from happening in the first place.

THE GOAL: Policy proposals that create a more equitable Cincinnati housing community will be adopted.

Tactic A: Support the funding of the Housing Trust Fund, making sure that affordable housing development is increased so that communities of color can access it wherever they want to live.

Tactic B: Create a landlord advisory board that will help create policies and approaches that successfully attract quality, affordable rental units for families.

Children and Youth

RACIAL INEQUITIES STRATEGY: In order to stop the cycle of generational poverty and homelessness we must respond to the impact systemic racism has on children and youth experiencing homelessness.

THE ISSUE: The inequities communities of color face impact the health and wellbeing of the children we serve – such as lack of stable housing, food insecurity and limited access to high-quality education – and perpetuate intergenerational effects including poverty, homelessness, and poor health outcomes.

THE GOAL: Mitigate impact of racial inequity on children impacted by homelessness

Tactic A: Develop an Advisory Board (inclusive of parents and students impacted by homelessness, school personnel, early childhood and homelessness experts) to inform our work specific to the inequities experienced by those experiencing homelessness in Cincinnati.

Tactic B: Actively participate in policy advocacy as it relates to rules for early childhood care, school transportation, and other policies impacting families experiencing homelessness.

Tactic C: Purchase vehicles to be utilized by shelters that can provide transportation that will enable families to access the resources needed to achieve stability.

Trauma-Informed Care

STRATEGY 1: In order to further enhance service experiences and outcomes, trauma-informed care strategies must be deepened and widened to acknowledge and address the role systemic racism plays in causing, exacerbating, and perpetuating trauma that may undermine successful, long-term, stable housing and overall wellness.

THE ISSUE: The reality of racism and the trauma it causes must be addressed in service delivery to support needed changes in policy and practice, as well as to put in place the unique supports that may be necessary for families of color to fully achieve their housing goals.

THE GOAL: Address trauma associated with racism and trauma exacerbated by racism in service delivery and operations.

Tactic A: Build upon success achieved in addressing developmental and school readiness deficits experienced by homeless children, and disproportionately homeless children of color by incorporating child service coordinators at all shelters by securing long-term funding for these positions.

Tactic B: Deepen level of intervention and evidence of impact in addressing child development by doing follow up ASQ-SE assessments with families post-shelter and tracking data collected for review.

Tactic C: Provide training and support to incorporate evaluation of ACES—that includes impact of racism—alongside ASQ-SE and provide parents with information and tools to help children address impacts of ACES. Set up mechanism to track and evaluate associated data.

Tactic D: Provide training and support to incorporate an adolescent mental wellness assessment that addresses risk factors such as the experience of racism, bullying, substance abuse, sexual relationships and other factors to better serve older children experiencing trauma.

Tactic E: Ensure that trainers for Risking Connection are educated on and able to address impact of racism on trauma and that trainers as a group are diverse and inclusive, representative of the diverse identities and experiences of staff of **Solutions for Family Homelessness** partner agencies.

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