



## *In From The Cold*

### Reaching out to the unsheltered.

Our community works every day to provide shelter, services and support to those who live unsheltered in the woods or on the streets. Despite our efforts, one of our neighbors died due to hypothermia in FY 2010. His life is a reminder to each of us of the importance of winter seasonal programs, in addition to other outreach programs.

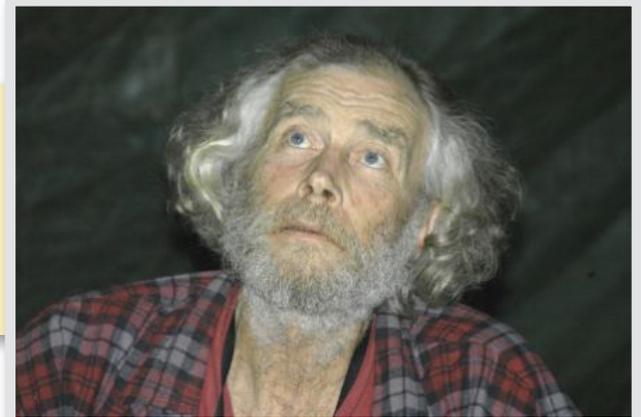
Most men and women who are unsheltered and live on the streets and in the woods in our community struggle with disabilities that make them unable to access the services, supports and housing that they need. A collaboration of faith-based communities, nonprofits, businesses and local government agencies has provided outreach, drop-in and hypothermia services in the Fairfax-Falls Church community for many years.

There are drop-in centers and specialized programs in our community to ensure the health and safety of our most vulnerable neighbors. Winter seasonal programs run

from late fall to early spring and offer the opportunity for people who are unsheltered to have a warm and safe place to stay. These programs are operated jointly by faith-based communities, nonprofits and government agencies. Health Care for the Homeless program is another collaborative partnership led by Fairfax County Health Department. This program provides critical medical care year round. Project to Assist Transition from Homelessness (PATH), operated by the Fairfax-Falls Church Community Services Board, provides mental health and substance abuse services. Each of these programs seeks to engage people in the services they need and ultimately get anyone who is interested housed.

Nearly every day someone from the community asks, "Are there homeless people in Fairfax?" The answer is an overwhelming "Yes!" Just this year, more than 1,000 people who were homeless were unable to access even an emergency shelter.

*“New Hope Housing has helped me get back on my feet. My case manager has helped me the most since she has been there to listen to my problem when I needed it the most.”*





During the winter season in FY 2010, there were **more than 300 individuals who were homeless** and lived outside in wooded areas in our community and were **at risk for hypothermia** during extreme weather.

## Winter Seasonal Programs

## Health Care for the Homeless

## PATH Outreach

Number of people served: **1,178**

- Out of the total number of people served, the Hypothermia Prevention Program served 884.
- Participants receive medical, mental health and substance abuse services, case management, information and screening, life skills and other critical services.

Number of people served: **564**

- Participants receive physical and mental health care, transportation to medical care, mental health and substance abuse services and dental care.
- This data is for calendar year 2009.

Number of people served: **349**

- Participants receive case management, assessment, diagnosis and treatment for mental health and substance abuse disorders, resource identification and assistance in obtaining benefits such as Supplemental Security Income (SSI), Social Security Disability Income (SSDI) and food stamps.
- This data was not collected in the Homeless Management Information System (HMIS).

### *Success Story*

A woman who was chronically homeless lived in her car for two years and had psychotic symptoms. On a snowy, cold day last winter she went to the hypothermia shelter. Due to the high number of clients, the hypothermia staff asked her and others to move to a different room for the night. Instead the client left and stayed in her car. Outreach staff went out to talk with her about receiving services and provided her with clean clothing and toiletries. Although hesitant, she agreed to enter one of the community shelters. Both outreach and shelter mental health staff continued to work with her, and she agreed to begin taking medication. Her disability application was approved, and she was accepted into the Housing First program. The client continues to participate in the Housing First program and has successfully maintained her apartment for the past two years. This success story demonstrates the important principles of outreach, including visiting sites where people who are homeless congregate; focusing on long-term goals, including access to housing and social services, as well as mental health services; and flexibility in service provision. Outreach staff presence at the hypothermia shelter provided a window of opportunity for engagement with the client. Proceeding at the client's pace to develop a therapeutic relationship was the key to her continuing recovery.