

In this module, you will be encouraged to think about existing resources and potential collaborations to ensure optimal care for patients experiencing homelessness; local and state leaders who are stakeholders in the mission of the HCH Program; and behaviors that help build relationships that serve the needs of homeless people in your community.

Community Dialogue and Response





- Respond slowly without coordination
- Respond quickly and effectively

In the aftermath of human disasters like the terrorist attacks of 911, Hurricane Katrina, and the recent economic downturn, some communities respond slowly and without coordination, while other communities respond quickly and effectively. It is clear that to meet the complex, community crisis presented by homelessness, sustained community dialogue and coordinated response are essential.



Some communities have worked extensively to bring together policy makers, service providers, faith communities, philanthropic interests, and others to enhance collaboration, while others have continued to remain somewhat fragmented, meeting immediate needs with uncoordinated, temporary solutions.

Each community must map its own course, but there are some "best practices" that open up the possibility of effective, collaborative response to serving people who find themselves experiencing homelessness.



In the reading assignment for this module, "Working Effectively in the Community," you'll review some of these best practices. All of these practices depend upon building relationships with others. Essential partners include other healthcare providers, such as:

- •Community Health Centers, Hospitals, Mental Health and Substance Abuse Providers
- Specialists, Dental Services, Optometrists, etc.
- City and County Health Departments
- •Local Housing Authorities and other Non-profit housing providers
- Legal Services
- •Federal, State and local agencies such as your local welfare agency and others
- •Local Continuum of Care Partners for the HUD McKinney-Vento Programs
- •Local Trade Associations for Mental Health and Substance Abuse Programs and services
- Anti-poverty programs and Community Action Programs, and
- •Local and State Homeless Advocacy Groups like Homeless Coalitions, the National Alliance for the Mentally III, and others.



You can also learn to work effectively with local and state leaders:

Individuals include: Elected Officials (Local Mayors, City Managers, Governing bodies, etc), Governors, State Legislators, Police and Fire Officials, etc.

Local Public and Private Philanthropic Organizations, Community Charities (United Way) and other

funders.

Health Center Board of Governors/Trustees

Local Universities and Professional Schools

Consumer Groups Consumer Advisory Boards)

Professional Trade and Business Associations (Chamber of Commerce)

Build relationships by ...

- Attending Continuum of Care meetings
- Participating in local advisory boards
- Hosting educational/training activities
- Participating with others in homelessness-related activities



Community relationships are ust like relationships with others in HCH services: they depend upon trust, mutuality, and dependability. You can demonstrate your commitment to a coordinated community response to homelessness:

Attending Continuum of Care meetings

Participating in local advisory boards

Hosting educational/training activities

Participating with others in homelessness-related activities (i.e., Homeless Memorial Day, HCH Day)

In the video for Module 5, HCH members will describe what they've learned about navigating communities of care to advocate for and provide services to people experiencing homelessness.