

**Homelessness Needs Assessment and Action Steps  
for  
State of Wyoming**



**Presentation of Observations, Findings  
and  
Recommendation of Strategic Action Steps**

**by**

**Marbut Consulting**



Community Presentations of Draft Report - June 26 to July19, 2019

Final Written Report - August 19, 2019

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## Study Scope

Initiated by Governor Matthew Mead, the State of Wyoming through the Department of Family Services' Homelessness Program procured the services of Marbut Consulting to conduct a Homelessness Services Needs Assessment and to develop Strategic Action Step Recommendations to improve service delivery in order to help reduce homelessness.

In order to develop practical recommendations, Marbut Consulting:

- conducted a wide range of interviews with stakeholders,
- conducted a series of site visits and tours of service providing agencies,
- interviewed individuals experiencing homelessness,
- studied and inventoried homeless services throughout the State of Wyoming,
- examined prior Point-in-Time-Count reports,
- analyzed statistics and reports from local agencies,
- made street-level observations,
- posed as a person experiencing homelessness in order to understand what it is like to be homeless in this area and to better understand the movement and circulation of the homelessness community.

Using national best practices and the *Seven Guiding Principles of Homeless Transformation* as the key measuring tools, Marbut Consulting evaluated the current state of homelessness service operations within the State of Wyoming. Marbut Consulting then conducted a needs assessment and gaps analysis between existing inventory and identified needs, including the types of services (qualitative) and capacity of services (quantitative) needed within the State of Wyoming.

Dr. Robert Marbut formally started in the State of Wyoming on March 11, 2019. In order to vet and refine this final report, Dr. Marbut conducted a series of community question and answer leadership presentations of his observations, data analyses, findings and recommendations from June 26, 2019 through July 19, 2019. Marbut Consulting then finished this study and written report on August 19, 2019.

The research conducted for this study focused on the cities with the top-10 highest populations: Casper, Cheyenne, Evanston, Gillette, Green River, Jackson, Laramie, Riverton, Rock Springs and Sheridan. In addition to studying the 10 most populous cities in Wyoming, Dr. Marbut visited dozens of other communities with populations under 10,000 like Afton, Buffalo, Ethete, Lander, Rawlins and Wheatland.

*From the signed contract:*

### **Proposed Scope-of-Work: Key Activities, Work Products and Timeline**

Based on prior work in dozens of other communities, Marbut Consulting proposes the following project Stages and Phases as outlined below.

Some of these phases would run in sequence, while other phases would overlap. These phases can be customized as desired by the State of Wyoming. Throughout these phases, homelessness will be observed from a variety of vantage points: individuals experiencing homelessness, families with children experiencing homelessness, agency staffs, volunteers, upstream funders, government officials, civic community leaders, businesses, the media and the general public.

Based on our prior work in developing strategic action plans, Marbut Consulting can complete this scope-of-work in 6-7 months.

### **Stage 1 - Data Research and Analysis**

#### **Phase 1 - Inventory of Current Services:**

In coordination with the Wyoming Homelessness Program Manager, Marbut Consulting will inventory and ascertain information about the types (qualitative) and volume (quantitative capacity) of services being provided throughout Wyoming. This will include in-person site visits of services and service points as well as interviews and focus groups with service providers and key stakeholders throughout Wyoming in order to inventory the “types” and “volume” of services. Specifically, the Consultant will perform in-person site visits and interviews of homelessness services in order to:

- analyze the coordinated entry system,
- inventory of shelter services, beds and mat units,
- inventory of transitional, recovery and long-term services,
- inventory of types and volume of supportive services (quantity and qualitative),
- inventory of preventative services,
- identify service pinch-points and segue gaps.

Throughout the different RFP Stages and Phases of this process, Marbut Consulting will inclusively facilitate and participate in group and individual meetings with key community stakeholders and partners in order to solicit their input, and to garner their buy-in of the Strategic Action Plan. The discussions with the key stakeholders and partners are critical in order to improve the study, promote buy-in and deepen partnerships.

#### **Target list of meetings and tours within the 3-5 larger Wyoming communities:**

- Critical State of Wyoming officials
- Elected officials, to include mayors and/or chairs of the county board of supervisors

- Senior city and county administrators (eg city manager, deputy city manager, county administrator, etc.).
- Other critical city and county staff members that deal with issues of homelessness (eg legal, community action, parks and recreation, etc.)
- Police chiefs and/or county sheriffs and/or top LEA commanders whom are dealing with issues of homelessness
- Active LEOs who are engaging with individuals experiencing homelessness
- Ride-alongs with police departments to see gathering points, feeding sites, encampments, jail, etc.
- Coordinators of EMS/fire/rescue in the most active areas
- Directors of the most active emergency rooms (ERs/EDs) that receives individuals experiencing homelessness
- Heads of local mental health agencies
- Chairs/CEOs/executive directors of the top homelessness service providing agencies and tours of all key homelessness service providing agencies
- Site visits of all the large encampments
- Site visits of major feeding initiatives
- Site visits of major congregating areas (eg community centers, parks, rivers, lakes, CBDs, etc.)
- Librarians and site visits of downtown libraries (and other highly impacted libraries)
- Data coordinators who work with HMIS (Homeless Management Information System) and PITC (HUD Point-in-Time Count) data and reports
- Key funders (to include local United Ways and community foundations)
- Key affected merchants and businesses
- Leaders of business and tourism organizations to include impacted business districts
- Critical advocates
- Any other key stakeholders

Target list of meetings and tours within the smaller Wyoming communities:

- Mayors and/or chairs of the county board of supervisors
- Critical city and county administrators (eg city manager, deputy city manager, county administrator, etc.).
- Police chiefs and/or county sheriffs
- Chairs/CEOs/executive directors of the top homelessness service providing agencies, to include tours of service providing agencies
- Windshield site visits of major congregating areas (eg parks, rivers, lakes, CBD, etc.)
- Site visits of the downtown libraries
- Other key stakeholders

## **Phase 2 - Data Analysis of PITCs and HMIS + Field Observations and Surveys:**

Marbut Consulting will conduct a data analysis of the recent Point-in-Time-Count (PITC) compared to earlier PITCs. The Consultant will also review Homeless Management Information System data and reports of homelessness service providing agencies. Additionally, in coordination with the Homelessness Program Manager, Marbut Consulting will conduct a series of targeted field observations analyzing flow and movement patterns which will include Dr. Marbut “being homeless” on the streets of selected cities within Wyoming. Based on these findings, the Marbut Consulting will then draft and conduct a targeted in-the-field data survey of individuals and families experiencing “street-level homelessness” to include individuals living in shelters, centers and transitional programs. Field observations and surveys will be used to better understand the unique local causes and triggers of homelessness, which will inform the Strategic Action Plan.

## **Phase 3 - Gaps and Duplication Data Analysis/Assessment:**

Based on the agency interviews, site visits, street-level observations, Point-in-Time-Count data, Homeless Management Information System reports, agency reports and the customized Wyoming survey data (*which would be focused uniquely on Wyoming issues and not on national issues*), Marbut Consulting will conduct a needs assessment of the types of services (qualitative) and capacity of services (quantitative) needed in Wyoming. This will include conducting a gap and duplication analysis of services between existing inventory and identified needs.

## **Phase 4 - Master Functionality Assessment Study:**

In conjunction with Phase 3 above, Marbut Consulting will then conduct a “strategic-higher-level” master functionality assessment study of the gaps and missing services within the context of the overall Continuum of Care (CoC). A “functionality assessment study” is critical in order to assure cost effective and affective strategic action steps, and to ascertain what is needed to assure long term success. Using national data and best practices, this sub-study will synthesize missing types of services, quantity of service gaps, demand:supply ratios, service proximity data, and downstream data (eg traditional housing, permanent supportive housing and housing first), which will in turn “inform” the functional strategic action steps. This will include a study of geographic areas. Having an accurate understanding of the functional needs is necessary in order to understand the scope, scale and structure of the overall system.

Phase 4 also will include an assessment of how effective it is for the State to be involved within the Homelessness Continuum of Care (CoC).

Toward the end of Phase 4, it is recommended that Dr. Marbut conduct an oral presentation, with an extensive Q&A session, of the preliminary data analyses and base findings at a public forum with the key stakeholders, partners and the State of Wyoming.

NOTE: The failure to conduct a thoughtful “functionality study” before developing strategic action steps is one of the biggest mistakes most communities make. This functionality study must be informed by practical national and emerging best practices while being customized to the local realities of Wyoming.

## **Stage 2 - Strategic Framing and Assessment**

### **Phase 5 - Strategic Framing of Critical Issues and Initiatives:**

With input and guidance from the Homelessness Program Manager, and as part of the strategic development process to create a shared vision and to encourage community “buy-in,” Marbut Consulting will “strategically frame” action steps in order to develop a sound action plan. The focus will be to develop strategic and customized impactful solutions to significantly reduce homelessness within Wyoming. This will require the Consultant to conduct in person meetings with officials from local government, elected bodies, funders, businesses, faith-based entities, non-profits, civic groups, service providers, educational groups and other agencies. This framing process will include the input of key stakeholders and community partners, as well as appropriate interrelated-system partners from the criminal justice, health care and mental/behavioral health systems.

## **Stage 3 - Development of Strategic Action Plan**

### **Phase 6 - Draft a Strategic Action Plan:**

Marbut Consulting will then draft a written Strategic Action Plan with recommendations based on national and emerging best practices that are grounded within identified local needs, gaps and opportunities. This plan will be informed by the input of key stakeholders and community partners. This strategic action plan will include real-world strategic positioning of both qualitative (types of services) and quantitative (volume) needs within the overall CoC environment including critical functionalities and operating policies/protocols/procedures. The types of services and volume of services also will be addressed by geographical areas. The Strategic Action plan will include recommended improvements throughout all aspects of the continuum of care including: outreach, engagement, prevention, coordinated entry, crisis response, transitional services, rapid rehousing, permanent supportive housing, affordable housing, and other longer term housing issues.

### **Phase 7 - Key Partner and Stakeholder Comment Period:**

As part of the “buy-in” efforts and to improve the overall study, Dr. Marbut will present the critical elements of the “Draft” Strategic Action Plan for comment to the key stakeholders in a variety of one-on-one and group forums. This phase will require Marbut Consulting to conduct numerous briefings of government staff members, elected officials, businesses, faith-based entities, civic groups, educational groups and service providing agencies. The Consultant will also share his knowledge of the best emerging practices across the United States.

**Phase 8 - Public Presentation of FINAL Strategic Action Plan:**

A written “Final” Strategic Action Plan with specific action steps will be delivered to the Homelessness Program Manager. This Strategic Action Plan will provide a comprehensive roadmap to help prevent and reduce homelessness within Wyoming. Beyond the recommendations, this report will also include key observations and data findings and will be about 25-30 pages. Additionally, Dr. Marbut will publically present his final report at a mutually agreed to community forum.

**Notes About Scope-of-Work:**

- Most likely many possible improvements will “organically” materialize throughout the process, especially during the gap and duplication analysis phase. Marbut Consulting will suggest improvement opportunities as they naturally arise throughout this “journey.”

## **Major State-wide Observations and Findings**

### **The Positives and the Opportunities**

There is a tendency in such endeavors to focus on the negative rather than the positive. Therefore, before the challenges and gaps are addressed below, there are a few observations that bode well for the State of Wyoming regarding the state of homelessness within the State that this researcher would like to share:

- Many recommendations already have started to be implemented by homelessness service agencies after this researcher made specific agency-level recommendations to agencies. Most of the homelessness service providing agencies within Wyoming have been very amenable to making agency-level changes that will improve the effectiveness of their service delivery (more than 135 agency-level recommendations, small and big, have been made to date).
- The number of year-round individuals experiencing “unsheltered” and street-level homelessness as defined by HUD (US Department of Housing and Urban Development’s web site [www.HUD.gov](http://www.HUD.gov)) is relatively low compared to other parts of the USA.
- Overall, agencies do so much with so little in Wyoming. Almost all of the homelessness service agencies in Wyoming are significantly underfunded and are very cash-strapped. In some communities homelessness service staff members actually make less money on an hourly basis than local quick service food workers (unfortunately, many of these underfunded agencies do not have enough funding to adequately fund case management).
- Local “Value-in-Kind” donations are relatively higher in Wyoming than the rest of the USA (unfortunately, cash donations are not relatively high). Food donations are exceptionally high within Wyoming.
- With the exception of food pantries, this researcher found no localized duplication of homelessness services, which is quite unusual within the homelessness services sector.

## The Negatives and the Challenges

**Wyoming's Harsh Weather → High Deterrence and More Deaths:** The extreme weather conditions of cold, wind and snow deter out-of-staters from coming to Wyoming between September and May. This means that nearly 100% of the individuals and families with children experiencing homelessness in Wyoming between the months of September to May have very strong and direct ties to Wyoming (eg are "home-grown"). Across the USA, weather is generally the number magnet that attracts individuals to move to a region, likewise, weather can deter individuals from going to a region. Seven of the ten cities visited by this researcher reported having hypothermia deaths of individuals experiencing homelessness within the last 18 months.

**The Three Unique Challenges of Service Delivery in Wyoming:** Relative to most other states, Wyoming has three unique characteristics that make it very difficult for local communities to cost effectively fund localized treatment, recovery and engagement activities for individuals and families experiencing homelessness:

- 1- Since local communities within Wyoming are relatively small, cities and counties often lack a strong taxpayer base to effectively fund treatment and engagement programs,
- 2- The vast distances between most communities make it difficult and unnatural for local communities to work together to address homelessness (therefore most communities operate as isolated islands),
- 3- With the exception of Cheyenne and Casper, there is not a critical mass of individuals experiencing homelessness, which means localized treatment, recovery and engagement programs lack the cost efficiencies that larger communities have with larger economies-of-scales.

**Cheyenne Is At an Unique Cross-roads:** Cheyenne is geographically unique in that it is located at the high traffic intersection of I-25 and I-80. Cheyenne is about 90 minutes from Denver and is also a short 45 minute bus ride from Fort Collins during most of the year (at times agencies in Fort Collins have encouraged individuals to go to Cheyenne). Taken together, Cheyenne receives a very high number individuals from out-of-state and from other parts of Wyoming.

Buffalo is also at a major intersection (I-25 and I-90), but Buffalo is geographically 200 miles north of Cheyenne (thus much colder) and is 289 miles north by vehicle (thus an additional drive time of 4.5 hours), so Buffalo does not receive the high in-bound traffic flow that Cheyenne receives. Evanston is 1.5 to 2.5 hours northeast of Salt Lake City (depending on the weather conditions), but because the terrain and weather conditions east of Salt Lake City are often much worse than the conditions between Fort Collins/Denver and Cheyenne, Evanston does not receive the high traffic flow that Cheyenne receives.

**There is Little Intra-State Movement of Individuals Experiencing Homelessness:** With a few notable exceptions, the vast distances between cities reduce intra-State movement between communities of individuals and families experiencing homelessness. Historically, Laramie has sent individuals to Cheyenne, and to a lesser extent Riverton has sent folks to Casper, and Green River has sent folks to Rock Springs.

**There is More Funding for Animals than Humans:** In most cities, the local animal services and shelters are funded at significantly higher levels within the respective city general funds than services for individuals and families experiencing homelessness.

**There Is a Dearth of Substance Abuse and Mental Health Treatment Slots/Beds in Wyoming:** The root triggers and causes of homelessness most often are behavioral health in nature, such as addictions, post-traumatic stress disorders (PTSD), military sexual trauma (MST) and mental health diseases. In order to engage in meaningful recovery, the focus must be on the root triggers of homelessness, not symptoms. There is a need in Wyoming for more behavioral health, mental health and substance abuse treatment slots/beds of all lengths of time. Additionally, it was anecdotally reported to this researcher about several incidents in which individuals who had allegedly committed major violent criminal felonies but had not been charged nor tried due to Wyoming Statutes Title 7, Chapter 11, Article 3, Paragraphs 302 and 303 (Mental Illness or Deficiency Statutes). This was reported the most within Casper. Individuals who commit violent criminal felonies while having major clinical mental illnesses need very formal clinical help and treatment, and their cases should not be prematurely dropped, diverted nor dismissed with prejudice in such away as to release these individuals into the public without treatment. The *condition of homelessness* and a commission of a major violent criminal felony are distinctly different issues. Likewise it is very important to note that for a variety of reasons the *condition of homelessness* should never be criminalized.

**The Amount of Housing Placements is Low:** Because of a low inventory of affordable housing and high occupancy rates, housing placements are very low relative to the need. The recent oil and gas booms have exacerbated this situation by increasing the cost of rentals and reducing the number of available vacancies. Even though some areas have experienced an economic down turn, the rental rates have remained relatively high. Like most of the USA, there is a critical need of “transitional” units (eg 6-24 month residential stays) as well as “permanent supportive housing” (eg 2 years or longer time frames). This shortage is especially acute for individuals with disabilities. The Tribal communities alone need about 375 affordable transitional housing units. Jail and prison releases exacerbate this issue. Study beyond the scope of this project is needed to determine a precise number of housing units needed for the balance of state.

**Critical Services Are Needed for Unaccompanied Students:** There is a critical State-wide need for 80 to 95 emergency housing units for unaccompanied students (ages 15-18, and ages 18-22 when students go onto college). Because of the very unique challenges of these students, these students do the best when they are in single-gender community housing situations that have formal on-site adult supervision and case management.

**The Major Subgroups of Homelessness in Wyoming (with “Triggers”):** Very seldom is the loss of a job the real root cause trigger of homelessness, likewise very seldom does securing a job alone reverse the cycle homelessness. The cycle of homelessness is a multi-faceted process that starts with a trigger, and devolves through the loss of credit worthiness, credit cards, connections with friends and families, jobs, housing, vehicles (except for individuals and families in the Northeast), etc. Below is a list of the major demographic sub-groups of homelessness in Wyoming:

- Veterans (triggered by chronic/complex post-traumatic stress disorders - PTSD and MST),
- Single Females (domestic violence triggered),
- Families with Children (domestic violence triggered),
- Families with Children (divorce and financially triggered),
- Unaccompanied Students (generally domestic violence triggered),
- Chronic (1-5 years on the street with self-medicating mental health issues),
- Super Chronic (5 years or more on the street who have not been in holistic programming),

**Dehydration, Poor Nutrition and Sleep Deprivation Exacerbate the Homelessness Condition:**

Mental Health, behavioral health and addictive disorder issues are all exacerbated by dehydration, poor nutrition and sleep deprivation. Individuals experiencing “street-level” homelessness often do not drink enough water since it is hard to find a public restroom and they do not want to be hassled for going to the bathroom in public. Additionally, individuals and families with children experiencing homelessness seldom eat well-balanced meals since it is much cheaper to prepare high-sugar and high-carbohydrate meals. Finally, most individuals and families experiencing homelessness have less than ideal sleeping arrangements which leads to severe sleep deprivation for many individuals. Unfortunately, many individuals experiencing homelessness also experience these exacerbating factors (eg dehydration, poor nutrition and sleep deprivation) which makes treatment and recovery even more challenging.

**“The Summer Surge” and Adult Summer Visiting Travelers:** The first people to bring up the *summer surge phenomenon* to this researcher were 3 different police chiefs from the top-10 most populace cities (their cities were 272 miles end-to-end across Wyoming). When asked by this researcher during the first stage of this research project “do you see any patterns” all 3 police chiefs, in 3 different interviews, on 3 different days, independently brought up the “summer surge.” The summer surge was then reaffirmed by 2 other police chiefs and 1 deputy chief from another city during later stages of this study. Several patrol officers throughout the State also brought up the issue of the summer surge phenomenon. Most of these law enforcement officers estimated the summer surge to be an increase of 15-30% between the months of May and September (with a couple estimates of more than 30%). Also, numerous library volunteers and staff members, as well as merchants located on I-80 and I-25 brought up the summer surge with estimated summer increases of 15-25% (does not include several very high outliers). On an agency level, with just two exceptions, every single adult program had significant vacancy levels during the fall, winter and spring months. For example, the men’s program at the Good Samaritan Mission in Jackson (which is a good agency bellwether since it has often been the median agency in regards to vacancy rates), had a vacancy rate of 20.7% on the day of this researcher’s site visit. In contrast it is very important to note that every program has historically reported occupancy rates of 100% or higher during the warm summer months. Additionally, food pantries and soup kitchens that are often very good indicators of adult single homelessness reported summer increases of 15-35%. Finally, this researcher observed first hand the summer surge during three different trips to Wyoming during the warmer months of May, June and July as compared to his trips in during the colder winter and spring months.

In mid-May 2019, during the earliest stage of the Summer Surge, COMEA of Cheyenne conducted an alpha-test and established residential service criteria (similar to Recommendation 6 below). COMEA found that 13.4% of the adult men in their program were from out-of-state. Based on historical data, the percentage of individuals from out-of-state would be even higher during mid-summer. Beyond decreasing overcrowding, COMEA reported that almost all of the out-of-state individuals who departed were case management and treatment resistant.

For the most part this “*Summer Surge*” is due to “*adult summer visiting travelers*” who often are not truly experiencing homelessness as defined by HUD. On the contrary, during the cold months between fall to spring nearly 100% of the guests/residents/participants are individuals experiencing homelessness per Federal HUD guidelines, and have direct ties to Wyoming (eg went to High School in Wyoming, have direct family living in Wyoming, and/or have been living year-round in Wyoming). Both law enforcement and agency staffs/volunteers reported that these Summer Surges are composed of individuals seasonally traveling through Wyoming once the weather warms up, then leave the State when the weather gets cold again. Furthermore, these individuals are spending a majority of their time in other states (eg are not Wyoming residents) and often do not meet the HUD definition of homelessness. Most of these individuals either come into the State by Greyhound Buses or hitchhike. It should be noted that with the significant increase in train security after the 9/11/2001 attack, only a very few individuals make it to Wyoming on a train anymore.

It is very important to note that programs that exclusively deal with families with children, domestic violence and unaccompanied youth/minors/students have generally stable censuses throughout the year and do not experience the summer surge phenomenon.

There is nearly universal awareness of a Summer Surge driven by single adults from out of state, however, there is a lack of useful data to quantify this summer surge. Unfortunately HMIS is not very useful in estimating the magnitude of the Summer Surge for several reasons:

- less than half of the agencies providing services to the homelessness community use HMIS,
- the data is often bulk inputted at the end of reporting cycles rather than real-time,
- the available data fields lack specificity around direct connectivity to Wyoming,
- HMIS currently only includes 1 pantry,
- HMIS currently only includes 1 soup kitchen.

Since there is no perfect data set to determine the annualized impact of the Summer Surge, a high-low amalgamated model can give us a really good data range in which to understand the Summer Surge.

Reported & Observed percentages for the Summer Surge (the 4 months between mid-May and mid-October):

- 25.0% average reported by food pantries and soup kitchens
- 22.5% average reported by law enforcement officials (excludes 2 high outliers)
- 20.7% agency bellwether
- 20.0% average reported by librarians and merchants (excludes several high outliers)
- 13.4% actual percent for an alpha-test during the leading edge of the Summer Surge (low estimate)
- > 20.3% average of these data point estimators of the Summer Surge (4 months)

*Higher Out-of-Town Model (using the average of the five estimators):* Assuming a 20.3% Summer Surge over 4 months, the annualized impact would be  $((20.3\% \text{ average estimator} \times 4 \text{ months}) + (2.0\% \text{ average fall to winter baseline of individuals not tied to Wyoming} \times 8 \text{ months})) = (.812 + .160)/12 = 8.1\%$  monthly average of individuals not tied to Wyoming. This means, using a higher out-of-town model, on an average 91.9% of the individuals experiencing homelessness in Wyoming are directly tied to Wyoming, with 8.1% summer visiting travelers.

*Lower Out-of-Town Model (using lowest reported estimator except the alpha-test):* Assuming a 15.0% Summer Surge over 4 months, the annualized impact would be  $((15.0\% \text{ lowest estimator} \times 4 \text{ months}) + (1.0\% \text{ average fall to winter baseline of individuals not tied to Wyoming} \times 8 \text{ months})) = (.600 + .080)/12 = 5.7\%$  monthly average not tied to Wyoming. This means, using a lower out-of-town model, on an average 94.3% of the individuals experiencing homelessness in Wyoming are directly tied to Wyoming, with 5.7% summer visiting travelers.

**It is therefore very safe to calculate that 91.9% to 94.3% of the individuals experiencing homelessness have direct ties to Wyoming on an annualized basis (eg average monthly basis). The Summer Surge is an important summer issue, but it is not a year-round issue.**

### **A Note on Current Child Research - It is Very Negative to Mix Children With Single Adults:**

This researcher observed that many programs within the State of Wyoming have been commingling young children with non-family single adult males and females experiencing chronic homelessness. This is very harmful to the future development of the children, and presents many unnecessary risks and liabilities to the service providing agencies.

Over the last 20 years, a new body of research has emerged that has been studying the long term neurobiological and physiological impacts of exposure to adverse experiences during childhood. These “toxic stress” experiences are now called “Adverse Childhood Experiences” (ACEs). The groundbreaking study in this research area was *Adverse Childhood Experiences Study (ACE Study)* and was led by California researchers Dr. Vincent Felitti and Dr. Robert Anda, and surveyed more than 17,000 adults. What they and others have found is having a high number of Adverse Childhood Experiences (eg traumatic experiences) during the most formative period of a person’s life can have a highly negative impact on a child’s developing brain and body, and this negative impact can last a lifetime.

There are 10 specific formally recognized ACEs that a child can be exposed to during childhood. See the *Data Report - A Hidden Crisis: Findings on Adverse Childhood Experiences in California* by The Center for Youth Wellness for more information.

It is thus highly problematic to mix non-family adult males who are experiencing homelessness with children since these children are exposed on an average to many more ACEs than children in the general population. In terms of the overall general population, 83.3% of the general population had 3 or less ACEs, and 60.0% of the general population had 0 or 1 ACEs in their childhood. Whereas, children that are commingled with adult males experiencing homelessness will likely experience at least 4 ACEs on a daily basis (eg exposure to individuals with mental illness, to individuals with substance abuse, to people who have been incarcerated, etc.). It is important to note that the research has found that having 4 or more ACEs is the critical tipping point between good outcomes and poor outcomes over a lift-time.

People who were exposed to 4 or more ACE’s during their childhood had the following increased serious health and behavioral conditions compared to individuals who were exposed to 3 or less ACEs (partial listing of negative outcomes):

- 12.2 times as likely to attempt suicide
- 10.3 times as likely to use injectable drugs
- 7.4 times as likely to be an alcoholic
- 5.1 times as likely to suffer from depression
- 2.9 times as likely to smoke
- 2.4 times as likely to have a stroke
- 2.2 times as likely to have ischemic heart disease
- 1.9 times as likely to have cancer
- 1.6 times as likely to have diabetes
- 39% more likely to be unemployed

**A Small State-wide Investment Would Make a HUGE Impact:** A small State-wide investment, when combined with a focus on year-round homegrown residents, would have a huge positive impact in terms of the overall outcomes. Furthermore, SMART and TARGETED investments could actually save and/or better utilize funding that is currently being spent within the criminal justice, medical and non-profit systems. If targeted correctly, Wyoming could realize significant improvements in multiple areas and aspects, better utilize funding, and save funds over the long term.

## **Major State-wide Recommended Strategic Action Steps - In Summary**

- 1 - Create State-wide Funding for Root Cause Treatment and Recovery Programs.
- 2 - Expand Funding to the Existing ESG Initiative for Customized Local Prevention and Diversion Efforts.
- 3 - Source New Housing Opportunities of All Types Whenever Possible, Especially Transitional Housing.
- 4 - Create Housing + Case Management for Unaccompanied Students.
- 5 - Whenever Possible, Separate Families with Children from Non-family Single Adults.
- 6 - Establish State-wide Service Eligibility Criterion (with Emergency Protocols).

## **Major State-wide Recommended Strategic Action Steps - In Detail**

### **1 - Create State-wide Funding for Root Cause Treatment and Recovery Programs**

Root cause treatment options for individuals and families experiencing homelessness is very limited throughout Wyoming. There is a critical need for both short-term and long-term for mental/behavioral health treatment services. Additionally, many individuals need recovery services for addictive disorders, which are often co-presenting.

Programs that only address the *symptoms* of homelessness do very little to reduce homelessness, and in fact, symptom only programs often increase homelessness vis-a-vis enablement. If a community wants to truly address the condition of homelessness, it must proactively and smartly focus on the *root causes* that trigger homelessness in the first place.

As mentioned in the observations section of this report, there are three reasons why it is very difficult for the smaller cities and counties of Wyoming to cost effectively fund localized treatment, recovery and engagement activities for individuals and families experiencing homelessness:

- 1- Local cities and counties often lack funds,
- 2- Vast distances between communities make it difficult for communities to work together,
- 3- With the exception of Cheyenne and Casper, there is not a critical mass of individuals experiencing homelessness, which means localized treatment, recovery and engagement programs lack the cost efficiencies that larger communities have with larger economies-of-scales.

There are two possible solutions to funding the needed mental and behavioral health treatments:

- 1- Cities and Counties pool their resources on a regional basis, and/or . . .
- 2- The State of Wyoming takes the lead in funding mental health services.

This is an urgent current need. If root cause treatment and recovery programs are not adequately funded in the very near future, it is very likely the number of individuals and families experiencing homelessness will increase significantly. This in turn will dramatically and exponentially increase the financial burden on the emergency medical service and criminal justice systems. This increase will especially drain and divert the resources of law enforcement, courts, jails and prisons. Within many cities, especially Cheyenne and Casper, law enforcement agencies already have disproportionately high contact/interaction rates with individuals experiencing homelessness. Likewise, many hospitals expend a disproportionately high amount of resources on individuals experiencing homelessness, while having a very low reimbursable rate on these expended resources.

If properly targeted, a small investment now will save millions of dollars later within the criminal justice and medical care systems.

## **2 - Expand Funding to the Existing ESG Initiative for Customized Local Prevention and Diversion Efforts**

Because of the three unique challenges facing Wyoming, a one-size-fits-all approach will not work successfully. Furthermore, only Cheyenne and Casper have adequate infrastructures to operate large-scale cost efficient operations. It is therefore critical to have customized initiatives that are based on unique localized needs and resources.

The best current State-wide tool to address homelessness prevention and diversion on a customized local basis is the Emergency Solutions Grant (ESG) which is administered by the Wyoming Department of Family Services - Homeless Division. ESG is funded at the Federal level by the Housing and Urban Development and must be matched 1:1 with state or local funding. In Wyoming, the matches have come from local governments and regional non-profits, with none from the State Government.

Currently the existing ESG (Emergency Shelter Grant) program provides prevention and diversion funding for street outreach, emergency shelter, prevention, rapid housing, and administration (capped at 7.5%). The 2019 HUD award to Wyoming is for \$323,751 which is being matched locally by seven non-profits.

The existing ESG initiative has proven to be very successful in leveraging local funding with 1:1 Federal matches. Furthermore, local communities have been able to customize these funds for stabilization, prevention and diversion efforts like emergency one-time rental assistance, utility assistance, security deposits (eg first month, last month and damage), emergency vouchers, etc.

It is recommended that the State of Wyoming provide an additional 1:1:1 match to this existing program. In simple terms the State would match the Federal Department of Housing and Urban Development's \$323,751 contribution and match it with local government's contribution of \$323,751 with its own \$323,751. This would mean the total of the fund would be \$971,253.

If approved by HUD this could literally be an extension of the existing program. If the granting HUD administrator does not want to blend the funds, the State Match could be a simple side-by-side fund that could even provide additional flexibility for local customization.

Such a program would provide a great ROI by leveraging existing funding and by customizing local initiatives, while creating equal participation at the national, state and local governmental levels. It would also save millions of dollars within the criminal justice and medical care systems.

### **3 - Source New Housing Opportunities of All Types Whenever Possible, Especially Transitional Housing**

There is a critical need to increase the number of affordable housing placements, especially traditional housing placements, across the spectrum for single men, single women and families with children. The lack of affordable housing in Wyoming has been exacerbated by the oil and gas boom cycles when the housing needs for the field workers crowd out others from the housing market. To be successful, there needs to be an increase in inventory capacity of all types of housing (eg transitional and long term) within the State of Wyoming.

Because of Federal budget cuts, which started during the Obama administration and have continued under the Trump administration, the financial burden is shifting to state and local governments to fund additional short-term transitional rapid-rehousing units and longer-term supportive housing units. The reality is there likely will be less Federal funding going forward for programs such as Rapid Rehousing and Permanent Supportive Housing.

Less Federal funding is only the first challenge. The second challenge is the fact that the State of Wyoming's oil and natural gas boom cycles have been increasing the costs of housing, while reducing the number of affordable housing units.

The State should proactively pursue multiple initiatives to increase the affordable housing stock:

- + as challenging it will be, try to obtain more Federal vouchers,
- + increase State funding of affordable housing initiatives,
- + partner with developers to maximize the use low-income-housing-tax-credits,
- + pursue housing developers,
- + encourage homelessness service organizations to develop "their own" housing stock,
- + conduct due diligence on the possibility of developing and placing "tiny-houses,"
- + purchase and then remodel vacant and/or abandoned motels.

All of the possible initiatives listed above have pros and cons. Vouchers are very useful and effective, but Federal budget cuts combined with higher rental rates will likely reduce the number of vouchers available. Low income tax credit housing is one of the best Federal programs in existence, however, this program is very competitive. Many of the housing first type programs are very expensive since it would likely entail developing/constructing new inventory. Tiny-houses have been proven to be useful for short periods of stay, but the evidence is inconclusive for longer term habitation. Additionally, most if not all of these solutions will have highly emotionally-charged NIMBY'ism zoning and siting challenges.

Finally, service providers need to develop educational training programs that better prepare individuals and families for the challenges they will face in the future once they receive housing placements.

#### **4 - Create Housing + Case Management for Unaccompanied Students**

Within the spectrum of the homelessness community, unaccompanied students (minors and youth) are one the most vulnerable sub-groups, with individuals experiencing a wide range of toxic stresses, sexual abuse, violence, neglect and abandonment.

It is therefore critical to do whatever is possible provide safe and secure environments that allow these students to stay in school and continue their studies. For many of these students school has been the only external positive aspect of their lives. Furthermore, education is one of the best tools to “break-the-cycle” and to provide a positive alternative path.

Sourcing and creation of housing for unaccompanied students is especially challenging because of the unique needs of minors and youth. For example, boys and girls under 18 should never be commingled within the same facility and on-site adult supervision is needed on a 24/7/168/365 basis.

It would be ideal for homes to be specifically designed for the unique needs of unaccompanied minor and youth. However, in most communities this would be financially impractical. A more realistic solution would be to convert existing homes into unaccompanied student homes. Ideal design characteristics of such student homes include, but not limited, having 4-6 single occupant student bedrooms, 1 adult supervisor bedroom, area for case management, kitchen with multiple refrigerators, study areas, etc.

On a programing level, student homes should be available to minors in high school, and for program youth that go onto college, especially during summer and Christmas/Winter breaks when colleges are not in session.

To be successful, it is very important that the housing be combined with robust case management.

It is critical to develop a State-wide network of student homes. In the short term, 35-45 units are critically needed, and over the long term, 80-95 units might be needed. The key is to get started. It is possible that as case management becomes more robust and prevalent, the number of units needed might be lower than 80-95. This is a relatively small number of housing units compared to other states.

Note: Because of the unique needs of children and the need for 24/7/168/365 supervision, youth and student programs are inherently more expensive operate.

## **5 - Whenever Possible, Separate Families with Children from Non-family Single Adults**

There were several occasions in which this researcher observed families with children commingled and/or in close proximity with non-family single adult males and females who were experiencing homelessness.

Families with children must be separated away from non-family single adults as much as possible, and as soon as possible. This includes all types of contact including queuing in lines for meals.

By all measures, the mixing of children with adults who are experiencing chronic homelessness does not meet national best practices as it is risky, dangerous and unnecessarily increases legal exposure to agencies. It is very important to note that this type of commingling also creates unhealthy and negative developmental issues in children. Furthermore, this mixing can exacerbate the inefficiencies in the placement process and inhibit optimal utilization of service inventory. This is why centers/programs/shelters across the USA have moved to separate families with children from non-family single men (and sometimes single women).

Ideally, all families with children should be separated at least from non-family adult males, and when possible separated from non-family adult females. However, the realities of building capacities and physical layouts may not allow for the ideal setup, at least in the short term.

Additionally, at a clinical level, it would be good for all single adult females to be separated from the single adult males. Ideally, single adult females would have their own dedicated shelter or dedicated section within a shelter that focuses solely on adults. On a practical level, single adult females could be a subsection of a shelter for families with children. Although less desirable, if properly designed and operated, single adult females could live in a separately demarcated section of an adult male shelter.

## **6 - Establish State-wide Service Eligibility Criterion (with Emergency Protocols)**

It is very important to use common nomenclature and to have common definitions in order to have a common understanding of the scope, scale and structure of the challenges facing Wyoming. Therefore, in order to improve the overall system, it is critical to have a common point of departure and a shared understanding of the different cohorts of individuals interacting with the service agencies.

For the most part, the individual adults interacting with social service agencies within Wyoming fall in one of two cohorts:

### Cohort 1 - Homegrown Individuals Experiencing HUD Defined Homelessness:

- defined as individuals experiencing homelessness per Federal HUD guidelines,
- have strong direct ties to Wyoming,
- year-round residents of Wyoming,
- generally have family connections to the community,
- often attended local high schools.

### Cohort 2 - Adult Travelers Who Often Do Not Meet the HUD Definition of Homelessness:

- individuals often are not experiencing HUD-defined homelessness,
- not directly connected to Wyoming,
- seasonal (eg not continuously living within Wyoming),
- individuals passing through the State when the temperatures warm up,
- compose nearly 100% of the “Summer Surge.”

It is very important for the different stake-holders to understand that most of the individuals composing the *Summer Surge* are *Adult Travelers* that are from other states, many of whom do not meet the HUD definition of homelessness.

It is strongly recommended that “Long Term” and “Intermediate Term” services funded by the government (eg State, Counties, Cities, Housing Authorities, etc.) be exclusively used for and on behalf of individuals with “Direct Connectivity to Wyoming” (see definition below). “Emergency Term” services would be available to all individuals who have either Direct Connectivity to Wyoming or No Direct Connectivity to Wyoming. For the purpose of this recommendation, Emergency Term services would last no longer than seven cumulative days of service within any year.

It should be noted that in some limited cases there might be Federal funding requirements that supercede the use of a residential requirement. If any, these exceptions will be few.

It is very important to realize that for the exception of domestic violence triggered homelessness, treatment is generally more successful at clinical level when an individual is located close to one's home support structure of friends and family. It is therefore better for individuals experiencing homelessness to be in a treatment community near where the individual grew up, and not be in unfamiliar surroundings.

It is recommended that "Direct Connectivity to Wyoming" be defined as individuals (a) who attended High School in Wyoming, (b) or who have living parents or siblings currently living in Wyoming, (c) or who have deceased parents that were living in Wyoming at the time of their passing, (d) or can prove they have been living continuously in Wyoming for more than twenty-four (24) months. If an individual does not meet at least one of these four definitions then the individual has "No Direct Connectivity to Wyoming."

Taken together, the above three paragraphs amount to a "residential requirement" for utilization of long-term and intermediate-term services. It also provides for the use of short term emergency services to all individuals for up to seven days of service in a year regardless of residency requirements. This could be perceived as controversial by some, but if implemented would dramatically reduce the number of seasonal inbound individuals that divert and dilute limited valuable resources away from the individuals truly in need of assistance that are experiencing HUD defined homelessness.

Because of the different clinical needs within each cohort, it is critical that each cohort be treated uniquely. Furthermore, if these cohorts were to be treated the same there could be a variety of very negative outcomes for both the individuals within the cohorts and for the general public.

For example, a home-grown individual experiencing HUD-defined year-round homelessness needs significant engagement and help. In the reverse, providing the same type of support to a traveler could actually encourage the traveler to stay longer, thus increasing the negative outcomes. Additionally, because of the robust communication channels within these cohorts, providing support to travelers will actually attract more travelers to Wyoming.

Simply put, if an individual is not on the year-round local HUD-defined HMIS list, they should only receive Emergency Assistance. There must be universal resolve not to hand out limited resources to individuals that are not truly experiencing homelessness. The community needs to reserve the limited available resources for the families and individuals most in need of assistance.

If all the service providing agencies had excess available funding to cover all the out-of-State individuals, then this would not be an issue. However, most agencies are barely operating at break-even and are struggling to fund existing operations. In practice resources for homegrown individuals experiencing homelessness is being diluted and crowded out by individuals from outside of the State of Wyoming during the Summer Surge.

Ideally all formal service agencies and informal organizations providing services within the State of Wyoming would adopt and use a similar eligibility criterion.

Beyond addressing legitimate budget issues, establishing a common eligibility criterion would also help to streamline the coordinated entry process and would deter non-residents from coming to the State of Wyoming. Having a common criteria would also reduce the “service-shopping” phenomenon.

**This does not mean individuals should not receive services!** When individuals do not meet residential requirements, they should still be eligible for emergency level services. In times of emergencies, enough services should be provided to allow the individual to make it back home. This researcher recommends everyone should be eligible of 7 cumulative days of services over a one year period of time.

In simple terms, Wyoming should have a sharp focus on who is being helped.

During the time of the drafting of this report, COMEA in Cheyenne (which is the largest shelter operation in the State) adopted new protocols and procedures to limit out-of-State residents to Emergency Services only, thus providing an ideal alpha-test for this recommendation. COMEA has found that it freed up needed beds while significantly improving the residential community’s collective attitude toward case management (since almost all of the out-of-state individuals were resistant to case management and treatment).

Furthermore, it is recommended that efforts be made to increase the utilization rate of the HMIS system in order to improve policy level decision making. Likewise, it is important to reiterate the value and importance of real-time data entry. Additionally, it would be helpful to add more practical questions to the HMIS system in order to improve the usefulness of the data and subsequent analyses.

## **Five Notes Regarding the State-wide Recommendations**

- \* **At a policy level compared to other states, the homelessness situation is much more manageable in Wyoming.** A small State-wide investment, when combined with a focus on year-round homegrown residents, would have a huge positive impact in terms of the overall outcomes. Furthermore, smart and targeted investments could actually save funding that is currently being spent within the criminal justice, medical and non-profit systems. If targeted correctly, Wyoming could realize significant improvements in multiple aspects and areas.
- \* It was anecdotally reported to this researcher about several incidents in which individuals who had allegedly committed violent criminal felonies were not charged nor tried due to Wyoming Statutes Title 7, Chapter 11, Article 3, Paragraphs 302 and 303 (Mental Illness or Deficiency Statutes). For a variety of reasons the *condition of homelessness* should never be criminalized. At the same time, **individuals who commit violent criminal felonies while having major clinical mental illnesses need very formal clinical help and treatment, and their cases should not be prematurely dropped, diverted nor dismissed with prejudice in such away as to release these individuals into the public without treatment.** As with Recommendation 1, these individuals need formal treatment.
- \* **It is critical for agencies to collaboratively work together within holistic service systems.** In three cities, this researcher observed several incidences of agencies “competing” against each other or agencies “ignoring” other agencies. The families and individuals we are trying to help will better served if agencies truly collaborate.
- \* This researcher was asked if it made more sense to continue to have a State-wide Continuum of Care (eg Wyoming Homeless Collaborative) or to break up into smaller regional CoCs. **This researcher believes a State-wide CoC provides a more influential platform in which to address the issues of homelessness, than breaking up into smaller regional CoCs.** This researcher also believes there could be benefits from the Wyoming Homeless Collaborative hosting regional meetings on a regular basis.
- \* **It is important to note that Dr. Marbut made about 135 small and big agency-level improvement recommendations directly to agencies that “organically” materialized during the gap and duplication analysis phase of this study.** In many cases, agencies have already implemented, or started to implement these recommendations.

## **Localized Issues: Additional Observations and Recommendations** **(by population rank)**

### **Cheyenne:**

**State-wide Recommendations:** Cheyenne would benefit from all six State-wide recommendations, especially Recommendations 1, 5 and 6 (eg create new treatment and recovery slots, separate families with children from non-family single adults and establish state-wide service eligibility criterion).

**Families with Children and Unaccompanied Students:** Currently, three different agencies have been working with different aspects of families with children and students experiencing homelessness (COMEA, Family Promise of Cheyenne and Unaccompanied Students Initiative). COMEA is well established and has strong case management staffing, but lacks the proper physical plant to safely house families with children. Family Promise has an outstanding track record of success, but has limited capacity within their system. The Unaccompanied Students Initiative has outstanding new facilities (some of the best ever seen by this researcher in the USA), but lacks critically needed long term case management for their residents.

Historically these three agencies have worked very well together on an informal basis, and at this point none of their services are duplicative. Going forward, there are many opportunities for these three agencies to collaboratively work together and to even “trade services” between agencies in order to more proactively address homelessness of families with children and unaccompanied students. Working together these three agencies could fill-in the existing gaps in services.

At the start of this research study, COMEA was commingling and co-housing families with children within the same building as non-family single adult men and women. As presented above, this is highly negative and very dangerous in many ways (see Page 13).

**Recommendation ->** It was recommended to the COMEA staff and board to immediately stop commingling and co-housing families with children and adult males and females within the same building (this recommendation has already been implemented).

**Recommendation ->** COMEA, Family Promise and Unaccompanied Student Initiative should develop and formalize a strategic partnership alliance that provides an “integrated-system-of-care” that holistically addresses child and student homelessness. This would likely include “trading of services” between these three agencies.

**The Daily 4.8 Mile Crumb-trail Circuit:** Many of, if not a majority of, the single adult males and to a lesser extent the single adult females complete a daily 4.8 mile trek through the City of Cheyenne. Individuals generally start the morning out at COMEA and then go to the Welcome Mat (2.2 miles), these individuals generally depart the Welcome Mat for lunch at the Salvation Army (1.1 miles), and toward the end of the day head back to COMEA (1.5 miles). A few individuals will actually go back to the Welcome Mat before they go back to COMEA, for a daily trek of 6.6 miles.

At a clinical level, this is very unproductive since individuals are spending between 1.5 and 2.5 hours a day during “prime-time” walking between service sites, rather than being in productive programming or working. At a community level, 4.8 to 6.6 miles of everybody’s daily trek is through the Central Business District and adjacent neighborhoods. At an agency functional efficiency level, three different agencies are “competing for customers,” with two of the agencies providing very limited niche services. Therefore, whether at the clinical level, community level or service agency functionality level, it makes no sense to have this daily crumb-trail circuit.

**Recommendation ->** COMEA is the best suited service site to consolidate all these services. Additionally, as an agency COMEA has a proven track of being able to successfully work with a high number of individuals at a more holistic level.

**COMEA Site Location:** For many reasons, the current COMEA site location is less than optimal. Ideally, COMEA would have been located at a different site when it was established. Furthermore, like so many other agencies within Wyoming, COMEA is doing so much with so little and has outgrown its original infrastructure footprint. Unfortunately, it is currently cost prohibitive for COMEA to relocate to a new site since there are not enough known funders that are willing and able to fund a change of location.

**Recommendation ->** In the short term, COMEA should pursue purchasing the adjacent vacant building in order to optimize the strategic utilization of space within the existing building and to provide new space that is more suitable for families with children. It would also free up space within the existing building in which to specifically design living areas for individuals with disabilities. Overall this would allow COMEA to *right-size and right-position* service functionalities. The new building could also be a future asset that could be sold or traded when pursuing relocation over the longer-term.

**Recommendation ->** As part of the *right-sizing and right-positioning* efforts, COMEA should work with the Cheyenne Regional Medical Center to determine if it would be logical for COMEA to include “HOP Beds” (Hospital Out Placement Beds) that are sponsored by the Cheyenne Regional Medical Center.

**Recommendation ->** The COMEA Board with the City of Cheyenne, with support of the County and State, should create a Relocation Action Task Force to pursue longer-term relocation options.

**Recommendation ->** Whether purchasing the adjacent building or relocating to a new site, COMEA should pursue possible purchasing and construction financing opportunities with the Wyoming Community Development Authority, similar to what the Wyoming Rescue Mission was able to do in Casper.

**Cheyenne is Not Casper:** Even though similar in size to Casper, Casper does not experience the unique types of challenges that Cheyenne faces by being at the cross-roads of two interstate highways and by being so close to Fort Collins and Denver.

### **Casper:**

**State-wide Recommendations:** Casper would benefit from all six State-wide recommendations, especially Recommendations 2 and 3 (eg expand ESG funding for customized local prevention and diversion efforts, and source new housing opportunities, especially transitional housing).

**Casper Has Two Very Strong Established Anchor Service Agencies:** Casper is fortunate to have two very well run and long established homelessness service agencies - Wyoming Rescue Mission (formed in 1978 for adult males and females) and Seton House (formed in 1989 for single-parent families). Together these two agencies have a combined 71 years of successful service to the Greater Casper region. Both agencies use holistic techniques to address the root causes of homelessness. Additionally both agencies have outstanding facility infrastructures that provide critical beachheads of services. Going forward both agencies could strategically benefit by adding targeted infrastructure improvements. The Wyoming Rescue Mission would benefit by creating an on-site addictive disorder residential program that would directly address the homelessness triggers of many of the individuals experiencing homelessness. Seton House would benefit by adding 8-12 family housing units to address Seton House's long running wait list to matriculate into programming.

**Recommendation ->** Natrona County, the City of Casper and the greater Casper civic community should financially support the targeted infrastructure improvements needed by the Wyoming Rescue Mission (eg the *Recovery Residency Program* that would be part of the Mission's *Project Transformation*) and Seton House (eg additional family units). Both agencies would also need financial increases to support these new operations.

**Wyoming Community Development Authority Financing:** Wyoming Community Development Agency (WCDA) should be commended for extending construction financing to the Wyoming Rescue Mission's recent major renovation project. WCDA's support allowed the Rescue Mission to move quickly while also leveraging up additional financial support. This test project by WCDA has proven to be very successful.

**Recommendation ->** WCDA should consider replicating their Wyoming Rescue Mission financing test project thus allowing other agencies and communities to utilize this very successful tool.

### **Laramie:**

**State-wide Recommendations:** Laramie would benefit from all six State-wide recommendations, especially Recommendations 1 and 2 (eg create new treatment and recovery slots, and expand ESG funding for customized local prevention and diversion efforts).

### **Laramie Lacks the Critical Mass to Cost Efficiently Operate Larger Programs:**

Laramie lacks the financial resources to cost effectively operate more holistic treatment, recovery and engagement activities for individuals and families experiencing homelessness. Beyond the lack of funding, Laramie does not have a critical contingent of individuals and families with children experiencing homelessness in which to provide cost efficient holistic programming. This in part is why many individuals experiencing homelessness in Laramie are referred and transported to Cheyenne.

### **Gillette:**

**State-wide Recommendations:** Gillette would benefit from all six State-wide recommendations, especially Recommendations 1, 2 and 5 (eg create new treatment and recovery slots, and expand ESG funding for customized local prevention and diversion efforts, and separate families with children from non-family single adults). State-wide adult treatment slots would be very helpful since Gillette seldom secures an adult funded bed, and when it does the treatment center is more than a 2-hour drive away from Gillette. It is also very important to do whatever is possible to separate families with children away from non-family adults, especially adult males.

**Recommendation ->** The Council of Community Services needs to urgently remodel their facilities in such a way as to separate families with children from single adults.

**Blackjewel Chapter 11 Bankruptcy:** At the time of the drafting of this report it is too early to fully understand what the potential full impact of the Blackjewel bankruptcy might be to the homelessness services community. What is known at the time of the drafting of this report is several affected individuals have already started to utilize the Council of Community Services Soup Kitchen.

**Y.E.S. House is Well Established and Very Successful:** Y.E.S. is a very well established agency and has done a great job developing a diversified funding portfolio through Federal, State and local grants. Y.E.S. House's service portfolio extends well beyond homelessness and has been very successful across many service sectors.

**Council of Community Services Needs Financial Support:** The Council of Community Services is also a very successful agency. With the possible exception of the Good Samaritan Mission in Jackson Wyoming, no other agency in the State does so much with so little than the Council of Community Services. The Council of Community Services receives an important and significant level of Value-in-Kind resources, however it receives a very low level of cash funding. The cash funding is so low that many of the workers at the Council of Community Services earn less on an hourly basis than some of the local quick service restaurant employees earn.

**Recommendation ->** Campbell County, the City of Gillette and the greater Gillette civic community should increase their financial support of the Council of Community Services.

**The "Build-It-and-They-Will-Come" Myth and NIMBY'ism:** There is a widely prevalent myth within the Gillette community that homelessness services and agencies attract homelessness. This myth is absolutely false!! The severe weather from fall to spring combined with an isolated very northern location significantly detours individuals from coming to Gillette. As a result, almost all the individuals experiencing homelessness within Gillette have direct ties to the greater Gillette community. Unfortunately, this false myth promotes NIMBY'ism (Not In My Back Yard) against homelessness service agencies and against the homelessness community in general. The truth is without the existing homelessness services more individuals would be living on the street and many more individuals would be dying.

### **Rock Springs:**

**State-wide Recommendations:** Rock Springs would benefit from all six State-wide recommendations, especially Recommendations 1 and 2 (eg create new treatment and recovery slots, and expand ESG funding for customized local prevention and diversion efforts).

**Lacks the Critical Mass to Cost Efficiently Operate Larger Programs:** Rock Springs lacks the financial resources to cost effectively operate more holistic treatment, recovery and engagement activities for individuals and families experiencing homelessness. Even though many individuals are referred and transported from Green River to Rock Springs, Rock Springs does not have a critical contingent of individuals and families experiencing homelessness in which to provide large scale cost efficient holistic programing.

### **Sheridan:**

**State-wide Recommendations:** Sheridan would benefit from all six State-wide recommendations, especially Recommendations 2 and 3 (eg expand ESG funding for customized local prevention and diversion efforts, and source new housing opportunities, especially transitional housing).

### **Green River:**

**State-wide Recommendations:** Green River would benefit from all six State-wide recommendations, especially Recommendation 2 (eg expand ESG funding for customized local prevention and diversion efforts).

### **Evanston:**

**State-wide Recommendations:** Evanston would benefit from all six State-wide recommendations, especially Recommendation 2 (eg expand ESG funding for customized local prevention and diversion efforts).

## **Riverton:**

**State-wide Recommendations:** Riverton would benefit from all six State-wide recommendations, especially Recommendations 1, 2 and 3 (eg create new treatment and recovery slots, expand ESG funding for customized local prevention and diversion efforts, and source new housing opportunities, especially transitional housing).

**Temporary Closure the Fremont County Good Samaritan Center:** The Good Samaritan Center has temporarily closed for required remodeling and lack of funding. This has caused major problems for individuals who depend on receiving services from Good Samaritan. Formally, former residents and guests are being referred to the Wyoming Rescue Mission in Casper. Informally, many former residents and guests are finding make-shift arrangements within Riverton. Like other smaller Wyoming communities that find themselves below the critical mass threshold of individuals, it might be that Riverton is unable to cost efficiently support a program like the Good Samaritan Center.

**The Myth of “*The Park Rangers*”:** Over the last several years a group of 25-30 individuals, mostly single adult men with some single adult woman have been gathering in City Park. Individuals within this group self-describe themselves as *The Park Rangers*. The myth held by many within the community is most, if not all, of these individuals are experiencing homelessness. But the fact is per HUD definitions, most of these individuals are not experiencing homelessness. It is important to note that most of these individuals would benefit from being in addictive disorder treatment programs.

## **Jackson:**

**State-wide Recommendations:** Jackson would benefit from all six State-wide recommendations, especially Recommendation 3 (eg source new housing opportunities, especially transitional housing).

**Good Samaritan Mission:** With the possible exception of the Council of Community Services Good Samaritan Mission in Gillette Wyoming, no other agency in the State does so much with so little than the Good Samaritan Mission.

## Next Steps

- \* Adopt and/or amend and/or reject the above recommendations.
- \* Assign each adopted recommendation to one person by name with a targeted timeline of implementation.
- \* Develop tactical steps to successfully implement the adopted strategic recommendations.
- \* As soon as possible start implementing - just get started!!
- \* Proactively meet with all levels of government in regards to the recommendations.
- \* Establish a checkup plan with a followup feedback loop to check progress and to make needed adjustments.

**Exhibit 1 -**  
**Program/Agency Site Visits, Tours, Meetings and Conference Calls (partial listing)**

**Community Tours (street observations, gridding, interviews, tours and site visits):**

Casper

Cheyenne

Evanston

Gillette

Green River

Jackson

Laramie

Riverton

Rock Springs

Sheridan

In addition to studying the above 10 most populous cities in Wyoming, Dr. Marbut also visited dozens of other communities with populations under 10,000 like Afton, Buffalo, Ethete, Lander, Rawlins and Wheatland.

Because of the formal contractual scope of work and long driving distances between communities, a couple communities were visited only once, whereas the communities with more issues were visited multiple times.

**Local Liaisons:**

Robin Bocanegra - Cheyenne

Chuck Fidroeff - Jackson

Dr. Brian Kaumo - Green River and Rock Springs

Karla McClaren - Casper and Laramie

Melissa Frandsen Novotony - Riverton

Todd Richins - Sheridan

Mikel Smith and Tatyana Walker - Gillette

Michelle Tholl - Evanston

**Large Group Community Forums (approximately 303 total people):**

Casper

Cheyenne and Laramie

Evanston, Green River and Rock Springs

Riverton

Gillette

**Individual and Small Group Formal Interviews and Visits:**

Kristie Arneson  
State of Wyoming - Department of Family Services  
Senior Policy/Legal Analyst and Assistant IV-D Director

Susie Arnold  
Volunteers of America Northern Rockies  
Director Youth Services & Homeless Outreach

Carrie R. Blase  
Interfaith of Natrona County  
Executive Director

Robin Bocanegra  
COMEA  
Executive Director

Don Calvert  
COMEA / Wells Fargo  
Chair / Financial Advisor

Sarah Carroll  
Laramie Soup Kitchen  
Head Chef and Outreach Coordinator

Brad Christensen  
Good Samaritan Mission  
Men's Coordinator

Reed J. Clevenger  
City of Green River  
City Administrator

Karl E. Cline, MA, MBA  
Peak Wellness Center  
Chief Executive Officer

Lucy Cone  
Almost Home Wyoming  
Executive Director

Linda Cornell  
Sweetwater County Community Nursing Service  
Best Beginnings

Shannon Cranmore  
Homeless Education and Title1-D Subpart 1  
Program Manager

Jayne Culvell  
Interfaith-Good Samaritan  
Social Work Intern

Patrick G. Davidson  
City of Gillette  
City Administrator

Chief Deputy Rowdy Dean  
Evanston Police Department  
Chief Deputy of the Department

Jen Dyer  
Self Help Center  
Executive Director

Chuck Fairbanks  
Y.E.S. House  
Assistant Director

Chuck Fidroeff  
Good Samaritan Mission  
Executive Director

Haylee Fleming  
Interfaith-Good Samaritan  
Social Work Intern

Melissa Frandsen-Novotony  
Volunteers of America  
Service Coordinator

Deanna Frey  
Seton House  
Executive Director

W. Patrick Goggles  
Northern Arapaho Tribal Housing  
Executive Director

Pete Gosar  
Downtown Clinic  
Executive Director

Laura Griffith  
Recover Wyoming  
Director

Tristean Grover  
Fremont County Good Samaritan Center  
Executive Director

Brenda Hanlon  
Interfaith-Good Samaritan Food Pantry  
Food Rescuer & Pantry Director

Martin Hawes  
Recover Wyoming  
PATH Program Assistant

Paul Heimer  
United Way of Albany County  
Executive Director

Tess Holmes  
Interfaith - Good Samaritan  
Client Services Manager

Brad Hopkins  
Wyoming Rescue Mission  
Executive Director

Scott Hoversland  
Wyoming Community Development Authority  
Executive Director

Rita Isaacson  
Sweetwater County School District 1  
McKinney-Vento Homeless Liaison

Kathleen Jacobson  
COMEA  
Vice Chair

Micki Jaramillo  
Self Help Center  
Safe House Director

Chief Tom Jarvie  
Green River Police Department  
Chief

Erin Johnson  
State of Wyoming - Office of the Governor  
Senior Policy Advisor

Brian Kaumo, PH.D.  
Sweetwater Family Resource Center  
Executive Director

Lori Kempter, MS, PPC  
Family Promise of Cheyenne  
Executive Director

Chief Brian Kozak  
Cheyenne Police Department  
Chief of Police

Sabrina Lane  
Wyoming 2-1-1  
Executive Director

Laura Leigh, AICP and CFM  
City of Green River  
Director of Community Development

Kimberley Lionberger, MSN, RN  
Sweetwater County Community Nursing Service / District Board of Health  
Director

Corrine Livers  
State of Wyoming - Department of Family Services  
Economic Security Programs Administrator

Lori Longfellow  
Inside Connection  
Executive Director

Ann Lucas  
COMEA  
Treasurer

Karla McClaren  
State of Wyoming - Department of Family Services' Homelessness Program  
Program Director

Hon. Billy Montgomery  
City of Gillette  
Councilman - Ward 2

Bobbie Nielsen  
HMIS  
Wyoming Project Manager

Tracy Obert  
Council of Community Services  
Housing Programs Manager

Vicki Orcutt  
Hope House / Wyoming Rescue Mission  
Founder / Former Chair

Hon. Marian Orr  
City of Cheyenne  
Mayor

Duke Overfield  
Good Samaritan Mission  
Kitchen Coordinator

Chief Dwane J. Pacheco  
Rock Springs Police Department  
Chief of Police

Lily N. Patton, MSW  
Community Action Partnership of Natrona County  
Housing First Program Manager

Rachel Rose Peery  
Northern Arapaho Tribal Housing  
Administrative Assistant

Trish Peoples  
Unaccompanied Students Initiative  
Board President

Todd Richins  
Volunteers of America  
Director of Business Development

Hon. Pete Rush  
City of Green River  
Mayor

Korin Schmidt  
State of Wyoming - Department of Family Services  
Director

Trish Simeroth  
Intermountain Division - The Salvation Army Goodstein Hope Center  
Major (Corps Officer)

Mikel Smith  
Council of Community Services  
Executive Director

Amy Spieker  
Cheyenne Regional Medical Center / Laramie County Community Partnership  
Director Community Health & Analysis / Executive Director

Casey Starr  
Y.E.S. House  
Transitional Living Program Coordinator

Stacy Strasser  
Juvenile Justice Services of Fremont County / Unaccompanied Students Initiative / WrapAround Wyoming  
Case Management Specialist / Board Member / Director

Kim Summerall-Wright  
Casper Housing Authority  
Executive Director

Michelle Tholl  
State of Wyoming - Department of Family Services  
District 3 Manager

April Thompson  
Rock Springs Public Housing Authority / Housing & Community Resources  
Executive Director / Supervisor

Gena Tilton, RMA  
Crossroads Healthcare Clinic  
Coordinator

Ruth Troyanek  
Albany County Public Library  
Library Director

Deanna Trumble  
First Stop Help Center - Salvation Army Service Unit Extension Office  
Executive Director

Mike Vercauteren  
Interfaith - Good Samaritan  
Executive Director

Marilyn Dymond Wagner, PCSW, MSW  
Community Action Partnership  
Executive Director

Tatyana Walker  
Y.E.S. House  
Development Director

Dr. Paul J. Washburn, MD, MPH  
HMI - Health Medical Institute  
Owner Director

Selau Weekes  
Intermountain Division - The Salvation Army Goodstein Hope Center  
Social Services Director

Chuck West  
Cheyenne Homes  
CCIM

Michelle Widmayer  
Eagles Hope Transition  
Executive Director

Monica Jennings Woodard  
Cheyenne Regional Medical Center  
CRMC Financial Navigation

Conversations and interviews with numerous individuals experiencing homelessness

Conversations with a variety of law enforcement offices across the state

Conversations with numerous area citizens and merchants

Conversations with several individuals from the faith-based community

**Formal Tours, Site Visits and Other Activities:**

1421 West Lincolnway Tour (Cheyenne)

Albany County Public Library Site Visit (Laramie)

Campbell County Commissioners - Presentation at Regular Posted Meeting (Gillette)

Campbell County Public Library (Gillette)

Center of Hope - VOA Northern Rockies (Riverton)

Cheyenne Site Visits of Key City Parks (Cheyenne)

Cheyenne Site Visits of Key Gathering Sites (eg Atlas Hotel, Hitching Post Inn, Pioneer Hotel, etc. - Cheyenne)

Cheyenne Site Visits of Potential Alternative Sites (Cheyenne)

COMEA Tour (Cheyenne)

COMEA Executive Committee and Board Meetings (Cheyenne)

Council of Community Services Food Pantry and Way Station I Tour (Gillette)

Council of Community Services Soup Kitchen (Gillette)

Downtown Clinic Tour (Laramie)

Eagles Hope Transitions Tour (Riverton)

Family Promise of Cheyenne Tour (Cheyenne) \*\*

Family Promise of Cheyenne Members of the Board \*\*

First Stop Help Center (Lander)

First United Methodist Church Soup Kitchen Tour (Lander)

Food for Thought Site Visit (Casper)

Fremont County Good Samaritan Center Tour (Riverton)

Interfaith-Good Samaritan Food Pantry Tour (Laramie)

Joshua's Storehouse Pantry & Distribution Center Site Visit (Casper)

Laramie County Library (Cheyenne)

Laramie Soup Kitchen Tour (Laramie)

LifeSteps Campus and 12<sup>th</sup> Street Clinic (fka Healthcare for the Homeless - Casper)

Natalie House (Cheyenne)

People Assistance Food Bank Site Visit (Sheridan)

Poverty Resistance Food Pantry Site Visit (Casper)

Poverty Resistance Thrift Shop Site Visit (Casper)

Raven Crest Apartments Site Visit (Casper)

Recover Wyoming (Cheyenne)

Saints Cyril & Methodius Catholic Church Soup Kitchen (Rock Springs)

Sally's House - Salvation Army's Cheyenne Corps and Community Center (Cheyenne)

Seton House Tour (Casper)

State of Wyoming Department of Revenue Liquor Division Vacant Warehouse Site Visit (Cheyenne)

Sweetwater Family Resource Center (Rock Springs)

The Salvation Army Good Samaritan Hope Center Site Visit (Casper)

Unaccompanied Students Initiative Tour (Cheyenne)

Welcome Mat - Wyoming Coalition for the Homeless (Cheyenne)

Wyoming Homeless Collaborative Annual Meeting (Wyoming's Continuum of Care)

Wyoming Rescue Mission Tour (Casper)

Y.E.S. House (Gillette)

\*\* A note about Family Promise - In the interest of full disclosure, Dr. Robert Marbut serves on the national Board of Directors of Family Promise. Until this research project, Dr. Marbut had not visited neither of the two local Family Promise affiliates nor met any of the Family Promise staff from these two affiliates.

## **Exhibit 2 - Robert G. Marbut Jr., Ph.D. Biography**

Dr. Robert Marbut has worked on issues of homelessness for more than three decades: first as a volunteer, then as chief of staff to San Antonio Mayor Henry Cisneros, next as a White House Fellow to President H.W. Bush (41, the Father), later as a San Antonio City Councilperson/Mayor-Pro-Tem and more recently as the Founding President & CEO of *Haven for Hope* (the most comprehensive homeless *transformational center* in the USA).

In 2007, frustrated by the lack of real improvement in reducing homelessness, and as part of the concept development phase for the *Haven for Hope Campus*, Dr. Marbut conducted a nationwide best practices study. After personally visiting 237 homelessness service facilities in 12 states and the District of Columbia, he developed *The Seven Guiding Principles of Homeless Transformation* which focuses on root causes and recovery, not on symptoms and short term gimmicks. Since then, Dr. Marbut has visited a total of 910 operations in 27 states, plus Washington, DC and Mexico, DF, and has helped hundreds of communities and agencies to dramatically reduce homelessness. He has consulted with more communities and organizations than anyone else in the USA.

These *Seven Guiding Principles of Transformation* are used in all aspects of his work to create holistically transformative environments in order to reduce homelessness.

He earned a Ph.D. from The University of Texas at Austin, Austin, Texas in International Relations (with an emphasis in international terrorism and Wahhabism), Political Behavior and American Political Institutions/Processes from the Department of Government.

He also has two Master of Arts degrees, one in Government from The University of Texas at Austin and one in Criminal Justice from the Claremont Graduate School. His Bachelor of Arts is a Full Triple Major in Economics, Political Science and Psychology (Honors Graduate) from Claremont McKenna (Men's) College.

Dr. Marbut also has completed three post-graduate fellowships, one as a White House Fellow (USA's most prestigious program for leadership and public service), one as a CORO Fellow of Public and Urban Affairs, and one as a TEACH Fellow in the Kingdom of Bahrain and the State of Qatar (1 of 13 USA educators selected). He was also a member of the Secretary of Defense's Joint Civilian Orientation Conference (JCOC-63) 2000 class which focused on Special Operations. JCOC is the Secretary of Defense's premier civic leadership program.

### **Contact Information:**

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