

*Program and Service-level
Collaboration*

1.4

**A RESPONSE TO HOMELESSNESS IN
PINELLAS COUNTY, FLORIDA:
AN EXAMINATION OF PINELLAS SAFE HARBOR AND
THE CHALLENGES OF FAITH-BASED SERVICE
PROVIDERS IN A SYSTEMS APPROACH**

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The primary purpose of this chapter is to introduce the systems approach to homelessness that Pinellas County, Florida, has developed around a 470-bed ‘come-as-you-are,’ entry portal shelter called Pinellas Safe Harbor (PSH).¹ The approach was devised, in large part, by Robert Marbut, a homelessness consultant and the founding CEO and president of Haven for Hope in San Antonio, Texas, a shelter that helped San Antonio address their structural issues related to homelessness. As with any systems approach to homelessness, the PSH-centred system had to bring together various levels of government and civil society in order to address the multi-faceted issue of homelessness. In this case, before any of Marbut’s recommendations could be implemented, he had to ensure that (a) the various levels of government were committed to working with one another, (b) law enforcement leadership – in particular the St. Petersburg Police Department and the Pinellas County Sheriff’s Office – were open to changing their culture related to the criminalization of homelessness, (c) there was a high probability of convincing public officials and tax payers of the cost-effectiveness of the approach and (d) a critical mass

of service providers, including a number of key faith-based organizations (FBOs), were willing to cooperate in the formation of a newly designed integrated system.

This latter concern over the participation of service providers is what initially piqued our interest in PSH. In particular, we were interested in the challenges associated with bringing FBOs and service providers into a government-run systems approach to address homelessness. In general, FBOs have a long history of advocating for and addressing the needs of the homeless and in many cases they are better placed than government agencies to effect changes in the services typically provided to people experiencing homelessness (Winkler, 2008). In the case of PSH, a number of high-profile faith-based service providers opted not to participate formally in the establishment of the system, most notably the well-resourced Catholic Charities of St. Petersburg. As of Summer 2015, Catholic Charities remained largely outside of the system coordination and integration concentrated in PSH, although it was acting as an important next-level point of contact for some chronically homeless people transitioning out of

1. In this chapter, we use the term ‘systems approach to homelessness’ to mean a formalized, coordinated and integrated system or systems that bring together design, funding, operations and service delivery.

PSH and into more permanent housing. This chapter highlights some of the challenges facing FBOs such as Catholic Charities when considering the integration of their services into a broader system.

We have organized this chapter into five sections. Section one provides a brief history of how a systems approach to homelessness developed in Pinellas County. Section two considers the initial systems planning led primarily by the homeless consultant. Section three examines the

emergence of two overlapping and mutually supporting countywide systems: one that was largely administrative in nature and one that used PSH as its hub. Section four highlights the various roles FBOs play in the system and a number of challenges they present to the system. The fifth and final section highlights key factors that contributed to the formation of the system that developed around PSH. This final section also identifies and critically assesses a number of outstanding questions and concerns with regard to the system as it has developed.

“THE CITY WITHOUT A HEART”

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In late December 2006, more than a hundred homeless people erected a tent city on four acres of vacant land owned by the St. Vincent de Paul Society South Pinellas, a popular centre providing some 500 meals a day to Pinellas County Florida’s hungry, homeless and working poor.² Just three kilometres (two miles) west of downtown St. Petersburg, Florida and next to the heavily travelled Interstate 375, the vacant lot had become overgrown with weeds and was, prior the newly settled residents cleaning it up, full of trash and debris. Early on, residents had established rules for the tent city and each resident signed a contract that outlined the duties people would carry out while living there, including spending at least four hours a week picking up any trash, cleaning the portable toilets and working in the tent city office. For many residents, it was the first night’s sleep they had had in months. Living among people they could trust, residents said they felt secure while sleeping and weren’t afraid that their belongings would be stolen during the night. For many, the tent city provided a sense of community and belonging (St. Pete for Peace, 2006).

From the outset, residents believed that their makeshift city was only a temporary measure addressing the lack of housing and adequate services while a longer-term solution was worked out by city, county and state officials. During the 1990s and early 2000s, downtown St. Petersburg had experienced tremendous growth, with multi-million dollar condominiums going up and ambitious plans for economic development projects along the city’s picturesque waterfront. But along with revitalization the city saw a rise in the number of homeless people living on the street, which was attributable to a lack of affordable housing, inadequate government support services and a slowing Florida economy. St. Petersburg and Pinellas County officials began to express their concerns over the increasing concentration of visible homeless persons near the city and the need for “containment” (Ulferis, 2007). The tent city only exacerbated those concerns.

2. Pinellas County has a population of 900,000 people. It includes 24 incorporated cities, including St. Petersburg, Clearwater and Pinellas Park. St. Petersburg is the largest city in the county.

In early January 2007, Pinellas County officials called an emergency meeting to address the tent city and problems created by the concentration of homeless persons near St. Petersburg. At this meeting, officials agreed that St. Petersburg's homeless situation constituted a crisis and immediate measures were needed. Although city officials could not force the residents off the site, since the tent city was on private land owned by St. Vincent de Paul, law enforcement could intervene, they argued, because the tent city violated a number of city ordinances, including those related to public hazards and safety. City officials made it clear that St. Vincent de Paul would be fined anywhere from one dollar to \$250 a day if it did not evict the tent city residents and remove their tents by Friday, January 12th. St. Vincent de Paul conceded, stating it would comply (Ulferis, 2007).

Although residents of the camp requested more time to make alternative arrangements, St. Vincent de Paul chose to comply with city ordinances and closed the site as requested. Uprooted once again, many of the former residents moved a few blocks away to two different locations. Tragically, a few days later two homeless men were found beaten to death, one of whom had been a resident in the tent city. The tension between the homeless and St. Petersburg city officials immediately escalated and city officials declared the homeless situation a state of emergency. On January 19, 2007, approximately two-dozen police officers raided the impromptu tent cities, citing numerous public hazard and safety code violations. They destroyed the tents with box cutters and knives, even while many of the residents were still in their tents (Raghunathan & Ulferis, 2007). Online videos of the tents being destroyed by the police went viral, sparking national outrage. It even prompted Fox News to call St. Petersburg, "the city without a heart" (DeCamp & Nohlgren, 2010).

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Although the tent city had been destroyed, the homeless situation was far from resolved. As city and county political leaders, police departments, the sheriff's office, the homeless people themselves and people advocating for the homeless considered a variety of options to resolve the homelessness crisis, Catholic Charities of St. Petersburg came forward in Fall 2007 with a stopgap proposal to donate 10 acres of land on the outskirts of Clearwater, Florida and to establish a 'tent city' emergency shelter on the donated land. Catholic Charities offered to set up tents, feed people and provide various social and health-related services. In return, St. Petersburg and Pinellas County would donate approximately a million dollars to run the shelter as a six-month pilot project. Known as Pinellas Hope, the 'shelter' (or the "bureaucratized and controlled tent city," as skeptics initially called it) opened its doors on December 1, 2007, with the support of the City of St. Petersburg and Pinellas County. What was supposed to be a six-month pilot eventually turned Pinellas Hope into the second largest emergency shelter currently operating in Pinellas County, with a program for almost 300 homeless men and women and a mission to provide a safe living environment and support to become self-sufficient (De Camp, 2009).

Even though Pinellas Hope relieved some of the pressure in the months following the forced closure of the tent cities, the homelessness crisis in Pinellas County continued over the next three years without the implementation of any further significant measures. During this time, tension had been mounting among some government officials as law enforcement officers continued to arrest homeless persons for violating ordinances related to panhandling around the St. Petersburg area, prohibiting the storage of personal belongings on

public property and making it unlawful to sleep outside at various locations. Already in January 2007, the Pinellas-Pasco Public Defender had announced that he would no longer represent indigent people arrested for violating municipal ordinances to protest what he called excessive arrests of homeless individuals.

The Great Recession of 2008 only ratcheted up tensions as the homeless population in Pinellas County increased. Counting homeless can be controversial (Wasserman and Clair, 2010), but according to Richard Linkiewicz, who was a police officer for the City of St. Petersburg and a homeless-outreach officer during the height of the economic crisis, there were 5,500 homeless in Pinellas County in 2008. By 2009 the number had risen to approximately 7,500, including 1,300 children in homeless families (Bazar, 2009). In March 2010, there were 46,391 filings for foreclosure in Florida, up by 70% over March 2009 filings. Indeed, in 2010, Florida ranked second in the United States in the number of foreclosures (State of Florida, Department of Children and Families Office on Homelessness, 2010: 3). According to the U.S. think-tank The National Alliance to End Homelessness, by 2011 the Tampa-St. Petersburg metropolitan area (which includes Pinellas County as well as neighbouring Hillsborough County) had the highest rate of homelessness in the United States (National Alliance to End Homelessness Report, 2011:

50). In this area there were 57.3 homeless people for every 10,000 residents. According to some estimates, there were about 16,000 homeless people in the Tampa area and one in five of them were children (Hirschhorn, 2012).

In October 2010, the City of St. Petersburg, with the support of Pinellas County, hired an outside consultant, Robert Marbut of San Antonio, Texas, to draft a strategic plan to address the crisis. A former White House fellow in the George H.W. Bush administration and a former chief of staff to San Antonio Mayor Henry Cisneros, Marbut delivered the central phases of his eight-phase “Strategic Homelessness Action Plan” in March 2011. In essence, the plan was a proposal to create a system of coordinated and integrated homelessness services in Pinellas County. At the core of the plan was the creation of a countywide system designed around an ‘entry portal’ service facility for chronically homeless men and women. One of Marbut’s recommendations was to convert an empty jail facility, which would be known as Pinellas Safe Harbor (PSH), into the countywide hub that would align the ‘service magnets’ (e.g. food, bathrooms, showers, shelter and safety) for the chronic homeless and as the hub for service providers, including case management, healthcare and legal assistance staff.

DEVELOPING A SYSTEMS APPROACH

In 1995, the Department of Housing and Urban Development (HUD) began to require communities to submit a single application for McKinney-Vento Homeless Assistance Grants in order to streamline the funding application process, to encourage coordination of housing and service providers on a local level and to promote the development of the Continuum of Care (CoC) initiatives at the regional or, in the cases of urban centres, local levels. In essence, a CoC is a regional or local planning body that coordinates housing, services and funding for homeless families and individuals through nonprofit providers, the state and local governments (U.S. Department of Housing and Urban Development, HUD Exchange, Continuum of Care). It provides programs and services for people experiencing homelessness, helps rehouse them and works toward self-sufficiency. The hope was that a more structural and strategic approach to housing and services would emerge by requiring communities to submit a single application.

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An important tool used by the CoCs is a software program called the Homeless Management Information System (HMIS). The HMIS collects “client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness” (U.S. Department of Housing and Urban Development, HUD Exchange, Homeless Management Information System). It is an electronic administrative database that is designed to record and store information on the characteristics and service needs of homeless persons. Each CoC uses a software solution that complies with HUD’s data collection, management and reporting standards. One key feature of the HMIS is that it facilitates a reasonably accurate census of both sheltered and unsheltered homeless populations over a full year and establishes Point-in-Time (PIT) counts. By using standard HMIS, then, CoCs make applications for funds based on data that is consistently collected, managed and reported across communities. When the City of St. Petersburg and Pinellas County hired Marbut in Fall 2010 to develop a strategic action plan, there was virtually no formal coordination among government agencies. If there was any coordination in the county, it was largely through a variety of homeless coalitions and church groups working in relatively loose association with each other around advocacy, sheltering and feeding. As a result,

one of Marbut’s initial steps was to provide a set of guiding principles to establish a unifying vision for the plan. He offered the following seven principles:

1. Move to a culture of transformation (versus the old culture of warehousing).
2. Work toward co-location and virtual e-integration of as many services as possible.
3. [Develop] a customized case management system in which one person coordinates the services in a customized manner.
4. Reward positive behavior because this will increase responsibility and privileges.
5. Have consequences for negative behavior so that there are proportionate consequences that encourage responsibility.
6. Stop external activities such as ‘street feeding’... and redirect to a co-location.
7. Stop panhandling because it enables homelessness (Marbut, 2011: 38).

For Marbut, these principles were not vague philosophical concepts but, rather, achievable, even if controversial, outcomes that would drive activities in the plan. Focusing almost exclusively on chronically homeless individuals – that is, not families – Marbut aimed to establish “transformational communities,”

which are, he argued, an essential part of the “overall service system design, structure and operations (e.g. systems approach)” (Marbut, 2014: 9).

Marbut’s efforts to establish a system around a “transformational community” involved an eight-phase analysis of the homeless situation in Pinellas County. Phase one consisted of an in-person inventory and review of the homeless-serving services throughout Pinellas County through formal and informal site visits. Phase two and three focused on research on and an assessment of the types (quality) and capacity (quantity) of services available in Pinellas County. These phases were conducted simultaneously because of the interconnectivity between needs assessment and gap analysis. Phase four involved in-person meetings with government officials, staffers and volunteers from government, business, faith-based, non-profit, civic and educational agencies. This phase was crucial in development of the system for it was here that Marbut began finalizing commitments. Phase five to seven were also conducted simultaneously because of some technical overlap. Phase five was a review of national best practices, phase six was the identification of action steps and phase seven was the submission of the final report. Phase eight, the final phase, was the visioning, development and eventual start-up of an “entry portal” (Marbut also called it a “transformational housing portal”) and service facility for men and women of Pinellas County (Marbut, 2011).

Marbut’s initial assessments in phases one through four focused primarily on the areas of design, funding, operations and service delivery. In terms of the state of the homeless sector as it had developed to 2011, the final report highlighted the considerable number of service providers in the community; however, it

stated, the “services are neither strategically nor formally coordinated within an integrated system, especially at the tactical level” (Marbut, 2011: 4). This meant, for example, that services provided by different organizations often conflicted with one another, resulting in clients having to choose one of several needed services. The report recommended that the overall homeless system in Pinellas County should be streamlined, transformed and re-branded so that all solutions are countywide coordinated initiatives.

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In terms of funding, the final report concluded that most of the agency funding and service delivery funding in Pinellas County had been “agency centric,” and not coordinated or strategic and that at times this situation had created competition among service providers and misaligned objectives. The final report recommended that funding be proactively coordinated. It stated funding “should be pooled, coordinated and allocated based on strategic objective outcomes” (Marbut, 2011: 5). Moreover, the streamlined integrated services and funding must include the two largest emergency homeless shelters, Pinellas Hope and PSH, which were not previously included.

The final report called for the transformation of operations in the homeless-serving sector. It cited the need to establish one lead organization to coordinate service decisions being made countywide in an integrated system. Service agencies within the newly designed system were encouraged to embrace national best practices in their operations. It called for the development of a robust master case management system. This master case management system would enable case managers and assigned case staff to follow through with clients as they progressed through the system. It would also allow for the coordination of

other services, including healthcare, legal assistance and educational training. Because it had master case management capacity, the HMIS, called the Tampa Bay Information Network (TBIN), needed to be upgraded to serve as a proactive case management tool within the integrated system. Finally, the entry portal and hub of the newly integrated system, PSH, first had to be adequately equipped, both in terms of infrastructure and trained personnel, to accommodate the enhanced activities and, secondly, the relationship between the 470-bed PSH and the Pinellas Hope tent facility needed to be strengthened as Pinellas Hope provided a next step toward permanent housing.

In terms of service delivery, one key recommendation, and one of the most controversial, in the final report was that all street feeding cease and be redirected to the entry portal, the service hub in the system and to service programming. While not outright recommending the criminalization of street feeding, as has been the case in other urban centres (Stoops, 2012), the report asserted that street feeding had to be redirected to PSH or stopped. Additionally, system stakeholders and particularly law enforcement as well as the media would need to play a crucial role in educating restaurant, supermarket and convenience store staff about the 'enabling' effects of street feeding. Churches and other FBOs also needed to understand that street feeding likely meant that those being fed were not involved in programming that could help them transition off the streets. According to the final report, these outreach efforts would be effective only if there was an integration of service delivery and an improved master case management system in place, which could

be achieved with an upgraded HMIS/TBIN.

We should highlight the fact that the final report did not anticipate or recommend rapid re-housing or Housing First, as it is often called, to address the systemic problems of homelessness. This is in spite of the fact that, since 2008, the federal government has been attempting to fund rapid re-housing initiatives (e.g. the United States Interagency Council on Homelessness, 2015). Indeed, the recommendations in the final report are rooted in the more traditional CoC model, which makes housing conditional upon a client's enrollment in service programming, including health care, mental health support and job re-training. The Housing First model, by contrast, is based on the premise that housing is a right, rather than a privilege, and that the CoC model can too often lead to the dehumanization of people experiencing homelessness (Padgett et al., 2015). The homeless advocates and FBO executive directors we interviewed were fully aware of the ethical challenges presented by the PSH shelter-continuum approach and at least one FBO executive director raised ethical concerns about Marbut's approach and the political motivations supporting Marbut's plan. Yet most supported the formation of the PSH, though some quite reluctantly, because there were no other viable options and there was a pressing need for greater service coordination and support. There was, for example, no local political will at the county and municipal levels to invest in Housing First initiatives but there was political will, whatever the motivations, to support efforts to provide new facilities and enhanced support to homeless people.

IMPLEMENTING COORDINATED AND INTEGRATED SYSTEMS

It is important to note that, in the final report, Marbut is essentially calling for the development of two countywide systems that are overlapping and mutually supportive – (1) a macro-level system that concentrates on administrative and financial leadership and (2) a micro-level system developed around PSH. The formation of the first system had at least three drivers: (a) accessing government funding channels; (b) responding to HUD’s insistence that local CoCs work collaboratively in the design, funding, operations and service delivery in the homelessness sector; and (c) responding to the final report’s recommendation to establish a single countywide body to ensure the coordination and integration of services. For many years, Pinellas County had two homeless initiative leadership organizations: the Pinellas County Coalition for the Homeless (PCCH) and the Homeless Leadership Network (HLN). PCCH had a mission to provide community education, advocacy, program support, capacity building and technical assistance for the communities, agencies and organizations concerned with homelessness and to secure government and private funding for needed homeless services. HLN focused more on the policy matters and it consisted of 35 elected officials, community leaders and institutional representatives. HLN was the planning body in charge of addressing local homelessness. The final report called for “one streamlined organization that has only one vision/mission, one board, one chair and one CEO” (Marbut, 2011: 4). In direct response to this recommendation, PCCH and HLN merged, in February 2012, to become the Homeless Leadership Board (HLB).

The HLB consists of eight elected officials and 13 community leaders. The 13 community leader positions on the board are allocated to ensure broad stakeholder representation. Four members are service experts, two represent FBOs, two represent county businesses, one sits as a representative of the Juvenile Welfare Board, one represents healthcare

providers, two members are at-large representatives and one member must be homeless or formerly homeless (Pinellas County Homeless Leadership Board Inc.). The HLB is now the lead organization in the coordination of the wide-ranging homelessness services in Pinellas County. The HLB also acts as the CoC for Pinellas County, which means it serves as the point of contact for government funding through HUD. The HLB does much of its work through two major councils, the Providers Council and the Funders Council, and their various committees which provide “comprehensive information and recommendations for action and approval to the Board” (ibid). The Providers Council and the Funders Council each has sitting representatives from the HLB.

The second system revolves around PSH. This system emerged primarily for pragmatic reasons. In late 2010, just as Marbut had agreed to work with St. Petersburg, Clearwater, Pinellas County and a coalition of other major municipalities in the county, then Chief Deputy Sheriff Bob Gualtieri, “initiated a meeting with stakeholders from the judiciary, the Office of the State Attorney, the Office of the Public Defender and local incorporated cities to look at the inmate jail population more strategically. This dialogue started a conversation about how to reduce the number of nonviolent, homeless individuals in the Pinellas County Jail” (McGillen, Sinovich & Marbut, 2012: 4). The sheriff’s office had struggled with how to deal with the growing homeless population in Pinellas County and it was looking for a way to keep homeless people out of jails and off the streets. Like many cities in the United States with a high number of homeless people, municipalities in the county had adopted a number of quality-of-life ordinances, some of which had been invoked in early 2007 with the removal of the tent city. Many stakeholders, including the sheriff’s office, understood that placing nonviolent, chronically homeless in jail not only overloads the

law enforcement/legal corrections system, it also fails to address the root causes of homelessness. Bluntly put, the cycle of (a) arresting non-violent homeless individuals, (b) jailing them for 12–24 hours, (c) perhaps meeting with the public defender, (d) releasing them and (e) starting the cycle over again with a rearrest had essentially clogged up the system with low-level non-violent offenders. Using the corrections system to address street homelessness was hugely costly. Moreover, Gualtieri and the sheriff's office in general understood that jails were not equipped to deal with some of the root causes of homelessness, such as mental health issues, life skills, job training or placement and medical care (Marbut & Simovich, 2012: 24–25; Wasserman and Clair, 2010: 69–96). Prior to 2011, however, there were no viable alternatives available to law enforcement.

In dialogue with Marbut in late 2010, the Pinellas County Sheriff's Office proposed that a recently closed minimum-security facility in Clearwater could be converted to serve as the entry portal shelter. In an attempt to raise the necessary funds to start the conversion, the proposal included the use of a government grant intended to develop jail diversion initiatives. Furthermore, the sheriff's office offered to take the lead in managing the facility, training its personnel, providing the majority of operational funding and coordinating local social service agencies in the facility (McGillen, Sinovich & Marbut, 2012: 5). Indeed, PSH is unique in the United States in that it is the only shelter of its kind to be managed by the law enforcement and correctional communities and still function as hub for a wide range of service providers, including FBOs, non-profit agencies and government agencies.

As of Fall 2015, PSH operates as a 24 hours a day, seven days a week, 365 days a year one-stop “come as you are” emergency homeless shelter and service provider for chronically homeless adult men and women. It operates with a budget of approximately \$1.8 million (Lindberg, 2015). It houses an average of 425 people a day and provides three meals a day, a shower and a mat (or bed) to sleep on. It has a customized master case management system. There are a team of case managers onsite to work with the residents as they begin the process toward stable housing and self-sufficiency. Social workers hired by the county offer needs assessment and coordination of services and placements. Directions for Living, a local non-profit organization, also provides case managers who offer needs assessment, mental health and substance abuse referrals. Westcare, a group of non-profit organizations, offers substance abuse evaluations, counselling and recovery services. A number of support groups run classes at PSH, including Alcoholics Anonymous and Narcotics Anonymous. Other groups offer HIV awareness, life skills, vocational rehabilitation, pedestrian safety and transitional help classes. A variety of religious groups provide worship services. Once a week, basic healthcare and referrals for medical, dental and mental health services are provided by Pinellas County onsite. However, one significant gap in service has been the lack of full-time onsite medical staff, which has resulted in PSH having to access emergency medical services for fairly routine medical

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events (*Tampa Bay Times*, 2014). All meals at PSH are provided by FBOs and the meal service is coordinated by Metropolitan Ministries (PSH, Services; & Pinellas County Sheriff's Office Statistical Summary, 2014).

In Spring 2014, the City of St. Petersburg hired Marbut to conduct a follow-up review of homelessness in the city. In June 2014, Marbut delivered his action plan, which included a reassessment of the street-level homeless population in the city, a re-evaluation of the homeless servicing capacity and six recommendations (Marbut, 2014). On the whole, Marbut concluded that efforts to develop a system around PSH had continued to yield desirable outcomes: for instance, between June 2010 and March 2014 night-time street-level homelessness in the city had decreased by 84%. He did, however, observe that there were weaknesses in the system that needed immediate attention: (a) St. Petersburg's failure to meet its financial commitments to support PSH, (b) the shuttering of the Pinellas County Sheriff's Homeless Diversion Program, (c) the decline in training and engagement on the part of St. Petersburg Police Department (SPPD) resulting in decreased positive interactions between the police and people who are experiencing homelessness, (d) the redirection of the SPPD's homeless outreach teams (HOTeams) away from chronically homeless individuals (the HOTeams had become focused on families), (e) gaps in service at a faith-based facility near downtown St. Petersburg that created high concentrations of homeless on the streets between 6:00 a.m. and 11:00 a.m. and (f) the need for increased capacity, largely through the Juvenile Welfare Board of Pinellas County, to address homeless families. These identified weaknesses in the system provided the basis for each of the six recommendations in the action plan.

It is important to note that five of the six weaknesses identified by Marbut are directly linked to government

agencies and that one is associated with a FBO, namely the Society of St. Vincent de Paul South Pinellas. Marbut observed that St. Vincent de Paul's overnight sleeping program, which provided 70 sleeping spaces, was, in effect, a part-time program that closed its night shelter at 6:00 a.m. This meant that individuals were back on the street early in the morning, many milling about the facility awaiting the opening of a weekday services program at 11:00 a.m. To address this service gap, Marbut recommended that St. Vincent de Paul become "a self-contained 24/7

holistic program that addresses the root causes of homelessness" and offers the same number of daytime slots as nighttime mat-bed slots (Marbut, 2014). Moreover, "all services offered by the Society of St. Vincent de Paul, including meals for the chronic homeless population, should be tied to active participation in case management services" (ibid).

This recommendation that active participation in case management services should be a prerequisite for homeless people to receive access to food raises both ethical and practical challenges. Ethically, critics of the CoC model, such as those who support Housing First approaches, argue that the conditions placed on access to food and housing reinforces a power relationship that subjugates homeless people as sick people in need of healing or sick souls in need of salvation (Wasserman & Clair, 2010). Practically, this recommendation points to a fundamental challenge not only in the Pinellas County systems approach but in any systems level approach that includes a mixture of government agencies and FBOs; that is, with the exception of any centralized funding being linked to FBO activities, there are virtually no formal levers in place to ensure that an FBO remains aligned with system-wide coordination and integration. There are, of course, informal measures, such as 'naming and shaming,' but these can often breed resentment, retrenchment and even further marginalization in the system.

On the whole, Marbut concluded that efforts to develop a system around PSH had continued to yield desirable outcomes: for instance, between June 2010 and March 2014 night-time street-level homelessness in the city had decreased by 84%.

FBOs IN THE SYSTEM

In Pinellas County, FBOs play an essential role in efforts to provide shelter, housing and services, especially food services. According to HUD's 2014 "CoC Homeless Assistance Programs Housing Inventory Count Report," the largest emergency shelter for adults in Pinellas County is PSH, with a maximum of 470 beds. The next three largest shelters are run by FBOs: Catholic Charities of St. Petersburg has 294 beds; Homeless Emergency Project (HEP) has 136 beds; and St. Vincent de Paul has 77 beds. Of the nine main emergency shelters for adult individuals in Pinellas County, five are run by FBOs. Pinellas County has 1,131 beds available for emergency shelter for adult individuals and 559 of these beds are run by FBOs. Furthermore, a number of FBOs, including Pinellas Hope and HEP, have been integral to efforts in the county to provide permanent or semi-permanent housing. In fact, in November 2014, Pinellas Hope announced that it would be creating permanent housing for an additional 76 people, bringing the total permanent supportive housing capacity on its ten-acre campus to just a little more than 150 units.

FBOs have taken the lead in feeding street-involved people in Pinellas County. According to the HLB's "Pinellas County Homeless Resource Guide," of the 15 organizations in the county that provide meals, 14 of these are run by FBOs. As previously mentioned, Metropolitan Ministries is responsible for managing food services at PSH. Based in Tampa, in Hillsborough County, Metropolitan Ministries has been working with homeless people since 1987, providing food, shelter and services to families. In 2004, they adopted a distributive model of feeding the hungry, which meant that they provided food to local churches so that the churches could feed the hungry and homeless in their own communities. One of these outreach partnerships was with Pastor Brian Pierce, who ran a non-profit organization called Taking It to the Streets Ministry, in Pinellas County. When PSH was founded in 2011, food service was initially managed through the jail commissary, which meant that feeding the residents of PSH was relatively expensive. Operating on a tight budget, the Pinellas County Sheriff began to reach out to the community for support. In response, Pierce offered to give up his ministry so that Metropolitan Ministries could provide food services at PSH. Seeing value in a coordinated food service plan, Tim Marks, the CEO of Metropolitan Ministries, met with then Deputy Sheriff Gulateri and eventually

agreed to take on this responsibility (Marks, Personal Communication, April 29, 2015).

A number of FBOs in Pinellas County have chosen not to participate directly in the system developed around PSH; however, all of the larger FBOs, such as Catholic Charities, the Society of St. Vincent de Paul, HEP and the Salvation Army have chosen to play a role on the HLB Providers Council. In fact, Michael Raposa, executive director of St. Vincent de Paul South Pinellas, is a two-term chair of the HLB, a position he holds until the end of 2016.

The Providers Council consists of service providers either serving people experiencing homelessness or those at risk of becoming homeless. They provide formal input and provide recommendations on all CoC policies and procedures that come to them via the HLB. They also raise and discuss critical issues that may be occurring in the homeless arena; as a result, there may be collaboration among the agencies to work toward a solution to address issues and problems. At times, this group makes decisions regarding state or local funding applications. It is through the Provider's Council that the HLB stays in close communication with the provider community (Abbott, Personal Communication, April 29, 2015).

FBOs have taken the lead in feeding street-involved people in Pinellas County. According to the HLB's "Pinellas County Homeless Resource Guide," of the 15 organizations in the county that provide meals, 14 of these are run by FBOs.

There is little doubt that there is potential for greater communication among the FBOs in Pinellas County as a result of their involvement in the newly revised HLB governance structure. However, there is not much evidence that these FBOs in Pinellas County have experienced any significant changes in their day-to-day operations. In other words, those FBOs outside the PSH system continue to operate independently, much as they did prior to the establishment of the new HLB. From our perspective, the lack of coordination between service providers outside the PSH system has created a number of serious problems which are actually adversely affecting homeless populations in the county. For example, there is an FBO in Clearwater that provides meals from 9:30 a.m. to 11:00 a.m., 365 days a year. It proudly promotes the fact that they serve more than 200 people each day. When we asked stakeholders in the area about why this ministry continues to offer food at this time, knowing that few, if any, of those they feed would be able to access the many programs and services offered during this time, a common response was “this is the time that their volunteers are able to serve meals” and “they believe they are meeting the homeless ‘where they are.’”

We are sympathetic to the various challenges that face this organization and many similar FBOs. Let us highlight three of them: First, many FBOs with a homeless ministry tend to focus on activities or outputs – for example, how many meals they serve, how many individuals they engaged, the number of beds and so on. This makes sense given that Christian organizations, in particular, understand their work as a response to the gospel teaching to give food to the hungry, drink to the thirsty, shelter to the stranger, clothing to the naked and care to the sick (cf. Matthew 25: 31–36). It can be difficult for an FBO to think in terms of objectives or outcomes – that is, once we have provided food, drink, shelter, clothing and care, how do we assist this person in moving from a state of crisis to a more self-sustaining state, all the while preserving the person’s human dignity? One reason why this is so difficult is that many

FBOs have not historically been able to provide the necessary suite of services required to address the range of issues facing people experiencing homelessness.

Second, many FBOs have not had an opportunity to consider how their activities or outputs are contributing to long-term and broad-based change (or in the parlance of strategic planning, they have not developed a ‘theory of change’). It is difficult for some FBOs, particularly those that are smaller or prone to working independently, to get a clear sense of what role they are playing in making changes in the culture in relation to other providers and in individual lives. By participating in a system, FBOs become part of the planning process around coordination and integration – they see firsthand how their activities or outputs contribute to system-wide agreed upon objectives or outputs. In Pinellas County, there is a tremendous amount of potential for this type of collaborative work through the HLB and Providers Council and especially through the system built around PSH.

And third, it can be a challenge for FBOs with homeless ministries to operate under a government-run umbrella organization, such as a sheriff’s department or a secular lead agency, perhaps a privately funded one-stop centre or an organization like Goodwill. There are many potential factors at play: for instance, concern over the loss of autonomy, concern over the quality of the outreach programming, anxiety over the loss of revenue if activities are not unique and, most fundamentally, concern over a shift in identity. In many respects, these factors are common to all service providers contemplating participation in a systems-level approach. But for many FBOs, it can be especially difficult to align their mission with any changes to the way they engage not only homeless people but also one another. If an FBO’s executive director or board is unable to see this alignment, this will be enough to persuade an FBO to opt out of a system.

CONCLUSION

The system designed around PSH is one built on a ‘first-step programming’ or ‘low-demand shelter’ for nonviolent homeless men and women who do not have to be alcohol or drug free to reside there (Marbut & Simovich, 2012). In our observations of the system that developed around PSH, there are at least six interrelated factors that facilitated broad-based stakeholder support of PSH: First, the situation in Pinellas County fit well with the entry portal or hub model proposed by Marbut. Prior to 2011, there were a high number of chronically homeless people in the county and there was very little coordination and integration of services. PSH provides the structure needed to sustain the system that has developed around it. Moreover, according to Marbut, it is a cost-effective approach: the average cost per person to run PSH is about \$20 a day, whereas the daily per person cost to run Pinellas County Jail is about \$106 a day (ibid). For many politicians, the cost-effectiveness of PSH was a determining factor in choosing this approach. In sum, the system that emerged was a coming together of often diverse motivations: from those advocating for enhanced funding, coordination and integration of services that were of value to street-involved people to those seeking a cost-effective way to contain homeless populations.

Second, there was a core group of stakeholders in the county who committed to working collaboratively: elected officials, the public defender’s office, law enforcement agencies and a variety of service providers. This willingness to collaborate was limited, however. Given the political climate in Pinellas County, there was, for example, no appetite to consider rapid re-housing or systemic factors that contribute to homelessness such as poverty, the health care system or the region’s political economy.

Third, while a major concern at the outset, the placement of PSH in a more industrialized area in Clearwater and away from traditional homeless gathering sites in St. Petersburg and near Clearwater Beach meant that public officials did not have to deal with NIMBYism (not in my back yard). Perhaps fortuitously, the Pinellas County Sheriff had an unused jail facility that could be affordably transformed into a homeless facility large enough to accommodate a high number of residents and key service providers.

Fourth, there was strong official leadership to champion the system. In particular, Deputy Sheriff and, as of November 2011, current Sheriff Bob Gualtieri saw the inherent pragmatism of Marbut’s recommendations, offered to provide the facility and committed to train sheriff staff to operate PSH and to engage homeless men and women in a constructive way at the street level.

Fifth, there was a commitment on the part of officials and providers to use an enhanced master case management program, the HMIS/TBIN, when engaging homeless individuals. This management tool is essential in tracking the progress of individuals and the services they have required as they move toward permanent housing and stability. There is, however, a gap in the ability to continue tracking the progress of

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individuals who move from PSH and into more permanent housing. While Pinellas Hope and HEP are key partners with PSH in the effort to provide more permanent housing, tracking the progress of residents as they engage these and other housing providers has been difficult.

And sixth, a critical number of faith-based service providers have agreed to work directly with PSH, including Metropolitan Ministries in the key area of food service. Additionally, major FBOs such as Catholic Charities of St. Petersburg and the Salvation Army continue to provide integral services in the broader countywide system, which often function as next phase services after leaving PSH.

In terms of national trends and funding opportunities for homeless initiatives, PSH and the systems approach that

Pinellas County has adopted are bucking the trend toward rapid re-housing and, in the process, finding it difficult to draw on funds available to Housing First approaches. On our last visit to Pinellas County in Summer 2015, we were still unable to find anyone with either political or financial influence interested in supporting a major Housing First initiative. Moreover, the CoC model is strongly embedded in the current system, though many stakeholders we spoke to would welcome a change toward Housing First. In our view, PSH developed as a compromise among various stakeholders at a crisis point in the county. The next step in the evolution of the systems approach in Pinellas County may well be a consideration of how to encourage and support rapid re-housing and a long-term commitment to address the many causes of homelessness. Here there remains much work to be done.

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