

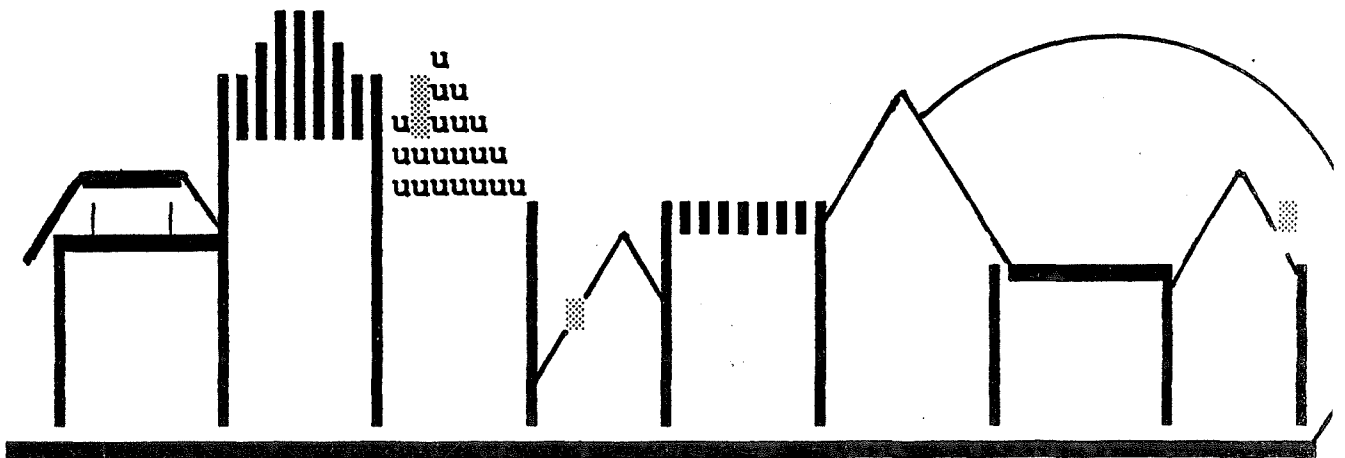
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John R. McKernan, Jr.
Governor

Lynn Wachtel
Commissioner

Leonard Dow
Director of
Community Development

Department
of
ECONOMIC AND COMMUNITY DEVELOPMENT
OFFICE OF COMMUNITY DEVELOPMENT

March 25, 1991

Governor John R. McKernan, Jr.
Members of the 115th Legislature

Dear Governor McKernan, Members of the 115th Legislature:

The following report, "by Sundown", is the result of the Maine Interagency Task Force on Homelessness and Housing Opportunities effort to define and find solutions to the problems facing people who are homeless or at risk of becoming homeless. It includes the identification of existing services, and the recognition of gaps that exist in those services.

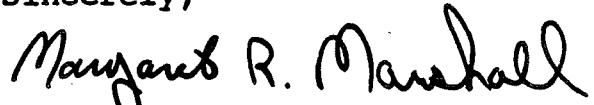
This report is the initial step in finding solutions that will move us toward ending the tragedy of homelessness. Because the problems leading to homelessness and the complex needs of people who are homeless cut across so many agencies in the public and private sector, the Interagency Task Force believes that ideally it should transition into a board or similar body having staff support and a small grants program. However, it recognizes that in light of current economic conditions and budget constraints, this may not be possible at this time. With the understanding that the Task Force will have limited time and resources available, it feels that it can continue to address some gaps in services through better coordination. In Addition, it believes it can continue to disseminate information relative to programs under the federal Stewart B. McKinney Homeless Programs. The Task Force chairperson can continue to act as the point person in facilitating technical assistance inquiries with appropriate Task Force members.

The Interagency Task Force has asked me to extend their appreciation to you, Governor McKernan and the members of the Legislature, for recognizing this problem and for your commitment to finding solutions toward ending homelessness in Maine.

The Task Force was moved by what it learned in talking to people that are homeless as well as those trying to help our less fortunate citizens. They, and so many others gave willingly of their time and interest to assist this initiative. This report would not have been possible without the cooperation and assistance the Task Force received from numerous sources. To all those who contributed, the Task Force is most appreciative.

Lastly, the members of the Task Force, working together, contributed an exceptional amount of time and effort to this initiative. Each participant should be commended for their continuing dedication and commitment.

Sincerely,

A handwritten signature in black ink that reads "Margaret R. Marshall". The signature is fluid and cursive, with the first name "Margaret" and last name "Marshall" clearly legible.

Margaret R. Marshall
Chairperson
Interagency Task Force
on Homelessness and
Housing Opportunities

BY SUNDOWN
A REPORT ON HOMELESSNESS IN MAINE



MARCH 1991

PREPARED BY:

**The Interagency Task Force on Homelessness
and Housing Opportunities**

**INTERAGENCY TASK FORCE ON HOMELESSNESS
& HOUSING OPPORTUNITIES**

REPORT

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HOMELESS

Tommy

Tommy is a 17-year-old with behavioral problems due to a stroke at age 15.

Tommy's behavior did not improve after two years of counseling. Although Tommy had not finished high school, he no longer attended. There was no transportation and a full day was too much for him. Tommy's family could no longer cope with his behavior as he became more difficult and started to abuse substances.

The family asked to have him psychologically evaluated and he was deemed not at risk of suicide or becoming violent; therefore, able to continue to live at home.

At that point Tommy's father gave the family a choice, either he leave or Tommy leave. The family took Tommy to an emergency shelter and signed him in. Stays at the shelter are limited to three weeks.

Tommy was abandoned by his family. The caseworker began contacting different agencies to obtain services: housing, food, funding, rehabilitation, etc.

After finding most facilities filled, he pieced together a plan. Because the caseworker was under time constraints and had a heavy case load, he was unable to investigate all the programs and services that might be available.

Tommy is 17, therefore, he does not qualify for most programs which are designed for adults. Social Security is available, but it can take up to eight weeks before a check arrives. Food stamps are not available without an address. Tommy does not qualify for protective services for children because he has not been abused; just abandoned.

Ken

Ken is a 22-year-old male diagnosed by the State Mental Health Institute as brain-damaged from chronic substance abuse and by the Community Mental Health Center as paranoid schizophrenic. He has been convicted of unlawful sexual contact with a minor and has been placed on probation. He receives a monthly Social Security check because of his disability. He is homeless.

The Tri-County Intensive Case Management Program has been working with Ken Trying to find him a place to stay, keep him on medication, and in treatment. He has been treated at Jackson Brook Institute and at the Augusta Mental Health Institute. He's gone to jail because he did not comply with the conditions of his probation: engaging in treatment. The Court has worked with the Mental Health Case Manager and his Probation Officer to mandate the treatment he needs; both mental health and substance abuse.

When he's not been in residential treatment or jail, the intensive case manager, probation officer, and an Area V Mental Health Program worker have tried to find housing for him. Ken has repeated the cycle of getting into some type of housing arrangement; with his parents, his sister, in his own apartment, at the YMCA. He does well for a few days, gets into drinking or drugs, spends all of his money, gets violent, and is moved to an inpatient unit or jail. He usually stays there for a short time, a few days to a week, and is discharged. When discharged, he has no money for food, housing, or clothing, and even if he did, no one wants him around because of his violent behavior. The cycles are beginning to change in that his inpatient stays are getting longer as his condition continues to deteriorate.

Joe and Sally

Joe and Sally are new to the problem of being homeless. They are self-conscious and keep apologizing for their problem. Joe and Sally owned their own construction company and were on top of the world one year ago. Now they have gone through bankruptcy and are homeless.

They lived in a van with their four children and then with Joe's brother and his family in one 9'x 10' room. Then they moved into a partially completed shell of a house; all that was left after the bankruptcy.

The weather turned cold and Joe and Sally realized that they could not stay in the shell any longer. They had tried everything they could to survive on their own. They were scared, tired, and didn't know where to turn. Luckily someone brought them to Rural Community Action Ministry (RCAM) in Leeds and again luckily, a family had just moved out of one of their two family shelters. Joe and Sally, with the four children moved into the trailer and now have a warm place, at least for awhile. They transported the children to the site of the house under construction so their education would not be interrupted while the house was being built.

Jane

Jane and her three children were living in an old shack which she inherited from her mother. The temperature outside was ten degrees; the temperature inside only thirty degrees. The children, two boys, ages 9 and 3 are both blind, and an 8 year old daughter, were inside, cold and tired.

Jane has some wood, but it was green and not burning well. There was no running water in the shack. The odor from the overused chemical toilet was very strong. A representative from Rural Community Action Ministries had been there before. RCAM had helped keep the shack standing for the past ten years, but this situation was the worst it had ever been. Although Jane did not want to leave her home, she agreed to move into RCAM's family shelter for the winter months. Since the shelter was located in her hometown, the children's education continued without interruption.

Jane is typical of the struggling single parent family in Maine. She spends her meager funds wisely and survives with as little as possible; she cannot afford more. RCAM, in cooperation with Community Concept's Community Action Agency, and Maine State Housing, will help get a trailer and a new well. But she is still in constant debt with medical bills for her children. In addition, transportation costs are very difficult for her but necessary, as the children must go into the city for treatment. Jane has no car and there is no regular transportation from her rural area. She is constantly in debt and in need of help.

FINDINGS

These cases were presented to the Task Force when, as part of a pilot project, members met with service providers and interested persons in Leeds and Lewiston. The Task Force wanted to learn about the extent of homelessness, the services available, problems encountered, and possible solutions. Members of the Task Force represent seven state agencies as well as several non-state agencies. Together, they had a wealth of information they could share with people struggling with finding the right service, at the right place, at the right time for clients on their caseloads threatened with homelessness.

It was gratifying to the Task Force members to provide information to case managers or service providers that would help them get services for a client or potential funding for a service. It was equally gratifying to hear from these same people how they managed to coordinate a group of services for an individual or family with their problems of homelessness.

The Task Force learned about a number of shelter facilities in urban areas. In Lewiston, there is a shelter for homeless men, another for alcoholic men, and one for adolescents. There is also a shelter for battered women, with or without children. A respite care unit is available on a limited basis for mentally ill adults suffering relapses. In Leeds the Rural Community Action Ministries, which serves 12 rural towns, has two trailers which can house families for up to three months.

Vacant apartments abound in substandard buildings in Lewiston. Costs for housing that meets even minimal standards is often beyond the financial means of those existing on SSI or AFDC or even those working for minimum wage. Adequate, vacant housing stock in the rural areas is almost non-existent. Trailers or mobile homes have been patched and "winterized" to provide basic, although unsafe, housing for some. Hand-built homes created over several generations often provide the only "affordable" housing.

Homelessness is easily seen in the shelters and on the streets of Lewiston as in other urban areas across the state and across the nation, but homelessness can not be seen in Leeds. People in rural areas move in with friends, neighbors, or relatives, and stay as long as they can; they move on to other homes unless they are fortunate enough to find a shack they can "fix up a little."

Lewiston and Leeds represent only two areas of the state; one urban and one rural. Each has its own character, population mix, and economic conditions. But the Task Force believed that the problems of people without homes in other urban areas are similar to those who live in Lewiston, and that those in rural areas would experience many problems similar to those

without homes in Leeds.

For those who are homeless, the need for financial assistance is paramount and immediate. Sources of help are limited. Often, specific criteria must be met before help is available. Many applications take weeks to process.

General assistance is administered by local municipalities using local funds and state tax dollars. This program has the most flexibility to help people who are threatened with losing their homes or those who have already lost them. Eligibility is based on need, people do not have to prove they fit into a certain category before applying for assistance. Youth under 18, although eligible for services on their own, often must prove they are emancipated or indicate that they are abused in some way by their parents before receiving assistance.

The general assistance program provides security deposits, help with rent or food, emergency shelter, and utility payments. But, especially for small towns, there is little information about existing services and rarely enough personnel to do more than provide funds to meet the applicant's request. There's never enough money to meet all the applicants' needs.

AFDC or Aid to Families with Dependent Children is limited to the provision of funds equal to 50% of the nation's poverty level, and is available only to families headed by single parents. The program contains a component that provides additional funds to meet emergencies, such as broken heating or plumbing systems, evictions, disconnection of utilities, or any crisis or disaster that may threaten families' basic needs. The program is limited to one payment of no more than \$500 per year per family. Supplemental Security Income provides a monthly payment to persons with disabilities and limited or no other income. The application process is lengthy and requires extensive documentation of income and disability.

Food Stamps help families and individuals who have a mailing address; people living on the streets, in cars, or in shelters may have no address. The federally-funded Women, Infant, and Children's (WIC) program provides vouchers for nutrition supplements, such as milk and fruit juice to women with small children. Specific eligibility criteria limits this service to a relatively small group of people.

Community Action Programs (CAP'S) administer several programs funded by the state and federal governments including the Home Energy Assistance Program (HEAP), that provides a benefit to assist in paying winter heating bills. Benefits range from about \$250 to \$400 for the heating season depending on the area of the State and other factors. Because funding is

limited and the cost of fuel is high, the HEAP benefit often pays only a small portion of a household's total energy costs. Currently, while every eligible person who applies for a benefit receives one, there are many eligible people who do not apply.

CAP's also provide help with energy emergencies, weatherization activities, and furnace repair. CAPs administer the Temporary Emergency Food Assistance Program (TEFAP) and help with local food banks. Food banks, soup kitchens, and shelters also can apply to receive food commodities directly from the State.

Cap agencies and three other non-profit agencies operate Headstart programs. Children of families without homes receive high priority. However, even with increasing funds the program can serve only about 30% of the eligible children.

Local civic and religious organizations may help families facing the prospect of homelessness with food, clothing, shelter, and other needs; but few have sufficient resources to meet all the basic needs.

Job training employment can play an important role in breaking the cycle of homelessness. Unfortunately, many agency representatives and others who spoke at the Task Force meetings in Lewiston and Leeds reported that there are long waiting lists for most job training programs. The ASPIRE program, which provides the greatest hope for individuals receiving welfare benefits may have waiting periods of over two years in some areas. This program combines education, job training and supportive services to assist individuals, including those without homes to achieve self-sufficiency.

Current Job Training Partnership Act and Stewart B. McKinney regulations state that a person who is homeless is automatically assumed to be eligible for services. However, people without homes may find it difficult to make necessary appointments or wait for training programs to start.

One Department of Labor funded employment and training project in Portland is working because it works with people in shelters and on the streets and provides a range of supportive services as well as employment and training assistance.

Employment and job training programs lack the full range of services, which may be required to assist persons without homes. When families are faced with the problems of providing shelter and food, health care takes a back seat. However, it is just these factors that place people at great risk of serious illnesses, especially communicable diseases such as tuberculosis, hepatitis, bacterial and viral infections, as well as anemia, or chronic respiratory conditions.

People living in shelters rarely have access to regular health care services. Emergency rooms are frequently the only source of care. General assistance pays for emergency care at Medicaid rates. Although most who lose their homes may be eligible for Medicaid and/or SSI benefits, many do not apply. In some cases, there are outpatient clinic services, well-child clinics, or community health centers available to people without homes. Children in shelters often have not received recommended immunizations and, therefore, are at high risk for vaccine preventable diseases. Additional risks for these children include exposure to tuberculosis and HIV infection.

Good health depends on the ability to pay for health care with insurance or other funds. Without good health people can not work and provide food and shelter for themselves and their families. Those most at risk of homelessness, because of lack of adequate health care include teens, especially pregnant or parenting teens; families whose employers provide no insurance benefits or who rely on unemployment benefits; families who have high medical costs due to chronic illnesses or children with developmental abnormalities.

People will not use the system unless they are treated as individuals, without discrimination. In addition, completing applications and complying with all requirements present obstacles unless there is someone available to help.

Individuals with mental illness may access a variety of services including emergency/crisis services, case management, inpatient and outpatient, treatment, residential, supportive housing and vocational services. However, availability of these services throughout the state is uneven and not always accessible to people who are homeless and mentally ill. The Department of Mental Health and Mental Retardation is committed to the development of a comprehensive mental health system which makes sure that each person's needs are met within an individual's community, to the maximum extent possible.

The need for appropriate services to people who are mentally ill has caused considerable concern during the course of the Task Force's deliberations. This concern has heightened with the recent AMHI Consent Decree, which directs the development of the aforementioned comprehensive mental health system. It also requires that quality care be provided at AMHI and that there be fewer residents at AMHI as services are developed. Concern has been expressed about patients being returned to the community who are not able to live independently and whether community resources will, in fact, be available to meet their needs. Homeless shelters have reported serving people who have more serious mental illness.

A wide range of services are available for children including primary prevention, child development, family support, health services, foster care, out-of-home placements, treatment and child protection. However, access to these services is limited and many programs are only able to address part of the child's needs. Rarely is the entire fabric of a child's life taken into consideration with enough care to ensure supportive services are available at any given time and throughout the various transitions of a child's life.

Support services for those in need are limited in urban areas and rarely available in rural Maine, even when affordable housing is located. Transportation is a major problem. Without it, health care, day care, and working becomes difficult or impossible. Transportation is an important factor; with no job or a low paying job, the purchase and maintenance of reliable transportation becomes a drain on already limited resources. Some Transportation services are available statewide, but those services are usually limited to either specific client groups or for special purposes.

The Task Force found that in some cases the loss of housing is attributable to specific illnesses or problems. Large proportions of people in shelters were substance abusers, mentally ill, or both. In other cases, especially for women and children, they simply did not have the means, or the skills to support a household. Underemployment and the lack of well-paying jobs or job training drastically limits what people can pay for housing in rural areas. And, in all cases, the loss of a place to call home is connected with a loss of identity, a factor to a sense of hopelessness.

In other cases, the problem is simply a lack of affordable housing. The Task Force found that even though urban areas often had high housing vacancy rates, residential units were not affordable, because of the requirement of first and last month rent deposits. At times the cost of rental units may exceed a family's total income. Two adults working, part-time, at minimum wage, can not afford to pay average rent cost, a security deposit, as well as pay for utilities, fuel, food, clothing, and medical insurance.

There are more than 2100 Section 8 tenant-based Certificates and Vouchers available through Maine State Housing Authority and substantially more which are available through local public housing authorities. However, Maine State Housing Authority reports three thousand households currently on a waiting list for section 8 housing, with some of these households on the waiting list for a period of two years.

Another problem is landlords often are reluctant to renting to people discharged from mental health institutes, women who are

battered, single parents, and teenagers. They are fearful that those in these groups might cause damage to units, harm other tenants, or that partners of battered women will return. Finally, they all fear non-payment or late rental payments.

In rural areas, rental and permanent housing simply does not exist. Use of pre-1976 trailers, which are low cost, are often available, but are unsafe and a danger to the family. The purchase cost of a home in Maine has usually been beyond reach or a remote possibility for families on a fixed income. While the Task Force feels much has been accomplished in addressing the need for affordable housing, continued development of creative housing programs must remain a high priority.

The Task Force found teenagers, including teen parents, who lack safe, secure housing because they either do not qualify for assistance or processing applications for assistance takes too much time. Often they end up on the streets, using or selling drugs; prostitution may become a way of life for many of these teens. Survival on a day-to-day basis for teen parents allows little time for bonding and developing parenting skills, continuing education, or job training. Such deficits can lead child abuse, substance abuse, and neglect or abandonment of the children.

The Task Force compiled a listing of specific groups of people needing special or additional assistance when faced with the reality of homelessness:

- Adolescents
- Adults who abuse substances
- Adults with mental illness
- Single women
- Women with children
- Adolescents with children
- Families with underemployed wage-earners
- Women who are abused
- People with AIDS/HIV infection
- Migrant Workers
- Elderly Persons

Although each of these groups required specific clusters of services and a particular approach, the Task Force learned that people did not easily fit into these neat, distinct categories.

In fact, individuals frequently fit into several categories. Getting the services to people facing homelessness often required overcoming a series of obstacles.

The Task Force found time and time again that in order to qualify for particular services people needed to fit into

narrowly defined program guidelines, both in emergencies or when trying to become self-sufficient. Frequently people in need find they are the wrong age, the wrong sex, have the wrong illness, or the wrong problem to qualify for available assistance.

The Task Force realized that to address homelessness, the needs of the individuals must be looked at and programs developed to fit their needs, not fit individuals in the present "boxes" to get them basic needed services. A system is needed that is client-centered rather than problem or service oriented.

The Task Force found a lack of knowledge about many services that are available through state and federal agencies and more importantly within their own communities. Communities were often unfamiliar with the services or specific requirements for accessing them. Funding sources often were not applied for, again, because the community, the agency, or the individual was unaware of the availability, or lack the resources (time, money, expertise) to pursue them.

The Task Force became aware that local groups had been formed to assess the extent of the homeless problem and develop strategies to deal with it. Yet, the Task Force was unaware of the extent of these efforts as were some of the service and shelter providers in the areas being assessed.

Communication or the lack of it, in both rural and urban areas is a serious obstacle to solving the problem of homelessness. Housing development groups, liaisons from mental health institutions, and service providers need to talk with each other about how they can help each other. Landlords might accept more "risky" tenants if they understood the needs of women, teens, and people discharged from mental health facilities. Landlords should feel that help will be provided, if they respond to the housing needs of these populations.

Creative financing for construction of affordable housing by both profit and non-profit developers needs to be encouraged, especially in rural areas. The identification of a lead resource in each community needs to be established. Unsafe trailers have to be replaced with sound, safe housing.

Just as the Task Force found a lack of services and shelter for the teenagers who are neglected, there was a strong indication that the same holds true for single women. Women who become homeless do not fit in the correct "boxes". Little is out there to help them. While there seems to be sufficient shelter beds throughout the state; few are available to women. The same holds true for women with children. Very little emergency and long-term shelter is provided for this group.

The present service system cannot cope effectively with people who present multiple problems. People are in unsafe, inadequate shelter, or have no shelter, while state and federal statutes, policies, regulations standards, and resource limitations result in providing services by categories, such as mental illness, alcohol or drug abuse.

Perhaps more than anything else, the Task Force learned that providing houses for people without homes did not necessarily solve the problem of homelessness. As there are many reasons for losing a home or for being without a home - unemployment, poor health, substance abuse, mental illness - there are as many service needs to address the problems. The loss of a home is always accompanied by the need for associated services: food, clothing, health care, transportation, child care, continued education for the children, and employment. Provision of services to address these identified problems can not simply be imposed on an individual or family without coordination by the providers.

The Task Force found many more issues and concerns expressed during our visits, such as the AMHI consent decree and what this means communities, federal and state regulations that require changes to respond to homelessness, lack of day care, affordable health care, and many more. The case histories at the beginning of this report illustrate a number of issues and problems facing people without homes or those fearing loss of their homes. They also identify problems with the system that need to be overcome before the problem of homelessness can be solved.

Tommy's caseworker didn't know all the services that might help Tommy or how to access some other services. The present service system does not recognize adolescents' needs for safe and decent housing when abandoned by their parents.

Ken's dual diagnoses of mental illness and substance abuse presents a particularly troublesome problem. Historically the treatment methods have been based on different philosophies; in fact, diametrically opposing philosophies, which do not allow for the two conditions to be diagnosed in one person. To say that the Task Force found lack of coordination of services in this case is an understatement. There was every effort to coordinate, but there was no basis on which the services could be coordinated.

The homeless condition of Ken was not caused by a lack of housing or even by lack of funds to provide housing. It was the combined problems of violence and unacceptable behavior brought on by abusing substances and not taking his medication for his mental illness.

Joe and Sally are typical example of a new group of people faced with homelessness. Because they have gone through bankruptcy, they have no credit, no jobs, and no shelter. The local community group, Rural Community Action Ministries' Director, who serves on the Interagency Task Force, is very aware of programs and services to help Joe and Sally. RCAM took advantage of a grant program through MSHA and loaned the family enough money to finish their home. Because the family was able to provide transportation, the children were able to continue school uninterrupted. Joe and Sally found good jobs, and the whole family is well on their way to putting their lives back together.

Jane has safe temporary housing and with coordination by RCAM, MSHA, and the community action agency, Jane will get a trailer and new well in the spring. Since the shelter is located in the same town, the children's education continues uninterrupted. However, many more services need to be coordinated before Jane can meet the basic needs of her family, and stave off the threat of homelessness.

RECOMMENDATIONS

COLLABORATION

Members of the Task Force in its struggle to develop means for dealing with the multiple and overlapping problems associated with homelessness agreed that they needed to identify the values that would underlie their recommendations.

"Every person in Maine has a right to decent and safe housing by sundown".

That value was adopted by the Task Force after completing the pilot project in Lewiston and Leeds. It's the bottom-line. Much needs to be done to develop affordable housing, to coordinate services to people threatened by homelessness, and to help people move into permanent housing arrangements. In light of the downturn of the economy and the dim prospects for immediate improvement, the very least that needs to be done is to assure that every person in Maine has or is offered shelter by sundown - every night.

The Task Force also recognizes that as the public budgets shrink in response to the general economic downturn, the number of people, adults and children, requesting shelter during 1991 will increase dramatically.

"If you don't get any help, call me back."

The Task Force heard repeatedly that people facing homelessness, or those trying to help, often did not know where to go. Anyone looking for assistance should be able to get some help from the first agency contacted. Often times,, even though that agency can not directly help, staff know of people or agencies that might be able to help. Giving that information could solve the problem. The Task Force would like to see all agencies that provide services to people currently without homes, or in imminent danger of losing their homes, accept responsibility for assisting and advocating on their behalf, until help or shelter is obtained.

In other words, the agency, even if it only has information, can ask a caller to "call me back" if they don't get the help they need; the implied promise is to stay with them, advocate, or get more information until help is found.

"People's needs should drive the services;
not the funding sources."

People facing homelessness don't fit into the neat, categorical funding streams developed by state and federal legislatures and bureaucracies. Some suffer from mental illness; some have substance abuse problems; some have both. There are families with children and children without family.

Women leave abusive homes with no place to go. Young women who are pregnant can not remain with their families. Many have no job skills or worse no high school education. Health care may be needed, but access requires insurance or money.

Each situation requires a different set of services to meet a different set of needs. There needs to be a way that a package of services can be developed to meet the immediate needs of people facing homelessness without finding the proper "box" of an eligibility category.

RECOMMENDATION:

1. The people of the State of Maine should accept these value statements as set out by the Task Force.

The issue of homelessness cannot be addressed by any one agency at any one level of government. Public officials at the local level see people in their offices facing the reality or prospect of losing their homes, but have few resources to provide living arrangements or access other services needed to obtain or maintain a home. They have limited knowledge of various potential resources available or how to access them. On the other hand, agencies at the state level may have selected services for a targeted group of people, but little to assist them in keeping their homes.

The number and types of services needed vary widely. Specialized treatment philosophies control the delivery of many services. With all of these variables it is imperative that services to people facing homelessness need to be developed and delivered within a collaborative environment. To establish such an environment, the Task Force recommends that:

RECOMMENDATION:

2. The Interagency Task Force on Homelessness and Housing Opportunities should be transition into a Board or similar body, the major function of which should be to support the development and maintenance of community groups organized to help people without homes or in danger of losing them. Members of the Board should represent state agencies and the private sector, similar to the representation of the existing task force. Sufficient staff support will be needed to carry out the functions of the Board.

Local community groups should include community members interested or involved in the problem of homelessness. Members could include persons at the local level responsible for administering General Assistance Funds and representatives of social service agencies, financial institutions, civic, religious organizations.

The Board would be responsible for the provision of technical assistance to these local community groups. The technical assistance would concentrate on accessing funds and packaging multiple funding sources and services to develop programs to meet local needs. It would provide the opportunity for various members of local groups and state groups to network with each other, to share ideas and information, to develop projects and programs, and to coordinate resources.

Technical assistance could be provided through the Board's staff in conjunction with a program of small grants (\$1-2,000) to stimulate the development of planning groups, obtain professional assistance to write grants to meet local needs, provide for needed legal fees, or any other item to help local communities grapple with the problems of homelessness.

Local community groups would work closely with the Board and the Executive Director in all phases of improving communications, advocacy, coordination, collaboration, and capacity building.

The Board should also disseminate information about programs, services and funding sources that will enable groups to use existing services more effectively and to capitalize on the use of existing services, programs, and funds. Members of the State Board would not only share information amongst themselves regarding the development of new programs, changing rules and regulations, they could also share that information with the local community groups through the staff.

Another major function of the Board should be the review (not as part of the approval process) of funding applications related to services for people affected by homelessness, program policies for their efforts on this population, and coordination of services and programs developed to serve people without homes. As a first step the Board should review all applications for Stewart B. McKinney funds, emanating from the State of Maine.

Because of its role as reviewer, the Board would gather a great deal of information about local and state programs, therefore, it should also act as a clearinghouse, providing information to individuals and agencies interested in applying for McKinney or other funds related to the issues of homelessness and affordable housing.

The Board should advocate within existing systems for needs of people who are homeless. It could, through review of all plans and reports produced by its agency members, assure these reports address specific needs of persons who are homeless regardless of the population that are otherwise addressed in the reports.

Finally, in carrying out the responsibilities of this Board the staff might intervene with state agencies or local programs on behalf of persons facing homelessness, who have been unsuccessful in obtaining critical services. The staff would act as a contact or lifeline to persons and providers in need of assistance. Information obtained through these interventions would be provided to the Board for development of a more appropriate system response.

ACCESS TO ARRAY OF SERVICES

The first step in responding to the issue of homelessness must assure that existing emergency shelters remain in place. These shelters most often run on a shoestring budget and rely heavily on the voluntary efforts of local religious and civic organizations and interested citizens. The hard work, donated food and furniture has saved lives on cold winter nights. The piece of legislation providing assistance to the shelters also appropriated another \$250,000 to assist people with the payment of security deposits. The second step is responding to homelessness is moving people from shelters to rents, which usually requires the payment of a security deposit. Therefore, the Task Force recommends that:

RECOMMENDATION:

3. The Legislature should continue to fund the emergency shelters at the same levels, \$500,000 per annum and the security deposit fund at least at the current level of \$250,000 per annum.

Once individuals and families end up in shelters a myriad of services are needed beyond just getting into a rent. Many families have no wage earner, and no means to pay for the rent. Without jobs there is no health insurance and, therefore, no health care. Children may have been moved out of their school districts to go into the shelter. The Task Force in keeping with its value of developing the services to meet the needs of the people in the shelters would like to see a variety of services available to people at the shelter.

RECOMMENDATIONS:

4. The Department of Labor should work closely with the staff in shelters, as well as with representatives of other service agencies, such as mental health centers, Community Action Programs, Department of Human Services, and city and town welfare programs to ensure the provision of a variety of services needed for people threatened by homelessness to achieve self-sufficiency.
5. Statutory changes to 20-A MRSA, submitted to the 115th Legislature by the Department of Education, to assure access to education for children and youth without homes should be supported. These statutes protect the rights of these children to a free and appropriate education, regardless of residence, in accordance with the Stewart B. McKinney Homeless Assistance Act, P.L. 100-77, Title VII, Subtitle B.
6. Educational programs regarding the life situations of people who are homeless need to be developed for health care providers. These programs should include:
 - Modification of immunization or physical examination schedules to maximize the present visit;
 - Modifying medication or treatment schedules, with a focus on on-site distribution of medication or treatments;
 - Objectively addressing the person's health condition as presented, including possibly more advanced stages of diseases and infectious conditions.

Of particular concern to this Task Force is society's response to children and their caretakers (mostly women) who represent the future as a society and are also its most vulnerable members. While there are many services available to children who are identified through a system such as education, mental health, and human services, there is no comprehensive system concerned about the basic shelter needs of children and families, which can act as a conduit and catalyst to bring together other service supports needed by individual children to be safe and to receive care and nurturance to grow to healthy adulthood.

RECOMMENDATION:

7. The Task Force recommends the child serving system include recognition and advocacy for basic shelter needs

The Task Force heard in particular about the needs of pregnant and parenting teens who find themselves without suitable housing and support. The needs of teen parents transcend the traditional boundaries of the educational, health delivery, community and social service system. Teen parents bring highly diverse backgrounds to the programs they may enter, particularly with respect to previous work experience, educational attainment, vocational aptitudes and interest, physical and emotional health status, child care needs, and overall life experience. It is safe to assume that the knowledge, skills, and abilities that they possess in these areas will be seriously deficient when related to age.

Because teen parents, by definition, are still children themselves, with limited life experience, their needs in many realms will frequently conflict with the needs of their young children. Because of their limited (and many times inappropriate) life experiences, teen parents require a great deal of assistance in using existing services. To attain meaningful success for teen parents often calls for a high degree of collaboration between and among many programs. Unfortunately, issues of confidentiality, mandated eligibility, service definitions, focus of control, and "territorial boundaries" frequently impede such collaboration.

The Task Force understands that currently there is an effort entitled "Success for Teen Parents" involving state and local representatives. The purpose of this effort is to use existing state and local resources to encourage and help facilitate Interagency case management, personal growth, access to health services (physical and emotional), education, training, and employment.

RECOMMENDATION:

8. The Task Force recommends continued development of this project and an emphasis on service development for pregnant and parenting teens.

While the Task Force explored the issues of homelessness, members were also confronted with the problems presented by persons who suffer from the effects of mental illness, substance abuse, or both. Provision of housing to persons in these categories will not alone solve the problem of homelessness.

The Task Force understands that the Department of Mental Health distinguishes between housing services and residential support services. The latter are oriented to enabling and assisting adults with serious and persistent mental illness to live successfully in the community. These programs are structured and staffed with an integral treatment and/or rehabilitation component. These programs also commonly have a clinically-based screening for admission with staffing and other structures appropriate to service-oriented environments.

Housing services operate as subsidize housing linked to services. The consumers tenancy in the housing is not conditioned on service considerations. While it is understood that the majority of the AMHI Consent Decree class members live independently, experience dictates that a large number of class members, including many of those now institutionalized, will require structured residential facilities. It is anticipated that the assessments now underway will underscore the need for such facilities to meet the downsizing requirements in the Decree.

RECOMMENDATION:

9. This Task Force supports the DMHMR philosophy to develop new housing resources to "bring people home" and make it possible for persons who have been institutionalized to live in safe, decent, affordable housing in their own chosen communities. Specifically, the Task Force supports the development of a comprehensive community mental health system for persons who are seriously mentally ill that responds to individual needs including those individuals who are homeless.

The Task Force heard the need for a responsive system for people exhibiting difficult, challenging behavior. The issues relating to people, who are not deemed to have a mental illness (after screening) but who present challenging behavior that puts their housing in jeopardy, need to be identified and addressed. Research shows that behavior which appears to come from mental illness may, in fact, be the result of substance abuse. Symptoms of psychosis will frequently subside after a short period (3 - 7 days) of detoxification and stabilization.

The Department of Mental Health and Mental Retardation has developed a series of monographs on the issue of dual disorders (mental illness and substance abuse). These monographs provide information and guidance on strategies for effective service delivery. This is particularly important, given the "walls" that separate the two professional systems. These walls include differences in historical development, treatment philosophies ("support" vs. "enable"), funding streams, and prescribed medications.

RECOMMENDATION:

10. This Task Force supports placement of much more emphasis in planning coordinating, funding, and delivery of services among mental health, substance abuse, and homeless provider agencies.

PREVENTION:

The Task Force found it extremely difficult to discuss the issues of homelessness without also discussing various means of prevention. It is not enough to come up with a coordinated response with appropriate resources after a person or family has lost a home. There were many areas where it seemed that either simple solutions or complex responses were indeed necessary to avoid losing an existing home.

Many people at risk of losing their homes live on the edge. As long as things remain on an even keel these people can retain their homes. However, even small events can become major catastrophes eventually resulting in the loss of their home. Many, although employed, work only part-time at minimum wage. They do not receive fringe benefits such as health insurance coverage. Any illness may threaten them with homelessness. Transportation may present a major hurdle. If the car, often an older model, breaks down, there is not enough money to fix it. Without transportation there may be no job.

RECOMMENDATIONS:

11. The Task Force recommends supporting those financial assistance programs, which are going to be increasingly critical in the current economic situation.
12. Establish advocacy for women, teens and people discharged from AMHI, with landlords. Recognize landlords' needs to feel that back-up help will be provided if they respond to needs.

Just the fact that a child's family does not have safe, decent ongoing shelter puts a child at risk in many domains. Maine has a national reputation for developing innovative, collaborative programming for children in need. However, continued categorical funding for children's services causes overburdened provider agencies to concentrate their creative resources to find dollars - diverting valuable attention away for the children in need.

RECOMMENDATION:

13. This Task Force recommends child serving agencies provide the community with the capacity to meet individual child needs.

The Governor's Task Force to Improve Services for Maine's Children, Youth and Families and the President's and Speaker's Blue Ribbon Commission on Children and Families are meeting to address the broad range of children's services. Also, The Department of Mental Health and Mental Retardation is working on an initiative which can build an array of services for school-aged children and adolescents with severe emotional disturbances, and provide support for their families. The recently completed research for the Bureau of Children with Special Needs provides the start of a data base on the problems of adolescents who are homeless.

RECOMMENDATION:

14. This Task Force supports all efforts made to improve the lives of children, youth, and their families, especially those most in need and without adequate and safe shelter.

Education, job skills, and job training are all critical service needs for many people at risk of homelessness. In addition, those with small children also face the need for child care to hold a job or obtain training for a better-paying job.

Adolescent parents face a nearly impossible task to try to complete their own education in order to become self-supporting adults, while caring for the needs of very young children. Those that are able to remain in school have a much greater chance of success in this endeavor. The additional assistance with child care and parent education can make this task possible.

RECOMMENDATION:

15. The State Board of Education should review school construction regulations and consider possible incentives for proposals which include child care and/or parenting centers for new construction and renovations of public schools.

Lack of housing stock posed a major problem in the rural areas. In some cases there simply is no housing, while in others the available housing not only does not meet minimum standards, it poses serious health and safety threats. Dealing with these problems requires a myriad of creative approaches.

RECOMMENDATIONS:

16. Encourage creative financing for construction by both profit and non-profit developers.
17. Identify a lead resource in each community and pool other resources through that one.
18. Build "self-help" housing with cooperation of lead agency and private industry, banks, and others by establishing partnerships with discretionary abilities to generate new housing.
19. Destroy unsafe trailers; these are not safe or financially sound replacement housing.
20. Encourage Comprehensive Plan writers to look at manufactured housing, rehabilitation, self-help stick built housing for the low-income portion of their plans.

PROGRESS REPORT

The Interagency Task Force on Homelessness and Housing Opportunities was established as part of the Maine Affordable Housing Alliance legislation, L.D. 1809 in August of 1989.

The charge of the Task Force has been to identify the resources available to persons who are homeless, persons at risk of becoming homeless and persons with special needs who fit either category. In addition the mission of the Task Force is to identify the gaps that exist in the delivery of those services and to make recommendations to the Governor and the Legislative Committee concerning the policies and programs serving this population.

The Task Force on Homelessness and Housing Opportunities comprises thirteen members representing seven state agencies which include Department of Corrections, Education, Human Services, Labor, Mental Health, Economic and Community Development, and the Division of Community Services. Maine State Housing Authority, Community Action Agencies, non profit housing development corporations, homeless shelters, municipalities, and low income residents also have a represented on the Task Force. A list of members is included in this report for your reference.

An organizational meeting was held in September of 1989 to elect a Chair and review the charge of the Task Force. Since that first meeting the Task Force has met on a monthly basis. In addition, subcommittees were formed and met in a series of planning meetings for special projects.

During the early part of 1990, the Task Force on Homelessness and Housing Opportunities worked to identify existing services for people who are homeless or those at risk of homelessness. A wide array of services provided by several State agencies, and a compendium of these services is included in this report. While many of these services have excellent track records in meeting the needs of this population, the Task Force recognized that much remains to be done in terms of filling gaps and expanding outreach efforts.

In March of 1990, to help identify the gaps in services, the Task Force visited homeless shelters and other facilities in Cumberland, York, and Penobscot Counties. The Task Force was impressed with local organizations efforts and levels of commitment to serving people who are homeless. We found that

this was often carried out with limited resources. Individually and as a group, Task Force members made a commitment to continue communication with shelter and service providers in an effort to find solutions to problems as they were identified. We concluded that through continued communication we could arrive at a better understanding of the gaps in services and how to begin to focus in on bridging those gaps.

In June of 1990, a subcommittee was formed to develop and submit an application for funding of a transitional housing demonstration project. The application was submitted to the Department of Health and Human Services, Office of Community Services, on July 2, 1990. The proposal requested funding of \$ 2,025,000. for four transitional sites in the State of Maine. The grant, if successful, will provide housing for fifty AFCD families in Augusta, Bangor, Biddeford, and Lewiston. * As of January, 1991, the State of Maine is still being considered for funding.

The Task Force continued to meet on a monthly basis and a plan was developed for a pilot project to be held in the fall of 1990. After several planning meetings, in September and October of 1990 the pilot project took place. Three meetings each were held in the City of Lewiston and the Town of Leeds. The purpose of the meetings was to communicate with local officials, area service and shelter providers on their concerns, issues and recommendations on the delivery of services to people who are homeless or at risk of homelessness. The Task Force was deeply moved by the plight of people who are homeless and the frustrations of those people trying to help. The findings from the meetings are included in the beginning of this report.

During the past sixteen months the Task Force on Homelessness and Housing Opportunities has met approximately thirty times. We will continue to meet in our efforts to finding solutions to the many problems that face people who are homeless or at risk of homelessness.

Upon request agendas and minutes from meetings are available.

*

The U.S. Department of Health and Human Services, Office of Community Services (OCS) notified Governor McKernan in February that Maine's application was not selected for funding. OCS selected three states which are New York, New Jersey, and Massachusetts. Upon further communications with OCS it was learned that while Maine was not selected, it was one of eight applications considered for funding in the final review.

APPENDICES

INTERAGENCY TASK FORCE ON HOMELESSNESS
AND HOUSING OPPORTUNITIES

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STATISTICS OF HOMELESS IN MAINE

Characteristics of Homeless Shelter Guests: 12/89-6/90

Emergency shelters served an estimated 4,713 different persons between 12/1/89 and 6/30/90. These figures will be conservative - the Oxford Street Shelter, located in the City of Portland, did not provide detailed information until May and June of 1990.

Median age of guests was 30 years. The youngest guest was less than 1 year old. The oldest guest was 90 years of age.

	<u>Number</u>	<u>%</u>
<18	818	19.7
18-29	1166	28.0
30-39	1014	24.4
40-49	619	14.9
50-59	322	7.7
60-69	161	3.9
70-79	46	1.1
80 +	11	0.3

Education:

	<u>Number</u>	<u>%</u>
8th grade or less	970	21.5
9th	422	9.4
10th	526	11.6
11th	297	6.6
12th	1764	39.2
13 - 15	378	8.4
16 +	<u>147</u>	<u>3.3</u>
	4504	100.0

1199 persons reported monthly income. The average income for those reporting was \$475 monthly.

Primary sources of income:

<u>Source</u>	<u>Number Reporting</u>
AFDC	130
City	44
Food Stamps	11
Social Security	752
VA	67
Job	367

Average length of stay was 27 days.

1 night	1450	34%
2 - 7 nights	1217	29%
8 - 30 nights	938	22%
> 30 nights	<u>641</u>	<u>15%</u>
	4246	100.0%

A number of persons admitted themselves to homeless shelters on more than one occasion.

<u>Number of times admitted</u>	<u>Number of persons</u>
2x	307
3 or 4x	171
5 + x	91

County of primary residence:

	<u>Number</u>	<u>%</u>
AND	300	6.8
ARO	193	4.4
CUM	1151	26.2
FRA	40	0.9
HAN	117	2.7
KEN	287	6.5
KNO	58	1.3
LIN	42	1.0
OXF	94	2.1
PEN	1088	24.8
PIS	32	0.7
SAG	80	1.8
SOM	72	1.6
WAL	77	1.8
WAS	75	1.8
YOR	297	6.8
OUT OF STATE	388	8.8
TOTAL	4391	100.0

DIRECTORY OF SERVICES
MAINE INTERAGENCY TASK FORCE ON HOMELESSNESS
AND HOUSING OPPORTUNITIES

MAINE DEPARTMENT OF LABOR

SERVICES

The Maine Department of Labor continues to provide services to homeless individuals in Maine through several programs.

Maine Job Service

The Maine Job Service provides employment related services to homeless individuals in the seventeen (17) local offices situated throughout the State. Five (5) of the offices have Employment Counselors on their staff to assist homeless individuals in overcoming barriers to employment. All of the offices are staffed with Employment and Training Specialists who may assist the homeless person find suitable employment by entering the individual into the statewide computerized Job Service Job Matching System. By registering for employment at any on Job Service, it is possible to access jobs throughout the State and, in some instances, across the nation.

In addition, there are eleven (11) Disabled Veterans Outreach Programs (DVOP) Specialists and ten and one-half (10½) Local Veterans Employment Representatives (LVER) positions in the Job Services offices. The veterans staff provides outreach, counseling and job placement services to veterans, including those who are homeless. The Job Service has begun working with homeless groups, service providers and shelters in some areas such as Portland. However, coordination between Job Service offices and homeless groups should be expanded.

The City of Portland's Homeless Employment Project is working with the Portland Job Service Office. A representative of the Homeless Employment Project recently spoke to the Job Service Employer Committee.

The Rural Farm Labor Committee has expressed interest in coordinating with Homeless groups and shelters to explore the feasibility of employing homeless individuals in farm labor. The group with representatives from the Department of Labor and the Department of Agriculture is considering a demonstration project at this time.

The Maine Job Training System

Maine's three (3) Private Industry Councils (PICs) implement Maine's Job Training System, in partnership with the Maine Department of Labor through a variety of State and federally funded programs, which provide for the training and upgrading of Maine workers. Recognizing that the needs of Maine's workers and businesses are changing as they adapt to new technologies and more competitive regional and worldwide markets, the goal is to provide every Maine citizen who needs

it, with an opportunity for training or retraining so that he or she will be better able to compete for the jobs in the future.

JTPA Federal Initiatives

IIA

The cornerstone of the Job Training System, provides education skills training and employment for economically disadvantaged people. Participants must meet federal eligibility guidelines. A recent U.S. DOL Guidance Letter states that a homeless individual is automatically considered economically eligible for JTPA programs unless proven otherwise.

Summer Youth Employment and Training Program (SYTEP IIB)

Places disadvantaged and at risk youth in public and private sector employment and provides many with basic educational training. This program coordinates with the Maine Job Service to place thousands of Maine youth each summer in the Governor's Summer Youth Jobs Program.

The Economic Dislocation and Worker Adjustment Assistance Act (EDWAA)

A comprehensive new dislocated worker training program that replaced Title III of JTPA on July 1, 1989. This new program requires increased local level planning and reinforces the importance of rapid response to displacement via the Rapid Employment and Training Initiatives (RETI) Team. It also encourages close coordination with the Trade Adjustment Assistance (TAA) program administered through the Job Service Division.

JTPA Set Asides

Three JTPA special grants are set aside from IIA funds for use at the Governor's discretion.

8% Funds

Set aside and targeted for education initiatives such as basic skills remediation, occupational training and upgrading.

6% Funds

Set aside to create incentives for Service Providers and generally used for unique program development and capacity building activities and to offset training costs.

3% Funds

Targeted to programming for older workers.

New Initiatives

Additional Support for People in Retraining & Education (ASPIRE)

This program builds upon the Department of Human Service's welfare and employment programs and the Department of Labor's and Private Industry Council's training system. By coordinating their services, this new initiative doubles the training and employment opportunities for welfare recipients. Basic education and training, combined with support services, will enable dependent adults to move into the workforce.

Strategic Training for Accelerated Reemployment (STAR)

STAR provides training and retraining for unemployed or displaced workers. By providing new skills to laid off workers, the program helps alleviate the mismatch between workers skills and the skills required in the workplace.

Maine Training Initiative (MTI)

The MTI provides funds for Occupational Training, On-the-Job Training, and Customized Training. The program allows the Jobs Training System to serve such groups as the working poor, displaced homemakers, older workers and others who may not qualify for federal JTPA programs. The program designs reflect local needs and local labor market conditions.

Health Occupations Training Project (HOT)

Responding directly to industry need, this project is intended to increase the supply of qualified workers in the health professions by providing recruitment, training, financial assistance and placement services to people entering the field. The project also contains a loan pay back plan for registered nurses, administered by the Department of Human Services.

Governor's Contingency Fund

This provides funding for labor intensive new or expanding businesses. This fund was increased in 1988 to provide more resources to new and expanding businesses in Maine. As the nature of jobs continues to change and business expand, this fund will ensure that there is a supply of skilled workers. This program is operated in conjunction with the Department of Economic and Community Development.

Maine Occupational Information Coordinating Committee

The MOICC provides computerized career guidance information to the Job Service, the Job Training System, Adult Education programs, Vocational Technical Colleges and the State University system. Homeless individuals enrolled in the above programs benefit from updated career and educational guidance information.

MAINE STATE HOUSING AUTHORITY

SERVICES

The Maine State Housing Authority administers the following programs which provide funding for the homeless and at risk populations.

HUD Emergency Grants Program

MSHA awards annual state allocation to shelters statewide for rehabilitation of buildings, operating costs and supportive services. Grants are made to local governments or non-profit shelter providers.

Shelter Operating Subsidy Program (SOS)

MSHA grants state appropriated funds to shelters statewide based on beds and occupancy rates. Grants go directly to shelters to provide and enhance services to homeless populations.

Partnerships to Aid the Homeless (PATH)

A commitment made in 1986 of Section 8 rental assistance to local housing authorities who network with community social services to comprehensively assist and house homeless families. Rental assistance is recycled to new homeless families upon turnover.

Homeless Family Transitional and Living Demonstration Pilot

A program instituted in 1989 to finance transitional housing for families with children. The program also includes a case management component for comprehensive assistance. Six Community Action Agencies participating in the program have produced 18 units of housing so far.

Matching Funds

MSHA has provided commitments for 50% development financing at 1% interest, 30 year terms, to applicants for HUD's Transitional Housing and Permanent Handicapped Homeless Programs since 1987.

Housing Preservation Grants (HPG)

MSHA provides grants to community-based non-profits for use in replacing or rehabilitating severely sub-standard housing of very low income or at risk persons. Grants and deferred loans are offered for 40% of the project cost.

Boarding Care Facility Program

MSHA offers below market interest rate loans to non-profit sponsors of group supportive homes that are subsidized by State contract. Permanent financing is offered for 100% of development costs.

DEPARTMENT OF HUMAN SERVICES

SERVICES

The Department of Human Services categorizes services to the homeless (or potentially homeless) within three phases along the continuum of need: preventative programs, acute or crisis services and remedial/rehabilitative programs. Traditionally, the public often associates the "hands-on" crisis-oriented services such as homeless shelters and soup kitchens as the main areas of assistance required by the homeless. What follows is a brief summary of DHS services. Additional information is available upon request.

The Department of Human Services is making a coordinated effort through many of its bureaus and offices to provide services to the potentially homeless in order to reduce the need for crisis services, and to provide remedial programs which assist homeless persons in leaving short-term shelters and moving into home-type environments.

Prevention Services

These services maintain people in a living environment which at least meets minimal health and safety standards. Homeless prevention programs are aimed at the portions of the population that could be potentially homeless:

- * General Assistance
- * Emergency Assistance
- * Nutrition Services (Food Stamps and WIC)
- * AFDC
- * Health Services
- * Teen Pregnancy and Health Services
- * Substance Abuse
- * AIDS/HIV Infection
- * Elderly Services
- * Refugees and Migrant Services
- * Family Violence Victims and Children

Major assistance to the potentially homeless is provided by municipalities using general assistance funds administered by the DHS Bureau of Income Maintenance (BIM). These funds provide the means for local government agencies to keep the potentially homeless in their homes. In FY 1990, more than half of the \$8.5 million in budgeted general assistance funds will be spent on housing and utilities. General Assistance funding is also the major source of financing for crisis and acute services for the homeless by providing a large portion of the operations costs of municipal shelters.

Acute or Crisis Services

These services assist an individual when an abrupt change in circumstance threatens or causes loss of shelter and other necessities of life. The change in circumstances is usually short term but requires immediate assistance. These services include:

- * Health Services
- * Teen Services
- * Substance Abuse
- * Elderly
- * Crime Victims Assistance Program
- * Migrant Services
- * Family Violence Victims

Remedial or Rehabilitative Services

These services allow the individual to become as self-sufficient as possible and to reduce dependence on private or government support. Services include:

- * ASPIRE
- * Teen Services
- * Substance Abuse
- * Elderly
- * Refugees and Migrants
- * Family Violence Victims and Children

DHS shares remedial and rehabilitative responsibility for the homeless with a number of other agencies including the Maine State Housing Authority and the Department of Mental Health and Mental Retardation, as well as with local municipal social service departments and private non-profit groups.

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION

SERVICES

The Maine Department of Mental Health and Mental Retardation serves adults with mental illness, children and adolescents with special needs and persons with mental retardation. The following homelessness and at risk of homelessness program summaries are limited to those population groups.

Non-Facility Based Programs Providing Treatment and Services

Adults With Mental Illness

Holy Innocents

Operates a large case management program for adults with serious mental illness in the Portland area.

York County Counseling Services

This Independent Living Program consists of three major components: subsidized living in apartments for five persons with severe and prolonged mental illness who are homeless; intensive community living counseling and supports; and services to assist clients secure and maintain affordable housing.

Shalom House Supported Apartments

Provides supports to up to ten persons in scattered community apartments in Portland, to eight persons in a rooming house (Spring Street), and to thirteen persons in a congregate living facility (Brackett Street). Each of these clients is directly from the AMHI inpatient population.

Area IV Mental Health Services Coalition

Community workers assist adults to find decent affordable housing and provide support in maintaining that housing.

Motivational Services Inc. Homeless Program

A staff person links with the shelter in Augusta to provide housing assistance and referral services to adults who are homeless and mentally ill.

Children and Adolescents with Special Needs

Portland Area Children's Mental Health Project

This multi-agency, collaborative project provides mental

health counseling, substance abuse counseling and case management to homeless youth at several sites in Portland.

Children and Adolescent Homeless Outreach Programs

Four separate programs in Bangor (Atrium), Rockland (Home Counselors), Sanford (York County Shelters), and Lewiston (New Beginnings) provide coordination, linkages and referrals to homeless or at risk youth.

BCSN/DMHMR Children's Outpatient Services

Although these outpatient programs do not target homelessness specifically, they do serve a prevention function by keeping families intact and include the following services: Homebased family services, family support, respite services, child and family mediation and day treatment.

Facility-Based Residential Programs

A variety of facility-based programs are funded/operated by the Department for the vulnerable population groups it serves. These supportive housing programs are designed to enable individuals to maintain stable, decent and affordable housing in the community.

Adults With Mental Illness

There are over twenty residential facilities throughout Maine for adults with severe and prolonged mental illness. These programs range from crisis intervention respite programs to independent apartments with as-needed supportive services to highly structured group homes with on-site staff and services. There has been a substantial increase in residential programs for adults with mental illness over the past two years, however, the bulk of these residential programs are small and have waiting lists.

The Transitional Housing Demonstration Program for Adolescents provides supervised group and semi-independent living, as well as supportive services, for up to two years in the Bath Children's Home for 12-16 children, ages 16 and up at time of admission, who are homeless or at risk of homelessness, within a Portland-Lewiston-augusta triangle. In addition, the children's mental health community system includes three well-established residential treatment centers, a network of teaching family homes based on the model at Boy's Town, and two or three experienced therapeutic foster home providers.

A \$7,000,000 housing bond was approved by Maine voters in November, 1989 for housing and capital improvement needs of community-based nonprofit organizations serving persons with mental illness. The bond is to be implemented jointly by the

Department of Mental Health and Mental Retardation and the Maine State Housing Authority. Guidelines and philosophy for the fund, which will create housing options for both youth and adults, are being developed in collaboration with a mandated advisory committee, which includes representatives of consumers of mental health services, family members and providers of community services.

For persons with mental retardation there are six residential respite centers providing temporary housing, up to 21 days at a time, for adults with mental retardation. Five are operated by private non-profit agencies, one is State operated. In addition there are supervised apartments with varying levels of staff supervision (less than 24 hours per day) as well as foster, boarding and waiver homes available statewide. Intermediate Care Facilities provide care and active treatment to persons with mental retardation who, due to the complexity of their needs, cannot be served in foster boarding homes.

Community-Based Services

In addition, the Department provides for a variety of community-based services to assist individuals in realizing their potential and to lead stable and productive lives within the community. Such services include the development of programs for employment opportunities, case management services and comprehensive crisis stabilization services.

DEPARTMENT OF CORRECTIONS

SERVICES

The Department of Corrections supervises nearly 7,000 adults on probation in the community. Males are a majority, 88% of the total. Little information is available on an aggregate basis for this target population. Assumptions can be drawn regarding their risk of homelessness in view of the number and types of problems they present, which include:

- * Alcohol and substance abuse
- * Lack of education (high school dropouts)
- * Lack of employment skills
- * Mental health problems
- * Low Income
- * Lack of independent living skills

The Department's correctional facilities which include the State Prison, the Correction Center, two correctional facilities and three pre-release centers house 1500 to 1600 adults.

The Department also supervises over 2,200 juveniles, about 220 of which are in the care of the Department's Youth Center. As with the adult population, the majority, or 85% are male. Children come into the correctional system with a number of personal and family problems including:

- * Substance abuse
- * Sexual and physical abuse victimization
- * Special education disabilities
- * Dysfunctional families
- * Truancy and dropping out of school
- * Emotional disorders

The Department contracts with a number of different agencies to provide services to inmates and probationers, both adults and juveniles. The services are provided with the goal of reducing criminal behavior. The same services could be used to reduce the risk of homelessness for those already in the community (probationers) and those who will be released from correctional facilities.

Contracted Services to Inmates of Correctional Facilities

Substance Abuse Treatment and Counseling

These services are provided by Affiliated Chemical Dependency, Kennebec Valley Regional Health and Washington County Psychotherapy Association Agencies. Day One provides substance abuse treatment services to residents of the Maine Youth Center.

Substance abuse and other counseling services are provided to probationers in the community by Crisis and Counseling Services, York County Counseling, Aroostook Mental Health Center, Downeast Community Hospital, Bath Memorial Hospital, Northeast Substance Abuse Services, Inc., Chemical Alternative Program, Waldo County Community Social Action, Freedom Counseling and various private practitioners.

Homebased Family Services

These programs provide crisis intervention services by a team of counselors geared to preventing placement of children outside the families' homes. Services are provided by Aroostook Mental Health Center, Bath-Brunswick Mental Health Center, Day One, St. Michael's Center, Families United, Home Counselors, Inc., Sweetser's Children's Home, Tri-County Mental Health Services and Youth and Family Services.

Emergency Shelter Services

These services are provided for children by the following:

- * New Beginnings, Lewiston
- * Halcyon House, Skowhegan
- * YWCA Fair Harbor Shelter of Portland, Maine
- * Youth Alternatives of Southern Maine

Long-Term Residential Care

These services are provided by the following group homes:

- * Community Schools, Inc., Camden
- * Project Atrium, Inc., Bangor
- * Christopher Home, Caribou
- * Rumford Group Home, Rumford
- * Day One, Bar Mills
- * Wellspring, Inc./Project Rebound
- * Goodwill Home Associates, Fairfield
- * Weymouth Houses, Bristol and Jefferson
- * Merrymeeting Farm, Kezar Falls
- * Youth Alternatives, Portland
- * Northern Maine General Hospital, Eagle Lake and Winterville homes

Semi-Independent Living Skills

These services are provided in transitional residential facilities at New Beginnings in Lewiston, Rumford Group Home and Goodwill Hinckley Home School Farm.

MOTUS, Inc. of Augusta

This program assists inmates leaving correctional facilities to find jobs and support services they need to retain these jobs.

H.O.M.E.

This residential program located in Orland assists in the development of independent living and employment skills along with a variety of support services.

DIVISION OF COMMUNITY SERVICES

SERVICES

The Division of Community Services provides services aimed at both the homeless and at risk populations through funding to the eleven Community Action Agencies that are located throughout Maine.

Emergency Community Services Homeless Grant Program

The Division receives federal McKinney funding to be used for expansion of comprehensive services for homeless individuals to help them make the transition out of poverty, provision of assistance in obtaining social and maintenance services, income support services and promotion of private sector and other available assistance. Funds are often used for administrative costs to provide staff who coordinate resources for the homeless. In addition, up to 25% of the funds can be used for direct services. In federal fiscal year 1991, Maine is receiving \$222,238 under this program.

Temporary Housing Assistance Program (THAP)

The State has provided \$250,000 in each of the past two years for temporary assistance for people who need shelter or who are at risk of becoming homeless. Assistance may include security deposits, rent, back rent, or other expenses necessary to prevent eviction or establish a person in a rental.

Weatherization (Federal and State Funds)

This program provides energy conservation services to eligible low-income households. Measures include insulation, storm doors and windows, caulking, weatherstripping, and chimney repairs. Services are delivered through Community Action Agencies and two Technical Colleges.

Clients who apply for the Low-Income Home Energy Assistance Program are referred to weatherization services. Priority is given to those low-income households which include someone who is elderly, disabled, or under two years of age.

Low-Income Home Energy Assistance Program (LIHEAP)

The primary purpose of LIHEAP is to provide a financial benefit to low-income households to assist them in paying a portion of their winter heating bills. Some of the LIHEAP funds are set aside for the Energy Crisis Intervention Program (ECIP) to assist with emergency energy needs, for weatherization and for the Central Heating Improvement Program (CHIP), to assist with the repair or replacement of heating

systems. Funds are sub-granted to Community Action Agencies and participating towns.

For a household to be eligible, total household income must be less than or equal to 125% of the Federal Poverty Guidelines. However, if the household has individuals who are elderly, handicapped, or under two years of age, income can be at or below 150%. In determining eligibility, health insurance payments are deducted from gross income for those who pay their own health insurance.

The Emergency Food Assistance Program (TFAP) & Hunger Prevention Program

Under TFAP, food commodities are provided by the U.S. Department of Agriculture and distributed to eligible low-income individuals by Community Action Agencies. Under the Federal Hunger Prevention Act, the Division was designated in FY 1989 to receive certain food commodities from the USDA and distribute them to soup kitchens, shelters and food banks, with priority given to those serving homeless persons.

Generally, Two TFAP distributions are held each year, while Hunger Prevention foods are available on a year-round basis.

Head Start

Head Start is a child development program for children between the ages of three and six and their families. Family income and available space are the criteria for services. Most programs operate four or five hours a day, four days a week for 32 weeks. Along with quality preschool education, attention is paid to the health and social service needs of the children and their families. Parental involvement is strongly encouraged. Services are provided by ten Community Action Agencies and three private, non-profit agencies.

In 1990-1991, 2,724 children are being served with a combination of over \$8.6 million in State and federal funding.

MAINE DEPARTMENT OF EDUCATION

SERVICES

The Department of Education has received federal funds under the Stewart B. McKinney Homeless Assistance Act since 1988. These funds have provided programs for Homeless Adult Education under the Bureau of Adult and Secondary Vocational Education and for Assuring Access to Education for Homeless Children and Youth under the Office of Truancy, Dropout and Alternative Education.

Maine Homeless Adult Education Project

The Homeless Adult Education Project will continue and expand current homeless education projects from 16 in the past year to 27 sites in 1991. These projects will serve homeless adults in Augusta, Bangor, Hancock County, Lewiston, Portland, Somerset County and York County. Each project will be supervised by the local adult basic education program coordinated with shelters, agencies and programs that provide services to the homeless. All instruction is provided at the shelters, soup kitchens, transitional housing sites and other locations. These projects focus on adult homeless who are victims of spousal abuse, recovering alcoholic men and women, single parents, chronically mentally ill and transitional, destitute and unemployed. Instructional services are provided to individuals who lack basic literacy skills or who have not finished high school.

Children and Youth

Maine's State Plan for Assuring Access to Education for Homeless Children and Youth has served as a guide for implementing strategies and programs coordinated by the Department. Workshops, forums and collaborative projects have begun, primarily in the Greater Portland Area. Expansion of activities to other regions of the State will be carried out in the next year. McKinney funds have been restricted to special short term projects and demonstration projects and have not been available for direct services.

The Coordinator of Education for Homeless Children and Youth provides technical assistance to the Department, the schools and other agencies or Departments with regards to planning and implementing educational services to homeless children and youth.

Recent funds under the McKinney Act have allowed the Department to develop and implement two Regional Demonstration Projects (one rural and one urban). These collaborative projects are expected to be underway in the Spring of 1991 and continue for up to eighteen months. Each project will link

schools, agencies and other providers to focus on homeless children and youth and those at risk of becoming homeless.

Other Department Services for Homeless

Services of Department of Education consultants and staff are available to schools, both public and private. Coordination of efforts to serve homeless populations, adults and children, some of who are enrolled in public education and many who are not, is encouraged by the Department for providers at the local levels. The adult homeless project director and the children and youth coordinator have met frequently about their projects. As funds become available through McKinney Act and/or other sources, grants will be available to schools through the Department for direct services to children and youth who are either homeless or at risk of becoming homeless.

DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT

SERVICES

The Department of Economic and Community Development (DECD) has been designated as the agency through which the State Contact Person for Homeless Issues, the Task Force on Homeless and Housing Opportunities, the Comprehensive Homeless Assistance Program, and the Permanent Housing for Homeless Handicapped Persons programs are centered. The Affordable Housing Alliance and the Community Development Block Grant Program both are located in DECD and offer opportunities for direct assistance to homeless persons and persons at risk of homelessness.

State Contact Person/Task Force on Homelessness

The State Contact Person is the liaison between the National Interagency Council on the Homeless and State agencies and is responsible for disseminating information on McKinney and non-McKinney homeless programs. In Maine, the State Contact Person fulfills multiple functions, including staffing the Task Force, coordinating CHAP and Annual Program Reports, overseeing administration of DECD homeless projects, and presenting reports to local, state, and national agencies. The Task Force on Homeless and Housing Opportunities was established by the Legislature and given the responsibility of dealing with the problem of homelessness. DECD is the contact agency in the State for homeless programs and has been appointed as the lead agency in staffing the Task Force.

Comprehensive Homeless Assistance Program

The Comprehensive Homeless Assistance Program and Annual Performance Report requirements are responsibilities of the Task Force. Both are necessary for continued eligibility for McKinney Act funds. All McKinney Act proposals have to be consistent with an approved CHAP. The State Contact Person coordinates submission of these to HUD.

Homeless Assistance Through Community Development Block Grants

The CDBG program includes eligible activities that can serve homeless persons. Shelter acquisition, rehabilitation, and operations may be funded as eligible activities. HUD has determined that construction of emergency shelter facilities and transitional housing are public facilities and eligible for CDBG funding.

Bangor, Lewiston, Auburn, and Portland receive CDBG funds annually. Remaining municipalities and plantations compete for CDBG Small Cities funding on an annual basis. The program is administered by the DECD Office of Community Development.

Local governments may pass through funds to not-for-profit corporations for implementing activities directly assisting homeless persons. Many local housing, public facilities, and economic development activities included in local programs indirectly impact homeless persons and those at risk of homelessness.

Permanent Housing for Handicapped Homeless Program

DECD is the designated state agency eligible to apply for funds on behalf of a project sponsor. The project sponsor has to be a private non-profit organization or a public housing authority. States must certify that a 50 percent non-federal match will be provided. MSHA has provided mortgages as match for four projects funded in Maine. Acquisition, rehabilitation, operation, and support services are fundable activities.

Projects may be group homes or units in a multi-family building designed solely for housing handicapped homeless persons. Sponsors are required to provide community-based housing and support services for a minimum of ten years. The program continues to adapt to changing needs and to adjust to requirements. Applications are accepted annually.

Affordable Housing Alliance

Staffed in February of 1990, the Maine Affordable Housing Alliance joins with DECD and MSHA in meeting affordable housing needs. The Alliance assists municipalities through revolving loan funds to purchase land, provide infrastructure, or improve deteriorating urban neighborhoods in support of affordable housing development. The Alliance also assists local groups to establish local housing alliances. These groups establish the local housing strategies that guide affordable housing efforts. As the Alliance fulfills its mission, availability of housing affordable to families in Maine will help prevent homelessness. Projects assisted with Alliance funds may include shelters, transitional housing, or permanent housing for homeless persons.

**LISTING OF PLACES AVAILABLE FOR PERSONS WHO ARE HOMELESS
OR AT RISK OF BECOMING HOMELESS**

The attached was developed from listings of shelters provided by the Maine Coalition for the Homeless and the Maine State Housing Authority. The intent is to identify places where people who are homeless or at risk of becoming homeless may receive shelter and services. Places are listed by county and then by municipality, thereby organizing it geographically.

Inclusion on the list is neither a recommendation of nor an endorsement by members of the Task Force, the agencies represented on the Task Force, and the State of Maine. Places have been included regardless of licensure and, in some cases, regardless of completeness of information.

There is a need for consistent and continued updating of listings such as this one. Additional information is necessary also. Updating and expanded data on each place are essential before the list can become a comprehensive representation of facilities available for Maine people.

ANDROSCOGGIN COUNTY

ABUSED WOMEN'S ADVOCACY PROJECT
P.O. BOX 713
AUBURN

04210

795-4020

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS: VICTIMS OF DOMESTIC VIOLENCE: WOMEN AND THEIR CHILDREN (BOYS UP TO AGE 13), MUST BE FUNCTIONAL AS STAFF IS NOT ON SITE 24 HOURS.

SERVICES: Kitchen facility with emergency food. Legal advocacy, support groups, empowerment groups and educational groups for women and children, housing referral, referral for other services as needed, transportation, clothing; child care is available during groups. Handicap accessible.

HOURS: ACCESSIBLE 24 HOURS; STAFF ON SITE M-TH.

STAY: TWO WEEKS

BEDS: 15 PLUS CRIBS

FEE: NONE

ACCESS: CALL HOTLINE NUMBER 795-4020; FARMINGTON OUTREACH 778-6107

COUNTY: ANDROSCOGGIN

ST. FRANCIS HOUSE
88 THIRD STREET
AUBURN

04210

784-2011

CLASSIFICATION: TRANSITIONAL HOUSING-SUBSTANCE ABUSE

CLIENTS: MEN AGES 18 AND OLDER WITH A SUBSTANCE ABUSE PROBLEM, MUST HAVE BEEN SOBER FOR 7 DAYS

SERVICES: Meals, medication monitoring, case management, individual and group counseling, independent living skills, housing referral, job training and location referral. Not handicap accessible.

HOURS: STAFFED 24 HOURS

STAY: AVERAGE 3 MONTHS, MAXIMUM 6 MONTHS

BEDS: 15

FEE: NOT REQUIRED, SLIDING FEE SCALE

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL, SCREENED ON WEDNESDAYS

COUNTY: ANDROSCOGGIN

RURAL COMMUNITY ACTION PROGRAM
RFD #1, BOX 2900
LEEDS

04263

946-5096

CLASSIFICATION: TRANSITIONAL HOUSING-FAMILY

CLIENTS: NO RESTRICTIONS, MUST BE SCREENED THROUGH INTERVIEW COMMITTEE, NEED TRANSPORTATION.

SERVICES: Kitchen facility, some food available, outreach program through RCAM. Housing, adolescent pregnancy program, parenting classes, and other service referrals as needed. Not handicap accessible.

STAY: 8AM-4PM MON-FRI

BEDS: 10-5 IN EACH MOBILE HOME

FEE: NOT REQUIRED/\$100 MONTH IF POSSIBLE

ACCESS: SELF REFERRAL OR OUTSIDE REFERRAL; CALL FOR AN APPOINTMENT

COUNTY: ANDROSCOGGIN

ANCHOR HOME FOR CHILDREN
209 LINCOLN STREET
LEWISTON

04240

783-6086

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AND BOYS AGES 4-12

SERVICES: Home setting with house parents, case management, counseling, referral. Attend Christian school.

STAY: LONG TERM, UNTIL 18

BEDS: 4, PLAN TO EXPAND

FEE: DEPENDS ON ABILITY TO PAY

ACCESS: NEED OUTSIDE REFERRAL, SCREENING PROCESS

COUNTY: ANDROSCOGGIN

FELLOWSHIP HOUSE
95 BLAKE STREET
LEWISTON

04240

784-2901

CLASSIFICATION: EMERGENCY SHELTER-SUBSTANCE ABUSE

CLIENTS: WOMEN AND MEN OVER 18 WITH A SUBSTANCE ABUSE PROBLEM -- NO DETOX FOR HEROIN

SERVICES: Emergency shelter and detox, meals, medical care, case management, individual and group counseling, substance abuse counseling, housing referral, clothing. Open AA meeting every day, educational groups, aftercare. Handicap accessible. No detox for heroin abuse.

HOURS: STAFFED 24 HOURS

STAY: EMERGENCY 24 HOURS, DETOX 7-10 DAYS

BEDS: EMERGENCY 3; DETOX 12; 9M & 3FEMALE

FEE: NOT REQUIRED, MEDICAID, SLIDING FEE

ACCESS: WALK IN, SELF REFERRAL AND OUTSIDE REFERRAL

COUNTY: ANDROSCOGGIN

HOPE HAVEN GOSPEL MISSION
209 LINCOLN STREET
LEWISTON

04240

783-6086

CLASSIFICATION: EMERGENCY SHELTER-FAMILY/ADULT

CLIENTS: FAMILIES, SINGLE WOMEN AND MEN, (EMANCIPATED YOUTH POSSIBLY BY SPECIAL EXCEPTION)

SERVICES: Meals (residents do cooking), case management, counseling, independent living skills, housing referral, job training: work rehab consists of kitchen help, professional maintenance, woodworking skills, retail, clothing, household items and furniture available.

HOURS: STAFFED 24 HOURS; BUILDING OPEN 7AM-10PM

STAY: MEN, INDEFINITE, WOMEN & CHILDREN ONE DAY

BEDS: 30: 24 MALE, 6 WOMEN, 2 CRIBS

FEE: NOT REQUIRED, SLIDING SCALE

ACCESS: WALK-IN, SELF REFERRAL, OUTSIDE REFERRAL

COUNTY: ANDROSCOGGIN

NEW BEGINNINGS
491 MAIN STREET
LEWISTON

04240

795-4070

CLASSIFICATION: EMERGENCY SHELTER-ADOLESCENT

CLIENTS: GIRLS AND BOY AGE 13-18

SERVICES: Meals, medication monitoring, structured program, case management, individual and group counseling, family counseling, independent living skills, housing referral, transportation, clothing, outside referral as needed. Not handicap accessible.

HOURS: STAFFED 24 HOURS/DAY

STAY: 21 DAYS; FAMILY CONFLICT RESPITE - 3 DAYS

BEDS: 12 6-MALE 6-FEMALE

FEE: NONE

ACCESS: SELF REFERRAL OR OUTSIDE REFERRAL

COUNTY: ANDROSCOGGIN

ST. ANDRE'S GROUP HOME
188 SABATTUS STREET
LEWISTON

04240

783-8003

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: EMOTIONALLY AND BEHAVIORALLY TROUBLED ADOLESCENT GIRLS, AGES 13-18

SERVICES: Residents cook meals. Medication monitoring, group and individual counseling, clinical and psycho-social planning, family counseling, independent living skills, recreational activities, transportation, clothing, aftercare plan. Resident required to attend school.

HOURS: 24

STAY: EMERGENCY UP TO 3 WKS. LONG TERM 1 1/2 YEARS

BEDS: EMERGENCY ONE LONG TERM SEVEN

FEE: NOT REQUIRED, SLIDING SCALE

ACCESS: EMERGENCY: REFERRAL AND A CASEWORKER

COUNTY: ANDROSCOGGIN

SUPPORTIVE APTS. AREA IV MENTAL HEALTH
100 PINE STREET
LEWISTON

04240

782-2273

CLASSIFICATION: PERMANENT HOUSING MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH PSYCHIATRIC DISABILITIES

SERVICES: Assist to locate apartment, move in, coordinate other services, short term case management. Encourage involvement of a primary care provider.

HOURS: OFFICE 9-5 MON-FRI

STAY: INDETERMINATE

FEE: NEED TO PAY SECURITY DEPOSIT/RENT

ACCESS: SELF & OUTSIDE REFERRAL; PRIMARY CARE PROVIDER ASSIST

COUNTY: ANDROSCOGGIN

HOPE HOUSE NETWORK, INC.
RFD 2, BOX 1 MECHANIC FALLS

04256 345-3027

CLASSIFICATION: TRANSITIONAL HOUSING-PREGNANT/PARENT

CLIENTS: PREGNANT AND PARENTING SINGLE MOTHERS AND THEIR CHILDREN, NO AGE RESTRICTIONS

SERVICES: Meals, case management, child birth classes, parenting classes, support group for single mothers, free pregnancy tests, baby clothes, transportation, referral to other services as needed. Not handicap accessible.

HOURS: 24

STAY: AS LONG AS NEEDED

BEDS: 3 WOMEN WITH CHILDREN; OTHER AVAIL.

FEE: NOT REQUIRED, 30% OF INCOME

ACCESS: SELF REFERRAL, CALL FOR AN APPOINTMENT

COUNTY: ANDROSCOGGIN

FRANKLIN ACADEMY

OLD LISBON ROAD, RR 1 BOX 3124
SABATTUS 04280

375-8162

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AND BOYS, AGE 9-18, WHO ARE "NOT FUNCTIONING UP TO POTENTIAL EITHER ACADEMICALLY OR SOCIALLY"

SERVICES: General high school, remedial and alternative education, agricultural training, supportive residential setting, other services in the community.

STAY: AVERAGE 9 MONTHS-3 YEARS

BEDS: 53

FEE: MUST PAY TUITION

ACCESS: SELF REFERRAL AND OUTSIDE REFERRAL

COUNTY: ANDROSCOGGIN

AROOSTOOK COUNTY

BATTERED WOMEN'S PROJECT

P.O. BOX 1358

CARIBOU

04736

498-6570

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS:

SERVICES:

BEDS: 12 AND SAFE HOUSES

COUNTY: AROOSTOOK

CARIBOU APARTMENTS

P.O. BOX 1018

CARIBOU

04736

498-6431

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 DIAGNOSED W/ A MENTAL ILLNESS

SERVICES: Clients cook for themselves. Case management, counselling, substance abuse counseling, independent living skills, housing referral, job training, transportation. Staffed 8 hours a day, 5 days a week, clients must spend 20 hours/week working or in a program. Handicap accessible.

STAY: VARIES, AVERAGE ONE YEAR - 18 MONTHS

BEDS: 10

FEE: NOT REQUIRED, BASED ON INCOME

ACCESS: SELF AND OUTSIDE REFERRAL

COUNTY: AROOSTOOK

CHRISTOPHER HOME
18 PLEASANT STREET, PO BOX 748
CARIBOU 04736

493-3343

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS 12-18

SERVICES: Safe environment. Individual, family, and group therapy; preparation for family reunification or independent living; operates under the Boys Town, Family Teaching Model.

STAY: MUST COMPLETE PROGRAM, AVERAGE ONE YEAR

BEDS: 7

ACCESS: REFERRED: DEPT OF HUMAN SERVICES OR DEPT OF CORRECTION

COUNTY: AROOSTOOK

FAMILY SUPPORT CENTER

CARIBOU 04736

498-6146

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS: DOMESTIC VIOLENCE VICTIMS: WOMEN AND THEIR CHILDREN (BOYS UNDER 14); SAFE HOUSING IS FOUND FOR MEN

SERVICES: Meals, referrals, support group, independent living skills, housing referral, parenting classes, transportation, clothing, children's program.

HOURS: 24

STAY: 30 DAYS

BEDS: 14 PLUS 3 CRIBS

FEE: NONE

ACCESS: SELF OR OUTSIDE REFERRAL; HOTLINE 769-8251

COUNTY: AROOSTOOK

FAMILY SUPPORT CTR. TRANSITIONAL HOUSING

CARIBOU

04736

498-6570

CLASSIFICATION: TRANSITIONAL HOUSING-DOMESTIC VIOLENCE

CLIENTS: VICTIMS OF DOMESTIC VIOLENCE, WOMEN & THEIR CHILDREN (BOYS UNDER 14)

SERVICES: Meals, referrals, support group, independent living skills, self esteem classes, housing referral, transportation, clothing, children's program.

HOURS: 24 HOURS

STAY: 18 MONTHS

BEDS: 6

FEE: 15% OF INCOME (AROUND \$40 MONTH)

ACCESS: SELF AND OUTSIDE REFERRAL; HOTLINE 769-8251

COUNTY: AROOSTOOK

MADAWASKA GROUP HOME

PO BOX 1018

CARIBOU

04736

498-6431

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 DIAGNOSED WITH A MENTAL ILLNESS

SERVICES: Meals, medication monitoring, case management, counseling, substance abuse counseling, housing referral, job training, job location, transportation. Handicap accessible.

HOURS: STAFFED 24 HOURS

STAY: AVERAGE 1 TO 1 1/2 YEARS

BEDS: 6

FEE: NOT REQUIRED; BASED ON INCOME

ACCESS: SELF AND OUTSIDE REFERRAL

COUNTY: AROOSTOOK

SKYHAVEN TRANSITIONAL LIVING RESIDENCE
PO BOX 1018
CARIBOU

04736

498-6431

CLASSIFICATION: TRANSITIONAL HOUSING MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 DIAGNOSED WITH A MENTAL ILLNESS

SERVICES: Meals, mediation monitoring, case management, counseling, substance abuse counseling, housing referral, job training and location, transportation. Handicap accessible.

HOURS: STAFFED 24 HOURS

STAY: AVERAGE 1 TO 1 1/2 YEARS

BEDS: 12

FEE: NOT REQUIRED; BASED ON INCOME

ACCESS: SELF AND OUTSIDE REFERRAL

COUNTY: AROOSTOOK

JOSEPHINE GAGNON YOUTH HOME
P.O. BOX 188
EAGLE LAKE

04739

444-5152

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: ADOLESCENT BOYS, AGE 11-17

SERVICES:

ACCESS: BY REFERRAL ONLY

COUNTY: AROOSTOOK

PHILLIP BLANCHETTE YOUTH HOME
P.O. BOX 188
EAGLE LAKE

04739

444-5480

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AND BOYS AGE 11-17

SERVICES: Meals, medication monitoring, case management, independent skills, transportation. Referrals to other services as needed. Handicap accessible.

STAY: 9-18 MONTHS

BEDS: 6

ACCESS: REFERRAL: DEPT. OF HUMAN SERVICES OR DEPT. OF CORRECTIONS

COUNTY: AROOSTOOK

BATTERED WOMEN'S PROJECT
P.O. BOX 986
HOULTON

04730

532-4004

CLASSIFICATION: EMERGENCY SHELTER DOMESTIC VIOLENCE

CLIENTS:

SERVICES:

BEDS: 14 AND SAFE HOME

ACCESS: BY REFERRAL ONLY

COUNTY: AROOSTOOK

TEMPORARY SHELTER FOR THE HOMELESS
SKYWAY INDUSTRIAL PARK, P.O. BOX 1753
PRESQUE ISLE 04769

764-4125

CLASSIFICATION: EMERGENCY SHELTER-FAMILY, ADULT

CLIENTS: SINGLE WOMEN AND MEN, YOUTH OVER 15 WITHOUT PARENTS, FAMILIES

SERVICES: Meals, referral for support services, independent living skills,
housing referral, job training, job location, transportation, clothing.
Handicap accessible.

HOURS: STAFFED 24 HOURS

STAY: INDEFINITE

BEDS: 21: 14 MALE, 7 FEMALE

FEE: NONE

ACCESS: WALK-IN SELF REFERRAL, OUTSIDE REFERRAL

COUNTY: AROOSTOOK

WINTERVILLE BOYS GROUP HOME

WINTERVILLE

444-4530

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS, AGES 11-17

SERVICES: Live-in house parents trained in effective parenting.
Psychological consultation, evaluation, individual, family, and group
therapy. Education prescriptive program by SAD #27; recreational and
pre-vocational experiences.

STAY: 9-18 MONTHS

BEDS: SIX

ACCESS: REFERRAL FROM DHS OR DEPT. OF CORRECTIONS

COUNTY: AROOSTOOK

CUMBERLAND COUNTY

TEDFORD HOUSE
10 PLEASANT STREET
BRUNSWICK

04011

725-4871

CLASSIFICATION: EMERGENCY SHELTER-FAMILY, ADULT

CLIENTS: SINGLE WOMEN AND MEN OVER 18; FAMILIES

SERVICES: Breakfast and dinner provided (clients do cooking), medication monitoring, case management, housing referral, job location, transportation, clothing, help with furnishing new apartment. Not handicap accessible.

HOURS: 24 HOURS/DAY

STAY: 5 DAYS, LONGER WITH APPROVAL

BEDS: 15 ADULT; LEASED MOTEL FOR FAMILIES

FEE: NONE

ACCESS: WALK-IN

COUNTY: CUMBERLAND

EDGEFIELD AND NAPLES SPURWINK SCHOOL
PO BOX 311
CASCO

04015

892-3686

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS, 13-18, EMOTIONALLY DISTURBED

SERVICES: Residential treatment center. Therapeutic milieu, special education program with individualized plans, individual, group, and/or family therapy, psychiatric/psychological evaluations; recreation program.

STAY: UNTIL 9 MONTHS PAST 18TH BIRTHDAY

BEDS: EDGEFIELD 10; NAPLES 4

FEE: PAID BY SCHOOL, STATE, OR DHS

ACCESS: PET REFERRAL, MENTAL HEALTH REFERRAL, AND DHS OR PARENTAL CONSENT

COUNTY: CUMBERLAND

OPPORTUNITY FARM FOR BOYS
P.O. BOX 65
NEW GLOUCESTER

04260

926-4532

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS 6 TO 13 WHEN ENTER; FROM BROKEN HOME DUE TO DEATH, DIVORCE, OR PERMANENT SEPARATION FROM ONE OF NATURAL PARENTS

SERVICES: Residential program with emphasis on academics and social adjustment, active recreation and sports program; minimal counseling.

STAY: THROUGH HIGH SCHOOL

BEDS: 37

FEE: SLIDING SCALE, PAYMENT NOT REQUIRED

ACCESS: SELF OR OUTSIDE REFERRAL

COUNTY: CUMBERLAND

AIDS LODGING HOUSE

PORTLAND

04101

874-1000

CLASSIFICATION: TRANSITIONAL HOUSING-ADULT AIDS

CLIENTS: ADULTS DIAGNOSED WITH AIDS WHO CAN CARE FOR THEMSELVES

SERVICES: Kitchen facility, referral to needed services, house support group. No on site staff. Not Handicap accessible.

HOURS: 24

STAY: NO TIME LIMIT

FEE: \$67/WEEK, GEN. ASSIST. VOUCHERS

ACCESS: MUST COMPLETE APPLICATION AND SCREENING PROCEDURE

COUNTY: CUMBERLAND

ALEXANDER HOUSE
275 STATE STREET
PORTLAND

04101

773-1914

CLASSIFICATION: PERMANENT HOUSING MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WHO ARE PSYCHIATRICALY DISABLED.

SERVICES: Meals, some referral to other services. Not handicap accessible.

HOURS: MANAGED 24 HOURS

STAY: INDETERMINATE

BEDS: 8

FEE: GENERAL ASSISTANCE AND S.S.INCOME

ACCESS: NEED A REFERRAL

COUNTY: CUMBERLAND

ARNIE HANSON CENTER
65 INDIA STREET
PORTLAND

04101

871-7452

CLASSIFICATION: EMERGENCY SHELTER-SUBSTANCE ABUSE

CLIENTS: WOMEN AND MEN WHOSE PRIMARY PROBLEM IS SUBSTANCE ABUSE. CLIENTS MAY BE INTOXICATED.

SERVICES: SHELTER: Evening and morning meals, shower, laundry, medical care, case management - referrals to other agencies, crisis intervention. DETOX: Ten day program used medical mode AA group counseling, educational films. Not handicap accessible.

HOURS: SHELTER: 6PM -6AM; DETOX: 24 HOURS

STAY: SHELTER: DETERMINED DAILY; DETOX 10 DAYS

FEE: SLIDING SCALE FOR CLIENTS W/INCOME

ACCESS: SELF REFERRALS FROM 6PM, REFERRALS FROM SOCIAL SERV. PROVIDERS

COUNTY: CUMBERLAND

BRENTWOOD HOME YOUTH ALTERNATIVES
53 BRENTWOOD STREET
PORTLAND

04103

874-1175

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS, AGE 12-15

SERVICES: Meals, medication monitoring, case management, counseling. Must attend school.

STAY: 3 YEARS

BEDS: 7

FEE: REIMBURSED BY DHS OR BLOCK GRANTS

ACCESS: OUTSIDE REFERRAL

COUNTY: CUMBERLAND

BRIDGE PROGRAM
247 VALLEY STREET
PORTLAND

04101

874-1055

CLASSIFICATION: EMERGENCY SHELTER-MENTAL HEALTH

CLIENTS: WOMEN AND MEN WITH PSYCHIATRIC HISTORY WHO DO NOT NEED CONSTANT SUPERVISION.

SERVICES: Evening meal prepared, residents prepare breakfast and dinner individually. Crisis intervention through the Ingraham Volunteer Hotline; unstructured independent living skills; case management and housing referral done outside. Prepared to serve hearing impaired guests. Not handicap accessible.

HOURS: OPEN 24 HOURS. STAFFED MON-FRI 8AM-9PM

STAY: THREE WEEKS MORE OR LESS

BEDS: 12

FEE: \$104/WK FOR RM. & BOARD, GEN. ASSISTANCE

ACCESS: SELF REFERRAL OR FROM SOCIAL SERVICE AGENCY

COUNTY: CUMBERLAND

CARLETON AND PRIDE HOUSES-GOODWILL
PO BOX 8600
PORTLAND

04101

774-6323

CLASSIFICATION: PERMANENT HOUSING MENTALLY RETARDED

CLIENTS: MENTALLY RETARDED WOMEN AND MEN OVER 18 WHO CAN PERFORM OWN PERSONAL CARE AND RECEIVE SSI

SERVICES: Clients cook. Case management, independent living skills, housing referral, referral to other services as needed. Vocational evaluation services, work adjustment training, life skills program, job placement and follow-up services, support employment. Clients must participate in a day program.

HOURS: OFFICE 7AM-4PM M-F; HOUSE 24 HOURS

STAY: UNLIMITED

BEDS: 15 (CARLETON); 18 (PRIDE)

FEE: SSI REIMBURSEMENT/EARNINGS CONTRIBUTION

ACCESS: SELF AND OUTSIDE REFERRAL; SCREENING REQUIRED

COUNTY: CUMBERLAND

CARON ST HOME-GOODWILL OF MAINE
PO BOX 8600
PORTLAND

04101

774-6323

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH EMOTIONAL, PSYCHIATRIC DISABILITIES AND BILATERAL HEARING LOSS

SERVICES: Clients cook. Case management, independent living skills, housing referral, referral to other services as needed. Vocational evaluation services, work adjustment training, life skills programs, job placement and follow-up services, support employment. Clients must participate in a day program.

HOURS: OFFICE 7AM-4PM M-F; HOUSE 24 HOURS

STAY: 2 YEARS

BEDS: 8

FEE: COST REIMBURSEMENT THROUGH SSI

ACCESS: SELF & OUTSIDE REFERRAL; SCREENING REQUIRED

COUNTY: CUMBERLAND

CASA, INC., NORTH STREET
26 NORTH STREET
PORTLAND

04101

773-4357

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: YOUNG WOMEN AND MEN, AGES 15-22, SEVERELY TO MODERATELY
DEVELOPMENTALLY DISABLED, NEED NURSING LEVEL CARE

SERVICES: Home care, attend day programs, recreational activities. Licensed
nursing staff 24 hours.

STAY: VARIES; UNTIL ANOTHER PLACEMENT IS APPROPRIATE

BEDS: THREE

ACCESS: NEED TO HAVE A BMR CASEWORKER

COUNTY: CUMBERLAND

CITY OF PORTLAND ADULT SHELTER
16 ALDER STREET
PORTLAND

04101

761-2072

CLASSIFICATION: EMERGENCY SHELTER-ADULT

CLIENTS: HOMELESS WOMEN AND MEN OVER 18; PHYSICALLY HANDICAPPED WILL BE
PLACED IN A HANDICAP ACCESSIBLE MOTEL.

SERVICES: Case management, crisis intervention, no meals, most services
provided through general assistance.

HOURS: SUMMER: 9PM-7AM; WINTER 8PM - 8AM

STAY: VARIES

FEE: NONE; GENERAL ASSISTANCE GUIDELINES

ACCESS: SELF REFERRAL, 5:30PM - 8PM

COUNTY: CUMBERLAND

CITY OF PORTLAND FAMILY CENTER
48 CEDAR STREET, 51 CHESTNUT STREET
PORTLAND 04101

775-6313

CLASSIFICATION: EMERGENCY SHELTER-FAMILY

CLIENTS: PARENTS MUST BE 18 OR OVER. PRIORITY GIVEN TO GENERAL ASSISTANCE RECIPIENTS. PHYSICALLY HANDICAPPED PERSONS REFERRED TO ACCESSIBLE MOTELS.

SERVICES: Kitchen facility, case management, counseling, substance abuse counseling, independent living skills, some family planning, housing referral, referral on job training, food stamps, clothing and some transportation available through General Assistance. Not handicap accessible.

HOURS: NO STAFF ON SITE; OFFICE HOURS 8AM - 5PM

STAY: AVERAGE TWO WEEKS

FEE: NONE, GUESTS ADHERE TO GA GUIDELINES

ACCESS: WALK IN OR CALL; SELF REFERRAL. 775-6314; 775-6315

COUNTY: CUMBERLAND

CITY OF PORTLAND TRANSITIONAL HOUSING
14 STONE STREET
PORTLAND 04101

775-6313

CLASSIFICATION: TRANSITIONAL HOUSING-FAMILY

CLIENTS: FAMILIES IN NEED OF TRANSITIONAL HOUSING, PARENTS MUST BE 18 OR OLDER NO ACTIVE USE OF DRUGS OR ALCOHOL.

SERVICES: Project Self Sufficiency Programs: self-management, counseling, crisis intervention, independent living skills. Housing referral, family planning, some parenting class, educational and vocational counseling kitchen facility.

HOURS: 24 HOURS, NO STAFF ON SITE

STAY: VARIES

FEE: SLIDING SCALE FOR GUESTS WITH INCOME

ACCESS: WALK IN OR CALL, PROJECT SELF SUFFICIENCY

COUNTY: CUMBERLAND

COMMUNITY HEAD INJURY PROGRAM-GOODW

PO BOX 8600

PORTLAND

04101

774-6323

CLASSIFICATION: TRANSITIONAL HOUSING-HEAD INJURY

CLIENTS: WOMEN AND MEN 16 AND OLDER WITH A HEAD INJURY

SERVICES: Residents shop and cook. Case management, Mental Health head injury support groups, assertiveness training, vocational evaluation and counseling, work adjustment training, recreational therapy, daily living skills. Handicap accessible.

HOURS: STAFFED 24 HOURS

STAY: 6 MONTHS TO 2 YEARS

BEDS: 8

FEE: FUNDING SOURCE WOULD PAY

ACCESS: SELF AND OUTSIDE REFERRAL; SCREENING REQUIRED

COUNTY: CUMBERLAND

CUMBERLAND COUNTY SHELTER (JAIL)

122 FEDERAL STREET

PORTLAND

04101

774-5939

CLASSIFICATION: EMERGENCY SHELTER

CLIENTS:

SERVICES:

HOURS: WINTER MONTHS ONLY

COUNTY: CUMBERLAND

EVODIA HOUSE
79 ALLEN AVENUE
PORTLAND

04103

871-7458

CLASSIFICATION: TRANSITIONAL HOUSING-SUBSTANCE ABUSE

CLIENTS: WOMEN 18 AND OVER WITH A SUBSTANCE ABUSE PROBLEM, MUST HAVE BEEN SOBER 7 DAYS, PRIOR REHAB EXPERIENCE REQUIRED.

SERVICES: Meals, medication monitoring, case management, individual and group counseling, substance abuse counseling, independent living skills, treatment, education and relapse prevention groups, referral for other services as needed. Must attend a 12 step program.

HOURS: STAFFED 24 HOURS, OFFICE MON-FRI 8-4

STAY: 3 1/2 TO 6 MONTHS

BEDS: 13

FEE: DEPENDS ON INCOME

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL, SCREENING REQUIRED

COUNTY: CUMBERLAND

FAIR HARBOR - YWCA
87 SPRING STREET
PORTLAND

04101

874-1130

CLASSIFICATION: EMERGENCY SHELTER-ADOLESCENT

CLIENTS: GIRLS AND BOYS AGES 7-17, WHO ARE IN CRISIS, MUST HAVE THE CONSENT OF LEGAL GUARDIAN

SERVICES: Advocacy, medication between guest and her family, recreational activities.

HOURS: 24 HOURS/DAY

STAY: UP TO 30 DAYS

BEDS: 8

FEE: NONE

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL

COUNTY: CUMBERLAND

FAIR HARBOR RESIDENTIAL PROGRAM
555 CUMBERLAND AVENUE
PORTLAND

04074

874-1137

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS UNABLE TO LIVE AT HOME OR IN A FOSTER HOME AND HAVE NO
ACCEPTABLE ALTERNATIVE

SERVICES: Semi-independent living. Independent living skills, in-depth case
management, individual and group counseling, family work when possible,
group recreational activities.

STAY: UNTIL 18

FEE: WHEN ABLE

ACCESS: SELF OR OUTSIDE REFERRAL

COUNTY: CUMBERLAND

FAMILY CRISIS SHELTER
P.O. BOX 704
PORTLAND

04104

874-HELP

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS:

SERVICES:

BEDS: 13 & 3 CRIBS

COUNTY: CUMBERLAND

FRIENDSHIP HOUSE
232 BRACKETT STREET
PORTLAND

04101

772-8876

CLASSIFICATION: EMERGENCY SHELTER-ADULT

CLIENTS: HOMELESS WOMEN AND MEN

SERVICES: Evening Meal, community kitchen, clothes closet, AA meetings, educational programs.

HOURS: 5 PM - 9 AM

STAY: UP TO ONE MONTH

FEE: NONE

ACCESS: REFERRAL FROM SOCIAL SERVICE PROVIDER NEEDED

COUNTY: CUMBERLAND

GRACE HOME
134-136 GRANT STREET
PORTLAND

04101

774-5122

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH A MENTAL DISABILITY

SERVICES: Apartments with kitchen facilities. Case management through Holy Innocents, housing referral, job location, transportation, clothing. Not handicap accessible.

HOURS: STAFFED 24 HOURS

STAY: INDEFINITE

BEDS: 24 (4 IN EACH OF 6 APTS.)

FEE: \$325/MONTH, NO FREE BEDS

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL, CALL FOR AN INTERVIEW

COUNTY: CUMBERLAND

GROUP HOMES SPURWINK SCHOOL
98 RACKLEFF ST., 194 MASS. AVE., 42 JACKSON STREET
PORTLAND 04101

871-1200

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS, AGES 7-20, EMOTIONALLY DISTURBED/BEHAVIORALLY DISORDERED

SERVICES: Residential treatment center. Therapeutic milieu, special education program with individualize plans, individual, group, and/or family therapy; recreation program, psychiatric/psychological evaluations.

STAY: DEPENDS ON INDIVIDUAL TREATMENT PLAN

BEDS: RACKLEFF 5, MASS 4, JACKSON 2

FEE: CONTRACT WITH BMHR

ACCESS: REFERRAL THROUGH PET PROCESS

COUNTY: CUMBERLAND

HASKELL STREET BOARDING HOME-GOODWI
P.O. BOX 8600
PORTLAND 04101

774-6323

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH A DISABILITY

SERVICES: Must participate in a day program. Clients cook. Case management, independent living skills, housing referral, referral to other services as needed, vocational evaluation services, work adjustment training, life skills program, job placement and follow-up services, support employment.

HOURS: OFFICE 7AM-4PM MON-FRI; (HOUSE 24 HOURS)

STAY: 6-18 MONTHS

BEDS: 10

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL, MUST GO THROUGH SCREENING

COUNTY: CUMBERLAND

JORDAN HOUSE
11 MELLEN STREET
PORTLAND

04101

773-1914

CLASSIFICATION: EMERGENCY SHELTER-ADULT

CLIENTS: HOMELESS WOMEN AND MEN

SERVICES: Three meals per day, weekly workshops.

HOURS: 24 HOURS

STAY: NO TIME LIMIT

FEE: FUNDING THROUGH GENERAL ASSISTANCE

ACCESS: REFERRAL FROM SOCIAL SERVICE PROVIDER NEEDED

COUNTY: CUMBERLAND

MCAULEY RESIDENCE
194 SPRING STREET
PORTLAND

04101

773-5289

CLASSIFICATION: TRANSITIONAL HOUSING-PREGNANT/PAREN

CLIENTS: PREGNANT AND PARENTING SINGLE MOTHERS AND THEIR CHILDREN, NO AGE RESTRICTIONS

SERVICES: Meals, case management, child birth classes, parenting classes, support group for single mothers, free pregnancy tests, baby clothes, transportation, referral to other services as needed. Not handicap accessible.

HOURS: 8:30-4:30 SOME EVENINGS NOT STAFFED AT NIGHT

STAY: UP TO 18 MONTHS

BEDS: 3 APTS FOR UP TO 9 PEOPLE

FEE: 20% OF MONTHLY INCOME

ACCESS: WALK IN, SELF AND OUTSIDE REFERRAL, SCREENING PROCESS

COUNTY: CUMBERLAND

MCKAY HOUSE
102 WESTERN AVENUE
PORTLAND

04101

773-1914

CLASSIFICATION: EMERGENCY SHELTER-MENTAL HEALTH

CLIENTS: SINGLE, PSYCHIATRICALY DISABLED, HOMELESS ADULTS

SERVICES: Ancillary support from local social service agencies, three meals per day, weekly workshop, literacy program.

HOURS: 24 HOUR HOUSE MANAGEMENT

FEE: MUST BE ELIGIBLE FOR GENERAL ASSIST

ACCESS: REFERRAL NEEDED FROM A SOCIAL SERVICE AGENCY

COUNTY: CUMBERLAND

OXFORD STREET SHELTER
203 OXFORD STREET
PORTLAND

04101

761-2072

CLASSIFICATION: EMERGENCY SHELTER-ADULT

CLIENTS: SINGLE ADULTS

SERVICES:

STAY: WINTER MONTHS ONLY

COUNTY: CUMBERLAND

ROADS GROUP HOME YOUTH ALTERNATIVES
288 EASTERN PROMENADE
PORTLAND

04101

874-1188

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS AGES 15-17

SERVICES: Meals, medication monitoring, case management, counseling, independent living skills, housing referral at time of graduation; must attend school and work part-time. Not handicap accessible.

STAY: UP TO AGE 18

BEDS: 10

FEE: REIMBURSED DHS OR BLOCK GRANTS

ACCESS: OUTSIDE REFERRAL; ALSO 874-1175

COUNTY: CUMBERLAND

SALVATION ARMY LIGHTHOUSE
65 ELM STREET
PORTLAND

04101

774-6304

CLASSIFICATION: EMERGENCY SHELTER-ADOLESCENT

CLIENTS: HOMELESS BOYS AND GIRLS, AGES 10-17

SERVICES: Showers, evening snacks and weekend breakfast, emergency clothing, access to social service providers.

HOURS: 9pm-7:30 am

STAY: VARIES

BEDS: 16

FEE: NONE

ACCESS: SELF REFERRAL

COUNTY: CUMBERLAND

SERENITY HOUSE
30 MELLE STREET
PORTLAND

04101

774-2722

CLASSIFICATION: TRANSITIONAL HOUSING-SUBSTANCE ABUSE

CLIENTS: MEN 18 AND OLDER (UNDER 18 W/PARENTAL CONSENT) W/A SUBSTANCE ABUSE PROBLEM, MUST HAVE GONE THROUGH DETOX AND A REHABILITATION PROGRAM

SERVICES: Meals, medication monitoring, medical care, case management, individual and group counseling, must attend AA or NA twice a week, independent living skills.

HOURS: STAFFED 24 HOURS, OFFICE 8-4 MON-FRI

STAY: 3-6 MONTHS

BEDS: 31

FEE: BASED ON ABILITY TO PAY

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL, SCREENING TUESDAY 12:45 BY APPOINTMENT

COUNTY: CUMBERLAND

SHALOM APARTMENTS
180 AUBURN STREET
PORTLAND

04101

874-1090

CLASSIFICATION: PERMANENT HOUSING MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18, DIAGNOSED MENTALLY ILL

SERVICES: Apartments with kitchen facilities, case management, independent living skills, referral to other services.

HOURS: OFFICE 9-5 MON-FRI

STAY: UNLIMITED

BEDS: 11 INDIVIDUAL UNITS

FEE: 30% OF INCOME

ACCESS: SELF AND OUTSIDE REFERRAL, SCREENING PROCESS

COUNTY: CUMBERLAND

SHALOM HOUSE
90 HIGH STREET
PORTLAND

04101

874-1080

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18, DIAGNOSED MENTALLY ILL

SERVICES: Meals, case management, independent living skills, housing referral, referral to other services as needed.

HOURS: OFFICE 9-5 MON-FRI, HOUSE STAFFED 24 HRS

STAY: 1 YEAR

BEDS: 15

FEE: 30% OF INCOME

ACCESS: NEED REFERRAL, SCREENING PROCESS

COUNTY: CUMBERLAND

SPRING STREET (SHALOM HOUSE, INC.)
124 SPRING STREET
PORTLAND

04101

874-1080

CLASSIFICATION: PERMANENT HOUSING MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH A CHRONIC MENTAL ILLNESS

SERVICES: Case management, independent living skills.

HOURS: STAFFED 24 HOURS

STAY: UNLIMITED

BEDS: 8

FEE: \$260/MONTH, GENERAL ASSIS. ACCEPTED

ACCESS: SELF AND OUTSIDE REFERRAL, INTERVIEW REQUIRED

COUNTY: CUMBERLAND

YMCA RESIDENCE PROGRAM

10 FOREST AVENUE, PO BOX 1078

PORTLAND

04104

874-1111

CLASSIFICATION: TRANSITIONAL HOUSING-ADULT MALES

CLIENTS: MEN OVER 18

SERVICES: Voluntary use of referral service for job placement, alcohol and drug rehabilitation, meals, housing. Social activities. Access to YMCA facilities. Not handicap accessible.

HOURS: STAFF AVAILABLE 24 HOURS

STAY: UP TO ONE YEAR

FEE: \$60/WK 18/DAY PLUS 15/DEPOSIT

ACCESS: WALK IN

COUNTY: CUMBERLAND

YWCA WOMEN'S RESIDENCE

87 SPRING STREET

PORTLAND

04101

874-1130

CLASSIFICATION: TRANSITIONAL HOUSING-ADULT WOMEN

CLIENTS: WOMEN AGE 18 AND OVER

SERVICES:

STAY: UP TO 2 YEARS

BEDS: 64

FEE: SINGLE \$55/WEEK; DOUBLE \$45/WEEK

ACCESS: SELF OR OUTSIDE REFERRAL

COUNTY: CUMBERLAND

YWCA WOMEN'S SHELTER
87 SPRING STREET
PORTLAND

04101

874-1130

CLASSIFICATION: EMERGENCY SHELTER-ADULT WOMEN

CLIENTS: ADULT WOMEN AND TEEN MOTHERS WITH A CHILD UP TO ONE YEAR OLD

SERVICES: Travelers aid room (access through Salvation Army and Ingraham Volunteers), emergency food bank, emergency clothing, community kitchens, pool privileges.

HOURS: 24 HOURS

STAY: UP TO THREE WEEKS; POTENTIAL 3 MONTH EXTENSION

BEDS: 10

FEE: 1 FREE BED PER NIGHT/OTHERS \$11.00

ACCESS: REFERRALS FROM SALVATION ARMY OR INGRAHAM VOLUNTEERS

COUNTY: CUMBERLAND

CASA, INC., SCARBOROUGH
PO BOX 58
SCARBOROUGH

04074

883-6333

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: WOMEN AND MEN, AGES 15-22, SEVERELY TO MODERATELY DEVELOPMENTALLY DISABLED, NEED NURSING LEVEL CARE

SERVICES: Home care, attend day programs, licensed nursing staff 24 hours, recreational activities.

STAY: UNTIL ANOTHER PLACEMENT IS APPROPRIATE

BEDS: 8

ACCESS: NEED TO HAVE A BMR CASEWORKER

COUNTY: CUMBERLAND

YOUTH ALTERNATIVES
677 WESTEROOK STREET
SO. PORTLAND

04106

874-1184

CLASSIFICATION: EMERGENCY SHELTER-ADOLESCENT

CLIENTS: BOYS, AGES 7-17, WHO ARE IN A CRISIS

SERVICES: Outreach family counseling, family follow-up for six months after discharge; educational services. Must have consent of legal guardian for participation.

HOURS: OPEN 24 HOURS

STAY: UP TO THREE WEEKS

BEDS: 9

FEE: NONE

ACCESS: SELF, FAMILY & COMMUNITY MEMBERS, SOCIAL SERVICE PROVIDERS

COUNTY: CUMBERLAND

CROSSROADS FOR WOMEN
144 MAIN STREET
SO. WINDHAM

04082

892-2192

CLASSIFICATION: TRANSITIONAL HOUSING-SUBSTANCE ABUSE

CLIENTS: WOMEN AGES 14 AND UP WITH A SUBSTANCE ABUSE PROBLEM

SERVICES: Meals, medical care, individual and group counseling, educational program of lectures and assignments, housing referral, aftercare plan. Not handicap accessible.

HOURS: STAFFED 24 HOURS

STAY: 28 DAYS

BEDS: 13

FEE: NOT REQUIRED, SLIDING SCALE

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL

COUNTY: CUMBERLAND

FRANKLIN COUNTY

HOUSING PROGRAM, TRI COUNTY M.H.S.
2 MIDDLE STREET
FARMINGTON

04938

778-3556

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH MENTAL OR EMOTIONAL DISABILITIES, READY TO LIVE INDEPENDENTLY.

SERVICES: Clients must have been with a primary therapist for at least months. Assist to find housing and financial aid, independent living skills, follow up until established in new residence.

ACCESS: REFERRAL FROM PRIMARY THERAPIST
COUNTY: FRANKLIN

HANCOCK COUNTY

MOUNT DESERT ISLAND YWCA
36 MOUNT DESERT STREET
BAR HARBOR

04609

288-5008

CLASSIFICATION: EMERGENCY SHELTER-ADULT WOMEN

CLIENTS: WOMEN, NO YOUNG CHILDREN WITHOUT PARENT

SERVICES: Kitchen facility; referral to community agencies. Child care on a sliding fee scale; access to exercise programs for a fee. Strict rules: no men, no alcohol and no drugs. Not handicap accessible.

HOURS: 24 HOURS

STAY: DEPENDS ON ABILITY TO PAY

BEDS: 3

FEE: NONE FOR A SHORT TIME, SLIDING FEE

ACCESS: WALK IN, SUMMER ANYTIME, WINTER 9:30 - 4:30

COUNTY: HANCOCK

MANDALA FARM
P.O. BOX 44
EAST ORLAND

04431

469-3018

CLASSIFICATION: EMERGENCY SHELTER-TRANSITIONAL HOUSING

CLIENTS: WOMEN, MEN, CHILDREN, FAMILIES

SERVICES: Therapeutic community detting, counseling, substance abuse counseling, independent living skills, housing referral, parenting classes, job training, transportation, clothing, HOME Co-op social worker does some case management. Handicapped accessible.

HOURS: 24

STAY: UNLIMITED

BEDS: 22

FEE: NONE

ACCESS: SELF REFERRAL

COUNTY: HANCOCK

ST. FRANCIS INN
ROUTE 1
EAST ORLAND

04431

469-7658

CLASSIFICATION: EMERGENCY SHELTER-TRANSITIONAL HOUSING

CLIENTS: SINGLE WOMEN AND MEN OVER 18, FAMILIES

SERVICES: Kitchen facility, referral to food assistance; housing referral, transportation; HOME Inc. provides outreach work. Child care available at HOME Inc. Handicap accessible.

HOURS: OPEN 24 HOURS

STAY: NOT MORE THAN ONE YEAR

BEDS: 12

FEE: NONE

ACCESS: WALK IN OR CALL, REFERRAL ACCEPTED

COUNTY: HANCOCK

HOMESTEAD PROJECT
P.O. BOX 663
ELLSWORTH

04605

667-7073

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AND BOYS, AGES 13-17, BEHAVIORALLY HANDICAPPED, RESIDENTS OF MAINE, VERMONT, OR NEW HAMPSHIRE

SERVICES: Special education. Group work focusing on oppositional, identity and conduct disorders; specialized group and individual counseling as needed, individual treatment plans; positive reinforcement of appropriate behavior. Camping, hiking, canoeing.

STAY: BASED ON INDIVIDUAL TREATMENT PLAN

BEDS: 38

FEE: PAID BY DHS

ACCESS: DHS OR SPEC. ED DIRECTOR; ALSO CALL 667-2021

COUNTY: HANCOCK

DOROTHY HANCE HOME

P.O. BOX 10

ORLAND

04472

469-2886

CLASSIFICATION: EMERGENCY SHELTER-TRANSITIONAL HOUSING

CLIENTS: WOMEN AND MEN OVER 40, MAY BE VICTIMS OF DOMESTIC VIOLENCE

SERVICES: Food provided at first, then responsible for own food. Crisis intervention, some independent living skills, housing referral, family planning, job location, transportation, clothing, referral to other services as needed. Access to all HOME Inc. services, including day care. Handicap accessible.

HOURS: 24

STAY: NO LIMIT, SHORT AND LONG TERM POSSIBLE

BEDS: NORMALLY 7-14, UP TO 32 POSSIBLE

FEE: DONATION ACCORDING TO INCOME

ACCESS: MUST BE REFERRED BY SOMEONE

COUNTY: HANCOCK

KENNEBEC COUNTY

BREAD OF LIFE MINISTRY
157 HOSPITAL STREET
AUGUSTA

04330

622-2946

CLASSIFICATION: EMERGENCY SHELTER-FAMILY, ADULT

CLIENTS: SINGLE WOMEN AND MEN, FAMILIES

SERVICES: No meals. Case management, counseling, housing referral, referral for other services. Not handicap accessible.

HOURS: 6PM - 9AM SEVEN DAY/WEEK

STAY: 7 DAYS

BEDS: 10 (2 DBL); 2 WOMEN, 6 MEN, 2 CRIBS

ACCESS: MUST HAVE AN OUTSIDE REFERRAL

COUNTY: KENNEBEC

ELM ST HOUSE-MOTIVATIONAL SERVICES
114 STATE STREET
AUGUSTA

04330

626-3465

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH PSYCHIATRIC DISABILITY

SERVICES: Independent living skills, case management, crisis intervention, some group activities. 24 hour support.

HOURS: 24 HOUR SUPPORT

STAY: LONG TERM BUT NOT PERMANENT

BEDS: 11

FEE: 20% OF INCOME PLUS FOOD & PHONE

COUNTY: KENNEBEC

KENNEBEC COUNTY

FAMILY VIOLENCE PROJECT

P.O. BOX 304

AUGUSTA

04330

623-8637

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS: VICTIMS OF DOMESTIC VIOLENCE: WOMEN AND THEIR CHILDREN (BOYS UNDER 14 YEARS OLD)

SERVICES: Kitchen facilities (provide own food), crisis intervention, support groups, housing referral, children's program, clothing, free child care on side. Not handicap accessible. CRISIS LINE 623-3569.

HOURS: 24 HRS. STAFFED MON-FRI 8:30AM - 5PM

STAY: 4 WEEKS

BEDS: 10 BEDS, 4 CRIBS

FEE: NONE

ACCESS: SELF, OUTSIDE REFERRAL; WALK IN OR CALL HOTLINE 1-800-452-1930

COUNTY: KENNEBEC

HEARTHESIDE

RFD #4, BOX 609

AUGUSTA

04330

547-3065

CLASSIFICATION: TRANSITIONAL HOUSING-SUBSTANCE ABUSE

CLIENTS: LATE AND FINAL STAGE CHEMICALLY DEPENDENT WOMEN AND MEN OVER 25, HAVE TO HAVE BEEN THROUGH DETOX

SERVICES: Meals prepared by clients. Mediation monitoring, substance abuse counseling, independent living skills, housing and employment referral, transportation, recreational activities.

HOURS: 24

STAY: 9 MONTHS - 1 YEAR

BEDS: 6 MALE AND 6 FEMALE

FEE: SLIDING FEE SCALE

ACCESS: SELF AND OUTSIDE REFERRAL, CALL FOR AN APPOINTMENT

COUNTY: KENNEBEC

MIDDLE STREET HOUSE-MOTIVATIONAL SE
114 STATE STREET
AUGUSTA 04330

626-3465

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH A PSYCHIATRIC DISABILITY

SERVICES: Independent living skills, case management, 24 hour support,
crisis intervention, some group activities.

HOURS: 24 HOUR SUPPORT

STAY: 1 TO 1 1/2 YEARS

BEDS: 10

FEE: 30% OF INCOME

ACCESS: SELF REFERRAL POSSIBLE; PREVIOUS SERVICE PROVIDER INPUT NEEDED

COUNTY: KENNEBEC

SUNRISE HOUSE-MOTIVATIONAL SERVICES
114 STATE STREET
AUGUSTA 04330

626-3465

CLASSIFICATION: PERMANENT HOUSING MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18, HEARING IMPAIRED AND PSYCHIATRICALY
DISABLED

SERVICES: Independent living skills, case management, 24 hour support,
crisis intervention, some group activities.

STAY: UNLIMITED

BEDS: 5

FEE: MINIMAL CLIENT PARTICIPATION

COUNTY: KENNEBEC

VETERAN'S ADM. CTR. TREATMENT PROG.

TOGUS

04330

623-8411

CLASSIFICATION: TRANSITIONAL HOUSING-SUBSTANCE ABUSE

CLIENTS: SUBSTANCE ABUSE, VETERANS WITH PROOF OF SERVICE, WOMEN AND MEN OVER 18

SERVICES: Meals, medication monitoring, case management, individual, group and family counseling, independent living skills and job training available in hospital, educational program. Handicap accessible.

HOURS: 24 OFFICE 7:30-4 MON-FRI

STAY: 21 DAYS

BEDS: 22

FEE: NOT REQUIRED, SLIDING SCALE

ACCESS: SELF AND OUTSIDE REFERRAL, CALL FOR AN INTERVIEW

COUNTY: KENNEBEC

KENNEBEC VALLEY MENTAL HEALTH CENTER

NORTH STREET

WATERVILLE

04901

873-2136

CLASSIFICATION: PERMANENT HOUSING MENTAL HEALTH

CLIENTS: HOMELESS WOMEN AND MEN OVER 18 WITH PERSISTENT MENTAL ILLNESS

SERVICES: Housing committee coordinates support services, independent living skills, all other services referred.

HOURS: OFFICE 8-4:30 M-F, EMERGENCY SERV. 24 HRS

BEDS: 7 APARTMENTS

FEE: 30% OF INCOME

ACCESS: SELF AND OUTSIDE REFERRAL, SCREENING

COUNTY: KENNEBEC

KVCAP, TRANSITIONAL LIVING DEMONSTR
P.O. BOX 278
WATERVILLE

04901

873-2122

CLASSIFICATION: TRANSITIONAL HOUSING-FAMILY

CLIENTS: FAMILIES WITH AT LEAST ONE CHILD UNDER 16

SERVICES: Case management, counseling, independent living skills, housing referral, referral to other services as needed, follow-up counseling.

HOURS: WEEKLY VISITS BY CASE WORKER

STAY: 6 MONTHS-2 1/2 YEARS

BEDS: 2 APTS W/2 BDRMS., 2 APTS W/ 3 BDRMS

FEE: \$0 -\$150/MONTH

ACCESS: SELF OR OUTSIDE REFERRAL; CALL FOR AN APPT/SCREENING

COUNTY: KENNEBEC

KVCAP-TRANS. LIVING FOR TEENS
P.O. BOX 278
WATERVILLE

04901

596-0361

CLASSIFICATION: TRANSITIONAL HOUSING-PREGNANT/PAREN

CLIENTS: TEENAGE PARENTS

SERVICES: Adolescent pregnancy counseling, in depth case management, counseling, independent living skills, housing referral.

STAY: 6 MONTHS - 2 1/2 YEARS

BEDS: 4 UNITS

FEE: \$0-\$150/MONTH

ACCESS: SELF AND OUTSIDE REFERRAL, SCREENING PROCESS

COUNTY: KENNEBEC

WATERVILLE COOPERATIVE APARTMENTS
14 LLOYD ROAD
WATERVILLE

04901

872-7661

CLASSIFICATION: PERMANENT HOUSING MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 WITH A HISTORY OF MENTAL ILLNESS

SERVICES: Unsupervised apartments, staff available for crisis intervention.

BEDS: 2 APTS. WITH 2 BEDROOMS EACH

FEE: \$175/MONTH

ACCESS: SELF AND OUTSIDE REFERRAL

COUNTY: KENNEBEC

KNOX COUNTY

COMMUNITY SCHOOL
P.O. BOX 555
CAMDEN

04843

236-3000

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: FEMALE/MALE ADOLESCENTS AGES 16-20 WHO ARE HIGH SCHOOL DROP OUTS

SERVICES: One on one teacher/counselor relationship, case management, counseling. Students cook, work and attend school, group rap with MSW facilitator. Camping trips, aftercare programs, graduates with high school diploma.

STAY: 6 MONTHS

BEDS: 8

ACCESS: SELF OR OUTSIDE REFERRAL, INTERVIEW PROCESS

COUNTY: KNOX

MID-COAST HUMAN RESOURCES COUNCIL
P.O. BOX 808, 43 PARK STREET
ROCKLAND

04841

596-0361

CLASSIFICATION: TRANSITIONAL HOUSING-FAMILY

CLIENTS: LOW-INCOME FAMILIES W/AT LEAST ONE PARENT OVER 18 AND HOMELESS OR AT IMMEDIATE RISK OF BECOMING SO; MUST AGREE TO WORK WITH CASE MANAGER.

SERVICES: Bi-weekly meetings with case manager, case management, independent living skills, housing referral.

HOURS: 8-4:30 MON-FRI; NO ON SITE SUPERVISION

STAY: UP TO 2 1/2 YEARS

BEDS: 2 APTS. WITH 2 BEDROOMS EACH

FEE: \$150/MONTH

ACCESS: SELF AND OUTSIDE REFERRAL, SCREENING PROCESS

COUNTY: KNOX

KENNEBEC COUNTY

NEW HOPE FOR WOMEN

P.O. BOX 642, 459 MAIN STREET
ROCKLAND 04841

594-2128

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS: VICTIMS OF DOMESTIC VIOLENCE, WOMEN (OVER 18 OR EMANCIPATED) AND THEIR CHILDREN

SERVICES: Women and children placed in safe homes. Crisis counseling, information and referral, housing referral, legal advocacy, survivors of sexual abuse group in Belfast. Not handicap accessible.

HOURS: 24 HOURS, OFFICE MONDAY THROUGH FRIDAY

STAY: 1 TO 2 NIGHTS

BEDS: 6 TO 10 SAFE HOUSES AT ANY TIME

FEE: NONE

ACCESS: CALL 24 HOUR NUMBER 594-2129

COUNTY: KNOX

MID-COAST HOSPITALITY HOUSE

P.O. BOX 155
ROCKPORT 04856

594-1422

CLASSIFICATION: EMERGENCY SHELTER-FAMILY, ADULT

CLIENTS: WOMEN AND MEN OVER 18, FAMILIES

SERVICES: Dinner and breakfast, referrals, transportation.

HOURS: STAFFED 24 HOURS; CLIENTS STAY 5PM -9AM

STAY: SHORT TERM, DEPENDS ON INDIVIDUAL

BEDS: 10

FEE: NOT REQUIRED; SLIDING SCALE

ACCESS: MUST HAVE A REFERRAL **COUNTY:** KNOX

LINCOLN COUNTY

WEYMOUTH HEINRICK HOUSE
ROUTE 130
BRISTOL

04539

563-1444

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS AGES 12-17 WITH A HISTORY OF PROBLEMS WITH PARENTS, SCHOOLS, LEGAL AUTHORITIES, OR PEERS

SERVICES: Group homes segregated by sex, run by live in professional teaching couple. Motivational system, counseling, community based therapeutic services and education available.

COUNTY: LINCOLN

WEYMOUTH CURTIS HOUSE
MOUNTAIN ROAD
JEFFERSON

04348

563-1444

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AGES 12-17 WITH A HISTORY OF PROBLEMS WITH PARENTS, SCHOOLS, LEGAL AUTHORITIES, OR PEERS

SERVICES: Group home segregated by sex, run by professional live-in teaching couple. Motivation system, counseling, community based therapeutic services and education available.

COUNTY: LINCOLN

LINCOLN COUNTY

OXFORD COUNTY

CHISHOLM FAMILY SHELTER
100 YORK STREET
RUMFORD

04257

364-4551

CLASSIFICATION: EMERGENCY SHELTER-FAMILY, ADULT

CLIENTS: SINGLE WOMEN AND MEN OVER 18, FAMILIES

SERVICES: Kitchen facility with food provided, case management, housing referral, transportation, clothing, referral to services as needed. Not handicap accessible.

HOURS: ACCESSIBLE 24 HOURS/DAY (STAFFED-DAY)

STAY: 3 DAYS

BEDS: 6 AT ALL TIMES; 20-25 COTS

FEE: NONE

ACCESS: WALK IN, CALL, REFERRALS ACCEPTED

COUNTY: OXFORD

RUMFORD GROUP HOME
346 PINE STREET
RUMFORD

04276

364-3551

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS 13-18

SERVICES: Family reunification and family counseling, meals, medication monitoring, case management, counseling, independent living skills, housing referral, family, job training, recreational activities. Have to be in some educational program.

STAY: UNLIMITED

BEDS: 10

FEE: \$56.75/DAY PAID BY RESPONSIBLE PARTY

ACCESS: MUST HAVE A REFERRAL SOURCE

COUNTY: OXFORD

RUMFORD GROUP HOME, INC.
346 PINE STREET
RUMFORD

04276

364-3551

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS 16-20, SEMI-INDEPENDENT LIVING PROGRAM FOR HOMELESS YOUTH

SERVICES: Structured program. Medication monitoring, case management, counseling, independent living skills, housing referral, family planning, job training, recreational activities. Must be in an educational program.

STAY: 2 YEARS

BEDS: 4

FEE: \$45/DAY

ACCESS: MUST HAVE A REFERRAL SOURCE

COUNTY: OXFORD

COMMUNITY CONCEPTS TRANSITIONAL LIVING
P.O. BOX 278, MARKET SQUARE
SOUTH PARIS

04281

743-7716

CLASSIFICATION: TRANSITIONAL HOUSING-FAMILY, ADULT

CLIENTS: SINGLE ADULTS, FAMILIES; PRIORITY TO FAMILIES; HOMELESS OR AT RISK OF HOMELESSNESS; LOW INCOME

SERVICES: In depth case management, counseling, independent living skills, housing referral, job training, transportation, referral to other services as needed.

HOURS: OFFICE: 8-4:30 MON-FRI

STAY: 6 MONTHS TO 2 YEARS

BEDS: 4 APTS WITH 2 BEDROOMS EACH

FEE: 30% OF INCOME

ACCESS: SELF AND OUTSIDE REFERRAL, CALL FOR AN APPOINTMENT

COUNTY: OXFORD

PENOBSCOT COUNTY

BANGOR HEALTH AND WELFARE
103 TEXAS AVENUE
BANGOR

04401

941-0257

CLASSIFICATION: EMERGENCY SHELTER-FAMILY

CLIENTS: SINGLE WOMEN AND MEN OVER 18, FAMILIES

SERVICES: Two shelters: one for men, one for women, children go with their parent(s). Meals, case management, transportation, clothing. Not handicap accessible.

HOURS: WOMENS SHELTER: 24; MENS SHELTER: 5PM-8AM

STAY: 30 DAYS

BEDS: WOMEN: 10; MEN: 4

FEE: NONE

ACCESS: WALK-IN, SELF AND OUTSIDE REFERRAL

COUNTY: PENOBSCOT

BANGOR RESCUE MISSION
126 THIRD STREET
BANGOR

04401

942-4161

CLASSIFICATION: EMERGENCY SHELTER-ADULT

CLIENTS: MEN OVER 18; NEED TO BE ABLE TO WORK, MUST ATTEND CHURCH SERVICES.

SERVICES: Meals, counseling, substance abuse counseling, job location, transportation, clothing educational assistance.

STAY: INDEFINITE

BEDS: 4

FEE: NONE; \$5 IF THEY HAVE INCOME

ACCESS: WALK IN, SELF REFERRAL, OUTSIDE REFERRAL.

COUNTY: PENOBSCOT

GREATER BANGOR AREA SHELTER
26 CEDAR STREET
BANGOR

04401

947-0092

CLASSIFICATION: EMERGENCY SHELTER-FAMILY, ADULT

CLIENTS: SINGLE WOMEN AND MEN, FAMILIES

SERVICES: Evening meal, medical care, case management, counseling, independent living skills, housing referral, clothing. Not handicap accessible.

HOURS: SUMMER 7PM TO 7AM; WINTER 5:30PM TO 8AM

STAY: 5 NIGHTS PER MONTH

BEDS: 15, ASSIGNED AS NEEDED

FEE: NONE

ACCESS: WALK-IN, SELF REFERRAL

COUNTY: PENOBSCOT

HOPE HOUSE, INC.
179 INDIANA AVENUE
BANGOR

04401

941-2879

CLASSIFICATION: EMERGENCY SHELTER-SUBSTANCE ABUSE

CLIENTS: WOMEN AND MEN OVER 18 WITH A SUBSTANCE ABUSE PROBLEM

SERVICES: Emergency shelter, detox, extended treatment; meals, medical care, counseling, substance abuse counseling, management, life skills, 12 step program, transportation, clothing.

HOURS: STAFFED 24 HOURS

STAY: EMERGENCY-24 HRS.; DETOX 3-10 DAYS; EXTEND UP TO 45 DAY

BEDS: 44; EMERGENCY 25, DETOX 19

FEE: NONE

ACCESS: WALK IN, SELF AND OUTSIDE REFERRALS

COUNTY: PENOBSCOT

OPPORTUNITY HOUSING
359 PERRY ROAD
BANGOR

04401

947-2730

CLASSIFICATION: EMERGENCY SHELTER-ADOLESCENT, ADULT

CLIENTS: BOYS AGES 14-17; WOMEN AND MEN OVER AGE 18

SERVICES: Meals. Referral to support services possible.

HOURS: 7A.M.-6P.M. FOR REFERRALS

STAY: 30 DAYS MAXIMUM

BEDS: ONE FOR ADOLESCENT; TWO FOR ADULTS

FEE: \$30 PER NIGHT

ACCESS: WALK-IN, SELF REFERRAL, OUTSIDE REFERRAL

COUNTY: PENOBSCOT

ORONO GROUP HOME
43 ILLINOIS AVENUE
BANGOR

04401

947-0366

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: MENTAL HEALTH DIAGNOSIS, WOMEN AND MEN OVER 18

SERVICES: Kitchen facilities. Case management, counseling available, housing referral, referral to other services as needed. Handicapped accessible.

HOURS: 24

STAY: NO LIMIT

BEDS: 8

FEE: 30% OF INCOME

ACCESS: SELF AND OUTSIDE REFERRAL

COUNTY: PENOBSCOT

PENOBSCOT JOB CORPS CENTER
P.O. BOX 1136
BANGOR

04401

842-1700

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT, AD

CLIENTS: WOMEN AND MEN, AGES 16-24, RESIDENTS OF U.S., IN NEED OF VOCATIONAL TRAINING, OUT OF SCHOOL OR UNABLE TO BENEFIT FROM PUBLIC SCHOOLS

SERVICES: Self-paced academics, "Hands on Training" in various vocations, basic health and medical services, pre-employment training classes, job placement counseling, off center work experience, clothing allowance.

STAY: UP TO 24 MONTHS

FEE: FREE ROOM AND BOARD + EARN \$40/MONTH

ACCESS: SELF REFERRAL; 1-800-842-1700 JOB CORPS

COUNTY: PENOBSCOT

PROJECT ATRIUM
265 HAMMOND STREET
BANGOR

04401

941-2825

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AND BOYS, AGES 14-18

SERVICES: Group and individual counseling; referral to other services as needed. Attend an education program.

STAY: AVERAGE 8-12 MONTHS

COUNTY: PENOBSCOT

PROJECT REBOUND—WELLSPRING, INC.
98 CUMBERLAND STREET
BANGOR 04401

941-1600

CLASSIFICATION: TRANSITIONAL HOUSING—SUBSTANCE ABUSE

CLIENTS: SUBSTANCE ABUSERS, GIRLS AND BOYS AGES 14-19

SERVICES: Meals, medication monitoring, case management, counseling, substance abuse counseling, independent living skills, some housing referral, outside referral for other services. Handicap accessible.

HOURS: 24

STAY: 6-12 MONTHS

BEDS: 12

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL

COUNTY: PENOBSCOT

SPRUCE RUN ASSOCIATION

P.O. BOX 653

BANGOR

04401

947-0496

CLASSIFICATION: EMERGENCY SHELTER—DOMESTIC VIOLENCE

CLIENTS: VICTIMS OF DOMESTIC VIOLENCE: WOMEN AND THEIR CHILDREN.

SERVICES: Counseling, support group, crisis intervention, children's program, outreach and referral.

HOURS: 24

STAY: 30 DAYS AVERAGE

BEDS: 5 FAMILIES AT ONCE COMFORTABLY

FEE: \$1 PER DAY PER FAMILY

ACCESS: SELF REFERRAL, OUTSIDE REFERRAL

COUNTY: PENOBSCOT

ST. ANDRE GROUP HOME
87 OHIO STREET
BANGOR

04401

945-5021

CLASSIFICATION: TRANSITIONAL HOUSING-PREGNANT/PAREN

CLIENTS: YOUNG WOMEN WITH INFANTS, ONLY ONE CHILD PER MOTHER

SERVICES: Residents cook meals. Medication monitoring, case management, independent living skills, family planning, parenting classes including parenting skills, self-esteem, assertiveness, healthy relationships, discipline. Housing referral, clothing.

HOURS: 24

STAY: 3 MONTHS-2 YEARS

BEDS: 4 PLUS 4 CRIBS

FEE: NOT REQUIRED, SLIDING FEE SCALE

ACCESS: SELF AND OUTSIDE REFERRAL, INTERVIEW NECESSARY

COUNTY: PENOBSCOT

TRANSITIONAL LIVING APARTMENTS
43 ILLINOIS AVENUE
BANGOR

04401

947-0366

CLASSIFICATION: TRANSITIONAL HOUSING-MENTAL HEALTH

CLIENTS: WOMEN AND MEN OVER 18 DIAGNOSED WITH A MENTAL ILLNESS

SERVICES: Case management, counseling, substance abuse counseling, independent living skills, housing referral.

HOURS: SUPERVISED 4 HRS/DAY 5 DAYS/WEEK, ON CALL

STAY: NOT SET BUT ENCOURAGED TO "MOVE ON"

BEDS: 6

FEE: \$125/MONTH

ACCESS: SELF AND OUTSIDE REFERRAL, SCREENING

COUNTY: PENOBSCOT

WELLSPRING, INC.
319 STATE STREET
BANGOR

04401

941-1600

CLASSIFICATION: TRANSITIONAL HOUSING-SUBSTANCE ABUSE

CLIENTS: WOMEN AND MEN OVER 18 WITH SUBSTANCE ABUSE PROBLEM; SEPARATE
HALFWAY HOUSES

SERVICES: Meals, medication monitoring, case management, counseling,
substance abuse counseling, independent living skills, referral to other
services as needed.

HOURS: 24
STAY: 6 MONTHS
BEDS: WOMEN 13, MEN 13
FEE: 25% OF INCOME WHEN EMPLOYED
ACCESS: SELF AND OUTSIDE REFERRAL, INTERVIEW
COUNTY: PENOBSCOT

KID'S KORNER
RFD #2, BOX 82
BREWER

04412

843-6141

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT DD

CLIENTS: GIRLS AND BOYS, AGES 5-18, WITH DEVELOPMENTAL DISABILITIES/MENTAL
RETARDATION

SERVICES: RESPITE: self care, A.D.L., personal independence, play and
leisure skills. LONG TERM: program coordination of ongoing medical
psycho-social, educational and administrative services.

STAY: LONG TERM TO AGE 18: RESPITE 18-21 DAYS MAX 60/YR
BEDS: 3 IN RESPITE; 3 IN LONG TERM
FEE: IN REGION \$32/NIGHT; OUT \$39/NIGHT
ACCESS: SELF AND OUTSIDE REFERRALS; APPLICATION PROCESS
COUNTY: PENOBSCOT

BIRCHCREST FARM -R.T.A.

RFD #2, BOX 76

LEVANT

04456

884-7346

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT MH

CLIENTS: BOYS, AGES 11-15, FOR WHOM NO LESS RESTRICTIVE ALTERNATIVE IS
AVAIL- ABLE, MODERATE TO SEVERE INTERPERSONAL AND INTRA-PSYCHIC DIFFICULTIES

SERVICES: Behavioral interventions, treatment/teaching plan,
multi-disciplinary supportive services, education, family integration
strategy. Case review team, community integration.

STAY: UNTIL 18

BEDS: 4

FEE: PAID BY DHS

ACCESS: REFERRAL FROM DHS

COUNTY: PENOBSCOT

PISCATAQUIS COUNTY

WOMENCARE/AEGIS ASSOCIATION

**P.O. BOX 192, MAIN STREET ABOVE KORSKY'S
DOVER-FOXCROFT**

04426

564-8165

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

**CLIENTS: VICTIMS OF DOMESTIC VIOLENCE: WOMEN AND THEIR CHILDREN (NO BOYS
OVER 16 YEARS OLD)**

**SERVICES: Clients are placed in safe homes. Women's support group, case
management, individual and group counseling, court advocacy, housing
referral, children's program.**

HOURS: SHELTER 24 HOURS; OFFICE M-F 8AM TO 4 PM

STAY: 72 HOURS

BEDS: SAFE HOMES

FEE: NONE

ACCESS: WALK IN OR CALL; AFTER HOURS NUMBER 564-8401

COUNTY: PISCATAQUIS

PISCATAQUIS COUNTY

SAGADAHOC COUNTY

RIVERSIDE ST. SPURWINK SCHOOL
RR BOX 1131, RIVERSIDE STREET
BRUNSWICK 04011

729-6692

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: BOYS, AGE 5-12; EMOTIONALLY DISTURBED/BEHAVIORALLY DISORDERED

SERVICES: Residential treatment center. Therapeutic milieu, special education program with individualized plan, individual, group and/or family therapy, psychiatric/psychological evaluations, recreation programs.

STAY: UP TO AGE 12
BEDS: 16 IN PROCESS OF BEING COMPLETED
FEE: USUALLY PAID BY SCHOOL DISTRICT
ACCESS: SELF OR OUTSIDE REFERRAL, SCREENING
COUNTY: SAGADAHOC

GROUP HOME-MILITARY & NAVAL CHILDREN
103 SOUTH STREET
BATH 04530

289-3555

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AND BOYS AGES 10-16

SERVICES: Public school education, in-house counseling, dormitory living, common meals, recreational activities. 24-hour supervision.

HOURS: 24 HOUR SUPERVISION
STAY: ONE YEAR OR LESS
BEDS: 8
FEE: SLIDING SCALE
ACCESS: SELF AND OUTSIDE REFERRAL
COUNTY: SAGADAHOC

TRANSITIONAL I&II CHILDREN & NAVAL CHILDREN

103 SOUTH ST

BATH

04530

289-3555

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENTS

CLIENTS: GIRLS AND BOYS AGES 16-17 REASONABLY CAPABLE OF INDEPENDENT LIVING WITHIN 2 YEARS (PHASE I); AGES 17-18 (PHASE II)

SERVICES: PHASE I: Public School education or GED activities; ion-house counseling and training, contracted therapies as needed, pre-vocational work experiences, health education, a vocational & leisure time activities, dormitory living, common meals, 24 hour supervision. PHASE II: Community job placement and support, completion of educational program, continued counseling, therapy, training, in-house apartment living with independent cooking, housekeeping, budgeting requirements, 24 hour supervision.

HOURS: 24 HOUR SUPERVISION

STAY: 2 YEARS

BEDS: 8

FEE: SLIDING SCALE

ACCESS: SELF AND OUTSIDE REFERRAL

COUNTY: SAGADOHOC

TRANSITIONAL III MIL & NAVAL CHILDREN

1093 SOUTH STREET

BATH

04530

289-3555

CLASSIFICATION: TRANSITIONAL HOUSING

CLIENTS: WOMEN AND MEN AGE 18 AND OVER

SERVICES: Independent living anywhere in the midcoast, Bath-Brunswick or Kennebec Valley area, with aftercare worker support for linking with community service agencies.

BEDS: 8

COUNTY: SAGADOHOC

SOMERSET COUNTY

GOODWILL HINCKLEY
P.O. BOX 129
HINCKLEY

04944

453-7335

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AND BOYS, AGES 12-GRADUATION, IN NEED OF A HOME

SERVICES: Residential home with a wife/husband team. Residents attend Averill School in special education, cooperative education or accelerated learning program. Residents work in some aspect of the facility; recreational opportunities.

STAY: 8 MONTHS TO 1 1/2 YEARS
BEDS: 90
FEE: SCHOLARSHIPS AVAILABLE
ACCESS: SELF AND OUTSIDE REFERRALS
COUNTY: SOMERSET

HOSPITALITY HOUSE
ROUTE 201, P.O. BOX 62
HINCKLEY

04944

453-6846

CLASSIFICATION: EMERGENCY SHELTER-FAMILY

CLIENTS: WOMEN AND MEN, FAMILIES, MINORS IF CLEARED BY THE STATE

SERVICES: Meals, medication monitoring, case management, independent living skills, housing referral, transportation, clothing, referral to other services as needed, TDD machine for the hearing impaired.

HOURS: 24
STAY: UNLIMITED
BEDS: UNKNOWN AT THIS TIME
FEE: NONE
ACCESS: WALK IN, SELF REFERRAL, OUTSIDE REFERRAL
COUNTY: SOMERSET

PITTSFIELD TRANSITIONAL HOUSE

PITTSFIELD 04967

CLASSIFICATION: TRANSITIONAL HOUSING

CLIENTS:

SERVICES:

COUNTY: SOMERSET

HALCYON HOUSE

P.O. BOX 502

SKOWHEGAN

04976

474-8574

CLASSIFICATION: EMERGENCY SHELTER-ADOLESCENT

CLIENTS: GIRLS AND BOYS, AGE 10-17, MUST HAVE CONSENT OF GUARDIAN; NO ONE ON PSYCHOTROPIC MEDICATION

SERVICES: Three meals/day, individual and group counseling, crisis intervention, independent living skills, transportation, clothing, teacher on staff for schooling. The referring agency or guardian must provide information and referral. Not handicap accessible.

HOURS: OPEN 24 HOURS

STAY: 21 DAYS MAXIMUM

BEDS: 10

FEE: DETERMINED CASE BY CASE

ACCESS: WALK-IN, SELF REFERRAL, OUTSIDE REFERRAL

COUNTY: SOMERSET

SKOWHEGAN TRANSITIONAL HOUSE

SKOWHEGAN

04976

CLASSIFICATION: TRANSITIONAL HOUSING-PREGNANT/PAREN

CLIENTS: PREGNANT TEENS AND TEEN MOTHERS; HOMELESS OR AT RISK OF HOMELESSNESS

SERVICES:

BEDS: 4 APARTMENTS

COUNTY: SOMERSET

WASHINGTON COUNTY

PENQUIS COMMUNITY ACTION PROGRAM
P.O. BOX 1162
BANGOR

04401

941-2830

CLASSIFICATION: TRANSITIONAL HOUSING-FAMILY

CLIENTS: LOW INCOME, HOMELESS FAMILIES WILLING TO PARTICIPATE IN SERVICES

SERVICES: Case management, referral to services as needed, weekly meeting with case manager.

HOURS: OFFICE 8:15-4:30 MON-FRI

STAY: UP TO 2 1/2 YEARS

BEDS: 1 APT. W/3 BEDROOMS, 1 APT. WITH 2

FEE: \$150/MONTH

ACCESS: SELF AND OUTSIDE REFERRAL, WAITING LIST, SCREENING PROCESS

COUNTY: WASHINGTON

WOMANKIND SATELLITE OFFICE
MAIN STREET, UNITED METHODIST CHURCH
CALAIS

04619

454-2311

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS: VICTIMS OF DOMESTIC VIOLENCE

SERVICES: Shelter in Machias; support group, court advocacy, community work through Calais Office.

HOURS: MON.- THURS. 9-3; CALL FOR APPOINTMENT

ACCESS: CRISIS NUMBER 1-800-432-7303

COUNTY: WASHINGTON

WOMANKIND, INC.
P.O. BOX 493
MACHIAS

04654

255-4785

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS: VICTIMS OF DOMESTIC VIOLENCE: WOMEN AND THEIR CHILDREN

SERVICES: Crisis line staffed with volunteers for counseling and referrals. Kitchen facility with some food available. Doctor available to come to shelter. Case management, counseling crisis intervention, support groups for women in shelter and in community, court advocacy, children's program, transportation, clothing, referral for other services as needed. Not handicap accessible.

HOURS: 24 HOURS, STAFFED DURING THE DAY ONLY

STAY: 4 WEEKS, NEGOTIABLE

BEDS: 6 PLUS CRIBS

FEE: NONE

ACCESS: WALK IN OR CALL; CRISIS LINE 1-800-432-7303

COUNTY: WASHINGTON

YORK COUNTY

YORK COUNTY SHELTER EXTENDED CARE
SMITH APTS, P.O. BOX 20
ALFRED 04002

324-1137

CLASSIFICATION: TRANSITIONAL HOUSING-ADULT

CLIENTS: WOMEN AND MEN OVER 18

SERVICES: Meals, medication monitoring, medical care, case management, counseling, substance abuse counseling, independent living skills, housing referral, job training in Notre Dame Bakery, job location, transportation, clothing. Handicap accessible.

HOURS: 24
STAY: 6-18 MONTHS; BMR RESPITE CLIENTS 1-5 DAYS
BEDS: 10
FEE: NO REQUIRED BASED ON ABILITY TO PAY
ACCESS: TRANSFER FROM YORK CO. EMERGENCY SHELTER
COUNTY: YORK

YORK COUNTY SHELTERS, INC.
P.O. BOX 20, OLD JAIL ON ROUTE 11
ALFRED 04002

324-6591

CLASSIFICATION: EMERGENCY SHELTER-ADULT

CLIENTS: SINGLE WOMEN AND MEN OVER 18

SERVICES: Meals, medication monitoring, case management, individual and group counseling, independent living skills, housing referral, job training in Notre Dame bakery, clothing.

HOURS: STAFFED 24 HOURS
STAY: 2 WEEKS EMERGENCY SHELTER, 45 DAYS EXTENDED STAY
BEDS: 30: 24 MALE, 6 FEMALE
FEE: NONE REQUIRED; SLIDING SCALE/CLIENT
ACCESS: WALK IN, SELF REFERRAL, OUTSIDE REFERRAL
COUNTY: YORK

DAY ONE JAMES C. HARROD CENTER
P.O. BOX 41
BAR MILLS

04004

929-5166

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT SUB

CLIENTS: YOUNG WOMEN AND MEN AGES 16-24 WITH A SUBSTANCE ABUSE PROBLEM, NEED TO BE SOBER

SERVICES: Meals, medical care, case management, individual and group counseling, substance abuse counseling, independent living skills, housing referral, accredited. High school on site, job training, job location, transportation, clothing.

HOURS: 24

STAY: 9 MONTHS TO ONE YEAR

BEDS: 11

FEE: NOT REQUIRED, SLIDING SCALE

ACCESS: SELF AND OUTSIDE REFERRAL, INTERVIEW PROCESS

COUNTY: YORK

ST. ANDRE HOME, INC.
283 ELM STREET
BIDDEFORD

04005

282-3351

CLASSIFICATION: TRANSITIONAL HOUSING-PREGNANT/PAREN

CLIENTS: PREGNANT WOMEN, NO AGE RESTRICTIONS

SERVICES: Meals, individual and group counseling, parent education training, child care skills, child development, health and nutrition, communication skills, stress management, self-esteem, adoption services, case management. Involvement in an education program leading to a high school diploma or GED.

HOURS: 24

STAY: UP TO 6 MONTHS—MUST BE AT LEAST 3 MONTHS PREGNANT

BEDS: 8

FEE: NOT REQUIRED, SLIDING SCALE

ACCESS: SELF AND OUTSIDE REFERRAL, SCREENING PROCESS

COUNTY: YORK

MILESTONE FOUNDATION, INC.

88 UNION AVENUE

OLD ORCHARD BCH

04064

934-5231

CLASSIFICATION: TRANSITIONAL HOUSING-SUBSTANCE ABUSE

CLIENTS: LATE TO FINAL STAGE ALCOHOLICS, MEN ONLY, MUST BE SOBER AND ABLE TO CARE FOR THEMSELVES.

SERVICES: Three meals/day prepared by clients. Medication monitoring, consulting physician. Case management, crisis intervention, substance abuse counseling, informal independent living skills, recreational activities, referrals for counseling, job location, transportation. Home work with families of clients, aftercare needs. Clients do volunteer work outside agency. No detox program on site. Would accommodate client with handicap.

HOURS: 24

STAY: AVERAGE 8 MONTHS - ONE YEAR

BEDS: 20

FEE: PAYMENT NOT REQUIRED, SLIDING SCALE

ACCESS: MUST BE SCREENED TO DETERMINE STAGE OF ALCOHOLISM. CALL APPOINTMENT

COUNTY: YORK

SWEETSER'S RESIDENTIAL TREATMENT

50 MOODY STREET

SACO

04072

284-5981

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT

CLIENTS: GIRLS AND BOYS, AGES 6-18

SERVICES: Interdisciplinary team provides 24 hours therapeutic experience; individual, group, family therapy, physical and mental health services, special education programing, recreational activities, life-skills training.

BEDS: 67 IN FIVE COTTAGES

ACCESS: INTAKE SERVICES 284-5981 EXT. 255; 883-2749, 772-7479

COUNTY: YORK

SWEETSER'S THERAPEUTIC GROUP HOME
50 MOODY STREET
SACO

04072

284-5981

CLASSIFICATION: TRANSITIONAL HOUSING-ADOLESCENT MH

CLIENTS: GIRLS AND BOYS, AGES 13-17, WHO ARE IN CONFLICT WITH THEIR HOME AND COMMUNITY ENVIRONMENTS

SERVICES: Full-time academic or vocational program, structured group living, independent living skills, individual counseling.

BEDS: 6

ACCESS: ADMINISTRATIVE ASSISTANT, INTAKE SERVICES, CALL 284-5981, EXT 255

COUNTY: YORK

CARING UNLIMITED
P.O. BOX 590
SANFORD

04073

282-2182

CLASSIFICATION: EMERGENCY SHELTER-DOMESTIC VIOLENCE

CLIENTS: VICTIMS OF DOMESTIC VIOLENCE: WOMEN OVER 18 OR EMANCIPATED WOMEN AND THEIR CHILDREN

SERVICES: Kitchen facility with food, laundry. Case management, counseling, crisis intervention, housing and job referral through newspaper. Transportation, clothing, in-house support groups as needed, support groups for women and children outside shelter, court advocacy. Handicap accessible.

HOURS: 24 HRS., STAFF ON SITE 9AM - 5PM

STAY: 2-4 WEEKS

BEDS: 11 PLUS 4 CRIBS

FEE: NONE, ASK FOR \$5 DONATION PER WEEK

ACCESS: CALL HOTLINE, 324-1802 OR 282-2182

COUNTY: YORK

W.I.T.H.I.N. (YORK COUNTY SHELTERS)

23 RIVERSIDE

SANFORD

04073

324-3600

CLASSIFICATION: TRANSITIONAL HOUSING-PREGNANT/PAREN

CLIENTS: WOMEN AND THEIR CHILDREN, NO AGE RESTRICTIONS

SERVICES: Meals, medication monitoring, case management, counseling, substance abuse counseling, independent living skills, education, job training, group skills, socialization skills, house management, house referral.

HOURS: 24

STAY: 18 MONTHS

BEDS: 9 PLUS 5 CRIBS, EXPANSION TO 11

FEE: SLIDING SCALE

ACCESS: SELF AND OUTSIDE REFERRAL, INTERVIEW

COUNTY: YORK

YORK COUNTY COMMUNITY ACTION CORP.

P.O. BOX 72

SANFORD

04073

324-5762

CLASSIFICATION: TRANSITIONAL HOUSING-FAMILY

CLIENTS: LOW INCOME HOMELESS FAMILIES; PARENTS OVER 18 AND CHILDREN UNDER 16, WILLING TO PARTICIPATE IN PROGRAM

SERVICES: Case management, housing referral, budgeting skills, referral to other services as needed.

HOURS: OFFICE 8-5 MON-FRI

STAY: UP TO 2 1/2 YEARS

BEDS: 3 SMALL 2 BEDROOM UNITS

FEE: \$150 MONTH

ACCESS: SELF AND OUTSIDE REFERRAL

COUNTY: YORK

STUDIES ON HOMELESSNESS

Independent and Federal Studies:

Families on the Move
Breaking the Cycle of Homelessness
The Edna McConnell Clark Foundation - 1990

Programs to Help the Hungry & Homeless
What Corporations Can Do to Help End Homelessness
The National Alliance to End Homelessness - 1990

Education for Homeless Adults: The First Year
U.S. Department of Education - 1990

Reaching Out Across America
Mentally Ill Veterans Programs
U.S. Department of Veterans Affairs - 1989

Homelessness in the States
Council of State Governments - 1989

Community Care for Homeless Families
The Better Homes Foundation
Interagency Council on the Homeless - 1990

Homelessness - Changes in the Interagency Council
on the Homeless
Homelessness - Too Early to Tell What Kinds of
Prevention Assistance Works Best
Homelessness - Access to McKinney Act Programs
Homelessness - McKinney Act Reports Could Improve
Federal Assistance Efforts
U.S. General Accounting Office - 1990

Dropout Prevention for Homeless & Foster Care Youth
Metropolitan Center for Educational Research - N.Y.U.
*funded by - U.S. Dept. of Health & Human Services
U.S. Dept. of Labor - 1989

Financing Services for Homeless Mentally Ill Persons
National Resource Center on Homelessness and Mental
*funded by
National Institute of Mental Health - 1989

Creative Sources of Funding for Programs
for Homeless Families
Georgetown University
*funded by - National Institute of Mental Health &
U.S. Dept. of Health & Human Services - 1990

State of Maine:

**Educational Access for Homeless School Age Children
University of Southern Maine
State of Maine Department of Education - 1990**

**Selected Children's Group Home Review - 1990
Children's Emergency Shelter Program Review - 1989
Interdepartmental Council - Subcommittee on
Residential, Group & Community Care**

**Homeless Not Helpless in Maine
Legal Right Directory
Pine Tree Legal - 1989**

**Poverty Today
Blue Ribbon Commission on Energy Policy - 1990**

**Homeless Shelter Survey
City of Portland, Maine - 1989**

**Executive Summary: Mental Health and Other
Characteristics of Homeless Adolescents:
A Descriptive Analyzes of Multi-Agency Case Records.
University of Southern Maine: Department of
Mental Health & Mental Retardation - 1991**