CASE MANAGEMENT: YOUNG ADULTS IN TRANSITION
WHAT ARE REASONS YOUNG PEOPLE DO NOT GO IN FOR SERVICES?

- Stigma
- Guilt/Shame
- Lack of finances
- Lack of insight on mental illness/trauma
- Lack of knowledge about resources
- Access to services
Some Common Behavioral Health Challenges for Young Adults

MAJOR DEPRESSION

BIPOLAR DISORDER

ANXIETY DISORDER

SCHIZOPHRENIA

SUICIDALITY
<table>
<thead>
<tr>
<th>MENTAL HEALTH DISORDERS</th>
<th>SYMPTOMS/BEHAVIORS (5 of 9)</th>
<th>HOW YOU CAN HELP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major Depression</td>
<td>Depressed Mood&lt;br&gt;Changes in sleep pattern or body movement&lt;br&gt;Little interest in activities&lt;br&gt;Inability to sleep/oversleeping&lt;br&gt;Pacing or slowing of thought</td>
<td>Be mindful of mood shifts and alternative sleep patterns&lt;br&gt;Look for when they seem most productive</td>
</tr>
<tr>
<td>One of the most common reasons people seek MH Services</td>
<td>Guilt/Worthlessness; Frequent thoughts of death or suicide</td>
<td>Learn to differentiate self harming behavior versus suicidality</td>
</tr>
<tr>
<td>Highest among Individuals aged 18-25</td>
<td>Difficulty concentrating&lt;br&gt;Fatigue</td>
<td>Focus on short term goals they want to accomplish.</td>
</tr>
</tbody>
</table>
# Suicidality V. S. Self Harming

<table>
<thead>
<tr>
<th>Suicidality</th>
<th>V. S. Self Harming</th>
</tr>
</thead>
<tbody>
<tr>
<td>The deliberate taking of one’s life.</td>
<td>A form of mutilation.</td>
</tr>
</tbody>
</table>

Often the last resort when the person feels there are no other options. Is about escaping feelings, coping with stressors, expressing pain, punishing themselves, euphoria (causes addiction)

Types: Cutting, Burning, Hitting, Picking at skin, Pulling hair, Biting, Carving

Warning Signs:  
- Seeing cuts and burns  
- Wearing hoods or long sleeves during hot weather  
- Spending long periods of time locked in a bathroom/bedroom  
- Isolation and avoiding social situations
BIPOLAR DISORDER

https://www.youtube.com/watch?v=KSvk8LLBo2g
<table>
<thead>
<tr>
<th>MENTAL HEALTH DISORDERS</th>
<th>SYMPTOMS/BEHAVIORS</th>
<th>HOW YOU CAN HELP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety Disorder</td>
<td>Excessive Fear; Worry about things before they happen</td>
<td>Reorient them to logic and problem solving methods</td>
</tr>
<tr>
<td>Affects 40 million adults in the United States age 18 and older every year.</td>
<td>Irritability and lack of concentration</td>
<td>Encourage self regulating skills (Ways to calm down)</td>
</tr>
<tr>
<td>Most common form of mental illness in the U.S.</td>
<td>Uneasiness that interferes with daily life</td>
<td>Be patient and encourage small victories</td>
</tr>
<tr>
<td>5 Types: GAD, Obsessive Compulsive Disorder, Panic Disorder, PTSD, Social Phobia</td>
<td>Physical Complaints: Frequent stomach aches, headaches, or physical complaints</td>
<td>Rehab on recognizing physical signs of anxiety Appt. to see doctor.</td>
</tr>
<tr>
<td>MENTAL HEALTH DISORDERS</td>
<td>SYMPTOMS/BEHAVIORS</td>
<td>HOW YOU CAN HELP</td>
</tr>
<tr>
<td>-------------------------</td>
<td>--------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Schizophrenia</td>
<td>Little range of emotions; Few facial expressions; Poor eye contact;</td>
<td>Do not challenge or add to delusions/hallucinations</td>
</tr>
<tr>
<td>Schizo- Split Phrenia- Mind</td>
<td>Delays in language, Unusual motor behaviors; Odd speech, both in content and tone</td>
<td>Encourage alternative coping skills and treatment while also educating on support of medication.</td>
</tr>
<tr>
<td>Splitting of the mind</td>
<td>Hallucinations</td>
<td>Teach “check in, check out” techniques to ground in reality.</td>
</tr>
<tr>
<td></td>
<td>May demonstrate confusion, suspicion, paranoia;</td>
<td>Do not jump to hospitalizations for every</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Delusion- are considered *inaccurate/false beliefs* held by an individual, (typically with a mental illness), regardless of logical evidence disproving the belief.

Ex. Neighbor can project and insert thoughts into your head. “My neighbor can read the thoughts in my head?”

Hallucination- A person experiences something that doesn’t really exist except in their mind.

Visual, Auditory, Olfactory (Smells), Gustatory (Taste), Tactile (Feeling)

Auditory hallucinations (e.g. hearing voices or some other sound) are most common type of hallucination in schizophrenia.
<table>
<thead>
<tr>
<th>MENTAL HEALTH DISORDERS</th>
<th>SYMPTOMS/BEHAVIORS</th>
<th>HOW YOU CAN HELP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suicidality</td>
<td>Statements of hopelessness, worthlessness and guilt Giving possessions away etc.</td>
<td>Be direct with the question, mindful of tone and language used. (QPR and CAMS)</td>
</tr>
<tr>
<td></td>
<td>2nd Leading cause of death for people ages 10-34</td>
<td>Do not elicit shame or guilt to divert suicide attempts. Be able to separate self harm from suicidality</td>
</tr>
<tr>
<td></td>
<td>Sudden happiness/high energy after prolonged periods of sadness/depression</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sudden interest or disinterest in religion</td>
<td>Know difference between active and passive suicidality</td>
</tr>
<tr>
<td></td>
<td>Mental confusion</td>
<td>Be accommodated</td>
</tr>
</tbody>
</table>
Who am I? Where do I belong?
- Identity development (gender, sexual, ethnic)
- Self-esteem
- Role of peer group

How do I relate to others?
- Social Skills
- Emotional Intelligence
Brain Development

Maturation Occurs from Back to Front of the Brain

Images of Brain Development in Healthy Youth (Ages 5 – 20)

Blue represents maturing of brain areas

Source: Gogtay, Gledd, et al., 2004.
Community Integration

- Physical Integration: Activities of daily living
- Social Integration: Engaging in social interactions with community members (General Members)
- Psychological Integration: Sense of belonging in their community
Community life functioning: Young adults ability to balance independence & interdependency with family members, Dating skills & development/maintenance of intimate relationships, Assertiveness skills & conflict resolution skills, Coping with stress & ability to relax, Recognizing when to see a physician.

Employment and Career: Out in the community working, can they build relationships at work, communicate at work, ability to complete required tasks while at work, can they establish and maintain work relationships, YAT feeling apart of the workforce.

Education: Have they completed HS, relationships in the classroom, relationships with peers, ability to complete tasks at hand in the classroom or training environment, transitional young adults feeling apart or contributing to the learning environment.

Living Situation: Building relationships with neighbors, social, socializing with positive peer groups, completing activities of daily living, ability to identify positive peer groups, feeling apart and empowered by the community.
PUTTING CASE MANAGEMENT AND LIFE DOMAINS INTO PRACTICE
Advocating, linking and referring young people to local organizations that improve quality of life (YMCA, support groups, alumni associations, peer driven groups).

Community Life Functioning

Advocating, linking and referring young people to local Oklahoma Workforce Investment Boards/Centers, employment agencies, employment advocacy organizations.

Advocating, linking and referring young people to local housing authority, ODMHSAS Housing Options, Independent Living Classes, Yes I Can (Former Foster Youth).

Advocating, linking and referring young people to alternative education centers, post secondary education, education access points (career tech or vocational services DRS).

Employment and Career

Living Situation

Education

Employment and Career

Community Life Functioning

Case Management
Advocate, link and Refer
PUTTING INDIVIDUAL REHABILITATION AND LIFE DOMAINS INTO PRACTICE

Ind Rehab + Life Domains = Success
Teaching young people how to balance life, mental illness and/or substance abuse disorders, how to communicate with neighbors and landlords, teaching how to problem solve, teaching and educating them how to improve their wellness and health.

Teaching young people independent living skills, educating young people about basic living skills and techniques such as cleaning, locking doors, and how to community with roommates.

Teaching young people about different employment options to pursue, educating them about positive workplace social skills, communication and when and how to disclose personal information (MH/SA).

Educating young people about different education options, teaching young people how to access education providers, teaching young people how to communicate with educators and build positive relationships with peers.

Ind Rehab Educate, teach and taught
RESOURCES

**Education Resources**
Local Career Technology Centers [http://www.okcareertech.org/technology-centers](http://www.okcareertech.org/technology-centers)
Alternative Education Programs/GED [http://ok.gov/sde/ged-testing-centers](http://ok.gov/sde/ged-testing-centers)

**Living Situations**
Local Housing Authorities [https://www.hud.gov/program_offices/public_indian_housing/pha/contacts](https://www.hud.gov/program_offices/public_indian_housing/pha/contacts)
Local Community Action Agencies [http://okacaa.org/agencies/](http://okacaa.org/agencies/)

**Employment and Career**

**Community Life Functioning**
Local Community Action Agencies [http://okacaa.org/agencies/](http://okacaa.org/agencies/)
**Former Foster Youth** [http://www.okil.ou.edu/yes-i-can](http://www.okil.ou.edu/yes-i-can)
Former Foster Youth [http://www.okil.ou.edu/](http://www.okil.ou.edu/)
HOUSING AND HOMELESS PREVENTION
Stage 1
Request for Housing Services

Stage 2
Housing Needs Assessment

Stage 3
Overcoming Barriers

Stage 4
Accessing Housing

Stage 5
Maintaining Housing
Housing Supports and Services

Transportation Services

Financial Supports

Employment Services/Supports

Education Services/Supports

Social Supports and Services

Life/Daily Skills Services
An approach that prioritizes:

- Providing **quick permanent affordable housing** to individuals and families experiencing homelessness.

- Provides **community supports and supportive services** in order to keep their housing and avoid returning to homelessness.
Housing First yields:

- Higher housing retention rates
- Lower returns to homelessness
- Significantly reduces the use of crisis services and institutions
Housing First: Key Principles

- Safe and affordable housing
- All people can achieve housing stability in permanent housing; supports may look different
- Everyone is “housing ready”
- Improved quality of life, health, mental health, and employment can be achieved through housing
- Right to determination, dignity and respect
- Configuration of housing and services based on participants needs and preferences
Most effective for people experiencing chronic homelessness

Housing First permanent supportive housing models result in:

- Long-term housing retention rate of up to 98 percent
- Improved physical and behavioral health outcomes
- Reduced use of crisis services

Current PSH providers can move to Housing First model by:

- Reviewing current policies and procedures
- Learn and adopt Housing First services approaches and practices
Few to **no programmatic prerequisites** to permanent housing entry
- Low barrier admission policies
- Rapid and streamlined entry into housing
- Supportive services are voluntary
- Tenants have full rights, responsibilities, and legal protections
- Practices and policies to prevent lease violations and evictions
- Applicable in a variety of housing models
**Housing First Checklist: Project-Level Elements**

**Additional Elements Found in Advanced Models:**

- Applicants prioritized based on duration/chronicity of homelessness, vulnerability, or high utilization of crisis services.
- Tenants given flexibility in rent payments; payment plans or financial management (e.g. rep payee).
- Case managers trained in motivational interviewing and client-centered counseling.
- Non-judgmental communication regarding drug/alcohol use and offers education on avoidance of risky behaviors.
- Building/apartment accommodations for disabilities.
WHAT ARE THE ELEMENTS OF A HOUSING FIRST PROGRAM?

- Permanent supportive housing (PSH)
- Rapid Re-Housing.
PERMANENT SUPPORTIVE HOUSING

Targets:

- Individuals and families with chronic illnesses, disabilities, mental health issues, or substance use disorders.

- Must have experienced long-term or repeated homelessness.

- It provides long term rental assistance and supportive services.

How Can You Help?

- Case managers should provide documentation to validate illness or disability.

- May require VI-SPDAT scores to prove risk of repeated episodes of homelessness
VI-SPDAT

- Vulnerability Index Service Prioritization Decision Assistance Tool
- Prioritizes who will receive services based on vulnerability
- Different Types:
  - Single Adults
  - Family
VULNERABILITY INDEX SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL

C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?
   □ Y □ N □ Refused

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?
   □ Y □ N □ Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR MONEY MANAGEMENT.

Score: 0

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?
   □ Y □ N □ Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.

Score: 0

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?
   □ Y □ N □ Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE.

Score: 0

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?
   □ Y □ N □ Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.

Score: 0
Rapid Re-Housing

- Provides short-term rental assistance and services.
- Goals: to help people obtain housing quickly
- Core Components of rapid re-housing—housing identification, rent and move-in assistance, and follow up short term case management

How Can You Help?

- May require diagnosis letter or verification of disability/illness
- May require validation of planning to or currently participating in a case management program
- May request that the consumers work with their own case managers.
OVERCOMING BARRIERS TO ACCESSING HOUSING

- Poor or lack of rental history
- Lack of financial resources
- Criminal history
- Social stigma associated with involvement in systems (mental health, criminal justice, etc.)
**FAIR HOUSING ASSISTANCE**

**Metropolitan Fair Housing Council of Oklahoma:** private, nonprofit, fair housing agency dedicated to the creation of racially and economically integrated communities, and the elimination of housing discrimination throughout the state.

**Legal Aid Services:** A non-profit law firm. They help eligible low-income individuals and seniors with civil legal problems.

- 1. Client services to alleged victims of housing discrimination
- 2. Fair Housing and fair lending education and outreach to consumers, public and private social service, community, faith-based organizations, attorneys and members of the housing industry
Metro Fair Housing Council Offers (MFHC)

- Fair Housing Counseling
- Investigation and Testing
- Complaint Referral
- Mediation Services
- Legal Referral
MFHC provides Fair Housing Educational and Outreach services throughout Oklahoma

- Fair housing and fair lending training
- Educational seminars
- Outreach services are for everyone.
Metro Fair Housing Council of Greater Oklahoma City
1500 N.E. 4th Street, Suite 204
Oklahoma City, OK 73117
405-232-5119

http://metrofairhousing.org/index.html
Legal Aid Services of Oklahoma

- Eviction
- Foreclosure
- Landlord Repairs
- Public Housing and Section 8
Legal Aid Services of Oklahoma
FAIR HOUSING ASSISTANCE

Legal Aid Services of Oklahoma
Administrative Offices
2901 North Classen Blvd., Suite 110
Oklahoma City, OK 73106
405-521-1302

http://www.legalaidok.org/
ACCESSING HOUSING: HUD REGULATED AGENCIES RENTAL ASSISTANCE PROGRAMS
ACCESSING HOUSING: HOUSING AGENCIES

Oklahoma Housing Finance Agency (OHFA)

Public Housing Authorities (PHA)
HOUSING AGENCIES COMPARISON

**OHFA Programs**

- Section 8 Rental Assistance Program
- Family Self Sufficiency Program
- Section 8 Homeownership Program
- Project Based Contract Administration (PBCA)
- Housing Opportunity People With AIDS (HOPWA)
- Veterans Affairs Supportive Housing (HUD-VASH)

**PHA Programs**

- Section 8 Rental Assistance Program
- Public Housing Program
- Homeownership Program
- Family Self Sufficiency Program
- Family Reunification Program
## SECTION 8 RENTAL ASSISTANCE PREFERENCE PROGRAMS

<table>
<thead>
<tr>
<th>OHFA Preference Program</th>
<th>OKC PHA Preference Program</th>
<th>Tulsa PHA Preference Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Homeless Preference</td>
<td>✓ Disabled Preference</td>
<td>✓ Disabled and Receiving SSI/SSDI Preference</td>
</tr>
<tr>
<td>✓ Disabled Preference</td>
<td></td>
<td>✓ Elderly 62 and Older Preference</td>
</tr>
<tr>
<td></td>
<td></td>
<td>✓ Living in a Care Facility (Shelter) because of Domestic Violence</td>
</tr>
</tbody>
</table>
Step 1
Application can be completed online or on paper.

Applicants mailing address is extremely important

Date of Birth and SS# are important

House hold information is also important.
All information provided in this section needs to be accurate.

Key Points: If the family meets the preference list, a signed letter of disability from a medical professional such as a Psychiatrist, PA Assistant, or Doctor can speed up the process: A psychologist, CM, RN, or LPN is not a medical professional according to OHFA.
Step 2 Certification/Recertification Process

✓ Verification of Income and Household Composition

✓ Financial Eligibility Determination
Step 3 Obtaining a Voucher

- Issuance of Vouchers-(when funding is available) OHFA will issue vouchers to applicants whose eligibility has been determined.

- Applicant Briefing- HUD requires briefing for all applicants (individual or group).
Step 4 Landlord Approval and Scheduling the Housing Quality Inspection (HQS)

- **Landlord Approval**- participants must gain landlord approval before requesting an inspection.

- **HQS**- In the Section 8 Housing Choice Voucher Program the dwelling must pass the inspection to receive a subsidy.

- Housing Quality Standards help to ensure the dwelling will be safe, healthy, and comfortable.
Step 5 Housing Assistance Payment Contract (HAP)

- **HAP**-agreement is the final step in the process of obtaining housing.
- **HAP**-places agreement between OHFA and the landlord.
- **OHFA** will provide assistance up to 40% of the monthly adjusted income.

Availability and wait times vary, always have back up resources.
 Felony Drug or Violent Conviction Policy: Assistance will be denied for a period of 3 Years from the date of conviction/arrest/and/or incarceration

 Methamphetamine Policy: Assistance will be denied for a period of 10 years if an individual has been arrested/convicted/incarcerated for using/distributing/manufacturing methamphetamine (whichever is later)

 If an individual has been arrested/convicted/incarcerated for distribution and manufacturing of methamphetamine in or on government owned housing or property that individual will face a life time ban from receiving section 8 housing.
Sex Offender Policy: OHFA will permanently deny admission or terminate assistance if any member of the household is subject to a lifetime registration requirement under a State sex offender registration program.

Sex Offenders, not subject to lifetime registration, will be denied assistance for a period of 10 years from the date of arrest/conviction/incarceration (whichever is later) or during the period they are required to be registered as a sex offender, whichever is greater.
OXFORD HOUSE
OXFORD HOUSE

- Oxford House is a democratically ran, self-supporting, drug free home

- The number of residents in the house may range from 6-15

- Houses for men, women, and women with children.

- Average stay is a year, can be three of more
<table>
<thead>
<tr>
<th>Location</th>
<th>Count</th>
<th>Location</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ada</td>
<td>2</td>
<td>Norman</td>
<td>10</td>
</tr>
<tr>
<td>Broken Arrow</td>
<td>3</td>
<td>OKC</td>
<td>28</td>
</tr>
<tr>
<td>Claremore</td>
<td>6</td>
<td>Owasso</td>
<td>1</td>
</tr>
<tr>
<td>Enid</td>
<td>4</td>
<td>Ponca City</td>
<td>2</td>
</tr>
<tr>
<td>Edmond</td>
<td>5</td>
<td>Shawnee</td>
<td>3</td>
</tr>
<tr>
<td>Moore</td>
<td>4</td>
<td>Stillwater</td>
<td>2</td>
</tr>
<tr>
<td>Muskogee</td>
<td>2</td>
<td>Tulsa</td>
<td>31</td>
</tr>
</tbody>
</table>
Completion of inpatient alcohol or drug treatment

Completion of a medical detox program

Sobriety that is free from dangerous withdrawals
Oxford Houses International - Directory

Select State:  Alabama  Submit
Oxford House

Select State:

Submit
Oxford Houses of Oklahoma - Directory
Sorted by City Name

For a printable list, go to the bottom of this page

---

Oklahoma

**Oxford House Ardmore 2**  
224 C Street SW  
Ardmore, OK 73401-4923  
580-319-4299  
Gender: M  
Total Occupancy: 7  
Charter: 12/30/2005  
[Vacancies]

**Oxford House Westwood**  
602 Rosewood Ct.  
Claremore, OK 74017-4731  
918-923-6563  
Gender: M  
Total Occupancy: 8  
Charter: 3/1/2008  
[Vacancies]

**Oxford House Claremore**  
112 E. 13th Place  
Claremore, OK 74017-4207  
918-341-4827  
Gender: W  
Total Occupancy: 7  
Charter: 7/15/2008  
[Vacancies]

**Oxford House Will Rogers**  
109 E 4th Street  
Claremore, OK 74017-7403  
Gender: M  
Total Occupancy: 9  
[Vacancies]
Westwood House
Gender: M
602 Rosewood Ct.
Claremore, OK 74017-4731
Contact: 918-923-6563
Total Beds: 8
Vacancies: 1
ELIGIBILITY

Application Process:

- Complete an application
- Contact the outreach services rep or the house to schedule an interview
- Attend interview at the house
- Requires an 80% yes vote from residents, if not they can try another house.
RESIDENT EXPENSES

- Residents must pay a $100 move in fee

- The rent ranges from $75 to $125 per week per individual.

- Each individual is responsible for their own groceries and personal hygiene items.
SUCCESS RATE

Monthly Success Rate: 93%  
Long Term Success Rate: 87%

1. Based on data collected in Oklahoma
2. DePaul University found at oxfordhouse.org
# National Oxford House Resident Profile

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Women's Houses</td>
<td>669</td>
</tr>
<tr>
<td>Number of Houses for Men</td>
<td>1,618</td>
</tr>
<tr>
<td>Recovery Beds for Men</td>
<td>12,872</td>
</tr>
<tr>
<td>National Network of Houses</td>
<td>2,287</td>
</tr>
<tr>
<td>Total Recovery Beds</td>
<td>18,025</td>
</tr>
<tr>
<td>Number of States with Houses</td>
<td>44</td>
</tr>
<tr>
<td>Percent Addicted to Only Alcohol</td>
<td>21%</td>
</tr>
<tr>
<td>Cities with Oxford Houses</td>
<td>481</td>
</tr>
<tr>
<td>Average Rent/Group/Month</td>
<td>$1,526</td>
</tr>
<tr>
<td>Race</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>69%</td>
</tr>
<tr>
<td>Black</td>
<td>22%</td>
</tr>
<tr>
<td>Other</td>
<td>9%</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
</tr>
<tr>
<td>Never Married</td>
<td>48%</td>
</tr>
<tr>
<td>Separated</td>
<td>18%</td>
</tr>
<tr>
<td>Divorced</td>
<td>28%</td>
</tr>
<tr>
<td>Married</td>
<td>5%</td>
</tr>
<tr>
<td>Widowed</td>
<td>1%</td>
</tr>
<tr>
<td>Average Age of Residents</td>
<td>37.2</td>
</tr>
<tr>
<td>Residents Working</td>
<td>87%</td>
</tr>
<tr>
<td>Prior Homelessness</td>
<td>68%</td>
</tr>
<tr>
<td>Average Jail Time</td>
<td>13.4 Mos.</td>
</tr>
<tr>
<td>Percent Veterans</td>
<td>12%</td>
</tr>
<tr>
<td>Average Monthly Earnings</td>
<td>$1,895</td>
</tr>
<tr>
<td>Average Time Homeless</td>
<td>7.9 Mos.</td>
</tr>
<tr>
<td>Prior Jail</td>
<td>77%</td>
</tr>
<tr>
<td>Average Educational Level</td>
<td>12.2 yrs</td>
</tr>
<tr>
<td>Residents Working</td>
<td>87%</td>
</tr>
<tr>
<td>Average AA or NA Meetings per Week</td>
<td>5.2</td>
</tr>
<tr>
<td>Percent Going To Counseling plus AA/NA</td>
<td>45%</td>
</tr>
<tr>
<td>Range of Educational Level</td>
<td>3-19 yrs</td>
</tr>
<tr>
<td>Average Monthly Earnings</td>
<td>$1,895</td>
</tr>
<tr>
<td>Average Length of Sobriety of House Residents</td>
<td>13.4 Mos.</td>
</tr>
<tr>
<td>Residents Expelled Because of Relapse</td>
<td>21.9%</td>
</tr>
<tr>
<td>Average Cost/Person per Week</td>
<td>$123</td>
</tr>
<tr>
<td>Percent Addicted to Both Drugs and Alcohol</td>
<td>79%</td>
</tr>
<tr>
<td>Average Length of Stay in an Oxford House</td>
<td>8.3 Mos.</td>
</tr>
<tr>
<td>Residents Expelled Because of Relapse</td>
<td>21.9%</td>
</tr>
<tr>
<td>Average No. of Applicants For Each Vacant Bed</td>
<td>4.4</td>
</tr>
</tbody>
</table>

2/28/2019
OKLAHOMA OUTREACH REGIONS

Cities by Region

**Region 1**
- Oklahoma City
- Edmond
- Midwest City
- Bethany
- Mustang

Region 1: 405-446-2751

**Region 2**
- Tulsa
- Broken Arrow
- Owasso
- Claremore
- Muskogee
- Sapulpa

Region 2: 918-936-0267

**Region 3**
- Ardmore
- Ada
- Shawnee
- Durant
- McAlester

Region 3: 405-519-1910

**Region 4**
- Norman
- Moore
- Lawton

Region 4: 405-826-6796

**Region 5**
- Stillwater
- Enid
- Ponca City

Region 5: 405-826-6818
RESOURCES

Tulsa Day Center for the Homeless, Inc.
415 W. Archer Street
Tulsa, OK 74103
918-583-5588

West Town Day Center OKC
1729 NW 3rd street
Oklahoma City, OK 73106

Mental Health Association in Tulsa
1870 South Boulder
Tulsa, Oklahoma
74119
Phone (918)585-1213
Fax (918)585-1263
info@mhat.org
www.mhat.org

Neighborhood Services Organization
413 SW 11thSt.
Oklahoma City, OK 73109
405-236-0413
www.nsookc.org

Youth Services of Tulsa
311 S. Madison Ave.
Tulsa, OK 74120
(918) 582-0061
https://www.yst.org
RESOURCES

USDA
Tommy Earls, Program Director
100 USDA, Suite 108
Stillwater, OK 74074
405-742-1070
E-mail: tommy.earls@ok.usda.gov

City Care, Inc.
2400 General Pershing Blvd.
Oklahoma City, OK 73107
(405) 609-2400
www.citycareinc.org

Jonathan Roberts - Executive Director for Be The Change/YES services
405-589-5315
Jonathanroberts@betethechangeok.org

Oklahoma Association of Community Action Agencies
2800 N.W. 36th street, suite 221
Oklahoma City, OK 73112
(405)949-1495
www.okacaa.org

Mental Health Association (OKC)
Address: 400 N Walker Ave, Oklahoma City, OK 73102
Phone: (405) 943-3700

2/28/2019
WEBSITES

U.S. Department of Housing and Urban Development
www.hud.gov

Oklahoma Housing Finance Agency
www.ohfa.com

Oklahoma City Housing Authority
www.ochanet.org

Tulsa Housing Authority
www.tulsahousing.org

Lawton Housing Authority
www.lawtonhousing.org

Norman Housing Authority
www.normaha.org
Coco’s Story

http://www.youtube.com/watch?v=T9o0sKUkIoA
We have come dangerously close to accepting the homeless situation as a problem that we just can't solve. -Linda Lingle