

Homeless Headlines

A publication of the Illinois Association of Community Action Agencies, 3435 Liberty Drive, Springfield, Illinois 62704 - (217) 789-0125

JUNE 2010

VOLUME 20, ISSUE 6

West Central Illinois Center for Independent Living

What WCICIL Is About

West Central Illinois Center for Independent Living (WCICIL) is a not-for-profit advocacy center funded by state and federal grants to provide services for people with disabilities. WCICIL is dedicated to the empowerment of persons with disabilities through advocacy, public education, increased opportunities and individualized services..

WCICIL is located in Quincy with a satellite office in Macomb. The agency serves Adams, Brown, Hancock, McDonough, Pike, and Schuyler Counties. Fifty-one percent of the

WCICIL Board of Directors must have a disability.

The Independent Living Philosophy is based on the premise that, regardless of a person's disability, individuals have the right and the responsibility to make life-controlling choices, which determine the direction of their life.

That includes full and meaningful social participation as an equal member of the community, free of any unnecessary physical attitudinal, communication, and employment barriers. The WCICIL goal is to promote the overall visibility of persons with disabilities as well as encouraging, meaningful involvement of disable people in community life.

WCICIL Core Services

WCICIL provides four core advocacy services. Advocacy is the process that increases the consumer's ability to act on their own to achieve independent living goals or to improve their current status.

- ✿ Advocacy educates consumers about their civil and human rights, providing options for services and benefits to which consumers are entitled.
- ✿ Independent Living Skills Training emphasizes

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Housing Reduces Health Care Costs

An intervention that provides housing for homeless persons with severe alcohol problems without requiring abstinence from drinking was associated with reduced health care use and costs and a decrease in the use of alcohol, according to a study in the April 2009 issue of the Journal of the American Medical Association (*JAMA*).

Chronically homeless people with severe alcohol problems are costly to the public because of their high use of publicly funded health and criminal justice systems resources. Typical interventions such as shelters,

abstinence-based housing and treatment programs fail to reverse these patterns for this population, according to background information in the article. The provision of housing reduces hospital visits, admissions and duration of hospital stays among homeless individuals. One type of supportive housing, called Housing First (HF), removes the requirements for sobriety, mandatory attendance to alcohol treatment programs, and other barriers to housing entrance.

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Headlines/Hotline on the Internet - The Illinois Community Action Association publishes both Homeless Headlines and Homeless Hotline on the Publications page of its web site at www.iacaanet.org. To receive both by email, send a blank email to: headlines-hotline-subscribe@yahoo.com. (Self service only.)

Illinois Department of
Human Services



Illinois Self-Sufficiency Calculator

The Illinois Self-Sufficiency Calculator is a user-friendly, comprehensive, confidential, free online budget-building tool that helps people plan for their future. The Calculator is available in multiple languages and requires no registration. The tool was developed by the Social Impact Research Center, a program of the Heartland Alliance for Human Needs & Human Rights.

The Calculator allows users to build their own personal budget, see the Self Sufficiency Standard cost-of-living approximation for their family type, and learn about resources that can assist them in planning and making progress toward economic self-sufficiency.

The Calculator is based on the Self-Sufficiency Standard, which determines a very basic, modest budget that helps us better understand the cost of living in each Illinois county for a variety of different family types—from single adults all the way up to two adults with children of various ages and dependent adults in the household. It illustrates how much income families need to make ends meet, with no public or private assistance.

How Can the Calculator be Used?

The Calculator helps people:

- ✿ Determine if they might be eligible for public benefits that can help cover the cost of food or expenses like health care or child care.
- ✿ Plan and develop career goals so they can work toward a better paying job.
- ✿ Decide if a job they are considering will pay enough to meet their family’s needs.
- ✿ Test and compare different work or living options and see how they affect their bottom line.

Case managers, job coaches, counselors, and others can incorporate the Calculator into their work with clients to help establish financial, career, and education goals and work plans. Users can generate a customized report and email it to themselves or save it as a PDF. To access the calculator, go to www.ilcalculator.org

Information on the Calculator and My Work

For more information on the Calculator and the Self-Sufficiency Standard, contact Amy Terpstra at aterpstra@heartlandalliance.org and visit www.ilselfsufficiency.org. You can also request an icon for your own website that you can then link directly to the Calculator. ■

Health Costs

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Mary E. Larimer, Ph.D., of the University of Washington, Seattle, and colleagues evaluated a HF program for chronically homeless individuals with severe alcohol problems, comparing the costs for housed participants with wait-list controls and noting any changes in reported alcohol use. The study included 95 housed participants (with drinking permitted in the residence) and 39 wait-list control participants, who

were enrolled between November 2005 and March 2007. The researchers examined the use and cost of services for study participants (such as jail bookings, days incarcerated, shelter and sobering center use, hospital-based medical services, publicly funded alcohol and drug detoxification and

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Homeless Headlines by email

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Homeless Headlines on the IACAA Web Site

The current issue of Homeless Headlines and back issues are available at www.iacaanet.org/homelessheadlines/.

Homeless Headlines



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The Illinois Association of Community Action Agencies has published the monthly Homeless Headlines and the Homeless Hotline since 1991 under contract with the Illinois Department of Human Services.

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HUD Documents “Worst Case Needs”

HUD issued its twelfth “Worst Case Housing Needs” in the last week of May. The report states that there were 5.91 million households, comprising 12.97 million people, with worst case housing needs in 2007, based on analysis of American Housing Survey data. The definition of worst case is a very low income renter household that did not receive housing assistance, and that paid more than half of its income for housing, lived in severely inadequate housing, or both. HUD is required by statute to report to Congress on “worst case housing needs” every two years.

The number of worst case needs households in 2007 fell by a statistically insignificant 1.5 percent, from 5.99 million in 2005.

As in recent years, severe cost burden, i. e., spending more than half of one’s

household income on rent and utilities, is the primary cause of worst case housing needs. Of the 5.91 million households, just 190,000 had inadequate housing and 240,000 had



inadequate housing and severe cost burden. Worst case needs are found across family types, with particular concentrations among families with children (37 percent) and the elderly (20 percent). Forty-six percent of the households with children had earnings consistent with working full-time at the minimum wage. Based on the current

incidence of severe problems among the unassisted population, HUD estimates that 2.74 million households would have severe problems if their assistance were withdrawn.

Of the 5.91 million worst case needs households, 73 percent are extremely low income (ELI; earning 30 percent of Area Median Income or less) and 27 percent are very low income (VLI; 31 percent to 50 percent AMI). Among all ELI households, almost half (48.6 percent) have worst case needs, while 23.6 percent of all VLI households do.

Caution is suggested in interpreting changes from 2005 to 2007, due to a number of methodological changes between the 2005 and 2007 AHS. As the report notes, though the economy was stronger than it is today, from 2005

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Making the Connection

State Cash Support for SSI Clients

By Kathryn Nelson



The authors of this column welcome your comments and questions. See contact information at the end of the article.

All of us know that the Supplemental Security Income (SSI) monthly benefit of \$674 a month is not able to meet the housing expenses of many of our clients. Because of this many people who receive SSI are homeless or at risk of homelessness, share housing at reduced or free rent, receive additional help from family or friends, or sometimes are qualify for limited

supported or subsidized housing programs.

Unfortunately, the amount of the SSI benefit can be affected by how the person structures their housing. Social Security has a rule in place that may reduce SSI benefits to \$459 a month when a person: .

- ❁ Lives in another person’s house and pays less than his fair share of food or housing costs;
- ❁ Lives in his own house and someone else pays for all or part of the food, rent, mortgage, or other things like electricity and heating fuel;
- ❁ Is in a hospital or nursing home for the whole month and Medicaid pays for over one half of the cost of care;
- ❁ Is a minor child and private insurance and Medicaid

together pay over half the bill; or

- ❁ Is in an institution that is run by a Federal, State, or local government and he is in for the whole month and Medicaid pays 50 percent or more of the expenses.

The SSI reduction often places your client in a deeper financial crisis. So what options are available to be able to increase your client’s income? You can apply for Aid to the Aged Blind or Disabled (AABD) cash assistance or State Supplemental Payment through the local IDHS office. This program can provide a small cash benefit which

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Independent Living

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independent living skill development in areas that focus on the needs of persons with disabilities, such as skill development on individual health care needs, financial benefits counseling, job development skills, household management, personal/ interpersonal skills, self care skills for safe and effective



Completed Home modification ramp for reintegration consumer in 2010. (This should cool you down!)

management of daily living tasks.

- ❁ Information and Referral, a service that that responds to specific questions and assists consumers in locating appropriate resources. It is the primary vehicle for empowering CIL consumers to become active participants in society.
- ❁ Peer Counseling is both one-on-one and group interactions with peers. It cover areas of advocacy and self-help that lead to independent living goals. Peer counselors are individuals with disabilities who have been selected on the basis of their communication skills and ability to help an individual to identify and to clarify independent living goals.

Services To The Community

WWCICIL also provides Americans With Disabilities Act Assistance services to businesses, local units of government and consumers. These services include education, seminars, accessibility, site checks, and information regarding ADA requirements. WCICIL has the capacity of providing material in large print and Braille for individuals, institutions, and businesses. We also make referrals for

other blind services, such as, Talking Books, Para Transit, and visual assistive devices (on a loan basis from another agency).

Equipment Loan Program of WCICIL has used assistive devices and equipment for loan including walkers, canes, wheelchairs, etc.

The borrower signs

an agreement to return the borrowed equipment within a three month period. A doctor's prescription and photo ID are required. The Youth Services Program at WCICIL provides parents of children with disabilities services to ensure that they receive the most appropriate and least restrictive education possible.

Personal Assistants

WWCICIL also trains Personal Assistants to provide home services to an individual with a disability who requires assistance to remain living at home. WCICIL will also train persons with disabilities to manage the employment of their Personal Assistants.

The Personal Assistants program plays a key role in the WCICIL Community Reintegration Program which is designed to reintegrate individuals

between the ages of 18 and 59 who are interested in moving back into the community from a nursing facility setting. This program provides services and purchase items to establish a home in the community and is partially reimbursed by Medicaid. The goal is to identify the services and support systems that a nursing facility resident may need in order to move into his or her own residence and live independently again.

The program allows WCICIL to assist in locating and securing affordable housing, assist with the first month's rent and security deposit, provide household items, provide assistive equipment and devices, arrange for home remodeling to ensure independent safe functioning, provide training in independent living skills, make referrals of personal assistant services, provide personal assistant management training, provide case management, as well as to provide advocacy and peer support.

In order for a person to qualify for this program they must reside in a nursing facility in Illinois, be a U.S. citizen or legal alien, between the ages of 18 and 59, have a severe disability which will last for 12 months or the duration of life. Need long term care as established by the Determination of Need, have physician approval of plan of care, no more than \$17,500 in non-exempt assts, receives or applies for Medicaid benefits, does not require in-home services that are expected to cost more than institutional care, is open to recommendations of staff regarding referrals for other services and demonstrates a willingness to follow through and to able to demonstrate initiative in meeting goals.

Community Reintegration

WWCICIL reintegrates approximately 8-10 individuals per year which the average cost to reintegrate per individual is \$3,500.00. Between 1998

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State Cash

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is determined based on the person's living situation.

To decide if a person is eligible for this supplemental cash benefit the state caseworker considers many factors:

- ✿ Does Joe rent a room from someone (this is considered living alone) or shares in the housing costs with the people he lives with (this would be called shared housing so all expenses are then proportionately determined e.g. Joe applies for cash and lives with Larry and they share housing costs. The state divides the state rates by ½ since Joe is one of two people sharing the costs).
- ✿ Does Joe have to pay for any utilities (water, electric, oil, gas, sewerage) or are these costs included in the rent?
- Does Joe have to go to a Laundromat or pay to do laundry?
- ✿ Does Joe have to pay for a phone?
- ✿ Does Joe have special dietary needs prescribed by a doctor?
- ✿ Does Joe need a service animal?

Once the caseworker identifies all the needs, the state rate is applied and the AABD state supplemental cash budget is calculated.

So how would this look for your client Joe? Let's say Joe lives with Larry rent free. Joe's only expenses are his phone, Laundromat costs and cleaning supplies. Because he live in another person's house, apartment, or mobile home, and pays less than his fair share of food or housing costs, Joe is sent a letter by Social Security telling him his SSI check is reduced to \$459 a month. Joe tells you this and you send him to the local IDHS/FCRC office. The caseworker interviews Joe and applies

state rates based on what Joe says his expenses are. The caseworker adds together the state personal allowance rate of \$62.43 which is intended to cover the cost of food, clothing, and other personal essentials; the laundry allowance of \$3.18; the cost to have basic phone service (for this example let's say based on where Joe lives in the state this is \$10 a month); and the state grant adjustment of \$495.90 (this is a flat amount applied to all AABD cash cases statewide). The caseworker sends a letter to Joe that tells him he will be able to receive \$112.51 a month from the state to supplement his \$459 a month SSI check. (Naturally if Joe's income changes or the living arrangement this will affect the amount of the state cash supplement.)

This state cash supplement is significantly underutilized. Social Security data for 2009 indicates that a little over 224,000 adults receive SSI benefits in Illinois. The state reports that as of December 2009 there were 29,238 persons who receive a state cash supplement through the AABD program – only about 13 percent of SSI recipients statewide.

So what can you do if your client needs additional cash help to supplement his SSI benefit? If your client currently receives Medicaid (and hopefully everyone who receives SSI is enrolled in the Medicaid program), have your client contact the IDHS caseworker and ask for a "SWAP" to cash assistance. Make sure your client files a written request for the SWAP (this means your client completes an IL444-2905 Request for Financial Assistance). The caseworker has to give this form to your client when he calls to request the cash assistance. The caseworker will gather information similar to what I described in Joes' case. The caseworker then has from 45-60 days to complete a budget and determine if your client is eligible for a cash supplement. The decision on your client's request has to be made in writing with state policy correctly cited if your client is not eligible for the

benefit. If your client is denied the cash, the medical and possibly SNAP assistance will continue.

If you want to look at the state policy regarding this benefit you can find it the state Policy Manual (PM) chapter 11 (www.dhs.state.il.us/page.aspx?item=15908). Information on how the state worker is to handle the SWAP request can be found in WAG 18-02-01.

The DuPage Federation on Human Services Reform, a non-profit 501(c)(3) organization focused on advocacy and planning in DuPage County, Illinois and designer and trainer of Making the Connection: A Guide to Accessing Public Benefits. The DuPage Federation is affiliated with Northern Illinois University, Center for Governmental Studies. Questions can be directed to knelson@dupagefederation.org ■

Independent Living

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and 2008, 1351 individuals have been moved out of Illinois nursing homes, saving the state of Illinois approximately \$138.5 million. In 2008 throughout the State of Illinois there were 160 individuals reintegrated which saved the state \$35million. This program is an improvement for the individual in their quality of life that allows them to live individually with minimal assistance. The value of this program is expressed by every individual who has been part of it as well as the money that is directly saved by the state of Illinois.

For further information, contact:

**Glenda Farkas, Executive Director
West Central Illinois Center for
Independent Living**
300 Maine, Suite 104
Quincy, Illinois
Telephone: 217-223-0400
ciledqcy@adams.net ■

Funding Resources

Source: Foundation Center Online <http://fconline.foundationcenter.org/>

The Blowitz-Ridgeway Foundation

1701 E. Woodfield Rd., Ste. 201
Schaumburg, IL 60173-5127
Telephone: (847) 330-1020

Contact: Serena L. Moy, Admin.; Laura Romero, Prog. Assoc.
Fax: (847) 330-1028
E-mail: laura@blowitzridgeway.org
URL: www.blowitzridgeway.org

Type of Grantmaker: Independent foundation

Limitations: Giving generally limited to Illinois, except for medical research grants. No support for government agencies, religious purposes, or organizations that subsist mainly on third-party funding. No grants to individuals, or for production or writing of audio-visual materials.

Financial Data (Year ended 9/30/09):

Total giving: \$1,148,827

Giving activities include: \$1,148,827 for 109 grants

Number of Staff: 1 full-time professional, 1 full-time support

Purpose and Activities: Giving through program, general operating capital, and research grants primarily in the areas of health, mental and physical disability, and social services, with emphasis on children and youth.

Fields of Interest: Children/youth, services; Health care; Human services; Medical research, institute; Mental health/crisis services

Population Groups: Adults; Adults, men; Adults, women; Aging; Children/youth; Disabilities, people with; Economically disadvantaged; Physically disabled; Terminal illness, people with; Women; Young adults; Young adults, female; Young adults, male; Youth

Types of Support: Capital campaigns; Continuing support; General/operating support; Program-related investments/

loans; Program development; Research

Application Information: See foundation web site for application guidelines and forms. Return applicants are required to submit their final report for the previous grant, before the new grant request can be reviewed. In addition, the foundation is requiring all grant applicants to include, with their grant application, a copy of the Schedule A form from the IRS form 990. Application form required. Initial approach: Letter or telephone requesting guidelines. Copies of proposal: 5. Board meeting date(s): Monthly. Deadline(s): Ongoing. Final notification: 3-6 months

W. P. and H. B. White Foundation

540 Frontage Rd., Ste. 3240
Northfield, IL 60093-1232
Telephone: (847) 446-1441

Contact: M. Margaret Blandford, Exec. Dir.

Type of Grantmaker: Independent foundation

Limitations: Giving primarily in the metropolitan Chicago, Illinois, area. No grants to individuals, or for land acquisition, endowment funds, publications, conferences, deficit financing, or visual or performing arts; no loans.

Financial Data (Year ended 12/31/08):

Total giving: \$1,234,500

Giving activities include: \$1,234,500 for 80 grants (high: \$30,000; low: \$5,000)

Number of Staff: 1 full-time professional, 1 full-time support

Purpose and Activities: Funding to organizations in the metropolitan Chicago, IL area that contribute to the future good of the country, primarily in the areas of education, health, and

human services, with an emphasis on helping those most in need. **Fields of Interest:** Adult/continuing education; Children/youth, services; Education; Health care; Housing/shelter, development; Human services; Secondary school/education

Population Groups: Economically disadvantaged; Minorities; **Types of Support:** Annual campaigns; Continuing support; General/operating support; Program development; Scholarship funds; **Application Information:** Application form not required. Initial approach: Proposal. Copies of proposal: 1. Board meeting date(s): March, June, September, and December. Deadline(s): February 1, May 1, August 1, November 1. Final notification: Several weeks.

The Barker Welfare Foundation

P. O. Box 2
Glen Head, NY 11545-0002
Telephone: (516) 759-5592
Contact: Sarane H. Ross, Pres.
Fax: (516) 759-5497
E-mail: BarkerSMD@aol.com
URL: www.barkerwelfare.org

Type of Grantmaker: Independent foundation

Limitations: Giving primarily in Chicago, IL, Michigan City, IN, and New York, NY. No support for political activities, start-up organizations, national health, welfare, or education agencies, institutions or funds, including private or public schools. No grants to individuals, or for endowment funds, seed money, emergency funds, deficit financing, scholarships, fellowships, medical or scientific research, films or videos, or conferences; no loans.

Financial Data (Year ended 9/30/08):

Total giving: \$2,778,473

Giving activities include: \$2,778,473 for 263 grants (high: \$55,000; low: \$500)

Number of Staff: 2 full-time professional, 1 part-time support

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Funding Resources

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Purpose and Activities: The mission of the Barker Welfare Foundation is to make grants to qualified charitable organizations whose initiatives improve the quality of life, with an emphasis on strengthening youth and families and to reflect the philosophy of Catherine B. Hickox, the Founder. Grants to established organizations and charitable institutions, with emphasis on youth and families, museums and the fine and performing arts, child welfare and

youth agencies, health services and rehabilitation, welfare, aid to the handicapped, family planning, libraries, the environment, recreation, and programs for the elderly. **Fields of Interest:** Children/youth, services; Environment; Health care; Human services; Mental health/crisis services; Recreation **Population Groups:** Disabilities, people with; Types of Support: Annual campaigns; Building/renovation; Capital campaigns; Continuing support; Equipment; General/operating support; **Application Information:** Proposals

must be completed according to the foundation's guidelines and grants process in order to be considered for funding. Grants to Chicago agencies are by invitation only. Proposals sent by fax not considered. Application information available on foundation web site. Application form required. Initial approach: 2- to 3-page letter of inquiry or online inquiry through web site. Copies of proposal: 2. Board meeting date(s): May and October. Deadline(s): February 1 and August 1. Final notification: After board meeting for positive responses; any time for negative responses ■

Worst Case Needs

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to 2007 the number of renters increased significantly by more than 1.2 million households, and even if the proportion of ELI renters decreased in this period, the number of ELI renters would be expected to increase. HUD also changed its questions related to household income and subsidy status. Finally, the methods used to determine HUD income limits, which are used in the study, also changed in this period; as a result, the income limits stayed largely flat as median incomes continued to increase.

These changes are discussed in Appendices C and D in the report.

One further methodological difficulty to note, which is not discussed in the report, is that the version of the 2007 American Housing Survey used in this report has some responses mistakenly coded as being in non-metropolitan areas, which may skew the weighting and some results. The team working on the report determined there was not sufficient bias to rerun the analysis with the corrected data.

Worst Case Housing Needs 2007: A Report to Congress can be found at: www2.huduser.org/portal/publications/affhsg/wc_HsgNeeds07.html ■

Health Costs

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treatment, emergency medical services and Medicaid-funded services).

In the year prior to the study, housed participants accrued median (midpoint) costs of \$4,066 per month per individual, with a total of \$8,175,922 in costs accrued by the 95 individuals for the year. After receiving housing, individual median costs per month declined after 6 months (\$1,492) and again at 12 months (\$958), and total costs for the housed group for the year after enrollment in housing were \$4,094,291, a reduction in total costs by more than \$4 million.

Cost offsets for HF participants at 6 months, in comparison with wait-list controls and accounting for the cost of housing, averaged \$2,449 per person per month, with HF participants accruing approximately 53 percent less costs compared with controls over the first 6 months of the study. In addition, there was an approximate 2 percent decrease per month in daily drinking while participants were housed.

“... the current study adds to the body of literature in support of HF. Reductions in health care and criminal justice system use and costs and alcohol consumption support expansion and replication of this low-threshold approach. Repeated unsuccessful participation in traditional

programs such as abstinence-based or mandated treatment, and high rejection rates of these programs by chronically homeless individuals with alcohol problems, suggests that less conventional approaches such as HF are also needed,” the researchers write.

“Findings suggest that permanent, rather than temporary, housing may be necessary to fully realize these cost savings, because benefits continued to accrue the longer these individuals were housed. Findings support strategies to retain these individuals in housing, including offering on-site medical and mental health services, supportive case managers, and minimal rules and regulations pertaining to their housing.”

To view the full article, go to <http://jama.ama-assn.org/cgi/reprint/301/13/1349> ■

HOMELESS HEADLINES



ILLINOIS ASSOCIATION OF COMMUNITY ACTION AGENCIES
HOMELESS HEADLINES
3435 LIBERTY DRIVE
SPRINGFIELD, IL 62704

Headlines Directory

Center for Community Change

1536 U Street NW
Washington, DC 20009
Telephone: (202) 339-9300
<http://www.communitychange.org>

Center on Budget and Policy Priorities

820 First Street, NE, Suite 510
Washington, DC 20002
Ph: (202) 408-1080
Fax: (202) 408-1056
<http://www.cbpp.org>

Chicago Coalition for the Homeless

1325 S. Wabash, Suite 205
Chicago, IL 60605
Telephone: (312) 435-4548
Fax: (312) 435-0198
<http://www.enteract.com/~cch/index.htm>

Coalition of Citizens With Disabilities in Illinois

300 E. Monroe, Suite 100
Springfield, IL 62701
Telephone: (217) 522 7016
Fax: (217) 522-7024
TDD: (217) 522-7016
<http://www.ccdionline.org>

Corporation for Supportive Housing

205 W. Randolph, 23rd Floor
Chicago, IL 60601
Phone: (312) 332-6690
Fax: (312) 332-7040
Email: il@csh.org
www.csh.org

Food Research and Action Center

1875 Connecticut Avenue, NW, # 540
Washington, D.C. 20009
Telephone: (202) 986-2200
Fax: (202)986-2525
foodresearch@frac.org

Housing Action Illinois

11 E. Adams, Suite 1601
Chicago, IL 60603
Telephone: (312) 939-6074
Fax: (312) 939-6822
<http://housingactionil.org>

Housing Assistance Council

1025 Vermont Ave. NW, Suite 606
Washington, D.C. 20005
Telephone: (202) 842-8600
Fax: (202) 347-3441
<http://www.ruralhome.org>

Illinois Association of Community Action Agencies

3435 Liberty Drive
Springfield, IL 62704
Telephone: (217) 789-0125
Fax: (217) 789-0139
<http://www.iaacanet.org>

Illinois Coalition Against Domestic Violence

801 S. 11th
Springfield, IL 62703
Telephone: (217) 789-2830
Fax: (217) 789-1939
<http://www.ilcadv.org>

Illinois Department of Commerce and Economic Opportunity

620 E. Adams, CIPS-3
Springfield, IL 62701
Telephone (217) 785-6142
Fax: (217-782-1206
<http://www.commerce.state.il.us/>

Illinois Department of Human Services

Homeless Services and Supportive
Housing
400 W. Lawrence, 2C
Springfield, IL 62762
Telephone: (217) 782-1317
Fax: (217) 524-5800
<http://www.dhs.state.il.us>

Illinois Food Bank Association

P.O. Box 8293
Springfield, IL 62791
(217)522-4022
E-mail: cifbank@aol.com

Illinois Housing Development Authority

401 N. Michigan Ave., Suite 900
Chicago, IL 60611
Telephone: (312) 836-5200
Fax: (312) 836-5286
TDD: (312) 836-5222
<http://www.ihda.org/>

National Alliance to End Homelessness

1518 K Street, NW, Suite 410
Washington, D.C. 20005
Telephone: (202) 638-1526
Fax: (202) 638-4664
E-mail: naeh@naeh.org
<http://www.endhomelessness.org/>

National Coalition for Homeless Veterans

333 1/2 Pennsylvania Avenue, SE
Washington, D.C. 20003-1148
Telephone: (202) 546-1969
Fax: (202) 546-2063
E-mail: nchv@nchv.org
<http://www.nchv.org/home.html>

National Coalition for the Homeless

2201 "P" St., NW
Washington, DC 20037-1033
Phone: (202) 462-4822 x234
Fax: (202) 462-4823
Email: info@nationalhomeless.org

National Community Reinvestment Coalition

727 15th St., NW, #900
Washington, D.C. 20005
Telephone: (202) 628-8866
Fax: (202) 628-9800

National Law Center on Homelessness & Poverty

918 F Street NW #412
Washington DC 20004
Telephone: (202) 638-2535
Fax (202) 628-2737

National Low-Income Housing Coalition

& National Low Income Housing Information Service

727 15th St NW, 6th Floor
Washington, D.C. 20005
Telephone: (202) 662-1530
Fax: (202) 393-1973
E-mail: info@nlihc.org
<http://www.nlihc.org>

National Rural Housing Coalition

601 Pennsylvania Avenue, NW
Suite 850
Washington, D.C. 20004
Telephone: (202) 393-5229
Fax: (202) 393-3034
<http://www.nrhweb.org>

Rural Development

2118 W. Park Ct, Suite A
Champaign IL 61821
Telephone: (217)403-6222
Fax: (217)403-6231

Southern Illinois Coalition for the Homeless

P.O. Box 955
801 N. Market
Marion, IL 62959
Telephone: (618) 993-0094
Fax: (618) 993-4013

Supportive Housing Providers Association

212 E. Ohio Street, 5th Floor
Chicago, IL 60611
Telephone: 773-935-4663, ext.123
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U.S. Department of Housing and Urban Development

Office of Community Planning and
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<http://www.hud.gov/local/chi/chihome.html>