



Rationing Health Care for the Homeless?

The number of people experiencing homelessness across the country is increasing. The US Conference of Mayors reports more and more people seeking assistance at food banks, meal sites, shelters — year after year. The fastest growing proportion of the population that experiences homelessness in the US is families with children. Year after year after year, the demand for our services is greater. Evidence of this includes national and local macro-data, our own service statistics, the lines out the doors that encircle our community courtyard.

Numb yet? Fatigued? Overwhelmed? You might be. We could be. Yet, AHCH direct line staff continue to greet each person in need with competence and compassion. How they summon either is near miraculous — but tempered by an intentional, values-driven

process of constant prioritization of whom we serve.

How do we serve everyone? We don't. Nor do we try. Years ago, AHCH recognized that the road to reducing the numbers of people in need would be long, the trends likely to continue. Thus our concerted systems and other advocacy. We also — reluctantly — realized that we just couldn't continue to try and

How do we serve everyone?
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serve everyone seeking care. Our well-intentioned, individual and collective efforts to do so would only solidify a kind of implicit or by-default “rationing” of our resources and services. Someone in need would be left out. We got clear that the right thing to do (al-

beit, a hard thing to do) was to determine the limits of our capacity and make the tough choices about where we could have the most impact. In other words, rationing. Explicitly.

Eligibility for our services is broad and timeless, as long as our mission does not change. Most simply stated, if you're homeless, you're eligible for AHCH services. Prioritization of whom we serve first and how, is a function of the interaction between and among conditions in the community and its health and human services systems, and our internal capacity to respond at any given time. We use a values-based decision-making process, with representative work groups, to come to agreement about what matters most in establishing priority subgroups of the homeless population, in any given time period. This helps us to

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Follow the Money *Before* You Donate

By Stephanie Silver
Development Coordinator

During the immediate aftermath of the Asian tsunami that struck Dec 26, 2004, Jan Egeland, United Nations Undersecretary for Humanitarian Affairs chided America as “stingy” after the government's initial pledge of \$15 million. In the following months, however, individual Americans donated more than \$1.7 billion dollars to the tsunami relief effort. Within only three and half months of Hurricanes Katrina and Rita, Americans donated \$3.12 billion in aid; a record response for any single disaster. Every year, Americans dip into their pockets and find nearly \$250 billion to give to all kinds of charities; about 2% of personal income. (*Wall Street Journal*, December 24, 2005)

That is a lot of money by any standard. And like any endeavor involving large sums of cash, charitable giving can attract scam artists who see the generosity of others as a means for personal, and dishonest, gain. Financial scandals have rocked even the United Way and

Red Cross; two charities that can hardly be described as “fly-by-night.” In 1995, William Aramony, president of United Way America, was convicted of defrauding the organization out of \$600,000. Within a month of the September 11, 2002 terrorist attacks information leaked that, of the \$530 million in donations that had poured into the Red Cross, \$200 million was diverted to the agency's administrative costs. Red Cross officials were accused of caring more about building the Red Cross empire than helping families affected by the tragedy. More recently, the Red Cross announced it was investigating 5,500 allegations of fraud related to its Hurricane Katrina relief activities.

Donors have a right to know that their contribution is applied in a manner consistent with their wishes.

Donors increasingly demand accountability from not-for-profits. Any reputable organization should not only be able to provide satisfactory accountability, but should be happy to. How can a donor ensure accountability and

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Tierra del Sol Recognized by the Department of Health

Staff of Tierra del Sol
Top: Maureen Rule, Steve Kinberger
Bottom: Pam Allen, Shoe, Rutledge Beard and Frankie

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AHCH Board of Directors
 FY 2005-2006
 Laura Crowe, *President*
 Paul Maestas, *Vice President*
 Jerry Ritchie, *Secretary/Treasurer*
 David Anderson
 Hilary Hale
 Judith Jenkins
 Tim Karpoff
 Sr. Mary Kennan Kudlacz
 Jerry Montoya
 Ruth Needham
 Kim Posich
 Mary Robinson
 Leonard Tapia

Board of Directors Meeting Dates
 The Board meets the second Tuesday of every month at 5:15 pm. If you are interested in attending a meeting, please call (505) 766-5197 to confirm meeting dates, times and location. Dates of upcoming Board meetings are:
 June 13
 July 11
 August 8
 September 12

AHCH Project Tour Dates
 AHCH conducts project tours for anyone interested in visiting our programs. Tours are the third Tuesday of each month and begin at 1:00 pm. Future tour dates are:
 May 16
 June 20
 July 18
 August 15
 If you would like to join us, please call Stephanie Silver at (505) 767-1177.

Our Mission is to provide caring and comprehensive health and supportive services, linking people experiencing homelessness to individual and collective solutions, *and* to be a leader in creating service delivery models and solutions to homelessness.

AHCH, a 501(c)(3) non-profit organization governed by a community-based Board of Directors, receives funding from federal, state, county, city and private funding sources. AHCH does not discriminate on the basis of sex, race, color, religion, sexual orientation or national origin.

El Intercambio ("the exchange") is a regular publication of Albuquerque Health Care for the Homeless, Inc.

Editor, Stephanie Silver
 Development Coordinator

From the Co-EDs...

This letter is adapted from that posted in January on our new website. Please visit us at www.abqhch.org/

"You will meet with challengers if you consider using this model" ... That's what we read last December as we surveyed articles and researched shared leadership options as part of our conversation with the AHCH Board of Directors. This sub-heading, taken from an article by Jim Campbell entitled "Co-Directing - A Leadership 'Pas de Deux'" (CharityVillage.com), immediately followed by another that went "You may also meet challenges from within yourself."

How ever could we resist?

So, after nearly 17 years combined experience as part of the AHCH leadership team, in January we accepted the Board's offer to remain as Co-Executive Directors. For AHCH, two decades of organizational history, growth, and continuous clarification of our mission in practice finds us at a good time to test such a model - one that reflects our values, innovative spirit, and culture. To borrow from Campbell again, we agree that "(c)o-directing an organization is the strongest possible demonstration of a commitment to power sharing."

To date, we've seen some head-scratchers, but few challengers as forewarned.

Prior to this year, we worked together as Deputy Director (Julie) and Development Director (Jenny) for six years. We enjoy working with one another and found that division of areas of responsibility fell out logically and naturally. Julie will maintain oversight of programs, human resources, operations, finance, and collaborative relationships with service partners; and Jenny will remain with development and planning, external relations, and advocacy; and we will both work with our Board and its committees.

Shared leadership will also make us more available to facilitate creativity and thoughtful reflection about our next steps at all levels of our organization. We look forward to building on a solid base of complementary strengths to add momentum to ongoing organizational initiatives (such as primary care/behav-

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Senior Management

1217 1st NW (505) 766-5197
 Jennifer Metzler, Co-Executive Director
 Julie Rosen, Co-Executive Director
 Anita Córdova, Associate Director
 Trish Grand, Director of Finance
 Stefanie Whaley, Director of Operations
 Sandra Penn, MD, Medical Director
 Tina Carlson, Behavioral Health Clinical Director
 Sandra Lee, Human Resources Director

Primary Care Services

1217 1st NW

Medical Clinic

Sandra Penn, MD, Medical Director
 242-4644
 Mona Marin, RN, Clinic Manager

Dental Clinic

Amalia Torrez, Program Manager
 242-8288

Social and Behavioral Health Day Services

1217 1st NW

Cyndi Yahn, Social and Behavioral Health Program Manager

Drop-in Center and STARS Case Management

Milton Thomas, Program Coordinator
 843-7611

Counseling & Therapy

Jill Zomerhuis, Program Coordinator
 843-7611

ArtStreet

Brenda Bunker, Program Coordinator
 248-0817

Harm Reduction Outreach

Dominick Zurlo, Program Coordinator
 266-4188

Residential Recovery Programs

Casa Los Arboles

Bob Maxwell, Program Coordinator
 344-6738

Villa de Paz

Mitch Marzec, Program Coordinator
 254-0320

Tierra del Sol

Maureen Rule, Program Coordinator
 831-7815

Please address all correspondence to:
 Albuquerque Health Care for the Homeless
 PO Box 25445
 Albuquerque, NM 87125-0445

New Leaders on AHCH Team

We're excited about some recent changes in AHCH's leadership structure. These changes include new roles for some of our dedicated and talented staff, as well as new members for our team.

Instead of the traditional biosketch introductions, we borrowed from a familiar advertising campaign to have them tell a bit about themselves.

Julie Rosen

New position: Co-Executive Director
Former position: AHCH Deputy Director
Years at AHCH: 6 years
Retreat: Beautiful beach on the ocean, or in New Mexico, a hot tub
Alarm clock: My daughter's call (every day) – "Wake up - it's morning!"
First job: "Girl Friday" for a small family (not mine) business
Indulgence: My daily indulgence is chocolate (in any form)
Favorite thing about my job: Working with such an amazing impressive committed group of staff!

Jenny Metzler

New position: Co-Executive Director
Former position: AHCH Development Director
Years at AHCH: 11 years
Fondest memory: I inherited my grandmother's ability to remember everything and am blessed with endless, timeless, poignant, pungent-good memories
Soundtrack: Latcho Drom
Retreat: Anyplace that gets my boots dirty, or Rachel's place on the mesa in Taos
Proudest moment: Climbing to 14k feet a year after healing five pelvic fractures
Biggest challenge: Knowing a moment of frank and pure (or everyday) bliss and — just — being — in — it
Alarm clock: Dogs Cleo's and Puck's intent stares and tail thumps

Anita Córdova

New position: Associate Director
Former position: Development Director, Law Access New Mexico
Childhood ambition: Transcend the norm
Fondest memory: Taco/enchilada night — each member of the family made them their own specific way with the variety of ingredients available — yet in the end we all ate together
Soundtrack: Basquiat
Retreat: Mountains
Wildest dream: To be the change I want to see in the world

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Recent Surveys Offer a Snapshot of Homelessness

Meanest Cities in America

The top 10 U.S. cities antagonistic to homeless people, according to the National Coalition to End Homelessness and the National Law Center on Homelessness and Poverty are:

1. Sarasota, FL
2. Lawrence, KS
3. Little Rock, AR
4. Atlanta, GA
5. Las Vegas, NV
6. Dallas, TX
7. Houston, TX
8. San Juan, PR
9. Santa Monica, CA
10. Flagstaff, AZ

This ranking is based on a survey of 224 U.S. cities that looked at the number of anti-homeless laws in the city, the enforcement of those laws, the general political climate toward people experiencing homelessness in the city, and the city's history of criminalization measures. For the complete story go to the website of the National Law Center on Homelessness and Poverty at www.nlchp.org.

Dominick Zurlo, Program Coordinator for AHCH's Harm Reduction Outreach Program is very happy to see that Albuquerque isn't on the list. "Homelessness is tough no matter where you are," he says. "It is, in part, a community's responsibility to develop programs and methods to reconnect people with services. Albuquerque is progressing in leaps and bounds through the collaborative efforts of various community-based organizations and other providers."

He continues, "For example, the Albuquerque Police Department has begun bringing people in need to a collaborative outreach site where they can connect immediately with services, rather than giving them a citation. This type of coordinated effort is increasing in Albuquerque due to a recognition that more comprehensive and better conti-

nity of care leads not just to a better community, but also to better lives for people struggling with homelessness."

Requests for Emergency Shelter

Both nationally and locally requests for emergency shelter are increasing. AHCH, and other agencies in Albuquerque that serve people experiencing homelessness, have a limited number of motel vouchers from the city for emergency shelter. Emergency shelter is usually for families with children or for individuals who need bedrest for medical reasons.

Locally, according to a survey by the Homeless Advocacy Coalition, in Albuquerque there were 516 emergency shelter beds available year round in 2005. There were 1,399 people who needed an emergency bed but were unable to secure one.

A report by the U.S. Conference of Mayors and Sodexo titled *Survey on Hunger and Homelessness* gives national figures. During 2005, requests for emergency shelter increased by an average of 6%. Requests for shelter by homeless families increased by 5%. 14% of requests for emergency shelter by homeless people overall went unmet. Among homeless families, 32% of their emergency shelter needs went unmet.

According to the report, on average, 22% of people experiencing homelessness have a mental illness, 30% are substance users, 15% are employed, and 11% are veterans.

City officials rank a lack of affordable housing as the leading cause of homelessness. Other causes, in order of frequency, are low-paying jobs, lack of services for mental illness and substance abuse, domestic violence, unemployment, and poverty.

Requests for assisted low-income housing increased by 85% during the year. Source: www.usmayors.org

Off the Bookshelf

There aren't too many visible models of folks who are courageously and compassionately self-critical. But we can learn so much from those who are willing to talk honestly, humbly, and directly about their mistakes and sources of confusion.... I think many of us could use this kind of fearless openness.... I'm talking about the courage to be self-critical, vulnerable, and willing to admit mistakes, all in the process of taking risks.

Chris Dixon, in *Letters from Young Activists*

Tierra del Sol Recognized by the Department of Health

The New Mexico Department of Health, Behavioral Health Services Division, awarded Tierra del Sol (TdS) and its staff for outstanding accomplishments and contributions to the field of behavioral health and for their dedication to helping improve the quality of life of New Mexicans. This was the first year for these awards, which were given during the the Southwest Regional Behavioral Health Conference.

Tierra del Sol is a long-term residential treatment program for homeless women and their children. TdS serves women with co-occurring disorders, is gender specific and trauma informed. It provides a least-restrictive environment, with a focus on safety and is client-centered with treatment plans and goals determined by clients and supported by the staff. Though TdS residents receive holistic treatment including alternative medicine, individual therapy, groups, case management and animal-assisted therapy, they also receive psychiatric, medical and dental care.

From the Co-EDs cont.

ioral health integration and diversity) and to engage with our neighbors and community partners. As reflected in the pages of this newsletter, AHCH is prepared to be accountable, to think out loud with others, to roll up our sleeves and plunge into real – but not always the easiest nor neatest – solutions to homelessness. We welcome the challenges as well as the breakthroughs ahead.

Our hope as we embark in our new roles is to learn with this incredible, supportive staff and board who constantly inspire us, and to share our lessons and experiences with our local and national collaborators. Ultimately, we are confident that testing this leadership model will help us to do the best for those without homes and for ending homelessness in our community.

Scratching your head? Experience with co-directing that you'd like to share? Feeling a challenge coming on? Call us. Come visit. We'd love to hear it.

Julie Rosen and Jenny Metzler
Co-Executive Directors

Rationing Health Care? cont.

dig into such questions as whether we should opt for more services to more people or better services to fewer; or what the implications of growth and responsiveness are if we are to maintain our organizational values and culture; or what our role is in making certain that our community is addressing homelessness. It gives us a framework for reflection on our effectiveness, and, frankly, to examine whether or not we're working the easiest versus the best approaches.

At AHCH, we don't charge for services. Eligibility is not determined by income, but rather by housing status. We don't slam the door on people who are in need, but not eligible. Our social services team works diligently to complete the linkages necessary for them to get the help they need from other community providers.

However, we're getting more comfortable with limits. We recently did another round of review of our prioritization criteria. We landed on two top values that will guide our decisionmaking, for now: acuity of need (not just physical health needs) and vulnerability. At the same time, 2006 will be a year of intensified focus on efficiency, productivity, and outcomes. We believe that if we can continue to challenge and test ourselves on these, then the issue of "rationing" will dwindle to less and less of a concern.



Arlene Fraley, *Agua Vida*, acrylic in stained glass, from ArtStreet

Follow the Money cont.

effectiveness? The Better Business Bureau's Wise Giving Alliance offers these suggested areas of questioning.

1. Does the organization spend at least 65% of its total expenses on program activities? You can easily figure this out from an annual report or IRS Form 990. Divide Total Program Expenses (line 13 on Form 990) by Total Expenses (line 17 on Form 990). At AHCH, for example, that would be \$4,369,801 divided by \$5,471,636, or 80%.

2. Does the organization spend no more than 35% of contributions on fundraising? Find out by dividing Total Fundraising Expenses by Total Related Contributions. At AHCH it's \$137,526 divided by \$5,288,367, a very thrifty 3%.

3. Does the board have a policy of assessing the organization's performance and effectiveness no fewer than every two years, and of determining future actions required to achieve its mission? AHCH board regularly conducts self evaluations and participates in a yearly strategic planning process with the staff.

4. Does the organization acknowledge that it is accountable to all those it serves, to all who support it, and to society? The accountable organization clearly states its mission. It explains how its programs work and how effective they are. It freely shares information about its operations. You can find the current annual report of AHCH on our website at www.abqhch.org. It contains our mission, vision, financials, supporters and program information.

If you have other questions that are of particular interest to you, please call AHCH at 766-5197.

Resources

www.charitynavigator.com - Ratings of more than 5,000 not-for-profits as well as guidelines and questions for donors.

www.give.org - Published by the Better Business Bureau. Includes a code of ethics for fundraisers.

www.afpnet.org - Website of the Association of Fundraising Professionals. Includes a donor "bill of rights."

www.GuideStar.org - Allows you to view the IRS Form 990 of any non-profit that has filed one.



health

change

HOME

care

dignity

make a donation

commUNITY takes all of us

Albuquerque
Health Care
for the Homeless

We're in the last quarter of our fiscal year and hoping to meet the last \$50,000 of our fundraising goal for the year. Please help us reach our goal by making a donation. As described in this newsletter, we have new leaders on our team. We're energized and full of ideas and inspiration for the coming year. We are eager to use your support to sustain our re-charged momentum.

If you've forgotten or were thinking about it and just didn't get around to it, here's how you can support Albuquerque Health Care for the Homeless.

1. Use this form to make a tax-deductible donation.
2. Sign up for electronic funds transfer. Call our office at 766-5197 to learn how.
3. Go to our website at www.abqhch.org to make a donation online.
4. Make a donation in honor or memory of someone.
5. If your company participates in United Way, designate AHCH to receive your donations.
6. Organize a fundraising drive for high-priority items such as socks, diapers, sunscreen, bottled water, lip balm, caps, toiletries, disposable razors, and vitamins.

My 100% tax deductible contribution in the amount of _____ is enclosed.

This donation is in honor/memory (circle one) of _____

Name _____ Phone _____

Address _____

Please make checks payable to *Albuquerque Health Care for the Homeless* or complete the credit card information below.

Visa or Master Card (circle one)

Name on Card: _____

Card Number: _____ Expiration Date: _____

Signature: _____

Please return this form with payment to: PO Box 25445, Albuquerque, NM 87125-0445

Wish List

Athletic socks
Bottled water
Lip balm
Sunscreen
Diapers
Toiletries
Shampoo, lotion, soap
Travel-size toiletries

To make a donation of these priority items, or if you have any questions about making a donation, please contact Stephanie Silver at 767-1177.

Call Hire Power

Hire Power Cooperative Association is operated by AHCH's Casa Los Arboles residential treatment program. If you have home and lawn maintenance, repair, or other projects, call 319-6315 for an estimate.

New Leaders on AHCH Team cont.

Proudest moment: Graduation from grad school; being a first generation college student

Biggest challenge: Being white on the outside and brown on the inside

Alarm clock: Arbitrary

Perfect day: Everyday

First job: Collecting empty cans around the neighborhood in Las Vegas, NM – Paid in two ways 1) a neighbor made me pancakes for cleaning up the neighborhood; 2) recycling the cans.

Indulgence: Napping in a ray of sunshine

Last purchase: Wedding gown

Favorite movie: Mask

Favorite book: *Secret Garden*

Inspiration: Selfless acts of kindness

My life: Is... an ongoing adventure

Sandra Penn, MD

New Position: Medical Director

Former position: Staff Physician, First Choice Community Health Centers

Proudest moment: Finishing medical school

Biggest challenge: Running my first marathon

Perfect day: Waking late, taking a hike, having dinner with friends

First job: Waiting on customers in my parents' store

Indulgence: Silk shirts

Latest book: *Synchronicity*

Inspiration: Everyone I meet

My life: Is...incredibly rich in opportunities.

Tina Carlson, APRN, BC

New position: Clinical Director

Former position: AHCH Clinical Nurse Specialist, Psychiatry

Years at AHCH: 2 years

Childhood ambition: To live and work in South America

Fondest memory: Living in Madrid as a 20-year old

Soudtrack: Gypsy King's *Canto de Amor*

Retreat: Mountains, hiking, smelling the pines

Wildest dream: Publish a book of poetry

Proudest moment: Traveling to China to adopt my daughter Mia Lin

Biggest challenge: Balancing all the things I want to do in my life

Alarm clock: Cat Peter

Perfect day: Nothing planned, outdoors, time and family

First job: Concessions at Bronco football games

Albuquerque Health Care for the Homeless, Inc.
PO Box 25445
Albuquerque, NM 87125-0445
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Albuquerque
HEALTHCARE
for the homeless

Our vision... To live
in a world that is just
and without
homelessness.