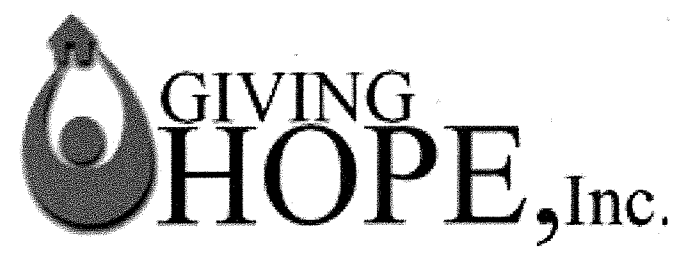
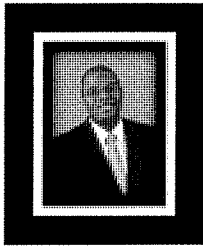




STATE OF THE HOMELESS

2016





I want to thank all of the amazing agencies, staff, and volunteers who helped make our State of the Homeless event and this report possible. This is not a Giving Hope Inc. report. This is a collaborative report of the efforts of a number of agencies in Denton County who share the common goal of eliminating homelessness in the county.

In these pages you will learn about the Point In Time Count and better understand what the homeless situation was in the county on that cold day in January. You will also see the story behind the numbers with the barriers to service report that compiles the efforts of a year of street outreach research and assistance. You will learn about the efforts to help youth in our county with the great work of Journey to Dream.

Please read this report and share with others. Get involved. Donate. Volunteer. Call our office at 940 382 0609 or email me at Alonzo.peterson@hopeincdenton.com with questions. So much is being done in the community to help our homeless neighbors, but more needs to be done to help those in need. It is going to take all of our collective efforts to find a home for those in need.

Sincerely,

A handwritten signature in cursive script, appearing to be 'Alonzo'.

*Dr. Alonzo Peterson
Executive Director
Giving Hope Inc.*



Texas Homeless Network 2016 Point-In-Time Results

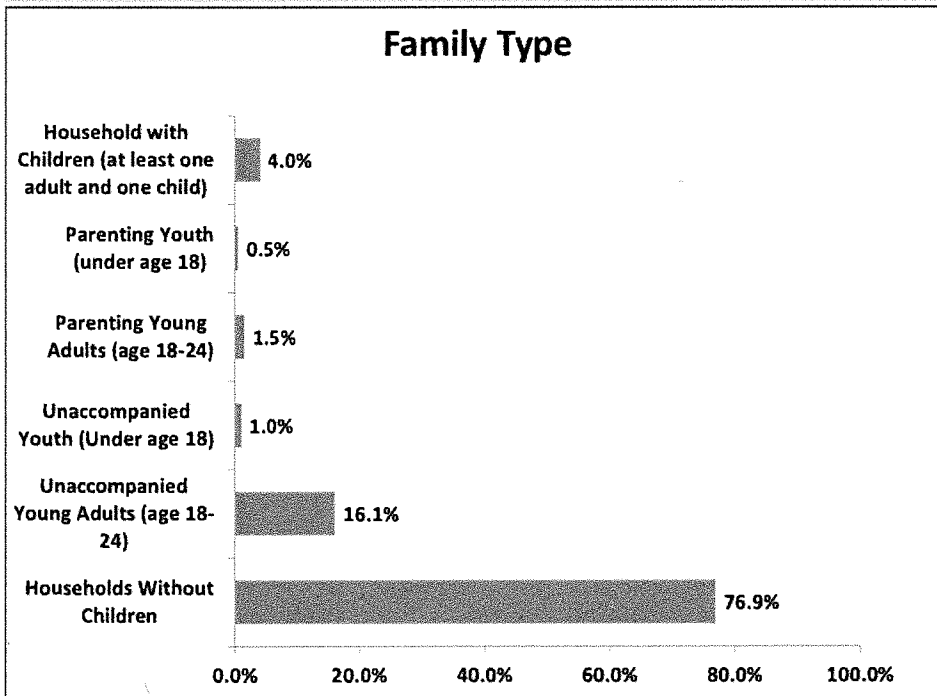
Denton

Contents	
Respondent History	2-3
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Health Care	6
Veteran Statistics	7
Community Needs and Estimates	8

Every year HUD requires all Continua to collect data on homelessness at a single point-in-time during the last week in January. The Texas Homeless Network annually assists communities with their Point-in-Time homeless survey preparation and data analysis. This report is a compilation of data collected on the day of January 21, 2016, by members of the Denton County Homeless Coalition.

The "known location" methodology was used by volunteers who surveyed persons found at sites identified by the community to be where those suffering from homelessness are known to congregate. The resulting survey sample is represented by people in homeless situations and persons who are at risk of becoming homeless. The number of survey responses does not represent the total population suffering from homelessness, so estimates are provided in this report. This information is used by local communities in the development of short and long-term strategies to alleviate homelessness.

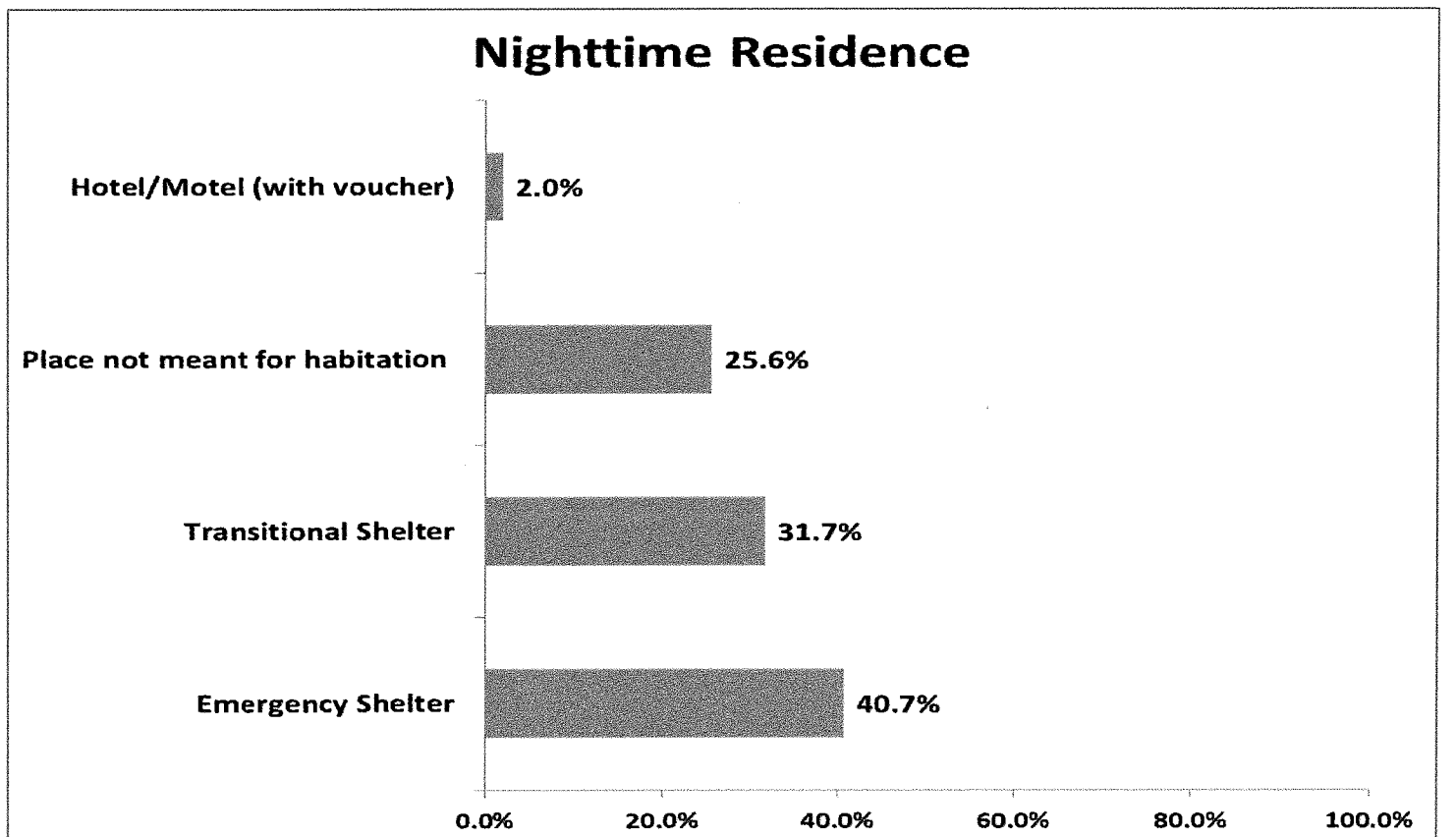
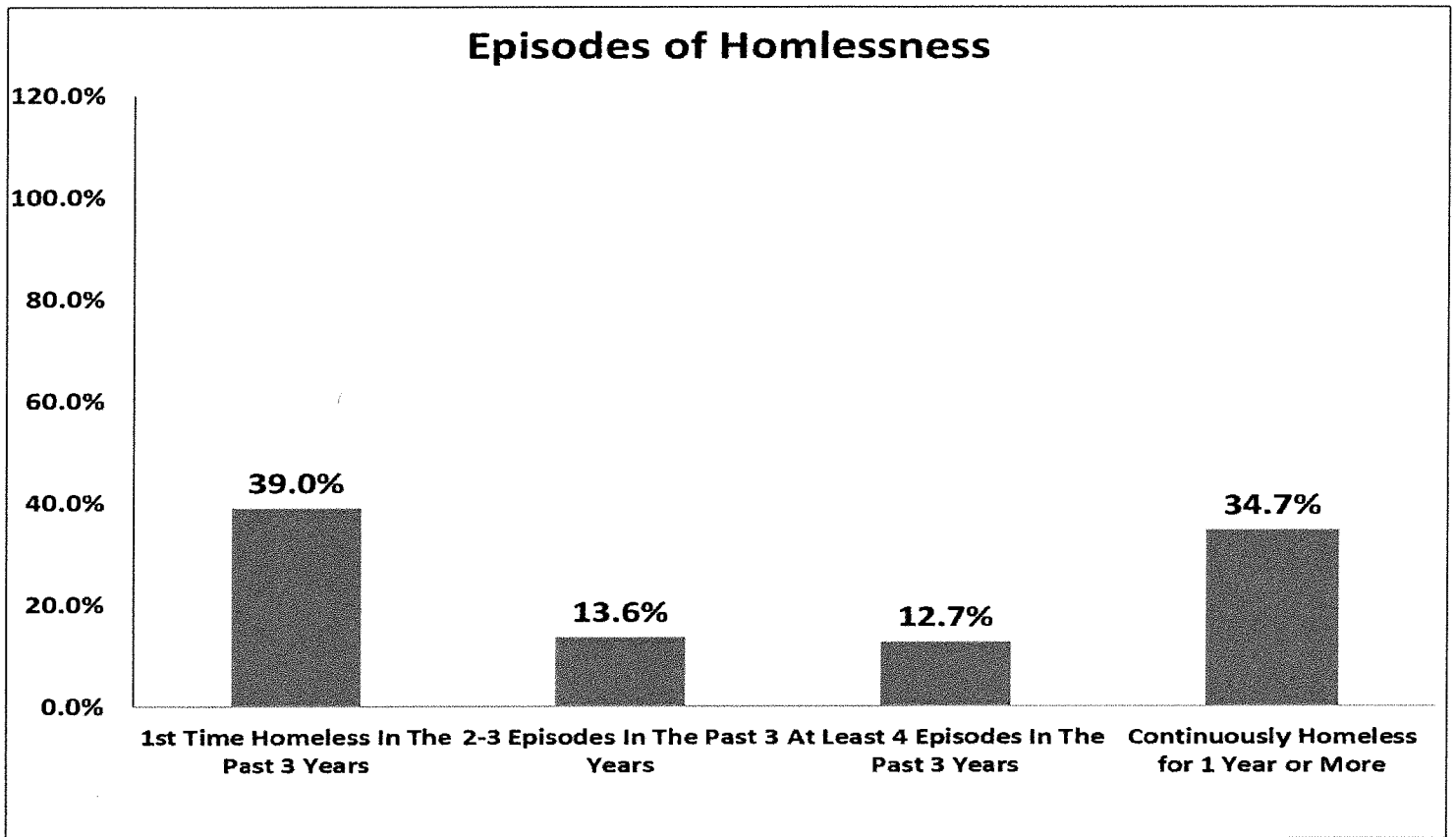
BASIC DEMOGRAPHICS QUICK REFERENCE OF 230 PEOPLE COUNTED



Average age of all participants	44
Male	68.1%
Female	31.9%
American Indian or Alaska Native	14.5%
Asian American	0%
Black or African American	3.1%
White	76.7%
Hispanic/Latino	9%
Households with Children	4%
Chronically Homeless	14.8%

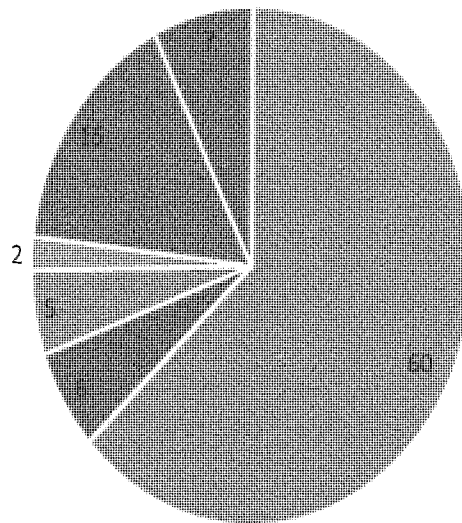
230 people were accounted for in the survey. 201 adults and 29 children.

RESPONDENT HISTORY



RESPONDENT HISTORY CONTINUED

Location Where Respondent Became Homeless This Time



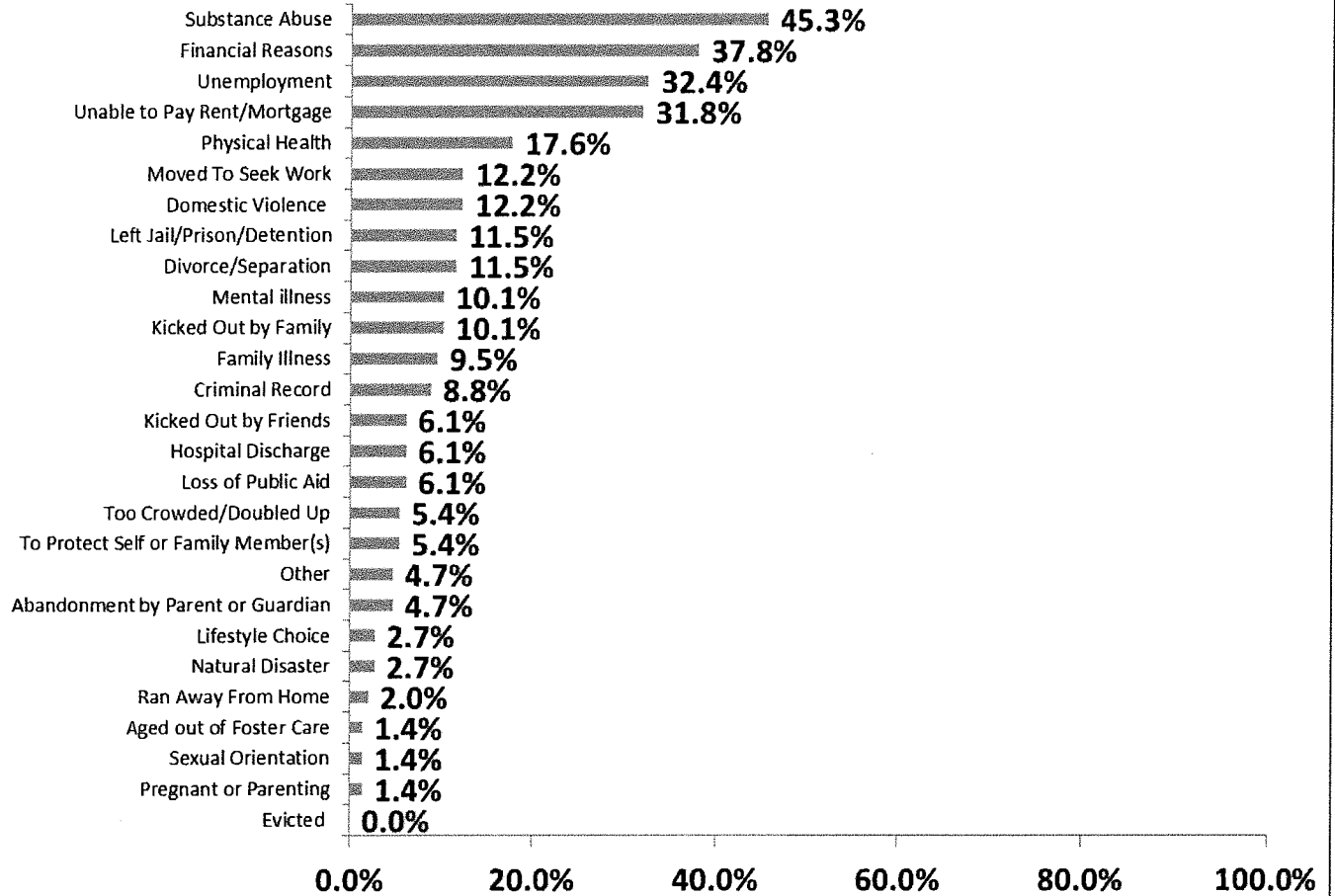
■ Denton ■ Lewisville ■ Dallas ■ Ft. Worth ■ Texas ■ Out of State

RISK FACTORS FOR HOMELESSNESS

Reasons For Homelessness

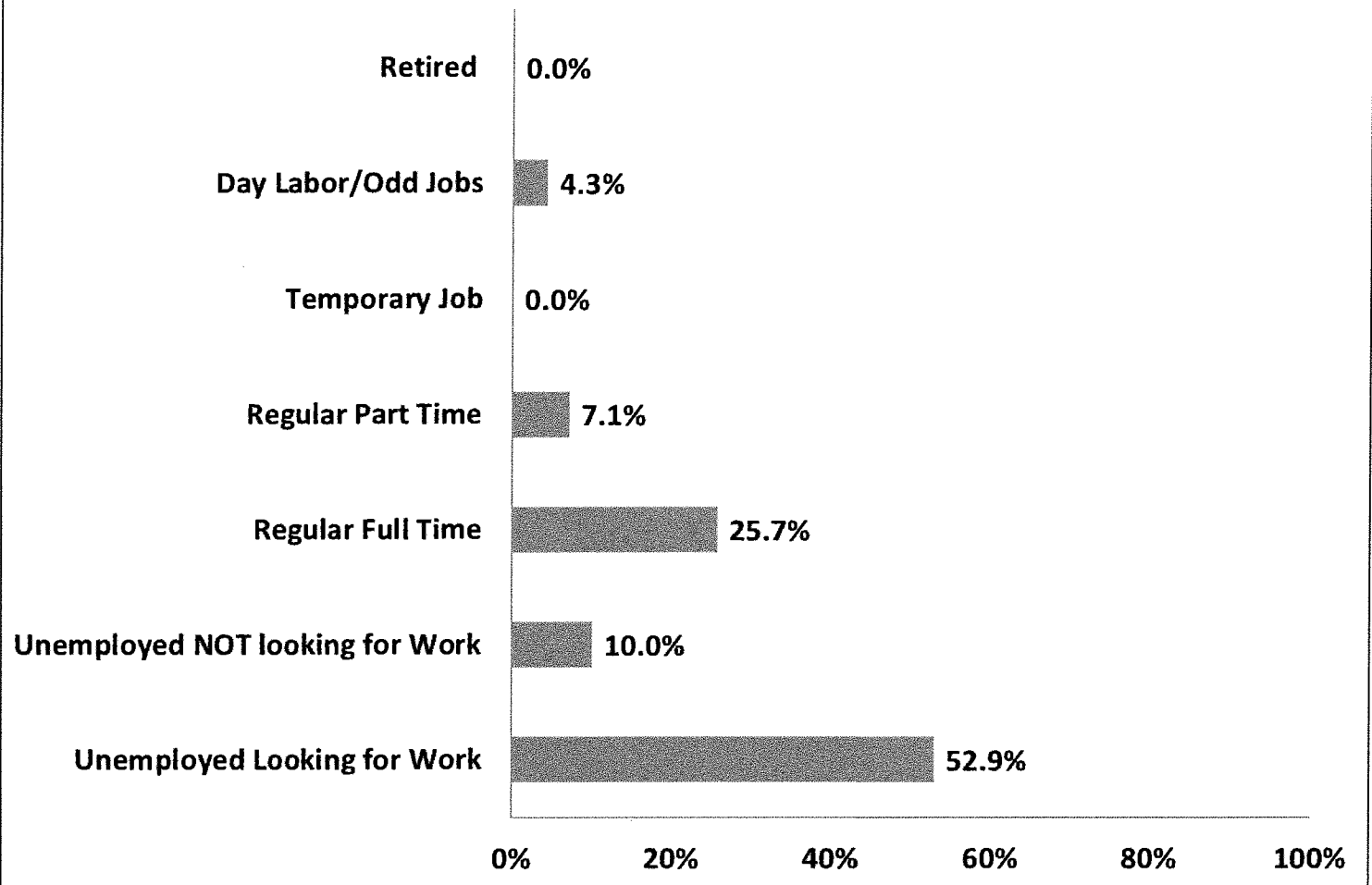
148 Confirmed Cases

Respondents were able to choose more than one category



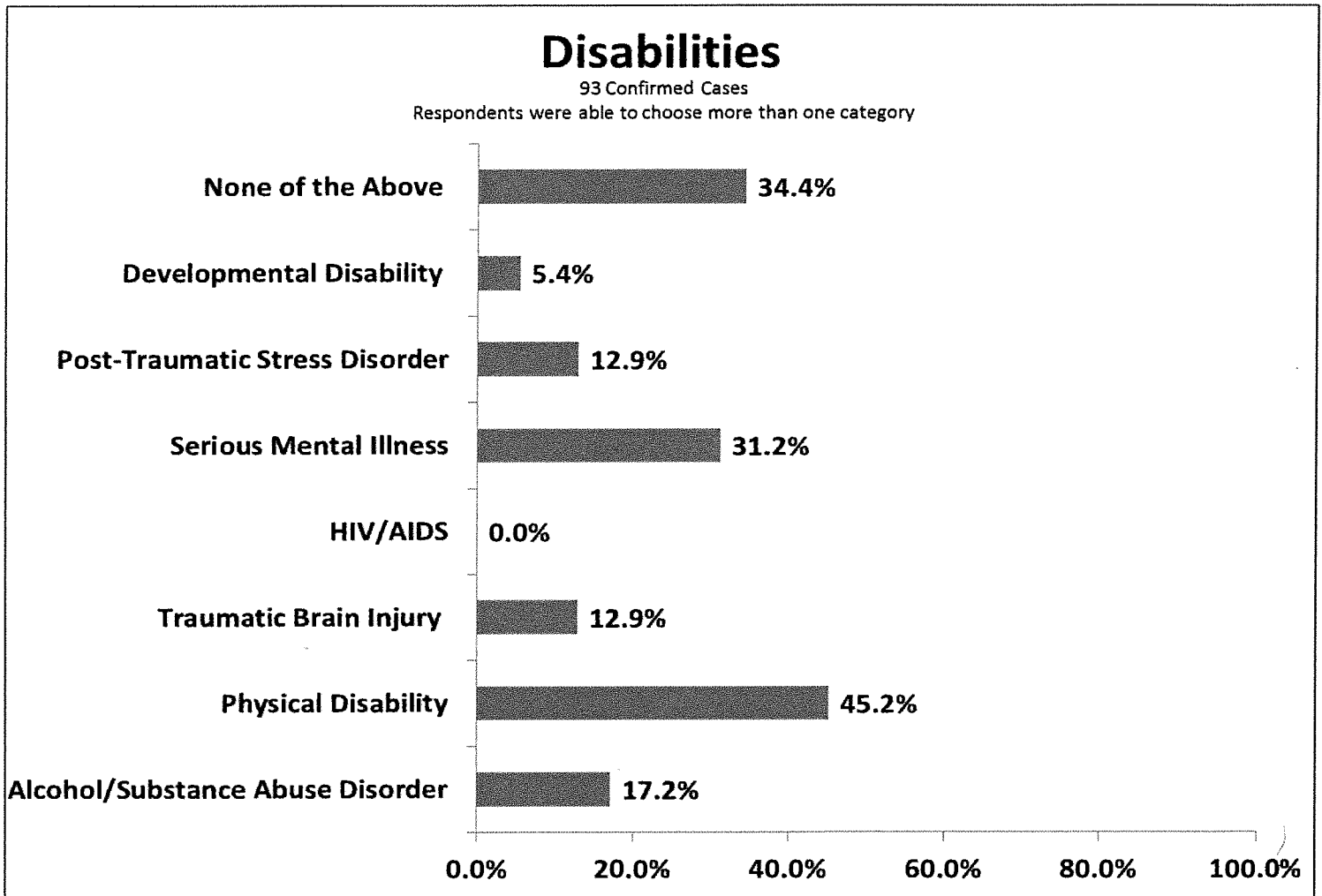
EMPLOYMENT AND EDUCATION

Employment Status



- **69.3%** of respondents indicated that they were able to work.
- Median length of unemployment is **6 months**.
- **73.2%** of respondents report attaining a high school diploma or higher degree in this sample.
- **26.8%** did not graduate high school.

Disabilities

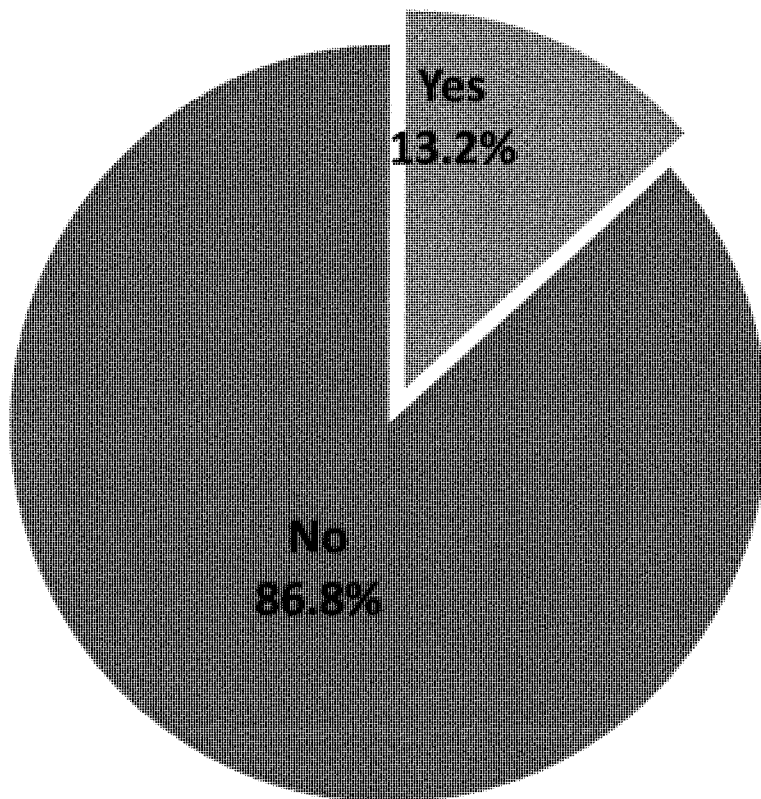


Veteran Statistics

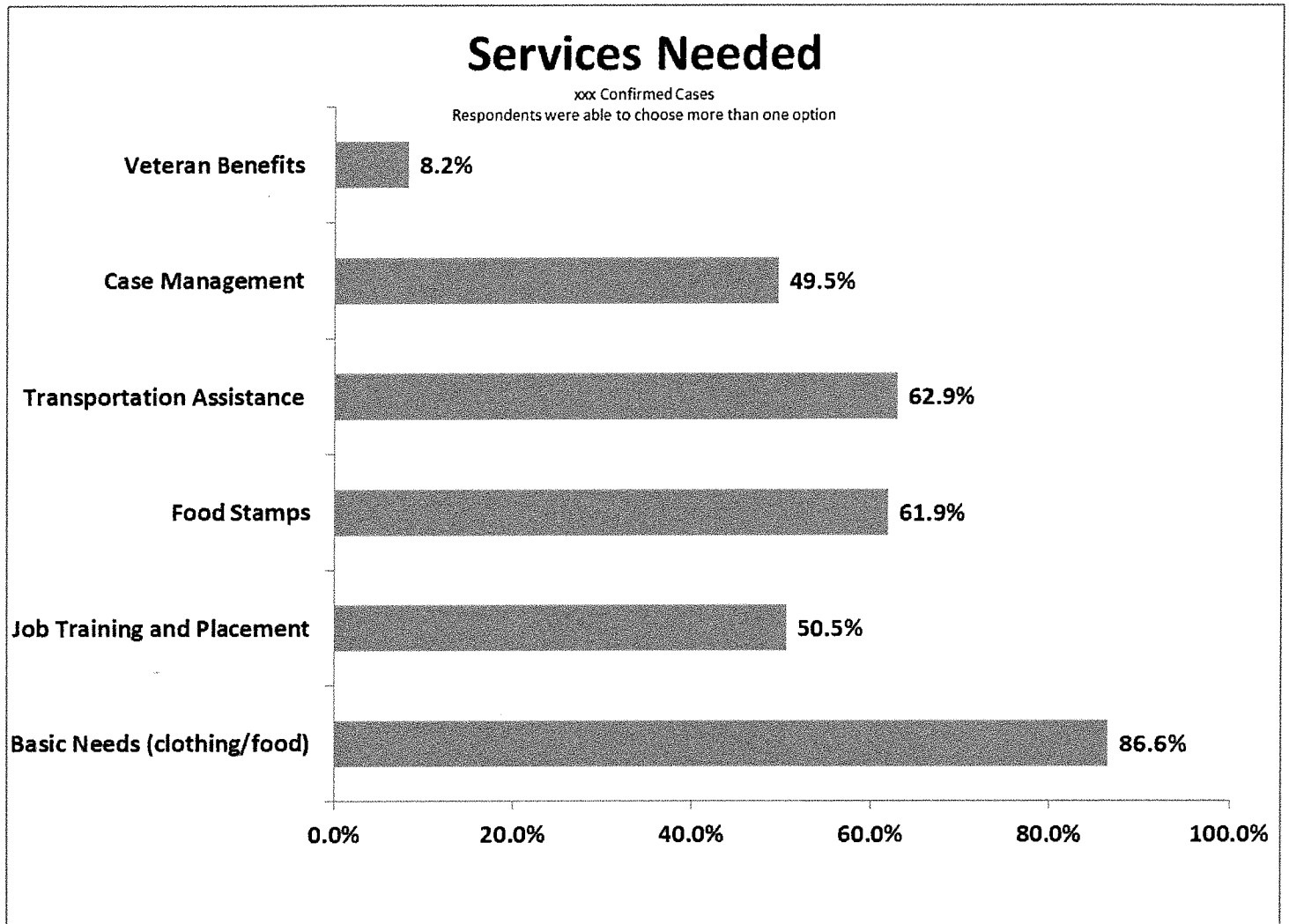
Those who indicated they served in the armed forces, their average length of service was 3 years. 0% indicated they were called up for active duty as a member of the National Guard or as a reservist. 33.3% of veterans who provided a response indicated they had VA benefits of any kind (healthcare or otherwise).

The majority of veterans who provided a response (60%) served in Afghanistan. Other respondents indicated service in Vietnam and Kuwait.

Service in US Armed Forces



COMMUNITY NEEDS



Street Outreach

Barriers Report

14-15

Prepared by: Liz Emerson, LMSW

Outreach Program Manager

Giving Hope Inc.



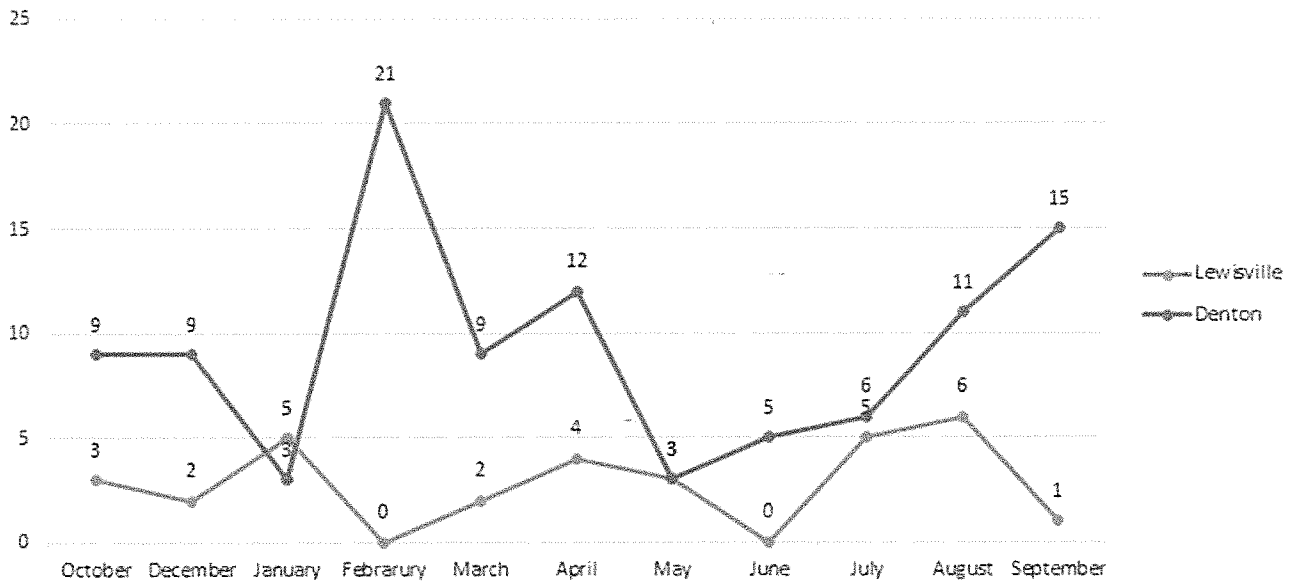
Introduction

The data in this report was collected over the Emergency Shelter Grant year from October 2014 through September 2015. All data is self-reported by individuals experiencing homelessness. Entering the second year of the Giving Hope, Inc. Street Outreach Program has allowed the program manager to adjust surveys to collect vital data that is not being collected cohesively in other programs in the County. Not only does this program acquire data but provides case management and referrals connecting clients to essential services as well as providing donated items. 1,070 items were passed out the 2014/2015 grant year to clients. Other government agencies and social service providers table with street outreach such as the Health Department, The Veterans Administration, Dallas Council on Drug and Alcohol Abuse, Texas Star Program, and Aetna Insurance. There is no requirement for receiving donations but taking the survey is encouraged to give a voice to this population that is often hidden, overlooked, or unheard.

Street Outreach is currently conducted in two cities in Denton County. Street Outreach is performed at the Emily Fowler Library in Denton twice a month. Libraries are historically a common point for those experiencing homelessness to access resources and information. Street Outreach is also conducted in Lewisville outside of the Salvation Army once a month. In Lewisville since there is no shelter this is the most popular access point for those experiencing homelessness as they provide meals and several vital services. The street outreach program does not generally go to encampments. It is important to consider that though they are not necessarily living in a "home" we must respect their privacy. In addition, if clients are staying somewhere that is prohibited and that information becomes known to law enforcement it can damage the trust relationship that is essential to begin working towards sustainable success.

There were 28 street outreach sessions over the entire grant year. One hundred and thirty-four unduplicated individuals participated in the street outreach program. Of those 134 individuals there were 83 clients who had follow up after the initial street outreach contact. Some clients had multiple follow ups while others were only seen once. 103 of the 134 individuals were seen in the city of Denton; 31 were seen in Lewisville. Out of the 83 follow up contacts, 65 were in Denton and 18 were in Lewisville. Follow up contacts were also made at Our Daily Bread and Salvation Army where the outreach manager frequently meets with clients that are not captured in these statistics. Also not included in these statistics are calls advocating for client services, follow up calls with clients, social service providers seeking information about clients who have given consent to discuss their case to access services and face to face office appointments.

of clients seen in 2014-2015



Data Trends

Data is analyzed and compiled by the Outreach Program Manager. As stated earlier, clients always have the option to refuse a question if they desire. The intent of the survey is explained initially to inform the client that the questions are driven to help assess client needs so that case manager can provide appropriate referrals. It is also explained that this data will be compiled to assess gaps in services and educate the community about who the individuals are that are experiencing homelessness as well as what barriers they face. All data that is presented in percentages is an approximate number rounded to the closest whole number.

Gender

Four options are listed on the street outreach survey for gender male, female, transgender, and refuse. Out of all of the individuals who participated in street outreach last year 97 identified as male and 30 identified as female. Seven clients refused to provide that information. Transgender is listed on the survey as an option but no one indicated that that was how they identified, which is not alarming due to the stigma associated with gender identity.

Age

The average age of an individual experiencing homelessness in Denton County according to data collected is 49. Dividing age range by gender our youngest female surveyed was 22 and the oldest 65. The range for males looks fairly similar with the youngest client being 21 and the oldest 69.

Race and Ethnicity

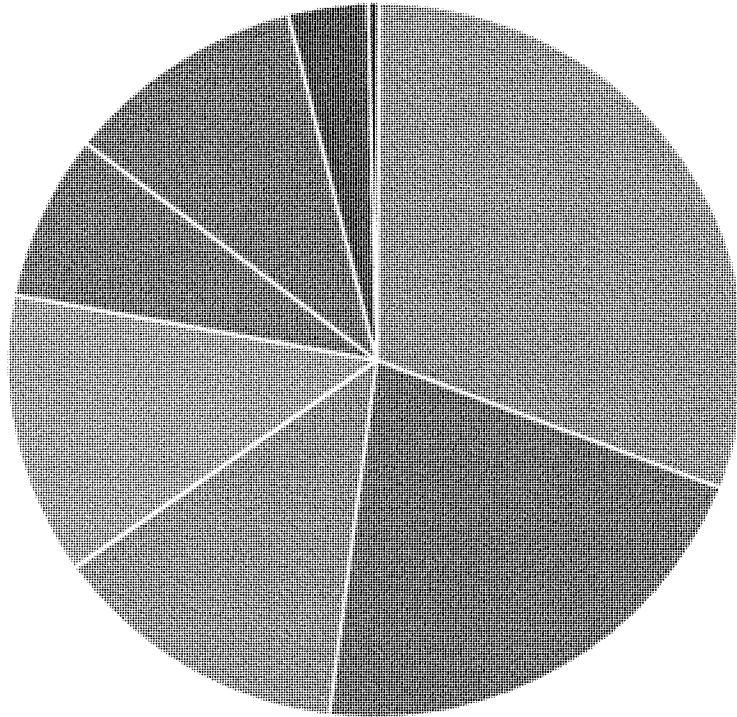
Race options listed on the survey are White, African American/Black, American Indian/Native American, Asian, Hawaiian or Pacific Islander, Multi-Racial, and refused. 99 clients identified as white which equals approximately 75% of the individuals that are surveyed. 16 Individuals identified as Black/African American. Three Individuals identified as American Indian/Native American, one individual identified as Asian. No one identified as Hawaiian/ Pacific Islander. Seven individuals identified as Multi-Racial. Eight clients refused to provide their racial identity. Three options are listed on the survey for Ethnicity Hispanic, Non-Hispanic, and refused. 113 individuals identified as Non-Hispanic. Ten individuals identified as Hispanic. 11 individuals refused to disclose their ethnicity.

Special Populations

There are eight populations identified in the street outreach program: veterans, domestic violence victims/survivors and victims/survivors of sexual assault, those living with severe mental illness, individuals living with physical disabilities, chronic substance abusers/addicts, people living with HIV/AIDS, and individuals that are chronically homeless. Some of the clients only identify as part of one of these populations and others are included in multiple categories. Percentages are determined by number of clients that identified with special population out of the total unduplicated number of clients seen at street outreach for the grant year.

Last year 13% of the clients surveyed at street outreach identified as veterans. 22% of clients identified as victims/survivors of domestic violence and or sexual assault. 36% of individuals surveyed stated they had been struggling with diagnosed or undiagnosed mental health issues 22% of clients stated they were living with a physical disability. 18% of clients identified as having an issue with chronic substance abuse. Less than 1% of clients reported that they were living with HIV/AIDS. 88 people were tested for HIV from March- September by the Dallas Council on Drug and Alcohol Abuse Mobile HIV testing.52% of individuals reported they have been chronically homeless which is defined as homeless for one year or longer or four episodes of homelessness within the last three years according to HUD.6% of clients surveyed were elderly (62+)

Special Population



■ CH ■ SMI ■ OD ■ DV/SA ■ Vet ■ CSA ■ Elderly ■ HIV

Government Assistance

There are eight types of government assistance listed on the street outreach survey to see how many clients are receiving benefits. Supplemental Nutrition Assistance Program (SNAP)- 26% of clients surveyed stated they received SNAP. Temporary Assistance for Needy Families (TANF)- Less than 1% of clients received TANF. This is most likely due to working with individuals who typically don't qualify for TANF. 2% of clients were receiving Medicare. 6% of clients reported they are on Medicaid. Supplemental Security Income (SSI)- 10% of clients are receiving. Social Security Disability Insurance (SSDI)- 3% receive benefits. 2% of clients receive VA Medical benefits and less than 1% receive VA financial benefits.

Key Issues

Shelter

Shelter Options

There are three shelter options when clients are experiencing homelessness in Denton County. Salvation Army shelter has capacity for 45 individuals. Salvation Army is an Emergency Shelter where individuals are able to stay five days a month and can file for an extension. Clients have to take a drug and alcohol test, a sex offender background check, and provide a state identification card upon entrance. When

there is weather days clients are not subject to drug and alcohol testing; there is only a sex offender background check. Weather days do not count towards a client's days for the month. Temperatures have to be below forty-two degrees Fahrenheit at 3:00 A.M. or ninety-nine degrees Fahrenheit at 9:00 P.M. or a 70% chance of rain. Any chance of severe weather is classified as a weather day. If the ground is still wet from the previous weather day that day is also considered a weather day. There are no family rooms available on site; however, there is hotel money available to families who are experiencing homelessness.

The Monsignor King Outreach Center (MKOC) obtained the old animal shelter building last February and signed a lease this September and has been operating as the inclement weather shelter with the goal of becoming a permanent shelter. If it is over one hundred degrees Fahrenheit or under thirty-two degrees Fahrenheit, they are open. They also make a determination if there is severe weather such as flash flooding, severe thunderstorm, or tornado watch/warnings in the future forecast to open the shelter. They have a live website they update to notify agencies and clients of their openings. You can also sign up to receive emails to be notified when they are open. MKOC has the capacity to hold 42 beds currently. They also allow families to stay. MKOC has now started opening every Monday night regardless of weather conditions.

Friends of the Family Residential Shelter is the third homeless shelter in town that is specific to victims of domestic violence and sexual assault. 32 individuals can stay at that shelter. These clients (whether the parent is the victim or the child) are screened via the crisis line or referred by other entities. They have an outreach office as well that provides the same services for victims that do not present an immediate need for residential services. These services include but are not limited to legal services, counseling, advocacy and outreach services. The shelter is for individual women and women with families but there is also funds allocated for individual men or men with families fleeing domestic violence or sexual assault situations as an alternative to the shelter. Men can be referred and receive services as well. Since the residential shelter is considered an emergency shelter the average stay is thirty days with the ability to apply for extensions when appropriate.

It is important to remember none of these shelters are available to everyone at all times. We only have two shelters that are available to individuals experiencing homelessness and only one of them as of now is open year round. The one that is open year round has specific requirements to be able to access shelter and still is meant to be temporary. These are not only the shelters for the city but all of Denton County. There are no shelter options for individuals who work overnight. Individuals are left with no option but to sleep outside or in places not meant for habitation with the risk of having run-ins with illegal activity, violence, and run-ins with law enforcement.

Survey Data

On the street outreach survey clients are asked general questions about where they are staying. Are they staying in the shelter, vehicle, or other (place not meant for habitation)? In January, the program manager added the question "Reason for not going to shelter?" to capture data from those who reported they were staying outside in their vehicle. 91% of clients of the overall year answered this

question. Some gave more than one reason which is why the total adds up to over 100%. 24% of people reported they stayed at Salvation army shelter at the time they were surveyed. 24% of people also refused to answer the question. 13% stated that they did not seek shelter due to overcrowding, using up their 5 days without qualifying for an extension, or being turned away. 11% stated they did not have transportation and it is too far away (Lewisville client's feedback). 9% stated they did not go because of program rules and drug/alcohol testing. 7% stated they felt unsafe or had a bad experience there. 4% stated due to not having an ID, having an overnight work schedule, or having no medical accommodations. 3% reported they were banned or kicked out. 2% stated they had not heard about the shelter. 2% stated they did not stay there due to family issues and only wanted to go for meals. 2% stated they stayed at Monseigneur King Center (inclement weather shelter). 1% stated they did not stay due to language barrier. 1 % stated it was due to fleeing a domestic violence situation.

Transportation

In February we added a question about methods of transportation so we were able to collect seven months' worth of data from 103 clients. The question on the survey is listed as "What is your most common form of Transportation?" 15% stated their most common method is a vehicle. 15% stated their most common form is bicycle. 35% individuals stated their most common form is walking. 7% of individuals stated they used public transportation most frequently. 9% stated they used some combination of vehicle, bike, walking, and public transportation. 19% individuals did not answer the question or refused. Less than 1% reported hitchhiking as their most common form of transportation. Several programs offer public transportation assistance and gas vouchers for medical appointments, job interviews, and obtaining benefits or identifying documents (birth certificate, ID, social security cards). Clients are not always aware of this service that is provided and those entities that provide them are limited in how much they can purchase. Clients state that often public transportation is unreliable and cost is extremely high even for those who are elderly and disabled (physically or mentally). A continual issue that has been echoed with transportation for those who own vehicles is they commonly get towed and then they are unable to get it out due to the high cost and fees that accumulate the longer it stays in impound. In some instances, work tools have been in the vehicle or identifying documentation and that adds additional barriers to service and maintaining employment. Clients that are ill (mentally or physically) are often unable to get to an affordable provider and are forced to use the ER and in some cases have to call an ambulance to get to the doctor in severe but non-emergency medical situations. If buses are off schedule or routes are cancelled clients can miss important appointments (medical, benefits, job interview) or lose employment. There are some vehicle repair programs that occur during the year such as "fix my ride" through Cross Timbers Church. If these events could occur more frequently or on a referral basis that would greatly benefit clients.

Employment

Clients are asked if they are able to work. Approximately 65% of clients stated that they were able to work and 27% stated they were not able to work. 8% of clients refused to answer the question. Of those who stated they were able to work 74% of those individuals are not working, 26 % are working. Approximately 35% of clients that are working are working 40 hours a week or more. 35% of clients are

working part-time. 30% of clients that are working report they are working temporary jobs or odd jobs. More employment services are needed, particularly for those with no work within the last year or more and those with criminal records. Clients who have little to no computer skills are limited in applying for jobs in general especially employment opportunities that require the ability to work with a computer. There is also a barrier for clients when they have no address to put down on a work application, and also for those not being able to get a good night sleep due to lack of access to regular shelter, meals, and showers on a continual basis.

Education

Clients were asked what their highest level of education was. 12 % of clients refused to answer the question. 4% of client's highest level of education was 7th and 8th grade (junior high). 23% left high school between 9th and 12th grade. 33% of clients completed their high school diploma or obtained their GED. 22% stated they attended some college. 6% of clients received one college degree or more.

Institutionalization

Incarceration

In January the Street Outreach manager began tracking information about jail and prison. We were able to ask one hundred and eleven clients about this data over a 7-month period. Clients were asked if they had been to jail in the last year and if so how many times. Clients were also asked if they have ever been to prison and if so did they receive re-entry services.

13% of clients refused to answer the question about going to jail within the last twelve months. 51% of clients stated they had not been to jail within the last year. 36% of clients stated they had been to jail within the last year. Of the clients that had been to jail in the last year 72% only reported being arrested once. 28% were arrested more than one time within the last year, with the maximum number of arrests being 5 times.

12% of clients refused to answer if they had ever been to prison. 64% of clients stated they had never been to prison. 24% stated that they had been to prison at least once. 81% reported receiving no re-entry services 19% reported received re-entry services.

Foster Care

Case manager was curious about the correlation between the child welfare system and homelessness so the question "Were you ever in foster care?" was also added to the survey in January. Therefore 111 clients were asked if they were ever in foster care. Approximately 12% clients refused to answer the question. Approximately 75% stated they were never in foster care. Approximately 13% of clients reported that they had been in foster care at some point.

Health

Mental and Physical Health directly affect a person's ability to function in society. Stable housing has a huge impact on a person's ability to access health care. Continual health care is even more difficult when you do not have income and reliable transportation. Data was collected about health in a general manner as well as some population specific information.

Questions specific to healthcare were added in the month of January. 83% of individuals surveyed last year were asked these question: "When was the last time you saw a doctor?"; "Who provided your treatment?"; "Number of times seen in the last twelve months?"; "Do you have insurance?" 15% of individuals refused to answer the question. 24% of clients have not seen the doctor in the last year. The longest reported time since a doctor had been seen was 35 years. 61% had been to the doctor in the last year. 18% of clients refused to disclose where they went for treatment. 54% of clients stated they went to the emergency room. 13% stated they went to a sliding scale or non-profit clinic such as Community Clinic, Christian Community Action Clinic, Health Services of North Texas, and First Refuge. 6% received care from a private physician. 4% stated that they last received care while incarcerated or in a psychiatric hospital. 3% went to MHMR for care. 2% last stated they went to the VA for care. When asked about insurance 13% of clients refused. 72% of clients are uninsured and 15% report being insured. It is important to consider that clients were just asked where they last received treatment because many clients have reported being in services with MHMR and the sliding scale and non-profit health care providers in follow up surveys. Consistent care is very important to get an accurate picture of what is really going to with a patient's mental and physical health. Many clients experience homelessness due to not receiving consistent care for several reasons, including but not limited to: housing, transportation, access to mail, and communication between providers and patient.

Chronic Health Conditions

In December the program manager added a question about having chronic health conditions with a follow up question asking if they are currently receiving treatment. 91% of clients that were surveyed over the grant year were asked this question. 35% of clients stated they had a chronic health condition. 40% of those clients reported receiving treatment. Program manager has noted that there is no clear option for those living with chronic health conditions. Without regular care there can be serious consequences including but not limited to: condition worsening, hospitalization, or death. Without shelter they are often challenged to get good rest. Without consistent transportation they have trouble staying in regular care and maintaining a medication regimen.

Mental Health

Beginning in December clients who identified as having mental illness were asked if they were receiving treatment capturing 90% of that population surveyed. 37 % of those clients reported they were currently receiving services. Those who identified as having chronic substance abuse issues were asked if they were receiving treatment; 42% of them stated they had received or currently were in treatment.

Food

There are many new resources this year for food. The Denton Hunger Coalition has been working on providing more access to food through all the county programs and is working on a current up to date list of food pantries in the county. They have a mobile food pantry the second Saturday of every month as well at the Mill. Our Daily Bread has expanded their meal services from lunch Monday through Friday by adding Monday nights and Saturday afternoons. Salvation Army provides meals for their residence and community members. In Lewisville there are now meals offered the last Sunday of every month as well as the regular week day meal program. Christian Community Action food bank is an additional resource as well in Lewisville. It seems that the main issues for access to food are transportation, meals that are easy to cook without access to a kitchen, and diet specific meals for those who live with health conditions that require a specific diet.

Looking Forward

Access to shelter for those in the city of Denton and around the county is the only way that individuals have a place to stabilize. With a permanent shelter it is highly likely that health and employment rates would improve. Currently those experiencing homelessness with overnight jobs have no shelter options. For those who are working with multiple service providers, communication with each other is key in providing the best case management and getting the “full picture” of a client’s situation. Transportation services must be well advertised to be accessed and when funds are limited we need to chart the unmet needs to be able to apply for grants for additional transportation services that are in existence.

Since clients that are not in shelter are often constantly mobile, storage and laundry are very common issues. Clients’ personal items are at risk of being stolen when they have nowhere to put it. This includes not only personal effects but identifying information and qualifying documentation. There are minimal onsite laundry services available in Denton. Without laundry services clients are having to wear clothes that expose them to health issues, and their appearance may prevent them from gaining employment. Nonprofits also have to constantly replenish clothing and items that cannot be stored. Some clients even purchase a storage with whatever funds are available and if they cannot maintain that storage they are once again at risk of losing everything.

With a holistic approach to homelessness housing, food, health, employment, and transportation are important issues that directly affect each other. Targeting each of these individual issues is imperative for client success and sustainability. The only way to work on all of these issues is with service provider, client, and community input.

Community Outreach Projects

In 2014 a national campaign called 100K Homes project was implemented in the city of Denton. Over 100 clients were surveyed and a vulnerability index determined those clients most at risk of dying on the street. Three individuals were chosen and provided with housing and wrap-around case management. The success of this program could be used as a model for future projects and the collaboration of agencies proved to be extremely beneficial for clients. Another project to continue expanding is our “Bridging the Gap” project, which brings religious entities together with service providers to prioritize monetary funds for expenses that agency grants cannot cover and also prevents duplication of services.

We recently had our first “Landlord Forum” so that relationships are developed with those who provide housing in the county to combat frequent barriers that prevent clients from getting into housing such as overall access and availability of properties, income requirements, rental history, and criminal background. The SSI/SSDI Outreach, Access, and Recovery (SOAR) program will be implemented this year which is a collaboration of agencies working together to develop a process to expedite claims for those who are chronically homeless with co-occurring disorders who typically fall through the cracks while applying for benefits. The Lewisville Task force was developed this year to examine issues that are specific to barriers in the southern part of Denton County. This group meets every other month and has developed a list of barriers and goals for this year. Last year we had our first Veteran Strategy Summit where we had a serious conversation with the Veterans Administration (VA) and the Denton County Veterans Coalition about what we can do to better provide housing and additional resources for veterans experiencing homelessness. Denton had its first ever Veterans Stand Down through the VA last October where in years prior Veterans were sent to Dallas or Fort Worth to participate.

Conclusion

During the outreach manager’s first year, developing the basics of the street outreach program, identifying gaps in services, and creating a barriers report to show what individuals experiencing homelessness are facing were the highest priority. Entering the second year the case manager developed additional survey questions to capture more data and help the case manager provide more extensive referrals and get a better picture of what homelessness looks like in Denton County.

Products distributed from Street Outreach 14-15

1,070 total items

69 first aid kits

76 cans of bug spray

80 water bottles

45 sewing kit

264 pieces of clothing socks, t-shirts, hats, coats, gloves, sweaters, scarves, and bandanas

153 oral hygiene toothbrush, toothpaste, mouthwash, and floss

35 deodorant

31 Feminine hygiene product kits (a bag with a week's supply of products)

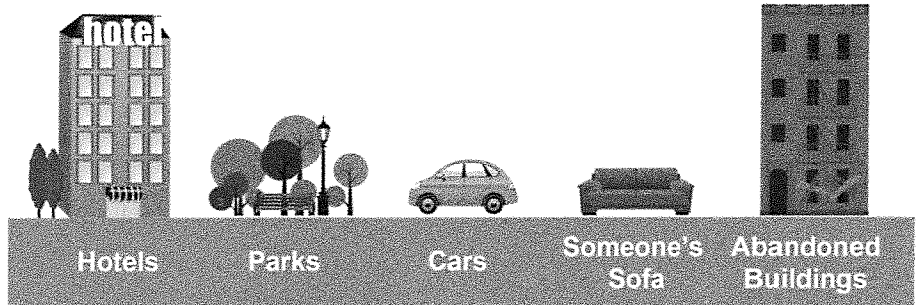
120 hygiene items shampoo, conditioner, and soap
17 razors and 2 shaving creams
40 bags
14 trial sized Tylenol/Advil
36 hair products combs, brushes, hair ties
2 lip balm
28 sanitizer sanitizing wipes and hand sanitizer
23 sunscreen
2 magnifiers for reading
15 Kleenex/tissue
1 blanket, notebook, flashlight, pen, pencil, nail care kit,
3 gold bond powders
9 wash rags

Why Kyle's Place?

- Because they don't have a safe, stable place to sleep tonight.
- Because human traffickers are looking for them.
- Because 60% run the risk of dropping out of school.
- Because few families foster teenagers.
- Because over 5,000 die annually from injury, illness or suicide.
- Because we take God at His word.

National Alliance to End Homelessness, National Network for Youth, National Runaway Switchboard

Where will unaccompanied homeless youth sleep in our community tonight?



There are NO shelter beds in Denton County for unaccompanied youth with more than 400 homeless on any given night.

0 Beds VS Over 400 Unaccompanied Homeless Youth



 = 1 bed  = 10 teens



KYLE'S PLACE

a division of Journey to Dream

Providing residential and support services to youth in crisis.

Family Reconciliation

Proactive Family Reconciliation Program

- ✦ Short-term emergency shelter
- ✦ Case management and basic needs
- ✦ Family and individual counseling
- ✦ Aftercare

Housing & Support Services

Transitional Housing & Supportive Services

- ✦ Case management and basic needs
- ✦ Support system (support groups, mentoring, family, community)
- ✦ Support Services (medical, dental, mental health, substance abuse review)
- ✦ Skill development (educational, jobs, and life skills training)

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