



CA HCD ESG-CV Training Series: Homeless Programs & Services 101



Learning Objectives

1. Trainees will be able to describe the current landscape of homeless programs and services funded at the state and federal level
2. Trainees will be able to describe in detail each of the ESG and ESG-CV core program activities and will be able to give examples of best practice programs
3. Trainees will gain an understanding of case management strategies that support successful homeless programs (trauma informed care, motivational interviewing, housing-focused approaches, harm reduction)
4. Trainees will be able to identify best practices to address community resistance to providing services to those experiencing homelessness
5. Trainees will be able to explain state mandates regarding housing first; how they apply to their homeless programs and will be able to describe and operationalize the core tenants of housing first



Questions to Answer

- What programs end homelessness?
- What are ESG & ESG-CV core programs?
- What is housing first & California's mandate?
- What are best practices to engage & assist participants?
- How to address stigma towards the homeless population?



Homeless Programs & Services



The HUD definition:

1. Literally homeless
2. Imminently homeless
3. Other definitions
4. Unsafe situations



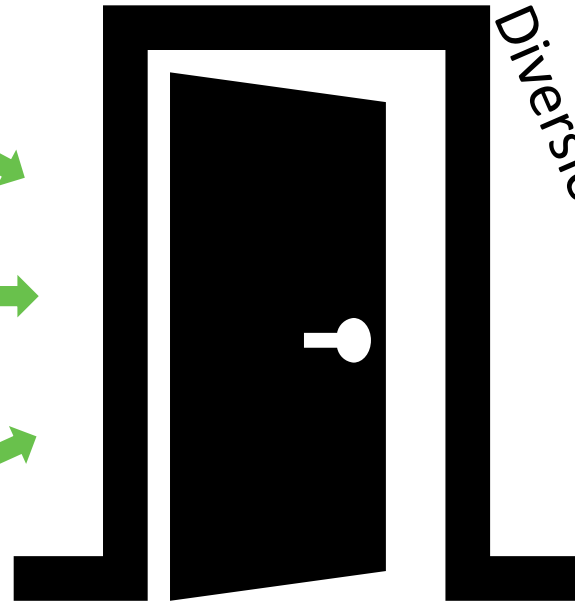
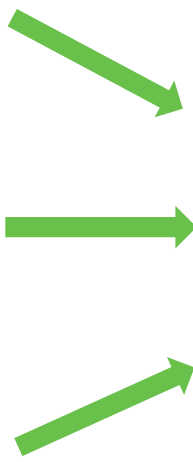
Homeless System of Care

Crisis Response System

Permanent Housing

Prevention

People experiencing homelessness

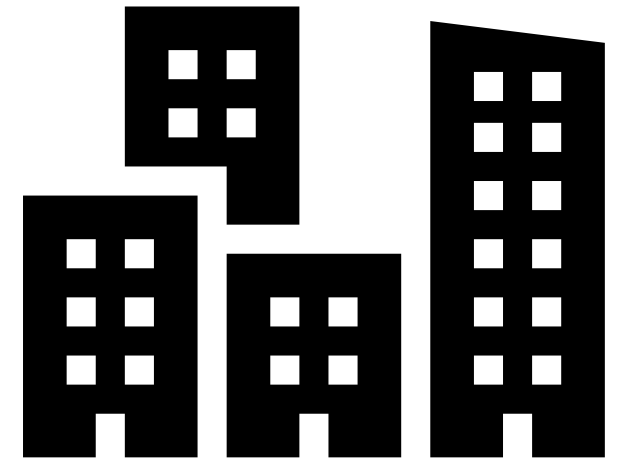
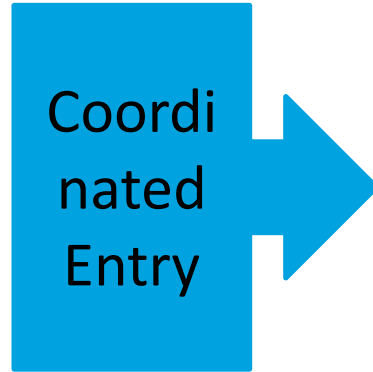


Temporary Housing

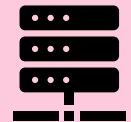
Diversion



Coordinated Entry



Homeless Management Information System (HMIS)





Crisis Response System





Homeless Prevention

What is it? Prevent crises from occurring & prevent an experience of homelessness

Who is it for? At risk of losing housing
Homeless under other federal statutes
Unsafe situations

What activities? Rental assistance
Financial assistance
Legal help
Mediation
Credit repair



Diversion

What is it? Resolve an immediate housing crisis by problem-solving to find an alternative solution to entering the homelessness system

Who is it for? At risk of losing housing
Literally homeless
Unsafe situations

What activities? Problem-solving conversation
Financial assistance
Mediation
Connection to other supports



Street Outreach

What is it? Essential services for meeting the immediate needs of unsheltered people

Who is it for? Literally homeless and not living in shelter

What activities? Services
Connection to resources
Transportation



Emergency Shelter

What is it? Temporary
indoor place to
live or sleep

Who is it for? Literally
homeless
Imminently
homeless
Unsafe
situations

What activities? Place to sleep
Services
Food
Storage of
belongings
Connection to
resources



Low-Barrier Shelter

What is Low-Barrier Shelter?

- Admissions policies that screen-in (not screen out) households
- Welcome pets, partners, and possessions
- Minimal rules that focus on safety
- Ability for people to come and go
- 24-hour operations



Transitional Housing (TH)

What is it? **Time-limited** housing that may provide stability & a plan towards permanent housing; often high-barrier

Who is it for? Literally homeless
Unsafe situations
Sometimes* for special populations

What activities? Furnished place to live either a congregate setting or apartment
Services
Connection to resources



Housing Programs





Permanent Housing Programs



Rapid Re-housing (RRH)

What is it? Time-limited rental assistance in permanent housing that provides support for long-term stability

Who is it for? Literally homeless
Cat. 2 (non-ESG sources)
Unsafe situations

What activities? Their own apartment & lease in participant's name
Case management
Housing location service
Financial assistance



Permanent Housing Programs



Joint Component TH & PH-RRH

What is it?

Crisis stabilization through TH and permanent housing (RRH) that provides support for long-term stability. The program is **time-limited** Participants choose which type of housing and when

Who is it for?

Literally homeless
Cat. 2 (not ESG or ESG-CV)
Unsafe situations

What activities?

Their own apartment & lease in participant's name
Case management
Housing location service
Financial assistance



Permanent Housing Programs



Permanent Supportive Housing (PSH)

What is it? Permanent housing that provides support for long-term stability with no time limits

Who is it for? Literally homeless
Unsafe situations
Focus on chronically homeless

What activities? Own apartment
Intensive case management
Financial assistance



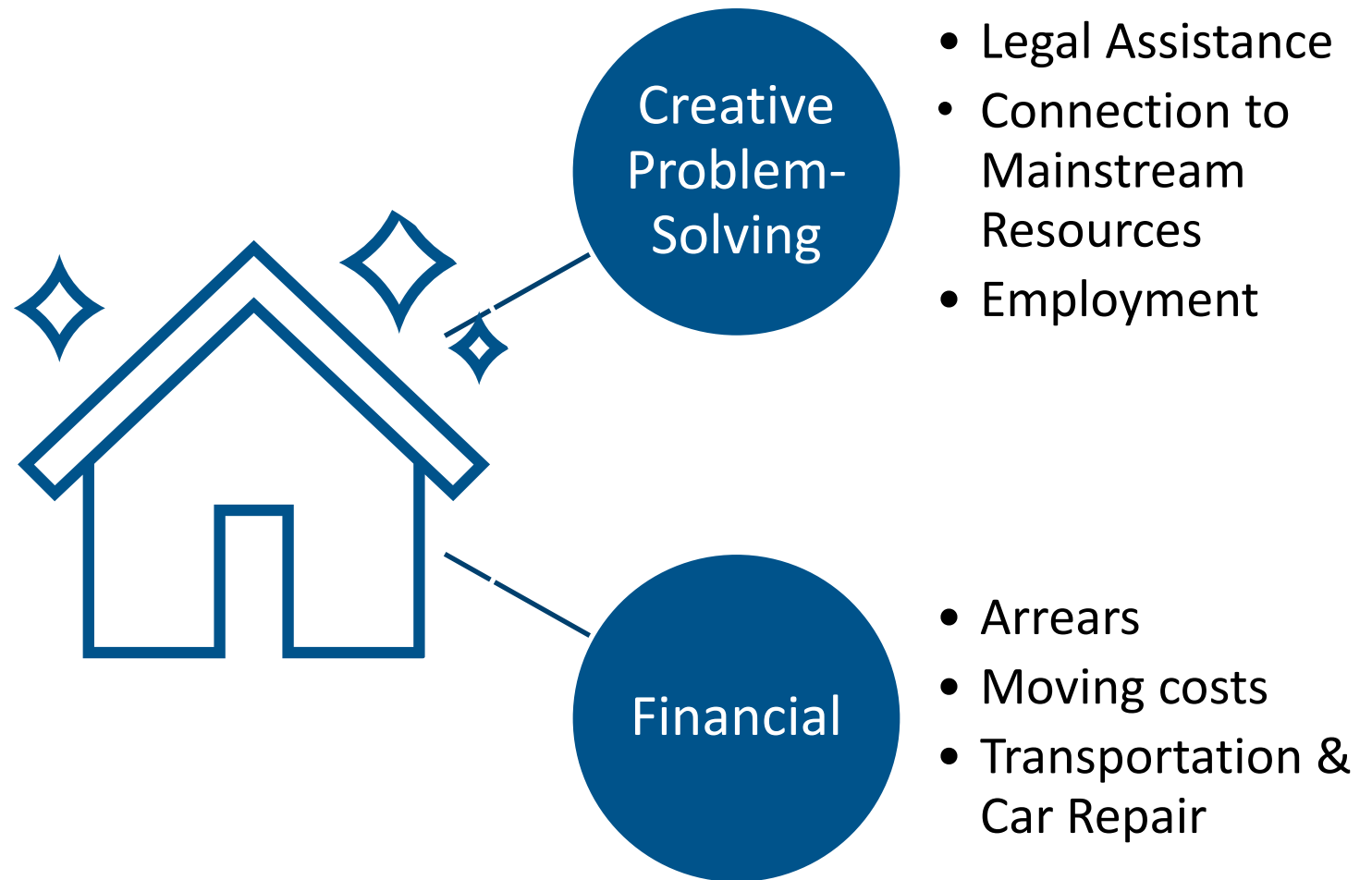
ESG & ESG-CV Core Programs

Program Component	ESG	ESG-CV
Homelessness Prevention	✓	✓
Diversion		
Street Outreach	✓	✓
Emergency Shelter (& Temporary Shelter)	✓	✓
Transitional Housing		
Rapid Re-housing	✓	✓
Joint Transitional Housing & PH-Rapid Re-housing		
Permanent Supportive Housing		
HMIS	✓	✓

Housing-Focused Practices

What is housing focused?

All homeless programs are orientated towards and focusing on moving people into and keeping permanent housing



Housing-Focused Practices



1. Housing & Housing Stability
2. Meeting Participant Goals



Best Practices



Housing First

Motivational
Interviewing

Harm
Reduction

Trauma
Informed
Care



HUD Definition

***Housing First** is an approach where homeless persons are provided **immediate access** to housing and then **offered the supportive services** that may be needed to foster long-term stability and prevent a return to homelessness. This approach removes unnecessary barriers and assumes that supportive services are more effective in addressing needs when the individual or family is housed – when the daily stress of being homeless is taken out of the equation.*

Ann Marie Oliva
Director, Office of Special Needs Assistance Programs
August 21, 2016

Four Overarching Principles:





Definitions without Jargon

Accept participants regardless of sobriety

Participants will be supported in ways that meet their individual needs

Participants will not be evicted for not complying with their service plan

Participants are not required to take classes before being placed in housing



Housing First is mandated or encouraged across the system of care:

■ Housing First Prioritization

COC WRITTEN STANDARDS

Housing, shelter, prevention, outreach, other CoC programs or those with reference in grant agreement

STATE- FUNDED HOUSING PROGRAMS

Permanent supportive housing, Rapid Re-Housing, No Place Like Home, CESH, HEAP, CalWORKS HSP, CDSS programs, new state funding (CA Welfare and Institutions Code Section 8255)

ESG

Shelters, outreach, prevention, Rapid Re-Housing (25 CCR 8409)



Core Components of Housing First

Under California state law, the “core components” of Housing First include:

1

Tenant screening and selection practices that promote **accepting applicants** regardless of their **sobriety or use of substances, completion of treatment, or participation in services**

2

Applicants are **not rejected** based on **poor credit or financial history, poor or lack of rental history, criminal convictions** unrelated to tenancy, or behaviors that indicate a **lack of “housing readiness”**

3

Acceptance of referrals directly from shelters, street outreach, drop-in centers, and other parts of **crisis response systems frequented by vulnerable people** experiencing homelessness



Core Components of Housing First

Under California state law, the “core components” of Housing First include:

- 4 Supportive services that **emphasize engagement and problem solving** over therapeutic goals and service plans that are **highly tenant-driven** without predetermined goals
- 5 **Participation in services is not a condition** of permanent housing tenancy
- 6 Tenants have a **lease** and **all the rights and responsibilities** of tenancy, as outlined in California’s Civil, Health and Safety, and Government codes
- 7 The **use of alcohol or drugs** in and of itself, without other lease violations, is **not a reason for eviction**



Core Components of Housing First

Under California state law, the “core components” of Housing First include:

8

In communities with **coordinated assessment and entry systems**, incentives for funding promote tenant selection plans for supportive housing that **prioritize eligible tenants based on criteria other than “first-come-first-serve,”** including, but not limited to, the **duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services** and prioritization may include triage tools, developed through local data, to identify high-cost, high-need homeless residents

9

Case managers and service coordinators who are **trained in and actively employ evidence-based practices for client engagement**, including, but not limited to, motivational interviewing and client-centered counseling



Core Components of Housing First

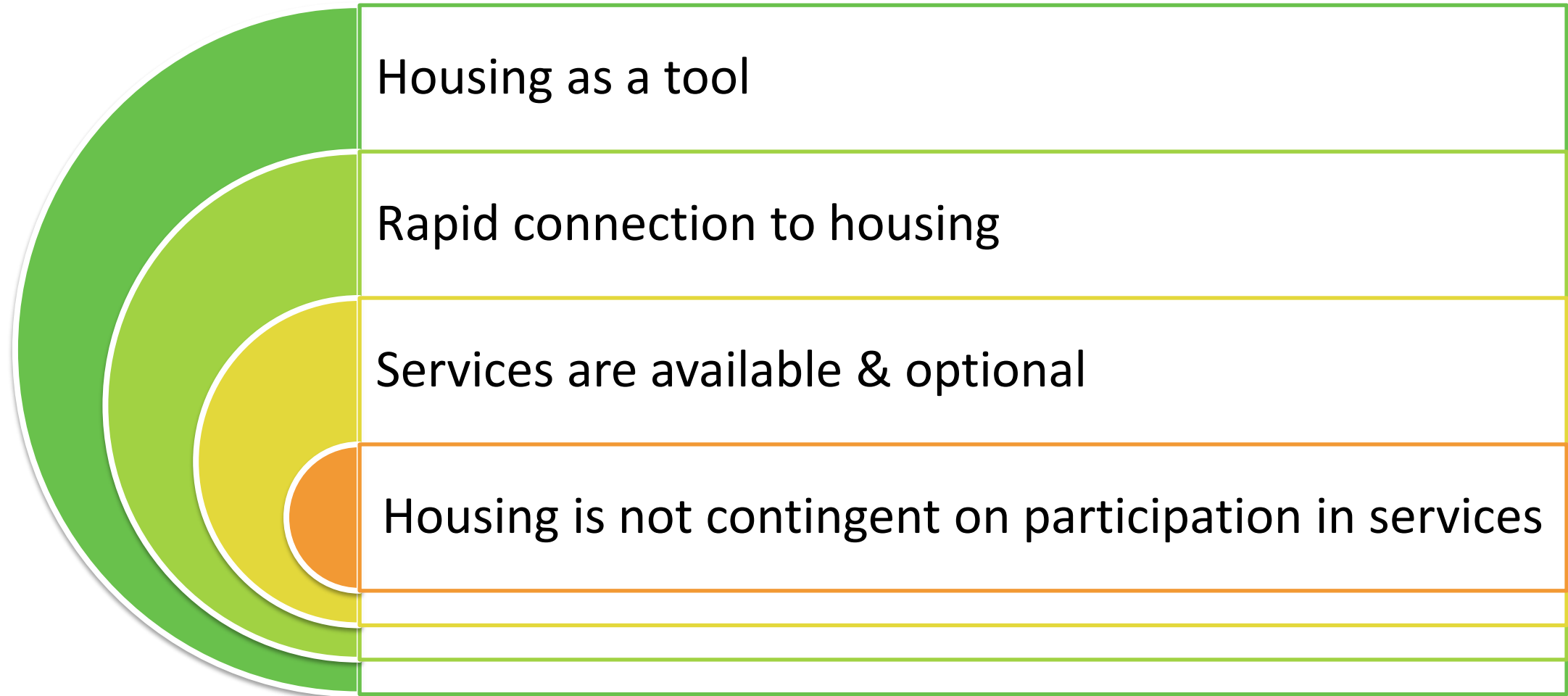
Under California state law, the “core components” of Housing First include:

10

Services are informed by a **harm-reduction philosophy** that recognizes drug and alcohol use and addiction as a part of tenants’ lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses

11

The project and specific apartment may include **special physical features** that accommodate disabilities, reduce harm, and promote health and community and independence among tenants



Housing First

Motivational
Interviewing

Harm
Reduction

Trauma
Informed
Care

Let's pause & reflect.

Think about a time when you wanted to change something in your life.

- What was it?
- How did you know?
- Did someone tell you to change?
- What helped you change?
- What kind of support did you need?



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What is Motivational Interviewing?

“Motivational Interviewing is a way of being with a client”
(Miller and Rollnick, 1991).

Goal:

Guide the person towards solving their own challenges and ambivalence (not to offer them a solution)

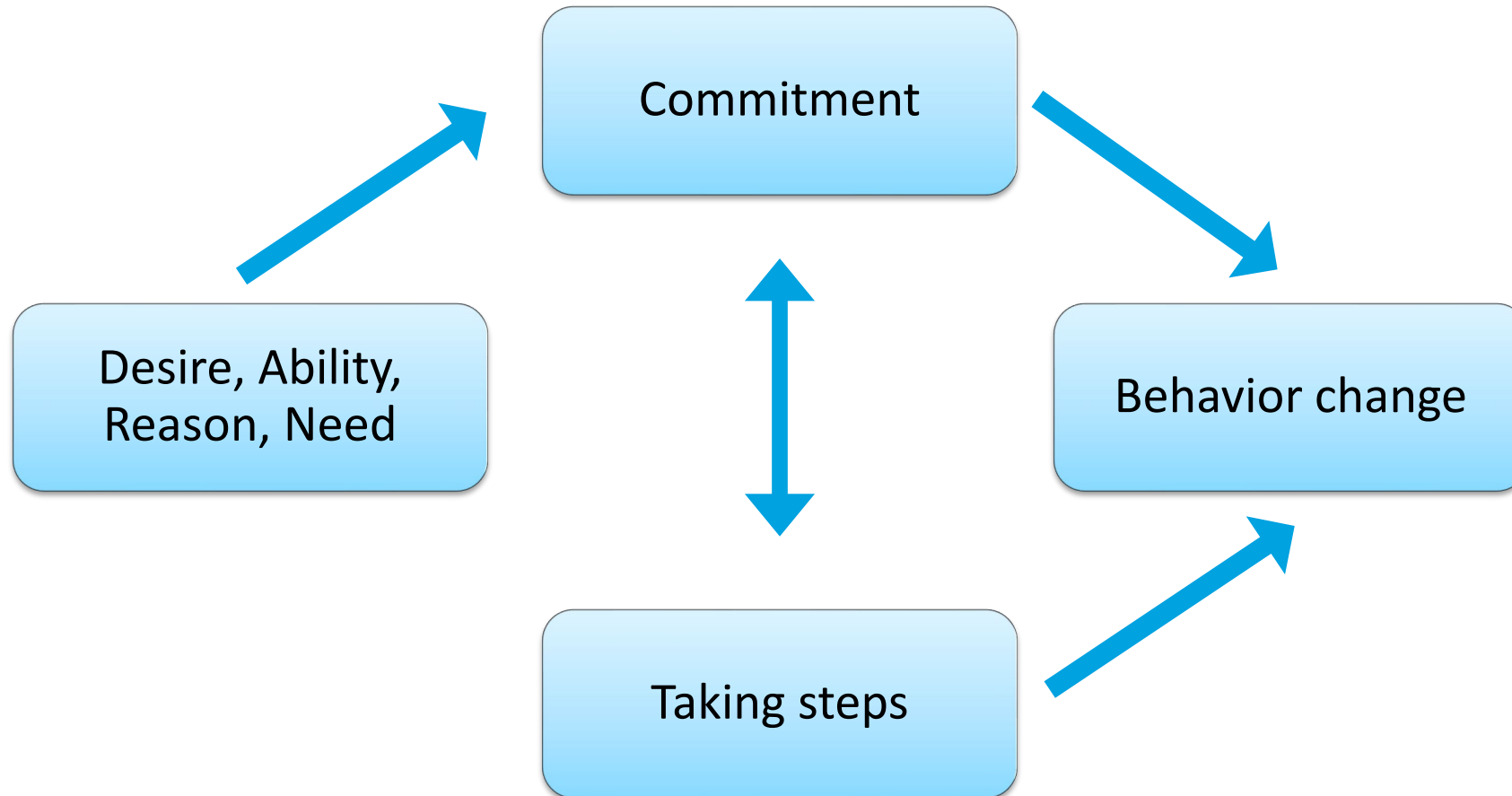
Practitioner’s job:

Elicit and reinforce patient motivation for change



Motivational Interviewing

Change Talk to Behavior Change





Motivational Interviewing

Motivational interviewing is...	Not...
<p>Collaboration</p> <ul style="list-style-type: none">• Developing a partnership in which the client's expertise, perspectives, and input is central to the consultation• Fostering and encouraging power sharing in the interaction	<p>Confrontation</p> <ul style="list-style-type: none">• Provider imposes awareness of client's reality• Provider tries to take control of the interaction
<p>Evocation</p> <ul style="list-style-type: none">• There sources and motivation for change reside within the client• Motivation is enhanced by eliciting and drawing on the client's own perceptions, experiences, goals	<p>Education</p> <ul style="list-style-type: none">• Provider assumes that client lacks knowledge
<p>Autonomy</p> <ul style="list-style-type: none">• Respecting the client's right to make informed choices facilitates change• Emphasize patient control and choice	<p>Authority</p> <ul style="list-style-type: none">• Provider tells client what they should do

Let's pause & reflect.

Think about a time when you wanted to stop doing something that was unhealthy.

- What was it?
- How did other people feel about this behavior?
- Did someone tell you to just stop?
- What helped you change?
- What kind of support did you need?

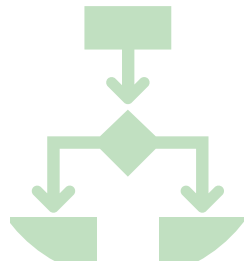


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What is Harm Reduction?

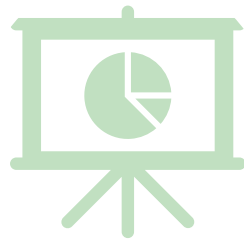


Action through policy and programming to reduce the harmful effects of behaviors



Non-judgmental approaches, strategies to enhance informed decision-making

- Knowledge, skills, resources, supports



Some portion of the population will always engage in high-risk behaviors

- Social, economic, mental health, personal reasons

Who can implement Harm Reduction?





Key Characteristics of Harm Reduction

Remove Barriers

Non-Coercive Engagement

Client-Driven Services

Focus on Immediate Needs

Information and Education

Building Relationships

Personal Responsibility

Community Partnerships



Trauma Informed Care

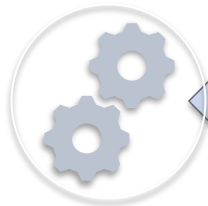
Traumatic Stress



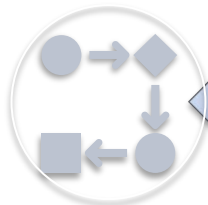
Homelessness and trauma are interrelated



Trauma overwhelms one's ability to cope



Persistent trauma impacts physical, emotional, relational, and cognitive functions



Behaviors are adaptations to past threats



Trauma Informed Care

Importance of Being Trauma-Informed

Create responsive services/programs

Avoid re-traumatizing clients

Help clients on their path to recovery

“Understanding, anticipating, and responding to the issues, expectations, and special needs [that each trauma-survivor may have]. At minimum, trauma-informed services should endeavor to do no harm...”



Trauma Informed Care

Trauma-Informed Services vs. Traditional Approaches

Trauma-Informed	Traditional
Problems/Symptoms are inter-related responses to or coping mechanisms to deal with trauma	Problems/Symptoms are discrete and separate
Shares power/Decreases Hierarchy	Hierarchical
Homeless families are active experts and partners with service providers	People providing shelter and services are the experts
Primary goals are defined by homeless families and focus on recovery, self-efficacy, and healing	Primary goals are defined by service providers and focus on symptom reduction
Proactive – preventing further crisis and avoiding re-traumatization	Reactive – services and symptoms are crisis driven and focused on minimizing liability
Understands providing choice, autonomy, and control is central to healing	Sees clients as broken, vulnerable, and needing protection from themselves



Addressing Resistance



■ What is NIMBY

N – Not

I – In

M – My

B – Back

Y – Yard





Stigma & How to Address it

Individuals

- Clothing bank
- Showers
- P.O. Boxes

Programs

- Site visits from local leaders
- Open house with local law enforcement & community members

Community

- Shelters throughout the community
- Safe Parking programs
- Public forums to address concerns



Stigma & How to Address it

Example: Tiny Home Developments

- **Casitas de Esperanza in San José**
 - Prior to construction, County staff went to community associations located near the project site to introduce the program. Taking the time to hear community concerns and respond to questions led to community associations being strong partners and advocates
 - A Community Advisory Committee comprised of neighborhood leaders meets monthly to address concerns, offer creative input, and provide community updates
- **LiveMoves in Mountain View**
 - Worked closely with the City of Mountain View and extended community outreach to a 1,000 ft. radius and conducted two community-wide meetings—one during the daytime and one during the evening
 - The agency knocked on neighbors' doors to put a face to LifeMoves
 - The contractor made sure the neighbors were aware of big construction activities so there were no surprises
 - A Supports Committee of outside volunteers helped stage an open house and wrote notes for the incoming residents

Programs that Work:

- Street Outreach
 - [Life Move's Homeless Outreach Teams](#) in San Mateo County
- Low-barrier, housing focused shelter
 - [Homeward Bound's Family Center](#) in Marin County
- Various homeless programs & services
 - [Bay Area Bright Spots](#) in and around San Francisco
 - RRH and PSH for [vets in Riverside County](#)



Thank you for listening.