Housing First
Permanent Supportive Housing

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2017 Update

Housing First

Evidence Based Practice

- Housing First – National Registry of Evidence Based Programs & Practices (NREPP)
- Presentation on Research, Principles, Model, Staffing, Resources
- National Supportive Housing Domains

Objectives

- Learn about Housing First
- National Movement
- Learn the values
- Understand Critical Partnerships
- Florida Challenges
- Useful Websites – Follow up available @ USF-FMHI
- Question & Answers

Housing First: Pathways Model

- Seeks to transform individual lives by ending homelessness and supporting recovery for those with psychiatric disabilities and co-occurring addiction disorders
- Housing is a basic right
- Driven by consumer choice and community integration

Housing First: Pathways

- Providing immediate access to permanent independent apartments, without preconditions for psychiatric treatment or sobriety (abstinence encouraged)
- Based on an Assertive Community Treatment Staffing Model
- Integration with Criminal Justice and Healthcare Integration Models

Evidence Based Research

- SAMHSA's National Registry of Evidenced-based Programs & Practices (NREPP)
- www.pathwaystohousing.org Publications
- Housing Retention at 85%
- Reduction in service utilization, ER's Jails
- Improved Mental Health
- Reduction in Alcohol & Drug Use
- Cost Effectiveness

Solution(s) To Homelessness

- The primary solution to Ending Homelessness is Housing!
- Poverty is a root cause with contributing factors; housing affordability, employment, health, mental health, substance abuse, domestic violence, etc.
- Community Planning & Implementation
- Research and Targeted Best Practices

National Vision

- U.S. Interagency Council on Homelessness
- "Opening Doors" – Federal Strategic Plan to Prevent and End Homelessness
- 10 Year Plan to Veterans Homelessness
- SAMHSA – Evidence-Based Practices KIT (Knowledge Informing Transformation) on Permanent Supportive Housing
- (International) Housing First Movement

National Movement

- HUD has moved towards models that result in Permanent Housing and has conducted studies on Housing First
- Hundreds of Communities across the U.S. have adopted Housing First as a primary strategy in their "10 Year Plans to End Chronic Homelessness"
- Programs have been developed for children and families

Florida Legislature

- Florida Legislation – SB 1054 (2009)
- "The Legislature further finds that Housing First is an alternative approach to the current system of emergency shelter or transitional housing…to encourage (Fl.) homeless continuums to adopt the Housing First approach to ending homelessness for individuals and families"

Local Florida Communities

- Local Coalitions have "promoted" Housing First in their HUD Continuum of Care applications (New Hearth Act), yet may not clearly understand the core recovery principles, have access to immediate housing, staffing patterns and funding.
- Several localities have been successful
- Others have "pushed back" the concept

What is Housing First?
Sam Tsemberis Ph.D

- A person-centered approach designed to end homelessness and support recovery for people with mental illnesses
- Housing First provides immediate access to permanent housing and support services and consumers are not required to participate in psychiatric treatment or attain a period of sobriety in order to obtain housing.

In the Context of Recovery

- Self-Direction (Housing Choices)
- Individualized & Person-Driven
- Empowerment (Affordability)
- Holistic
- Non-Linear
- Strengths-based (ability to Rent/Own)
- Peer Support (Dual Recovery/AA, etc.)
- Respect
- Responsibility (Leases)
- Hope – Permanent Housing & Recovery

Why Was Housing First Developed? 1992

- To help people with mental illnesses who remained homeless over time
- "Are people homeless because they have a mental illness or for the same reasons as everyone else"?
- Million Dollar Murray – *Malcolm Gladwell*
- Pathways to Housing, NYC
- www.pathwaystohousing.org

Target Populations

- People who are “chronically homeless”
- Co-occurring mental health & substance use disorders
- Living on the streets, shelters, mangroves, woods, bridges, discharged from institutions, jails, emergency rooms, etc.
- Evidence = “Culhane Study” or NY/NY

Key Change Elements

- Change from a Linear Housing Model
- Change in the view of those served
- Change in the goals of the system
- Change in power relationships
- Change in focus and locus of care
- Change in treatment culture
- Traditional Models to Contemporary

Housing Models

Traditional Models

- Treatment First
- Housing "Ready" (linear)
- Sober for a period of time 30 days to six months
- Transitional – 6 months to 24 months
- Staff on-site; "supervised"
- Congregate living

Housing First

- Housing First
- Move-in with supports
- No sobriety required, abstinence encouraged
- Permanent supportive housing
- Staff off-site, mobile, 24/7 access or on call
- Independent living

Housing First: Main Components

- Housing – Scattered site independent apartments rented from community landlords (property management)
- Clinical Services – Treatment and support services provided by off-site Assertive Community Treatment Teams or Intensive Case Management "that makes house calls"

Values & Principles

- In the context of a positive relationship
- When consumers set their own goals
- Receive support and are taught skills
- Have positive expectations for hope for the future
- Obtain Permanent Housing
- When people believe in their own recovery

Essential Ingredients

- Consumer Choice Philosophy
- Separation of Housing and Services
- Recovery-oriented Services
- Community Integration
- Fidelity Scales – Structure, Philosophy, Practices: “A Matter of Degree” and Quality Improvement

Consumer Choice Philosophy

- Philosophy Guides Practice
- Housing First provides consumers an apartment of their own as a matter of right or need, not as a reward for treatment compliance
- Consumer choice of housing, type, sequence (non-linear) and intensity of services
- Harm reduction vs. strict sobriety model

Limits to Consumer Choice

- Practical and clinical
- Availability to affordable housing
- Local housing stock
- Weekly apartment visit
- Person may be a danger to themselves or others
- Legal Issues – Illegal activity, violence, etc.

Separation Housing & Services

- Housing & services are separate domains
- Different expectations and requirements for defining success
- Clinical services are a treatment relationship
- Housing is about responsibilities of tenancy (good neighbor, tenant, etc.)

Clinical - Housing

- Clinical “crisis” does not mean eviction or loss of housing
- Eviction from housing does not mean discharge from clinical services, continuing care, outreach, in-reach, self-help, or other recovery-oriented care
- Abstinence is not “required”, but is encouraged
- Housing retention is a major goal

Landlords as Partners

- Landlord, tenant and program have a common goal = All want safe, decent and well managed (quality) housing
- Agency/consumer ensures the rent is paid on time; damaged paid
- Team is responsive to landlords needs
- No rent loss for vacancies
- Public Housing Authorities are critical

Advantages of Using Existing Rental Market

- Quick start up
- Multiple sites - scattered
- Ability to match consumers to neighborhoods
- Flexibility in relocation
- Normative settings (integrated)
- Social inclusion

Recovery-Oriented

- Recovery from mental illnesses and substance use/abuse is possible
- People can live full and independent lives in and “of the community”
- Role recovery – friend, family member, peer, employee, spouse, parent, sibling, church member, neighbor.

Implications for Practice

- Instilling HOPE is crucial
- Relationship is foundational – eliminate “power’ differential and role distinction between provider and consumer
- Key roles of peer support “on the team”
- Meaningful social roles – beyond the “mental health system” = Citizenship

Holistic Wellness

- Wellness Lifestyle
- Positive daily structure
- Meaningful activity
- Diet, exercise, access to primary care
- Healing trauma (men and women)
- Spirituality
- Connection to others

Service Delivery

- Assertive Field-based Interdisciplinary Team Approach
- Intensive Case Management
- “Offer” to a range of clinical services
- Co-occurring SAMH
- Vocational and Employment opportunities
- Peer Supports
- Healthcare benefits (Medicaid) – Medication
- Housing Retention

Challenges in Florida

Housing

- Local Housing stock
- Rent subsidies
- Access to Shelter Plus Care: partner with Public Housing Authorities
- Start up funds
- Benevolent Landlords
- Affordable choices
- Permanent Focus

Services

- ACT Teams or intensive case management for those most in need of support
- Shift from Linear models to Housing First
- Harm Reduction & Co-occurring capability
- Medicaid Managed Care
- Provider Desire & Support

Program Development

- Leadership, model development
- Single site option = challenges
- Choose the right target population
- Hire staff, including peers who believe in recovery, principles of housing first & skills/abilities to work in the community
- Available housing (rent subsidies – Shelter Plus Care, VA HUD-VASH, Landlords, etc.)

Florida Examples with Data

- Homeless Coalitions: HMIS
- Citrus Healthcare – Miami-Dade Trust
- Gracepoint – Tampa (UT Study)
- Veterans Bay Pines VA
- Jerome Golden Center for Behavioral Health, Inc. West Palm – Building Housing First from the ground up
- Coastal Behavioral Healthcare – Charlotte County – SAMHSA-CSAT Grant & USF (ended)

SAMHSA Supportive Housing Core Fidelity Dimensions

- Evidence of impact on resident stability
- Evidence of greater impact over alternatives
- Cost Benefits
- Housing Choice
- Separation of Housing and services
- Decent, safe affordable housing
- Community Integration and rights of tenancy
- Flexible, voluntary and recovery-focused services
- Access to Privacy

Implementing Evidenced-Based Practices

- Easier said than done!
- Education alone is not enough
- Research literature, knowledge & translation into practice requires change
- Consensus by administrators, clinicians, consumers and the community
- Use of Tool Kits: complex, yet develop programs and improve *recovery* outcomes

Targeted Websites

- www.hazeldon.org/bookstore
- www.pathwaystohousing.org
- http://www.nrepp.samhsa.gov
- http://www.homeless.samhsa.gov
- http://pathprogram.samhsa.gov
- http://www.endhomelessness.org
- http://www1.va.gov/HOMELESS/NationalCenter.asp
- www.flshc.net

Video Clip & Films

- http://www.youtube.com TedTalks
- Search Sam Tsemberis
- Google Housing First
- www.hazelden.org Order No. 4753 DVD Housing First
- VA HUD-VASH Housing First – In production

American Journal of Psychiatric Rehabilitation

- Sam Tsemberis (2013) Housing First: Implementation, Dissemination and Program Fidelity (Ana Stefancic)
- Volume 16 (4) – Special Report
- Fidelity Scale
- Examining Provider Perspectives
- Canada – Large Scale Evaluation – 5 Cities
- Full Service Partnerships - California

Housing First in Europe

- Dublin, Ireland
- Finland – Multiple Sites
- Glasgow – Scotland
- Amsterdam, Netherlands
- France: Paris, Lille, Marseille, Toulouse
- Lisbon, Portugal
- Sociopolitical Context in each pilot

TIP 55

- Treatment Improvement Protocol 55
- Behavioral Health Services for People Who are Homeless
- www.samhsa.gov
- HHS Publication No. (SMA) 13-4734
- First Printed in 2013
- Housing First – Textbook (Oxford Press 2016); Padgett, Henwood & Tsemberis (Available on Amazon)

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