Programming for Low Demand Housing Programs

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Overview

- Core Values of Programming in Low Demand Programs
- A Programming Assumption to Avoid
- Are Groups and Classes Compulsory?
- Focus on Getting and Staying Housed Instead of Treatment
- Working with Vets in Earliest Stages of Recovery & Stages of Change
- Helping Veterans to Establish Personal and Workable Goals
- Assisting Veterans Who Have Lost Their Housing Multiple Times Due to Money Management Issues
- Programming in Low Demand Housing Programs
- Lessons from Ward Family Found. & 2021 Low Demand GPD Fidelity
Core Values of Programming in Low Demand Housing Programs

• Encourage
• Engage
• Motivate
• Reward Participation
• But Do Not Force or Apply Negative Sanctions
A Programming Assumption to Avoid

• Low Demand does not mean that clients are not interested in participating in services, classes, groups, meetings, and/or other structured activities
• Be proactive in providing a variety of meaningful activities; ask residents what they would like
• Routinely post, update, and announce the schedule activities
• Be proactive in engaging residents in services, classes, groups, meetings, and/or other activities
Are Groups and Classes Compulsory?

- A core value of the Low Demand Model is to encourage but not demand

- Negative sanctions, especially dismissal from the program, **should not** be used to motivate residents to attend programming

- Don’t wait for residents to come to your group or class, reach out and engage them, make them feel welcome

- Help residents find groups and classes that are meaningful to them
Focus on Getting and Staying Housed Instead of Treatment

• Keep the program focused on Housing
• Assist Veterans with the challenges of accessing and getting what they need to move onto permanent housing
  – Housing application
  – Housing search
  – Finances
  – Resolving legal issues
  – Acquiring basic household items
  – Emotional and social support for the process
Working with Veterans in the Earliest Stages of Recovery and Stages of Change

- Listen to each resident’s goals
- Build trust
- Keep the steps small and the goals realistic
- Reinforce the small steps of housing and recovery goals
- Support residents through predictable setbacks, and help them stay focused on THEIR goals
Helping Veterans to Establish Personal and Workable Goals

- Residents in early recovery are often in a pre-contemplative stage of change and often do not have many goals.
- Be patient while residents determine if this program will work for them.
- Listen to the resident’s goals for achieving housing stability, as housing may be the only reason they joined your program.
- Negotiate reasonable goals that can be achieved.
- Seize opportunities to provide reinforcement and support for each small step of goal achievement.
- Find meaningful rewards for goal attainment.
Assisting Veterans Who Have Lost Their Housing Multiple Times Due to Money Management Issues

- Finances are a top reason that residents lose housing
- Offer budgeting and money management classes/assistance
- Harm reduction approaches to financial management
- Help residents accept fiduciary services

Programming in Low Demand Housing Programs

Typically a mix of services, classes, groups, meetings, outings, movie nights, & other structured activities, such as:

- Community Meetings
- Housing Options and Process
- Financial Management, Budgeting, and Repairing Credit
- Securing Income through Employment and/or Benefits
- Managing the Landlord/Tenant Relationship
- Securing Furniture and Household Items
- Legal Assistance and Resolving Warrants, Child Support Arrears, and Past Debts
Programming Continued

• Social Events and Outings
• Building a Satisfying Social Life and Leisure Time
• Nutrition and Cooking for One
• Daily Living Skills
• Anger Management
• Managing Addiction and Mental Health Issues
• Relapse Management
• Overdose Kits and Preventing Death from Overdoses
• Addressing Spiritual Needs
Pandemic Programming Issues

Routinely:

• Stay abreast of the latest Local Infection Rates and Trends in your community and program
• Listen to residents’ concerns and ideas about staying safe and avoiding COVID
• Revisit program rules as needed to ensure safety
• Review safety practices and encourage vaccination
• Have discussions about COVID misinformation
• Provide support and understanding about the isolation that many are feeling during this pandemic
  – Try to reinforce a sense of community
Lessons from Ward Family Foundation (WFF) National Survey of Safe Havens
Safe Haven Programs
Analysis of Strategies and Operating Practices
July, 2005
Ward Family Foundation: National Survey of 79 Low Demand Safe Haven Programs

http://www.wardfamilyfoundation.org/wff-safehaven-programs.pdf
<table>
<thead>
<tr>
<th>Purpose of Report</th>
<th>Conscious decision not to look in any detail at the clinical symptoms of residents, and not to draw conclusions about impact that Safe Haven programs have on their recovery</th>
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<tbody>
<tr>
<td></td>
<td>Focused instead on whether Safe Havens are effective in moving residents into permanent housing, and identify best practices</td>
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<tr>
<td>Sample</td>
<td>Identified 118 HUD-funded Safe Haven programs</td>
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<td>79 returned a completed survey via mail</td>
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Conclusion: Permanent Housing

Low Demand Safe Havens effectively engage and retain residents

More than half successfully transitioned into some type of permanent housing program:

- Approximately 30% exited to affordable perm. housing w/subsidy & supports (perm. supported housing)
- 13% to affordable permanent housing w/subsidy but without supports
- 7% to affordable permanent housing w/neither subsidy nor supports
**Best Practices Benchmark (BPB)**

Group of 15 programs with an 85.2% average exit to perm. housing, compared to 64 with a 41.6% rate

**BPB Basic Program Description:** More likely to be smaller programs, at full capacity, and offering more private accommodations

**BPB Admission Criteria:** more likely require diagnosis of SPMI + SUD for admission

**BPB Admission Procedures:** more likely to offer preadmission visits to assess if a good fit

**BPB Daily Life:** more likely to offer optional behavioral health activities
<table>
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<tr>
<th>BPB Daily Life: more likely to bring in people with different areas of expertise to discuss topics of interest (health, benefits, family)</th>
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<tbody>
<tr>
<td>BPB Daily Life: more likely to offer activities of general interest (sports night, cooking classes, monthly birthday dinner)</td>
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<td>BPB Daily Life: more likely to offer regular opportunities for program governance participation (weekly meetings, feedback session)</td>
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<td>BPB Daily Life: more likely to offer senior residents opportunities for mentoring and positive support</td>
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<tr>
<td>BPB Rules and Expectations</td>
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<tr>
<td>----------------------------</td>
</tr>
<tr>
<td>BPB Staffing</td>
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<td>BPB Services</td>
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<td>BPB Services</td>
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What sorts of activities are offered by your fellow Low Demand GPD programs?

Findings regarding Programming from the 2021 Low Demand GPD Fidelity Review
Scope of the 2021 Survey / Framing

• 68 Low Demand GPD Programs completed a fidelity survey, representing facilities with a total of 1,382 Low Demand GPD Beds

• The 68 programs included:
  – 55 **ESTABLISHED** programs operating Low Demand for $\geq 6$ months
  – 13 **NEW** programs operating as Low Demand less than 6 months

• The 2021 survey asked respondents to indicate how their **Low Demand programs/beds** currently operated.
  – Open-ended items at the end of 2021 survey asked about program changes resulting from COVID-19.
  – 2020 survey asked respondents to indicate how the Low Demand programs/beds were operating **before the COVID-19 pandemic**.
Veteran Services, Part 1 of 3: Established Programs

Information based on completed surveys from 55 Established programs.
Veteran Services, Part 1 of 3: New Programs

Information based on completed surveys from 13 New programs.
Veteran Services, Part 2 of 3: Established Programs

% Responding Yes

- Peer Support: 13%
- Vocational: 13%
- Daily Living Skills: 49%
- Advocacy for Entitlements: 33%
- Transport: 66%
- Housing Transition Svcs: 55%

Information based on completed surveys from 55 Established programs.
Veteran Services, Part 2 of 3: New Programs

Information based on completed surveys from **13 New programs**.
Veteran Services, Part 3 of 3: Established Programs

Information based on completed surveys from 55 Established programs.
Veteran Services, Part 3 of 3: New Programs

<table>
<thead>
<tr>
<th>Service</th>
<th>Required (%)</th>
<th>On-Site (%)</th>
<th>Off-Site (%)</th>
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<tbody>
<tr>
<td>VA MHICM</td>
<td>39%</td>
<td>23%</td>
<td>77%</td>
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<tr>
<td>Legal</td>
<td>23%</td>
<td>8%</td>
<td>23%</td>
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<tr>
<td>Housing Specialist</td>
<td>46%</td>
<td>61%</td>
<td>85%</td>
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<tr>
<td>SSVF</td>
<td>46%</td>
<td>15%</td>
<td>69%</td>
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Information based on completed surveys from **13 New programs**.
Additional Service Offerings

Information based on completed surveys from 55 Established and 13 New programs.
Current Service Offerings, Part 1 of 2: Established Programs

Information based on completed surveys from 55 Established programs.
Current Service Offerings, Part 1 of 2: New Programs

Information based on completed surveys from 12 New programs.
Current Service Offerings, Part 2 of 2: Established Programs

Information based on completed surveys from 55 Established programs.
Current Service Offerings, Part 2 of 2: New Programs

Information based on completed surveys from 12 New programs.
Chores

Information based on completed surveys from 54 Established and 13 New programs.
Questions? / Discussion