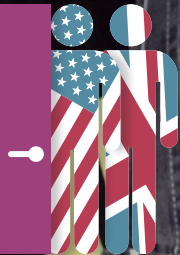


Transatlantic Practice Exchange 2017

Reports from 10 frontline
professionals on an
international exchange of
knowledge and practice



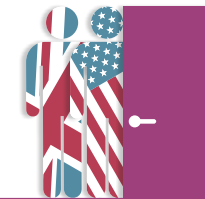


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2017

Transatlantic Practice Exchange



About the Exchange

The Transatlantic Practice Exchange is funded by the Oak Foundation and delivered by Homeless Link in England and the National Alliance to End Homelessness in the US.

Exchanges took place between April and June 2017, with participants spending up to two weeks on placement with their hosts and other local organisations.

Homeless Link and the National Alliance to End Homelessness would like to thank all the hosts and participants for their commitment and enthusiasm throughout the project.

Recruitment for the 2018 Exchange will take place in autumn of 2017. Please check www.homeless.org.uk and www.endhomelessness.org for news, or look out for tweets from the teams.

Participant blogs

Many participants blogged and took to social media to share their experiences of the Exchange using the hashtag [#homelesslearning](#).

Catch up on blogs from the Exchange:

www.ruthfranciszka.blogspot.co.uk

www.louisasteele.blogspot.co.uk

www.samstransatlanticexchange.blogspot.co.uk

www.iksukcasenotes.wordpress.com

Further information

UK

For further information on UK participants and hosts please contact Tasmin Maitland, Homeless Link's Head of Innovation and Good Practice.

tasmin.maitland@homelesslink.org.uk

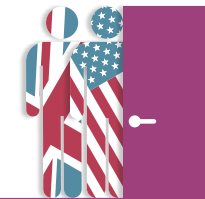
+44 20 7840 4451

US

For further information on US participants and hosts, please contact Jared Thompson, Program and Policy Associate at the National Alliance to End Homelessness

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From the UK

It is with great pleasure that we present the reports from our penultimate Transatlantic Practice Exchange.

Funded by the Oak Foundation, the Exchange is designed to provide frontline staff with the opportunity to work for two weeks in another context. Five people go to work in services in the US, and five people from the US come to work here. By immersing themselves in the work of an organisation for two weeks, the participants come to understand the context and organisational culture in which their counterpart service is delivered. They go with a specific topic and set of questions to answer and, most of all, they go with an open mind.

In last year's report I noted that, at a time when everything seems to be changing, with resources getting tighter and needs higher, it would be easy to lose sight of the opportunities to work differently. In the background of this year's reports we have the prospect of even more far-reaching change. In the US there is a new administration, while for the UK Brexit negotiations are underway.

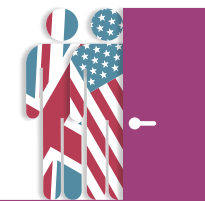
Against the backdrop of these political changes, our participants focused on an issue that has persisted (albeit at different levels) through successive administrations and evolving strategic agendas: how to end homelessness. They did this by looking outside traditional boundaries and thought processes – by looking beyond what we take as given in our everyday work. In doing this, each participant has brought home learning that will help them re-think their services and practice and, over time, deliver in a different way.

Our friends from the US arrived in the UK to look at work with young homeless people through support for social networks and specialist LGBT services; how the voluntary sector engages with the private rented sector; and how to achieve positive outcomes for people with complex needs. Participants from the UK looked at Housing First for women, Critical Time Intervention and strengths-based approaches. There was a focus from both sides of the pond on employment as a route out of poverty, and we have reports on this topic from both American and British participants. Reading them in parallel gives a strong sense of how experiencing transatlantic similarities and differences can stimulate new ways of working.

These reports are not about bringing home lessons to replicate, but rather taking a fresh view of how to overcome barriers, how to think differently and how to focus on solutions. Their narratives certainly inspire me. I hope they will inspire you too.

Mark McPherson
Director of Strategy, Partnership and Innovation
[Homeless Link](#)





From the US

Over the past decade, homelessness service providers in the United States have invested in innovative solutions to prevent and end homelessness and have committed to proven, evidence-based practices. Despite unique challenges and roadblocks faced in every community, these efforts have led to an overall decline in homelessness across the nation.

We still have a long way to go to end homelessness in the US. To finish the job, we need to renew our commitment to find new and advanced housing solutions, and to improve on the services provided to people experiencing homelessness. This is why we believe so ardently in the value of the Transatlantic Practice Exchange.

This year's class of US participants in the Exchange looked to the UK for new insights on how social enterprises are filling the gaps in social services systems for some of the highest need populations; how effective landlord engagement can expand access to the private rented sector; how building social connections can improve outcomes for young people experiencing homelessness; and much more that can be used to improve work here in the US.

On our side, the US shared lessons with our UK colleagues on what we have learned about how Critical Time Intervention can improve services and transitions for a diverse set of populations; how Housing First approaches can be effectively used to serve people, such as chronically homeless women, who have specific needs ; and how client-centered and systems-based approaches have driven change.

The Exchange plays an invaluable role for participants, hosts, and their communities in the effort to end homelessness in the US. We would like to extend our gratitude to the Oak Foundation and our partners at Homeless Link for making it possible for the Exchange to inform broader improvement in homelessness systems and practices. Thank you also to the generous hosts who opened their doors so this great work could happen. Finally, we extend a special congratulations to the US and UK participants whose passion for their work and dedication to improving efforts across the board are reflected in this report.

Nan Roman

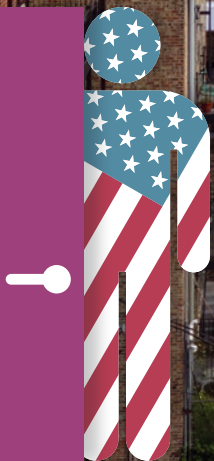
President and CEO

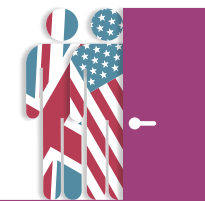
National Alliance to End Homelessness

Sam Forsdike

The intersection of homelessness and unemployment

Heartland Alliance
Chicago





Sam Forsdike: Heartland Alliance, Chicago

The intersection of homelessness and unemployment

The approach to employment services in the UK's homelessness sector has traditionally been a consideration once housing has been secured, the individual feels stable and is looking to be able to take the next step to support themselves. However, in recent years this standard – and logical – pathway has become somewhat less straightforward. Legislative changes to the welfare system and employment practice coupled with the housing shortage, rising homelessness and systematic issues for migrants has resulted in a cultural shift that now requires many people experiencing homelessness to obtain paid employment in order to be able to access housing.

I have worked at C4WS Homeless Project, which runs a winter night shelter in Camden, for the last five years and this emergence of a new 'Employment First' population has been one of the most fundamental changes to impact us. It began with restrictions to EEA migrants' entitlements to benefits and has been compounded by the prevalence of zero-hour contracts, more punitive sanctions of benefits, rising deposits needed for the private rented sector and more restrictive landlord attitudes. We now see 50% of guests referred to the shelter requiring support around employment.

Consequently, we have created a Jobs Club programme that offers a pathway to stability for those experiencing the dual needs of homelessness and unemployment. Last year, 71% of those accessing the Jobs Club who were eligible for work successfully gained paid employment.

The Jobs Club has become such an integral component of our housing work that I was keen to apply for the

Transatlantic Exchange to learn more about the intersection between homelessness and unemployment. In particular I wanted to explore:

- What are the areas of need for those facing dual struggles with homelessness and unemployment?
- What support can be provided to counter these practical and emotional barriers for someone to successfully access employment?
- How to broker links with employers to offer supportive employment opportunities to those with experience of homelessness.
- How to take a more strategic approach to synthesising housing and employment services to create and deliver effective resources for the Employment First population.

Heartland Alliance

The Exchange matched me with Heartland Alliance in Chicago, an anti-poverty organisation serving those who are homeless, living in poverty and seeking safety. As the second largest non-profit in Chicago – and with offices around the world – they directly help 400,000 people each year through a range of innovative services.

While touching on some of the wider scope of their work, I was primarily based with Heartland Human Care Services (HHCS) who provide support to families, veterans, refugees, victims of trafficking and single homeless adults with housing, healthcare, employment, education and asset management.

US Context

Focusing specifically on homeless jobseekers, there are some marked differences between the UK and America that directed my research.

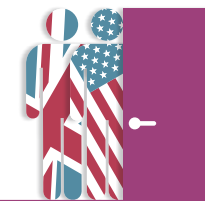
Public funds

In America, there is a very limited supply of housing vouchers prioritised for the most chronically in need, which means the majority of those who are homeless have to secure housing through their own efforts. This contrasts with the UK system in which access to Housing Benefit through public funds is available on a means-tested basis designed to support those without resources.

At the risk of sounding ungrateful for working in a country with a theoretical universal safety net, it is important to understand that, in practice, this is not always a golden ticket out of homelessness. Legislative restrictions and sanctions mean that, for an increasing number of people in the UK, access to such benefits – and therefore housing – is no longer an option. For these people, the systems in the UK and America are much more similar in the expectation to find their own means of supporting themselves, chiefly through employment.

Youth homelessness

In the UK there is a statutory obligation to support a minor experiencing homelessness. In theory, this means we do not have youth or family rough-sleeping and employment support is not a necessary requirement for this demographic. In America there is no differentiation based on age, and youth and family homelessness is a standard part of the landscape.



Sam Forsdike: Heartland Alliance, Chicago

The intersection of homelessness and unemployment

This is so commonplace that many schools employ a Homeless Liaison Officer to work solely with those students who are homeless or at risk of becoming homeless.

Refugees

In America, resettlement programmes bring refugees to the country and on arrival they are linked in with services including housing. The statutory limit on this support is 90 days. During this time refugees are expected to have sufficiently adapted to their new surroundings to obtain the financial means to support themselves. Different organisations in Chicago told me this is an unrealistic expectation and that voluntary organisations often top up support beyond the time limit to prevent refugees becoming homeless.

In the UK the majority of our refugees arrive as asylum seekers. They are eligible to make an application to access emergency government accommodation whilst their asylum case is being assessed. If granted refugee status they are permitted just 28 days before they have to exit this property and provide for themselves.

This considerably shorter timeframe for transition in the UK is offset by the potential of accessing public funds – and therefore housing. However, echoing sentiments in America, the reality of someone being able to successfully navigate the necessary systems within four weeks often results in them still becoming homeless.

Asylum seekers

While destitution and the dangers of the grey economy are shared risks for asylum seekers in both countries one notable

– and laudable – distinction in America is the opportunity for asylum seekers to be authorised to work on short term, renewable permits. As a general rule, UK asylum seekers are not allowed to work, meaning their capacity to access money is restricted to a small government allowance. This restriction can also impact on their integration and skills development, which are important factors in improving someone's capacity for self-sufficiency if and when they are granted refugee status.

Learning and findings

During the Exchange I was fortunate enough to be exposed to the range of Heartland's work, addressing the intersection of homelessness and unemployment, from frontline projects through to strategic planning and political lobbying.

Their direct employment services are spearheaded through HHCS' Pathways to Success programme, but employment support is also integrated into case-working delivered by staff supporting people in housing. Distinguishing between the different types of housing was important for understanding the relative needs for employment assistance:

- Short term Rapid Rehousing vouchers cover rent for a fixed period to help people get on their feet, but when these vouchers expire residents are required to support themselves.
- Supportive Housing provides lengthier financial support on the basis that it will take an individual longer to adjust to self-sufficiency.
- Permanent Supportive Housing vouchers cover housing costs for the most chronic and in-need, meaning employability is typically not relevant.

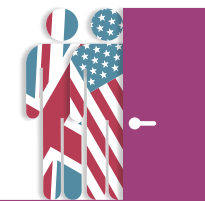
- The Refugee and Immigrant Community Service (RICS) programme and the Veteran Families Supportive Services work with specific demographics and have dedicated staff focused on employability assistance.

In looking for examples of best practice for the emergent Employment First population in the UK, the most common parallels could be drawn with those accessing Rapid Rehousing and the RICS programme. Whilst both of these demographics are not homeless, they share a need to quickly become job-ready, upskill and be capable of finding and maintaining a job in order to retain their housing. How Heartland approaches supporting these populations illuminated ideas for shared learning on practical, psychological and systematic levels.

Survival jobs

This was a new phrase I learned whilst in Chicago and perfectly encapsulates the dilemmas of an Employment First population. At a literal level, a job may have the positive effect of enabling an individual to 'survive'. But 'surviving' can also have negative psychological connotations. It is passive rather than pro-active and it is about enduring rather than enjoying. Desperation might lead to someone taking a job, but if this is the primary source of motivation it may impact on the long term sustenance of that job, and therefore the stability of someone's housing.

Speaking to staff at Heartland Alliance I found they frequently encounter people who also see employment purely from a survival perspective, stating they "just want a job, any job, now." The knee-jerk response is to help such jobseekers look for immediate vacancies with the least barriers – which by



Sam Forsdike: Heartland Alliance, Chicago

The intersection of homelessness and unemployment

definition tend to be low-skilled positions with little variety in their scope or sense of personal value. But Heartland's approach encourages jobseekers to think beyond the immediate necessity of securing work, understand what their longer term aims are and how decisions they are making now might impact this.

This doesn't necessarily mean that a 'survival job' is not the most appropriate option, but enabling someone to consider things like job satisfaction or the potential of career progression can make a difference. To deny the significance of such factors simply because of the pressing needs of someone's current circumstances is a 'dehumanising' process. A staff member might find it difficult to retain a job based purely on the perception of it as a source of income, so why would we not expect our clients to experience a similar struggle?

Helping a jobseeker find value in their work can change their focus from 'surviving' to feeling that they are exerting some control and influence on their life. This approach might result in a slower pathway into employment but, if it improves that jobseeker's chances of achieving longer term prosperity, it's a worthwhile intervention.

Job retention

Employment services can tend to be heavily loaded towards practical support, such as CV-writing, interview preparation, job-searching and filling in applications. This is of huge assistance in helping someone obtain employment, but can be fruitless if there is not the equivalent support for an individual to then retain the job they have worked so hard to get.

Heartland staff recognise the importance of a balanced approach in their employment services, which takes two distinct forms:

1. Incorporating psychological preparation to enable a jobseeker to cope with the pressures and demands of being in work

This occurs through a range of techniques:

- **Motivational Coaching** focuses a jobseeker on identifying their goals and using these goals as a stem from which everything else relates. It is a personalised technique that enables the jobseeker to understand how plans they make will help them achieve these goals, acknowledges the behaviours that will motivate them to succeed, and relates successes achieved back to these aims.
- **Trauma Informed Care** is used in housing and has equally useful implications for jobseekers. Identifying previous traumas someone may have experienced in their life can help them to anticipate associated issues they might experience in a working environment. The jobseeker and staff work together to develop resilience specific to the requirements of employment and build in advanced support tools and coping mechanisms.
- **Individual Placement Support (IPS)** is traditionally a model that has been used for supporting people with mental health issues into employment but Heartland Alliance is the first organisation in America to innovate this for refugees. Using the person-centred approach in which an individual directs their plans, staff broker relationships with employers to match these aims. This creates a mutually beneficial relationship for employer and employee that improves its chances of success.

2. Continued provision of support through employment

This can occur through case-working but is also embedded in the specific employment services at HHCS. Part of the IPS model for refugees requires Heartland staff to maintain relationships with employers and offer support to them with any issues they may encounter from candidates that they have put forward.

This is flexible in operation: for some employers it might see staff touching base to monitor a candidate's progress, while in other scenarios it sees staff discovering an issue and intervening with the employer on the candidate's behalf. One example shared with me was of a candidate struggling to keep to a new rota because of childcare demands. Cultural differences to workplace practice in their native country meant they didn't realise they could speak to their manager about this issue. The intervention of staff in facilitating this conversation resulted in a change of the rota and successful continuation of the job.

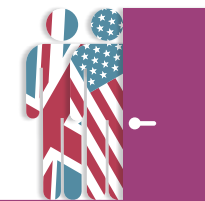
Asset management

I met a number of different organisations in Chicago who offer asset management and view it as a logical counterpart to employment services. By supporting jobseekers with learning how to look after their money it maximises their capacity for employment, and consequently more stable housing.

One of the most innovative aspects of such programmes is the use of match-funding to reward and encourage savings. 'Matching' what someone pays into their account can be a huge incentive to establishing a pattern of saving. The

Sam Forsdike: Heartland Alliance, Chicago

The intersection of homelessness and unemployment



practicalities of this can also be a vital financial accelerator for those needing to save money, for example, getting together a rent deposit that will enable them to leave a shelter and move into housing.

It was also interesting to speak to staff about the choice of language for this programme. They deliberately avoid phrases such as ‘money management’ and ‘financial literacy’, which can have punitive connotations. Similarly, rather than ‘wages’ or ‘money’, they reinforce the idea of understanding your income as an ‘asset’ – something that, with good management, will facilitate your future – and this can serve as a big motivational tool.

Training and transitional jobs

Too often in employment services there is a big division between training and work, with the former a requirement to lead to the latter. Whilst a jobseeker may require upskilling for work, someone in an Employment First scenario does not have the luxury to undertake unpaid training, especially if there is no guarantee of a job at the end of it.

I visited two projects of HHCS which successfully address this dilemma:

Employment-focused Training: hospitality sector for refugees

This rigorous, skills-based programme works specifically with refugees to quickly train them to be equipped to work in the hotel trade. It is run by a former hotel concierge who uses her industry experience to provide the highest levels of training and has a network of contacts with which she has brokered pathways from the programme into work.

The rigorous training is a blend of cultural orientation around American work practice and English lessons with practical-based activities utilising role play and group work. Every aspect of the programme focuses on equipping the students with the skills to succeed at interview and then to integrate into the workplace. With such a clear and identifiable pathway it is a hugely popular scheme because jobseekers understand how it will help them achieve their employment aims. Of the intake I met, every single person in the programme had either already secured work or lined up an interview.

It was also interesting to understand how the programme positions its candidates as assets to employers. Rather than appealing to employers on a philanthropic level to support the programme, which can appear apologetic in tone, it sells the invaluable pre-training as a commercial saving to the employer, who gains up-skilled staff at no extra expense.

Transitional Jobs: Urban FarmWorks

This flagship project is a shining example of the Transitional Jobs model – employment that provides paid training to skill its participants for future work. Those recruited at FarmWorks learn how to cultivate and harvest the food grown on the 2.6 hectare site, and help appropriate it at the distribution centres. One day a week they are also given classroom support with their employability needs to help them secure work after the programme has finished.

Speaking to the current employees, their enthusiasm for Transitional Jobs echoed much of what I hear in the UK. The opportunity to access paid training is rare and this holistic model of combining skills-learning with an income creates high levels

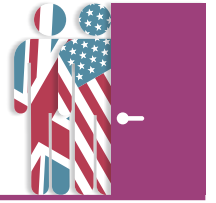
of motivation amongst the participants. With more than 70% of graduates going on to obtain long-term work it is a testament to how investing resources in trainees builds commitment to an employer and a sustainable pathway for the employee.

Conclusions and applying learning in England

In many ways, the current UK environment for homeless jobseekers is shifting towards a ‘pull yourself up by your bootstraps’ ideology. This has a lot more in common than it does in difference with the system in America, where the absence of a welfare state has naturally shaped their social care provision. The Exchange was, therefore, a timely opportunity to learn more about how organisations already interfacing with the dual issues of homelessness and unemployment have been approaching what is, in the UK, a relatively emergent situation.

At C4WS we believe that by providing quality employment support we can help people out of homelessness and enable them to build a stability that reduces the threat of future homelessness. I was heartened to see that the systems we have built with our Jobs Club are rooted in the same foundations of good practice in what I saw in America. Similarly, it was reassuring to observe that the hugely successful evidence-based Transitional Jobs model already tentatively exists in the UK through forward-thinking organisations like Pret a Manger’s Rising Stars programme, which should serve as a good example for replication for other employers.

On the other hand, given the rising epidemic of an Employment First demographic within homelessness, there needs to be a



Sam Forsdike: Heartland Alliance, Chicago

The intersection of homelessness and unemployment

far wider engagement with the intersection of these issues. We need a large scale and sector-standard response that can properly offer solutions to those in crisis need.

This isn't exclusive to the UK. Heartland Alliance echoed these sentiments where in America, Housing and Employment, and their funding models, are two silos with a distinct absence of crossover. Yet for those of us working in frontline homelessness the overlap is only too obvious and the lack of joined-up dialogue between two very different entities is detrimental to the people we support.

Since I have returned I have been encouraged by the implementation of my learning. Brokering discussions with local employers has yielded successful new relationships for our Jobs Club, while ambitious plans in development for a Camden employment forum specifically to support those who are homeless have been positively received by local businesses.

Yet I feel strongly that beyond a localised level there needs to be a coordinated effort to bring together homelessness and employment services. Firstly, data needs to be collected to properly understand the scale and impact of how homelessness and unemployment are feeding into each other. Then, secondly, we need to use this to look at how we can create effective solutions to those experiencing these dual needs: from the absence of cultural orientation and transitional services for migrant jobseekers to the growth of a 'working poor', whose jobs – and job progression – are not enabling them to sustain their homes, and therefore leave them at risk of becoming homeless.

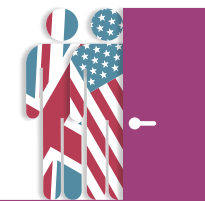
The housing and employment sectors offer great resources and we need to understand that acting in isolation to address issues will not be as strong as a collaborative response that can pool skills and networks. There are plenty of forums and alliances in the homeless sector that successfully address dual needs, yet the landscape for joined up thinking in homelessness and employment remains distinctly barren. To start these conversations will be a true legacy of the Exchange.

Louisa Steele

Housing First for women

Downtown
Women's Centre
Los Angeles





Louisa Steele: Downtown Women's Centre, Los Angeles

Housing First for women

In May 2017 I was fortunate enough to travel to Los Angeles to explore how an innovative Women's Centre there use the Housing First model to meet the needs of the female chronically homeless population on Skid Row.

I have worked in a Housing First service in London for nearly two years. The service supports chronically homeless women and men into permanent housing with intensive, wrap-around support and, most importantly, without conditions, those awkwardly placed hoops that complex needs clients will never be able (or willing!) to jump through. Previously I worked in domestic violence services, where I noticed the lack of homeless or 'complex' women using the service, and was often at a loss as to how to support these cases the few times they did come in.

When I started at Housing First, the female clients I met gave me a better idea of why this was. In 'Hard Edges' Lankelly Chase define the term multiple disadvantage as 'a combination of homelessness, substance misuse, mental health problems, and offending behaviours, the extreme nature of which lies in their multiplicity, interlocking nature and cumulative impact' (Lankelly Chase, 2015). With their interlocking experiences of childhood trauma, violence and exploitation, poor mental and physical health, substance use, and the loss of children, the women I work with in Housing First push the limits of that definition. Therefore focusing on a single issue cannot fully address the multiplicity of their experience, and the complex trauma they have experienced.

Cuts to services and the austerity agenda in the UK have hit women hardest. As more and more women run out of options, services designed in silos – and for a largely male homeless

population – cannot be expected to meet their needs. While working with my female clients I began to wonder how Housing First was different, and how the key principles of the Housing First model have impacted on them. What was working well? What were they finding difficult? And how could we do things differently to better meet their specific needs? As Housing First is much more established and widely used in the US, I was keen to find out how they have adapted the model to meet the needs of the chronically homeless female population. I had three areas of learning that I wanted to explore:

- Domestic violence – how do services conceptualise risk and safety, especially in the context of domestic violence? How do they try to mitigate those risks?
- Building confidence and resilience/community integration – how are services supporting women to build confidence and resilience?
- What type of housing might work best for women?

Homelessness in LA

Los Angeles is vast, divided up into 84 separate cities, mostly only practically navigable by car, and with a stark divide between those that have and those that don't. Of the 57,794 homeless people in LA, nearly 18,000 are women, a 16% increase from last year. For the purposes of this report I will focus on the Skid Row area as this has by far the most concentrated homeless population in LA – about 30% of an estimated 2,000 people who sleep on Skid Row's streets or shelters each night are women.

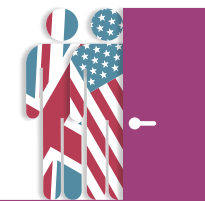
In their 2016 needs assessment the Downtown Women's Centre found that the majority of women on Skid Row are

unaccompanied by children. Walking through Skid Row, it was clear to see that many of these women were experiencing multiple disadvantage in similar ways to women in the UK, where poor mental health, experiences of violence and trauma, substance use, and loss of children combine.

What is different, though, is the lack of options available to get women off the streets. I met many women sleeping in temporary beds in emergency shelters where beds are laid out in large dormitories, women must leave every morning and then queue up again at night, and little support is provided. In their 2016 needs assessment Downtown found that one third of survey respondents reported feeling unsafe in these shelters and, disturbingly, that 35% of women who sleep most frequently in shelters had experienced physical or sexual violence in the last year. Many women will switch between shelter beds and sleeping out.

Another major difference is that women on Skid Row are also more likely to be older: 48% of those surveyed by the Downtown Women's Centre were aged 51-61, therefore physical health is a major issue. Most of the women are also African-American, which serves as a crucial reminder of the long term effects of institutionalised racism, and the way it intersects with gender, poverty and disadvantage.

The above issues are compounded by a lack of affordable housing, a confusing housing voucher system, and very limited access to healthcare and welfare benefits. Shadowing a case management session, I looked over a bill for medical care sent to a 72-year-old resident in Downtown Women's Centre's on-site permanent supported housing. For her counterpart in the UK the situation would be very different, as the medical



Louisa Steele: Downtown Women's Centre, Los Angeles

Housing First for women

bill wouldn't exist, and she would be eligible for housing under statutory homelessness law. This situation is just one example of the many struggles faced by homeless women on Skid Row.

The Downtown Women's Centre

The Downtown Women's Centre was founded in 1978 by outreach worker, Jill Halverson, and her friend Rose Arzola. Rose was one of many women with mental illness who ended up on the streets of downtown LA in the wake of deinstitutionalisation, the state's removal of mentally ill patients from psychiatric hospitals due to facility closures.

What little service provision there was for the homeless population back then, there was certainly nothing for the ever-increasing numbers of homeless women ending up on Skid Row. The Downtown Women's centre was the first service in the area to serve women exclusively. When it first opened in 1978, it provided hot meals, showers, clothing and a safe place for about 400 women a year. Today, nearly 200 women come through its doors on any single day!

Downtown also run a well-established Housing First service for women, with 119 on-site apartments as well as community-based rapid and permanent supported housing programmes. On-site health and wellness services and a specialist trauma centre are designed around, and cater specifically for, women's health needs, providing everything from mammograms to crisis intervention services for women experiencing domestic or sexual violence. Downtown also run a successful social enterprise, 'Made', where women make

candles and other gifts that are sold in its two stores, and in other venues across LA. 'Made' is a big part of Downtown's workforce development and job training programme.

Gender informed services vs. services 'for' women

"A gendered point of view is essential to informing research, policies and practices that aim to end homelessness"

Anne Miskey, CEO Downtown Women's Centre.

It is important to start with the key point that all of Downtown's services are not just arbitrarily 'for' women, because they are women. They are designed around a gender and trauma informed framework that recognises the importance of social context, particularly the social inequalities impacting on women's lives, and the subsequent need for integrated, holistic support. At Downtown, I attended a resident and participant advisory board meeting where a resident made the following comment, which I think encapsulates what is needed to run a truly gender informed service for women experiencing homelessness and multiple disadvantage: "There is no power and control here. It's the only place I've seen that allows freedom of choice without coercion or mandatory participation in groups and stuff. When I first got here I cried with joy when they gave me a clean pair of underwear – that is what I most needed at that time".

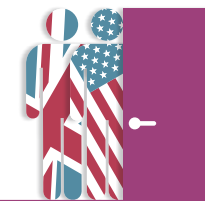
There are two important points to draw out from this comment. Firstly, around the importance of self-determination and choice for women who are likely to have experienced extensive abuse across their lives, the dynamics of which have often been replicated by services they have accessed in the past.

Being able to choose is an invaluable tool, as well as a key tenet of the Housing First approach for women. The second important indicator of gender informed support is the fact that the resident was asked what she needed. This is a simple but immeasurably empowering question that many women will not have been asked before, and is key to building trusting relationships from the very first point of engagement.

Housing. First.

Like Exchange participants before me, I came to the US with quite a fixed idea of what the Housing First model should look like, and came home with a far broader definition than I was expecting! In LA, Housing First must respond to the diversity of homeless women's experience. Downtown have therefore adapted the Housing First model to meet the continuum of needs of the women they serve. Rapid re-housing for domestic violence survivors works on the prevention end of the scale, housing women with low needs, who are at risk of becoming homeless due to domestic violence as quickly as possible, before the associated problems of being a homeless, traumatised woman (worsening mental health, further experiences of violence, using substances to cope) begin to mount up. Permanent supported housing supports those higher up that scale, those who have chronic physical or mental health issues, have spent considerable amounts of time in shelters or sleeping rough, and that need intensive support to maintain their tenancies and achieve stability.

Although the type of housing, level of need and intensity of support differ across this expanded idea of Housing First, the 'core' principles of the model remain the same – the main points being that clients get their own tenancy, as quickly as



Louisa Steele: Downtown Women's Centre, Los Angeles

Housing First for women

possible, the separation of housing and support, no pre-requisites to housing, and all of this firmly underpinned by a philosophy of choice and self-determination.

Building confidence and resilience

In her research into single, street homeless women in LA, Sofia Herrera prioritises permanent supported housing as the most effective way of meeting their needs, and within this highlights the importance of 'promoting of a sense of community through fostering a sense of belonging' (Herrera, 2017). It is this sense of community that can make all the difference to a homeless woman's confidence and self esteem, and how she relates to her environment and others. We know that homeless women experience the stigma and shame of their perceived failure to live up to traditional expectations of femininity, as housewives, and mothers. This shame runs deep, and alongside it a woman's confidence and self-esteem are further eroded with every traumatic, violent experience they endure.

Downtown recognise and address this in a number of innovative ways. Downtown's on-site, permanent supported housing units really help to foster this sense of community. While every woman has her own self-contained flat, with both kitchen and bathroom, there are also a number of community spaces such as living rooms, a communal kitchen and a library, where women can come together and support each other. Groups and activities are also an important part of this; women living on site can easily access women's empowerment groups, resilience building groups, therapeutic walking groups and a number of other activities. A limitation here is

on how this can be achieved for women living in scattered accommodation out in the community, which is something I would like to explore further in disseminating my learning.

Downtown also see the importance of challenging the stigma around homelessness and changing perceptions within the community at large, and how this wider change and increased understanding can have a direct, positive impact on an individual homeless woman's confidence and self-esteem. Their social enterprise and work development scheme play a major part in this, engaging women at any level of need, and enabling them to be involved as much or as little as they feel ready to. Downtown also run an advocacy programme which trains women up to tell their stories; this too serves as a powerful tool in the fight against the negative judgement and stigma that perpetuates and feeds into women's homeless identities and feelings of worthlessness.

Domestic violence

Ninety per cent of the women who took part in the 2016 Downtown Women's Needs Assessment reported that they had experienced physical or sexual violence in their lifetime, with half of all respondents reporting experiencing violence in the last 12 months. Safety is, therefore, a key consideration when using Housing First for women. To this end, Downtown are involved in an innovative piece of partnership working, the Domestic Violence and Homelessness Services Coalition, formed out of the need to bridge the gap between domestic violence and homelessness services, and address domestic violence as a major cause of homelessness. At the meeting I observed, Downtown stressed that safety can mean a very different thing to each woman, therefore the universal

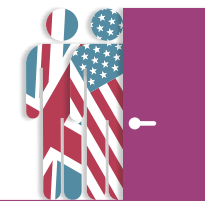
approach traditionally taken by providers is ineffective. They acknowledged the tension that exists between providing too much safety, or not enough, and the issues that this can cause.

This question around self-determination and choice vs. safety is a complex one when it comes to using the Housing First approach for women. Both of Downtown's permanent supported housing sites for chronically homeless women are staffed 24 hours, with a resident manager based in the lobby. There are house rules that ban any boys over the age of 14 from the sites, and restrict women from having visitors in their flats. These rules are a response to the communal living environment, but they also act as a safety net for the most complex women experiencing violence, as the choice around who enters their flat is taken out of their hands.

When it comes to housing women in the community, that safety net isn't there. Unlike women in single site housing, they can make the choice to let, or not let, the perpetrator in. Staff attempt to mitigate this risk by ensuring that conversations are had with the woman around what makes her feel safe, and every effort is made to find the right type of housing for that specific woman's needs, in an appropriate area. Many of the staff though, felt that chronically homeless women with the highest needs were safer and had better outcomes in Downtown's on site permanent supported housing, whereas scattered accommodation in the community was more suitable for lower need women.

Trauma informed services

When I asked staff for their thoughts around how we need to do Housing First differently to meet women's needs, they



Louisa Steele: Downtown Women's Centre, Los Angeles

Housing First for women

all stressed the need for trauma informed services, and for staff to work in a trauma informed way. At Downtown all of the staff, including the maintenance team and the kitchen staff, had received training on trauma informed care. It was a framework that was very much integrated throughout the entire organisation. Downtown also work in partnership with Peace Over Violence to deliver on-site crisis intervention and triage services for trauma survivors or victims of crime. Women can walk into the service when they need it, and it comes as no surprise that domestic violence is the most common presenting issue. Downtown also have mental health services on-site and a wide range of group therapies facilitated by trauma informed clinicians that aim to give clients the coping skills they need to start managing their experience of trauma.

What then, does a trauma informed approach to Housing First look like? At Downtown they recognise that when women are housed they may be at their most symptomatic. A staff member pointed out that “security can feel scarier”, it all depends on how that woman views her homelessness and what makes up her homeless identity. In their 2006 report, Crisis made a similar point, that whether a woman defines herself as homeless will affect the assistance she seeks, her actions, and the way she negotiates every day life (Crisis, 2006). I would argue that this is a key point for future consideration when utilising Housing First for women. It is crucial then that Housing First workers have training in trauma, so that they can do the initial, critical work of helping women build skills around recognising and managing their symptoms of trauma, long before they would consider going into more structured therapy.

Applying learning in England

Examples of innovative, gender informed practice are starting to spring up across the UK, and it is time for homelessness services to start thinking about how we can integrate this approach. Housing First is a relatively new concept in the UK and, as I have demonstrated in this report, looks rather different here than it does in the US. My time in the US has convinced me that there is an incredible amount of potential to integrate gender and trauma informed principles into the Housing First model, and that this could be a highly effective way of meeting the needs of chronically homeless women in the UK.

Since returning to the UK I have started a new capacity-building role for a dedicated Housing First Service for women experiencing domestic violence. I have set up meetings with specialists in domestic violence and women's homelessness to discuss my findings and how these can be integrated into the evidence base I must build. I plan to document this experience through the blog that I started in LA: www.louisasteele.blogspot.co.uk. I hope this will serve as an engaging way of getting my findings across, as well as building a solid evidence base for the project.

I am also looking forward to participating in a webinar with Housing First England on women and Housing First. This will feed nicely into the steps I have already taken to start up a Women and Housing First working group for the specialist organisations running Housing First services for women in the UK, as well as other professionals and academics with experience around this topic. I have been in touch with Homeless Link about using the Housing First England platform to set this up. This group will provide a space to discuss challenges, examples of best practice, and ultimately what good outcomes should look like for women supported by Housing First.

Finally, I am participating in the development of the first toolkit on using the Housing First approach for women. I have been in touch with other Housing First services working with women across England, am excited to collaborate with them on this and further disseminate the learning I have taken from my time in the US. I believe that the toolkit will be a great opportunity to investigate existing good practice examples, challenges, and to strengthen partnership working and alliances between organisations.

Conclusions

Although the scope of Housing First is so much broader in the US, I have taken away some valuable recommendations and points for consideration:

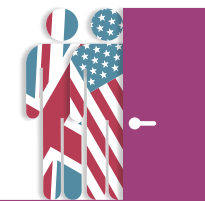
- Firstly, that work around fostering a sense of belonging at home, as well as changing wider perceptions in the community, is key and must be done in parallel, to help build confidence and resilience in women, and ultimately aid tenancy sustainment.
- The safety/self-determination issue that comes up when women with multiple and complex needs are experiencing domestic violence, needs further investigation. We need to think more about what type of housing would suit them best, as well as around safety planning and measures that could be put in place to keep them safe.
- Access to gender and trauma informed support is key and so therefore is the location of the Housing First service. The Women's Centre model is a strong foundation for the Housing First model, with their focus on the whole woman, rather than single presenting issues.

Ruth Wallbank

Strengths Based Practice

Community
Rebuilders
Grand Rapids





Ruth Wallbank: Community Rebuilders, Grand Rapids Strengths Based Practice

My name is Ruth Wallbank, and during the Exchange I worked as a System Broker for VOICES in Stoke-on-Trent. VOICES are one of 12 Big Lottery Fulfilling Lives areas. Fulfilling Lives was the first programme of its kind – partnerships of voluntary and statutory agencies applied for a long-term investment of up to 10 million pounds to create systemic change for adults experiencing severe and multiple disadvantage; namely co-occurring substance misuse, homelessness, mental ill health and contact with the criminal justice system.

As I learnt more about the policy and practice environment that commissions, designs and delivers services for people experiencing several problems, I was struck by the deficit based approach that is often taken with this client group. The individuals we support have often been in and out of services since they were children; they are barred, evicted, excluded and judged by their perceived problems, issues and mistakes. They are assessed for their housing readiness, job readiness, treatment readiness. They are assessed on the risks they pose, and they are assessed on their ability to be neighbours, parents, patients, citizens.

I applied for the exchange to learn more about Strengths Based Practice (SBP), which is also referred to as Asset Based Practice. SBP is an approach that was developed in the U.S and was popularised in the late nineties as a response to traditional social work practices that tend to pathologise and promote blame and judgement. I wanted to understand the principles of a strengths-based approach by focusing on the following questions:

- What is Strengths Based Practice?
- How is it implemented organisationally?
- What are the benefits and challenges of the approach?

In May 2017, I travelled to Grand Rapids, Michigan. Grand Rapids is a growing, vibrant city with a thriving art scene and a growing tourist industry thanks to its recent status as Beer City (USA Today) and its yearly international Art Prize. Despite, and because of, its sudden growth, Grand Rapids is facing a housing crisis. Affordable housing is becoming more and more difficult to access as rents rise and competition for properties becomes fiercer. This shift is disproportionately affecting the African American population who are highly over represented in the homeless system here, making up only 10% of the city's overall population but 68% of the homeless population. In 2015 9842 individuals in Kent County had contact with the homelessness system, a 23.4% increase on the previous year.

The shelter system forms most of the homelessness provision in Grand Rapids and large faith-based organisations like Mel Trotter Ministries offer the majority of emergency provision. Mel Trotter accommodates over 200 men, women, and families each night. The ministry offers a variety of faith-based programmes, including vitamin-based non-medical detoxes and programmes geared towards employment or addiction recovery. The residents must prove 'housing-readiness' by completing these programmes, they are then able to move out of the large communal dormitory, to a smaller dormitory. With further involvement in programmes participants can move up to a higher floor of the building to their own apartment style rooms, eventually progressing to their own accommodation.

My host organisation Community Rebuilders (CR), take a dramatically different approach to ending homelessness compared to other providers in Grand Rapids. They provide over 15 different prevention and rehousing programmes, serving single adults, families, young parents and veterans.

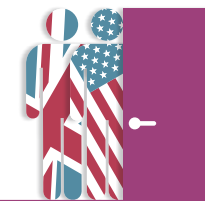
During my visit, CR were in the process of finding out whether veteran homelessness had been ended in Kent County; this means that the area has reached 'functional zero', meaning they have created an infrastructure where there is adequate provision for any veteran that becomes homeless. The services CR provide are largely based around a Housing First model; their team of Housing Resource Specialists (HRS) utilise properties that CR owns and manages, as well as the Private Rented Sector, to support the individuals they serve to get quick access to safe, affordable, decent housing. They aim to house people within 14 days and all of their work is centred around Strengths Based Practice, which they describe as "about partnering in order to help service recipients identify, and use their strengths and resources to overcome obstacles, and live empowered lives. It is an evidenced based approach, that focuses on what is strong, not what is wrong".

Learning

How is Strengths Based Practice implemented organisationally?

Values

Few, if any, organisations, either in the US or at home in the UK would describe themselves as deficit based. Most would consider themselves to value the assets of their participants and many list 'empowerment' as a key organisational value or principle. However, as many frontline workers will attest, a focus on paperwork, targets, a lack of resources and understaffing can make this difficult in practice. From my first day with CR, I began to see the subtle shifts in organisational



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culture that are required to create a platform for practicing, not just preaching, empowerment.

Community Rebuilders describe their core values as “the bedrock of HRS work” and a strengths based approach underpins all of them:

- Empowerment
- Individualizing service
- Building on strengths
- Creating a hope-fostering vision
- Honouring self-determination
- Encouraging consumer participation
- Fostering transferability of skills
- Protecting confidentiality

These values are the foundations and focus of their practice, rather than a set of abstract principles that practice must try and live up to.

Strengths based training and supervision

Community Rebuilders’ core values form the basis for their strengths-based training programme. All staff members complete the programme as part of their induction, including administration, management and facilities staff, which demonstrates CR’s organisation-wide commitment to the model.

CR place equal value on ongoing strengths-based training for existing staff as they do on an initial induction to the approach. During my visit, I was able to attend a day of strengths based training for a group of long serving staff at Community Rebuilders. The management choose to run this training

periodically with veteran staff whenever there has been a significant organisational change, such as the opening of a new scheme or an influx of new staff. This approach shows the value CR place on the strengths and experience of its most experienced staff, recognising them as organisational leaders who are able to disseminate training to others.

The training focused on five key principles of the model, the thinking that supports each principle and ‘detours’ that can prevent staff from working in strengths based way. The staff were then tasked with creating a list of the practical tools and resources that they have at their disposal to help prevent detours and practice the principal. For example:

Principle: “Trauma, abuse and illness and struggle may be injurious, but they may also be sources of challenge and opportunity.”

Dwelling on consumers’ pasts and hardships promotes “an image of themselves as helpless in the past, which becomes the basis for fault-finding and continued helplessness in the present” (Wolin and Wolin 1993).

Thinking that supports SBP:

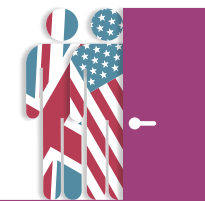
- You see your consumers as survivors who are working with you because they desire a change in their life/situation
- When consumers are struggling to meet life’s challenges you are able to point out competencies, resiliencies and resourcefulness
- You understand the impact of trauma and stress on functioning and are trained to de-escalate crisis situations and promote safety.

Thinking that Detours from SBP and becomes deficit-based:

1. “I spend the majority of my time learning about the problem and listening to hardship stories.”
2. “I respond the same way to everyone, I see ineffective and unhealthy behaviours and use these to determine needs.”
3. “I get discouraged and don’t understand why consumers behave the way they do.”
4. “I don’t know if our time spent together was useful to my consumer.”

Practical tools and resources to avoid detours:

- Utilising team strengths – managers and co-workers
- Strengths-based training
- Inventory of strengths
- An emphasis on clear communication and the client leading the session; asking the client how useful a session has been, allowing them to set the pace and agenda.
- Life Domain Rating Scale: CR use the Life Domain Rating Scale as a means of goal setting and tracking progress with clients. The scale differs from other similar tools such as the Outcomes Star, as the client and HRS work together to create an individualised rating scale, constructed to measure the specific area the consumer has chosen to address. This is described as a ‘self-anchored’ rating scale. For example, some clients may identify that they want to focus on building a relationship with their landlord as a priority and will rate their confidence in this area from 1-10; other clients may choose to prioritise reconnecting with family and will rate their confidence in this area. The scale allows the clients to focus in on areas of strength



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and resilience and areas where they wish to make changes rather than being presented with a pre-defined list of areas that may need ‘fixing’ or ‘improving’.

Internal challenge and commitment to the model

During my visit, I discussed SBP with Community Rebuilders’ Executive Director, Vera Beech, who reflected on introducing the approach to the organisation and the level of commitment this took. She said that being strengths based is something that you have to “practice every day” and that it was vital that their team challenged each other. Throughout my visit, I was struck by the candid and constructive way that staff challenged one another if they overheard a phone call or interaction with a client that was not strengths based – because a culture of open dialogue is embedded in the organisation, this kind of feedback was always well delivered and received.

Strengths Based Practice and Housing First

CR’s Housing First offer is inextricably linked to their strengths-based work. In a strengths-based service, providers believe that behaviour is shaped by the resources available to people (Davidson and Rapp 1976). This removes the focus from specialised programmes, tenancy training, or pathways that prepare a consumer for ‘housing readiness’ or compensate for perceived deficits. The approach acknowledges Maslow’s Hierarchy of Needs, focusing on individuals’ rights to have their basic needs met without conditions or prerequisites.

During my visit, I participated in an initial meeting between a client and their Housing Resource Specialist (HRS) in

Keys First, a programme for young parents experiencing homelessness. The client was not asked questions about her current situation or needs (unlike many first meetings with services for clients in the UK) – any information she offered about this was given voluntarily as part of the conversation. The HRS recognised that finding housing was the client’s priority and as a result the meeting focused entirely on this. The HRS helped the client to explore the resources and strengths she already has that would help her to gain accommodation, such as previous successful tenancies, a positive landlord reference, and good relationships with her daughter’s school. Actions were agreed that both the client and staff member would complete; this not only gave the client a means by which to measure the sincerity of the HRS, which built trust, but also demonstrated to her that the HRS had faith in her ability to succeed. She left rating her confidence as 9/10 that she would complete the actions by the deadline she had set herself.

I met with another client who was experiencing issues with promised repairs that the landlord had failed to complete. Traditional support work practice would often involve the support worker contacting the landlord, however, Community Rebuilders emphasise the important on the relationship between landlord and tenant. Although they will support tenants to challenge their landlord, this is always done by the principle of ‘doing with, not for’ in order to help the tenant to develop the strengths needed to maintain this, and any future, tenancy. The HRS helped the client to identify her preferred method of contact, draft a letter and send it to the landlord, as well as reinforcing her rights as a tenant.

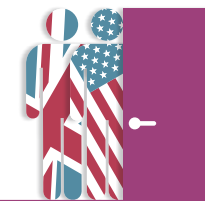
I also met Robert, who had taken part in an initiative called ‘Move up’. This was a voluntary programme for residents whose housing involved an additional element of floating support from an external provider. Due to funding, CR are only able to provide a finite number of places in this programme. ‘Move up’ allows clients to maintain their property but relinquish the floating support element when they feel ready. It gives the client complete control over the length of their relationship with services and provides them with an opportunity to help another member of the community who may be less far along in their journey.

Addressing common criticisms of the model

“SBP creates blurred boundaries between clients and staff”

This is an important consideration for any service working with vulnerable groups regardless of their service delivery model, and SBP’s focus on building relationships and trust can lead to critics to worry about boundaries becoming blurred. However, one of the main focuses of SBP is to support clients to develop assets and relationships within the community, outside of support services, thus creating less dependency on services than other models.

If implemented correctly, SBP will create a shift in the power dynamic between staff and client, and placing the client at the centre of their own journey. It is important that staff are properly trained to understand and support this change. Community Rebuilder’s training focuses not only on this shift, but also trains staff to better recognise genuine crises and specific situations where the model needs to be put to one



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side in order to act in someone's best interest. For example, this could be when there are safeguarding concerns or if someone becomes a risk to themselves or others.

"SBP is ineffective if there is a lack of resources"

In their essay 'Strengths-based practice: social care's latest Elixir or the next false dawn?' Slasberg and Beresford explore the implementation of SBP in UK statutory social care. They argue that the approach alone cannot change the system and that there must also be adequate resource to allow people to fulfil their potential. SBP was so successful at Community Rebuilders not only because of the genuine, unconditional positive regard staff had for their clients, but also because of the specialist skills of HRS staff to acquire high quality properties quickly for their clients. CR are operating in a difficult rental market, and facing the pressure that many clients must 'income up' in order to fund their own rent after a brief period of rent subsidy ends (usually 6-12 months). They use SBP to maintain a focus on the strengths of their clients, staff and landlords and acquire new properties and resources. I would argue that, in CR's case, commitment to SBP has helped to combat the lack of resource that could ultimately undermine strengths-based work.

Applying learning in England

After returning from the Exchange I travelled to Oxford to look at a UK implementation of the strengths-based approach. I attended the launch of the MayDay Trust's Personal Transition Service (PTS). Mayday's Asset Coaches use Strengths Based Practice to motivate clients, help them to recognise their strengths, broker opportunities for them to use their assets

and build positive networks outside of support services. Like CR's core values, Mayday's approach is underpinned by four core concepts that ensure their work is strengths based: Personalisation, Being Asset Based, Advantage Thinking, and Relationships and Purpose.

Both organisations share a commitment to internal challenge. Mayday Director Pat McArdle said that, when they began to adopt the model, they were "questioning our role in colluding with a system that disempowers people". They undertook a process of "organisational transformation" with a focus on recruiting and training staff who were committed to working with people's assets. Both organisations are clear that their approach is about 'doing with' not 'doing for'. Mayday gave the example of someone with rent arrears, often support services in this situation would intervene, make phone calls and 'fix' the problem – Mayday recognise that "standing back is difficult but crucial" and that their role is to help the client use their strengths and find solutions that would prevent this happening in the future. Mayday's work provides a UK evidence base for the success of a Strengths Based Practice. During their proof of concept phase 78% of individuals sustained accommodation, 36% engaged in volunteering, training or employment and 44% reduced usage of high cost services. Most importantly, every individual who took part in the study was able to identify some of their own assets that they can build on.

Since the Exchange, I have started a new position as the Midlands Partnership Manager for MEAM (Making Every Adult Matter), a coalition of Mind, Homeless Link and Clinks. We work to create policy and practice change for people

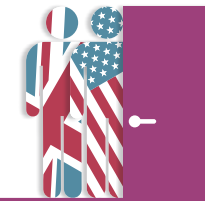
experiencing multiple disadvantages, supporting local areas to set up coordinated interventions using the MEAM approach. My new role means that I am able to disseminate good practice much more widely as I visit services and organisations across the country; I will have the opportunity to promote Strengths Based Practice at both strategic and operational levels to projects at various stages of development.

Part of my new role is to offer independent support to Fulfilling Lives areas and I will continue to work alongside VOICES. I plan to run strengths-based workshops, highlighting the asset based work they already do and encouraging all staff to set an individual action plan of small changes that they can make to become more strengths based. If this training is successful I will deliver it again at the Fulfilling Lives Midlands Hub event, where frontline staff from five of the projects meet annually.

Conclusions

Fulfilling Lives projects have many of the resources needed to fully integrate a Strengths Based Approach within their programme structure:

- Time and resources allocated to system's change and good practice
- Access to clinical supervision and reflective practice
- Access to local and national evaluation to monitor the impact of the approach
- Personalised budgets, giving the client greater choice and control, creating opportunities to build and develop strengths



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- Small caseloads – caseloads under 10 mean that staff have the time and space to build the meaningful, trusting relationships required to implement a fully strengths-based approach
- No time limit on length of support – means the service can work at the client's pace, not the other way around
- Housing First – VOICES are currently exploring local implementation of a Housing First initiative and could use the learning from CR to ensure that implementation of the approach values the strengths of participants, staff, landlords and the wider community.

During my time working in the sector I have met many individual support workers who build strong working relationships with their clients and empower them to use their skills and assets. The Exchange has taught me that by adopting a service delivery model, like SBP, we can create a culture where this kind of work is recognised, appreciate and replicated. There is no 'off the shelf' model for adopting SBP, however a focus on strong values, continued training, giving staff the freedom and time to work autonomously and creatively, and a culture of self-reflection and internal challenge are the common ingredients in successful strengths based services, both here and in the US. Although not all organisations will choose to adopt Strengths Based Practice, committing to a shared psychological approach formalises an organisation's ethos, providing a framework within which to reflect and improve. It ensures that the people accessing services are at the centre of all we do, are treated with the highest level of dignity and respect, and are not only valued for their innumerable strengths, skills and assets, but are also given real opportunities to use them.

"If we ask people to look for deficits, they will usually find them, and their view of the situation will be coloured by this. If we ask people to look for successes they will usually find them, and their view of the situation will be coloured by this."

Kral, 1989.

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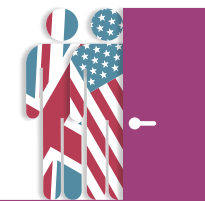
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Alex Smith

Critical Time Intervention: learning from Los Angeles

Brilliant Corners
Los Angeles





Alex Smith: Brilliant Corners, Los Angeles

Critical Time Intervention: learning from Los Angeles

As a System Broker for the Big Lottery Fund's Fulfilling Lives Multiple Complex Needs programme, I am interested in change and innovation to explore and understand how we can better support those most excluded.

Fulfilling Lives Newcastle/Gateshead (FLN&G) is a research programme working with a small caseload of people who have overlapping support needs around homelessness, mental health, offending and substance use. We have a team of Service Navigators to provide long-term, responsive and flexible support to people on the frontline, while our System Brokers and Research & Evaluation team work both to understand the barriers facing people with multiple needs, and to promote lasting change to overcome those barriers. I lead on one of our key focus areas, transition, and this is why I applied to be part of the 2017 Transatlantic Exchange.

One of the topics being explored through this year's Exchange was Critical Time Intervention (CTI). When I was first writing my application, I misunderstood the CTI model, as it is something very different to the models of intervention we use in the UK. Through initial research, I learned that CTI is an approach to support complex people through high risk transitions, for example being released from prison, and I could see the links and potential application to the work of FLN&G.

My key research question was:

- Does the CTI model help people to sustain accommodation?

I am particularly interested in accommodation sustainment in the context of complex needs, where there are overlapping issues around mental health, substance use and offending.

Los Angeles and Brilliant Corners

Following some additional research into CTI, I learnt about Brilliant Corners, an organisation based in Los Angeles and San Francisco, California. I was matched with a programme based in Downtown Los Angeles (LA), serving the whole of the LA County – a county with a total population of 10.1m and the second highest homeless population in the US. In the latest report from Los Angeles Homeless Service Authority (LAHSA) there are some 34,189 homeless people in the city of LA, with a staggering 57,794 homeless people in the County, which sees a 23% increase in 2016 compared to the previous year. Homelessness is at crisis point in LA. One of the key causes of homelessness in the US is affordability of rent: in LA average rent charges have increased by 32% since 2000, with the average household income for those renting decreasing by 3%¹.

US Context

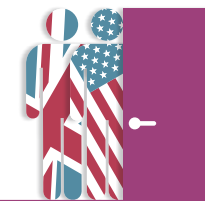
There are countless differences between the US and UK systems but three of the most significant I found were:

- There is no Housing Benefit. Housing subsidies are available but are not universal and often temporary.
- As a result of not having robust welfare support, there is a much greater emphasis on employment for those in support services
- There is no universal health care, and the inequalities between rich and poor are more stark than anywhere I have ever visited



Brilliant Corners is a non-profit supportive housing agency serving people with developmental disabilities and other special needs, including people transitioning from homelessness, institutional settings and homeless veterans. Brilliant Corners offers a number of different programmes, including temporary and permanent supportive housing, and case management services.

I was matched with the Brilliant Corner's Breaking Barriers, a partnership programme working collaboratively with the Department of Health, Probation and Chrysalis (an employment agency), based in Downtown Los Angeles. Due to the scale of homelessness in LA, the County has started to invest in programmes to reduce homelessness and its link to offending. Breaking Barriers works with people experiencing homelessness while on probation and offers a 24-month rapid re-housing (temporary and partial housing subsidy), with housing co-ordination, case management and employment support through the model of CTI.



Alex Smith: Brilliant Corners, Los Angeles

Critical Time Intervention: learning from Los Angeles

What is CTI?

Critical Time Intervention is different to traditional support work models. Based on my learning in the US, further reading and conversations, I have identified a number of key learning points.

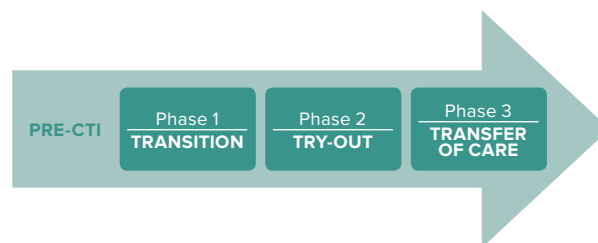
CTI is designed to help complex people with long-term support needs, however it is not in itself a long-term intervention. The model aims to “mobilise support for society’s most vulnerable individuals”² and the CTI worker focusing on building a network of support. This is the first key learning point – CTI recognises that no one service has the whole solution, and the CTI worker acts as a broker to advocate and negotiate with all levels of the network to build a solid and long-lasting foundation for the individual: CTI is a shared experience.

The second key point is how the model is delivered, and it is this that seems radically different compared to our traditional models of support. CTI is a time-limited, focused and phased approach.

Time-limited

The CTI model is usually delivered over a period of 9 months, with a clear and definitive ending. During my time in LA, I discovered that the model is being adapted to meet the needs of an individual programme and for Breaking Barriers their model is over a 24-month period.

Phased



Pre-CTI

Develop a trusting relationship with client.

Phase 1: Transition

Provide support and begin to connect client to people and agencies that will assume the primary role of support.

Phase 2: Try-Out

Monitor and strengthen support network and client’s skills.

Phase 3: Transfer of Care

Terminate CTI services with support network safely in place.

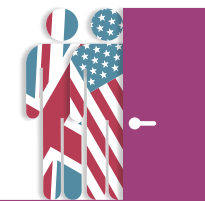
Center for the Advancement of Critical Time Intervention,
New York City, USA

CTI in LA

Whilst in LA I heard that the CTI model was difficult to understand at first – are we setting people up to fail by pushing them on too fast? What if they genuinely aren’t ready to move on? What if the support to transfer care is not there at the end of phase three?

These are all valid questions based on traditional models of support, so it is important to understand that CTI is different. The ultimate goal of CTI is not to ‘fix’ or to achieve a ‘fulfilled life’ for the individual; it is recognising and acknowledging that long-term support is needed and that all parts of the system need to be involved. The CTI worker needs to be skilled at building a relationship of trust, role modelling structure to their client and, crucially, being linked with key stakeholders to ensure that their client is receiving the support they need. The end goal is to build a network.

Breaking Barriers has been operating since July 2015 and during this time they have been on a journey to understand CTI and how the model works within their programme. Part of this learning was discovering that the traditional 9-month model was not suitable and as such, they extended the time to cover the full 24-months of Breaking Barriers programme. In addition, the phases used through Breaking Barriers are linked to the individual contributing a higher percentage toward their rent charge (a reduction in the housing subsidy) and this too meant that greater flexibility was required within the phases, depending on the financial circumstances of the individual. For this reason Breaking Barriers have adapted the traditional phases to meet their programme needs (see page 26).



Alex Smith: Brilliant Corners, Los Angeles

Critical Time Intervention: learning from Los Angeles

The decision to move a client from one CTI phase to the next is largely determined by the time frame, not client readiness

Before housed	Months 1-6	Months 7-9	Months 10-18	Months 19-24
PRE-HOUSING Before housed Visits two times per month, in office or community	PHASE 1 Housed 1-6 months Visits two times per month at least one at home	PHASE 1 or 2 Housed 7-9 months <i>If Phase 1</i> Visits two times per month, at least one at home <i>If Phase 2</i> One home visit per month and one phone call between visits	PHASE 2 Housed 10-18 months Visit one time per month and one phone call between visits	PHASE 3 Housed 19-24 months Visit one time per month at home

Breaking Barriers CTI Model – Lisa Johnson, Breaking Barriers Programme Manager

Breaking Barriers receives its referrals from the Probation Department, screened through the Vulnerability Index – Service Prioritisation Decision Assistance Tool (VI-SPDAT) to ensure that all referrals are appropriate for the programme. Two of the key criteria are that the person is on probation and homeless and, once accepted, the person is allocated a Case Manager who starts work within a matter of weeks. Crucially, the first phase does not begin until the person is housed and, during this time, the worker and individual start to build a relationship in preparation for transition into housing. Throughout the phases, intensity of support gradually decreases as the support network develops although, it is important to note that Case Managers are very much on hand to step in should a crisis happen; there is flexibility based on circumstance, but the general message to the client is that contact will decrease. As I talked to Case Managers and

people in the programme, it was clear that this decrease in support was seen in a very positive light, as a celebration to move from one phase to the next; the worker feels supported/boundaried, with a balanced caseload, and the person feels a sense of achievement.

The model being used by Breaking Barriers shows that CTI is flexible and can be adapted to meet the needs of any programme.

In addition to flexibility, the Breaking Barriers programme has developed in-house holistic support where three workers collaboratively support the individual with clearly defined roles. This structure includes:

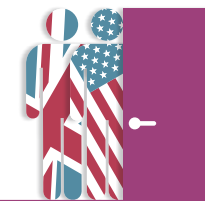
- **Housing Co-ordinator** – This worker is based within Brilliant Corners. The Housing Co-ordinator supports with all

aspects of property management, including rent, arrears, repairs and issues such as anti-social behaviour (ASB).

- **Case Manager** – This worker is based within Brilliant Corners (case management is often outsourced to different providers). This worker provides psycho-social interventions, care co-ordination and advocacy. The Case Manager and Housing Co-ordinator would work together on overlapping issues such as ASB/guests.
- **Employment Coach** – This worker is based with a partner agency Chrysalis. The focus of this support is all around skill development, training and employment. The Employment Coach and Case Manager work closely in relation to goals set by the individual and to also work through any difficulties/challenges.

This structure means that the individual has a clear and structured relationship with each worker, and that each worker has a clear role, while also working collaboratively with other parts of the network. As one client explained, “I know who to go to for what.” In LA, this support structure forms the basis of the network and, through the CTI phases, this network is developed with other agencies such as health and treatment agencies, with a big emphasis placed on reconnecting to friends and family.

During my time in LA, I attended a Design Team meeting which includes all Breaking Barriers partners and funders. This group has met consistently since the start of the programme in July 2015 and has worked together to overcome each challenge; all partners are committed and invested. This was the final Design Team meeting planned for this initial 24-month pilot project and top of the agenda was a discussion around outcomes. A total of



Alex Smith: Brilliant Corners, Los Angeles

Critical Time Intervention: learning from Los Angeles

14 people were coming to the end of the 24-month programme and the team discussed the status of these participants. So, all 14 are ready to end phase 3, but is the network robust enough to manage this? The honest answer was no. The 14 people coming to the end of the programme could be grouped in three:

1. Working full-time and client ready to take over the tenancy/full rent charge
2. Working and not quite ready to take over the tenancy, but close to
3. Unable to take over the tenancy

The reality is that, following phase three, the CTI programme will end, but the network might not be robustly in place for everyone. The Department of Health Services explained that they were considering additional funding options to allow an extension for those people who needed a little more time, and also looking at transition to permanent supported housing for those who were unable to live independently. Breaking Barriers is collaborative, which means that responsibility is shared; no one is 'blamed' for the fact not all 14 people are where they expected. At the end of all three CTI phases, reflection is needed with all partners and at all levels to ensure that the ending is right and that any additional support requirements are highlighted and secured.

Findings

Critical Time Intervention emerged from work in large shelters in New York during the early 1990s. There was a focus on comprehensive treatment programmes for people in shelters, but for people transitioning from shelter into housing there was a significant rate of men falling back into homelessness. In FLN&G we see that our complex clients are often unable

to sustain their accommodation for complex reasons and, over an 18-month period, there is an average of four different accommodations, with multiple evictions, abandonments and periods of rough sleeping. Therefore my key research question is: can CTI increase accommodation sustainment?

The CTI model has been recognised as a Top Tier intervention in the US by the Coalition for Evidence Based Practice:

Top Tier: Interventions shown in well-designed and implemented randomized controlled trials, preferably conducted in typical community settings, to produce sizable, sustained benefits to participants and/or society.³

In the first randomised trial of CTI with chronically homeless men in New York City, there was a 66% sustainment rate when moving out of shelter into housing. A further US-wide trial working with homeless veterans found that, after 18 months, participants were five times more likely to still be housed. This study also showed that the CTI model can be applied across different geographies and in different housing systems.

In the UK, the NHS has trialled CTI for severely mentally ill prisoners, where there is a significantly increased risk of suicide and overdose following release from prison. The study found that six weeks after release there had been a 25% increase in contact with mental health services compared to the control group.

From LA, across the US to Europe, CTI is being applied to a number of different transitions including homelessness to accommodation, prison to community, those leaving rehabilitation units or being discharged from hospital. To date, it has been proven to be flexible with varied applications.

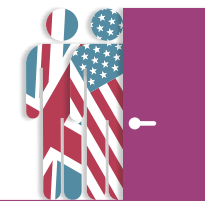
The research supports CTI as a model of intervention to increase accommodation sustainment and, beyond this, shows enhanced engagement with services for people with long-term support needs.

In LA, the pilot Breaking Barriers programme has seen fantastic results for homeless offenders:

- Programme retention rate: 73%
- Accommodation sustainment rate: 83%

During my time in LA, I met a number of beneficiaries who were all flourishing with the support of the CTI model. John's mother was addicted to crack cocaine and, following a difficult childhood, John ended up joining a gang with his older brother. During this time, John was drinking heavily and ended up spending over five years in the prison system, with his latest release seeing him sleeping in a car with no support. During this time, John lost his brother to gun violence and lost touch with his family and support network. John's probation officer referred him to the Breaking Barriers programme in May 2016 and since this time he has been housed, maintained that accommodation, secured employment and is now in Phase Two of the CTI model. When I met John, I was struck by two main things; pride and gratitude. John was reflective about his past behaviour, acknowledging his motivation around gaining respect from peers but also showing a genuine change in his approach – becoming a role model for his young niece and gaining his independence, having a job and being successful.

Based on the Breaking Barriers model and international studies, CTI is an effective model of intervention for people in transition when considering accommodation sustainment rate. During my two week visit with the Breaking Barriers



Alex Smith: Brilliant Corners, Los Angeles

Critical Time Intervention: learning from Los Angeles

programme, I found their caseload to be less complex than people we are working with through FLN&G and I was concerned that there would be difficulties applying this to the UK; however, I have since talked to Dan Herman from the Centre for the Advancement of Critical Time Intervention and it is clear that the model does work for the most complex people.

Applying learning in England

In addition to initial concerns about the complexity of caseload from the Breaking Barriers programme, I am also very aware of the cultural differences between the US and UK. For example, we have very different welfare support and health care systems and this has a bearing on the way programmes are designed and delivered, as well as how beneficiaries engage with such programmes. As there are fewer universal support services such as access to Housing Benefit, statutory housing duties or the NHS, there is a much greater need for people to provide for themselves in the US – to pay their own rent and have insurance for health care costs. This shift in responsibility has an impact on engagement and prioritisation. Almost all of the beneficiaries I met in LA were working or desperately wanted to work, in comparison zero FLN&G beneficiaries currently have employment; it is still a long-term goal.

The FLN&G programme is supporting some of the most chaotic and complex individuals across the area, with over 90% of the caseload experiencing difficulties around mental health, substance use and offending. However, at the point of referral we see an average of 57% of people experiencing homelessness – it is by far our lowest recorded support need. The people we work with are often housed, so the problem isn't necessarily finding a bed, it's finding the right bed.

We recently conducted research into a sub-set of FLN&G clients focused on those who have been in prison. This group consists of 50 people, 100% of who have mental health needs and 71% had different accommodation on release than they had prior to incarceration, with 41% released to No Fixed Abode and a reoffending rate of 42%. Learning from the FLN&G programme shows that there are clear issues with our prison release strategies, with vulnerable complex people not receiving the support or continuity of care they require to sustain accommodation and stability within the community setting.

The Critical Time Intervention model could be piloted in the transition of FLN&G clients from prison into the community – this proposal has been explored with the FLN&G Strategic Reference Group and there is wide acknowledgement that a new model is needed to create better, more sustainable transition from prison to the community for those with complex needs. A Task and Finish Group is being set up to take this forward. For me, this pilot would look a little different to Breaking Barrier's CTI model, with the focus being on transition from prison to community, phases across the traditional 9-month period and a focus on the network of support needed for long-term sustainability, without employment as a key outcome.

Conclusion

Los Angeles could not feel any more different to the North East of England. Our population is a fraction of the size, as is the scale of homelessness, with relatively small numbers of people sleeping rough across Newcastle and Gateshead. In Newcastle, we have the following accommodation options:

- 135 units of crisis accommodation
- 60 units of Housing First

- 529 units of supported accommodation
- 730 people receiving floating tenancy support.

Despite this level of investment, there are still people cycling around the health, social care and criminal justice systems, unable to engage, sustain and progress with the support being offered. We need a fresh look at what and how we offer services to the most complex individuals.

Critical Time Intervention could offer a new approach to people with multiple complex needs who experience multiple transitions through various systems with constant change and inconsistency. We continually see that our support systems demand the most from those with complex needs, with the onus of engagement on the person rather than the system. CTI takes a fresh look at this, with a time-limited focused and phased approach to mobilising the system of support to work for the individual before, during and after transition, to make engagement and progress possible and sustainable.

Although there are systemic and cultural differences between LA and Newcastle, the US and UK, there are clear similarities: we all need a safe place to live, good quality connections and something that helps us rise in the morning and go forward with our lives. In short, we are all human. Critical Time Intervention has not yet been trialled extensively in the UK and I am keen that the learning I have gained through this Exchange will allow us to further explore the model for the UK, to help us move toward ending homelessness.

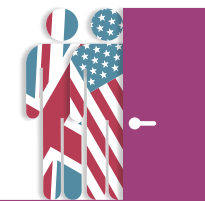
Notes

1. www.bbc.co.uk/news/world-us-canada-40115541 (1 June 2017)
2. www.criticaltime.org/cti-model/ (accessed 29 June 2017)
3. www.evidencebasedprograms.org/1366-2/critical-time-intervention-top-tier (29 June 2017)

Michael Corbishley

Critical Time Intervention: learning from New York





Michael Corbishley: CUCS, New York

Critical Time Intervention: learning from New York

Single Homeless Project (SHP) is a London-wide charity working to prevent homelessness and help vulnerable and socially excluded people to transform their lives. Within SHP, and across the sector, one of the main challenges we face is the cyclical nature of homelessness. While SHP enjoys a high level of success in rehousing homeless households and helping our clients sustain their tenancies, in my role as a Service Manager I was keen to explore how the Critical Time Intervention (CTI) model could complement existing provision. I regularly see clients who have returned to the service after completing a positive move on or those who are fearful of having their case closed once their support plan has been completed, and CTI seemed to be a potential solution.

CTI is a casework approach aimed at supporting vulnerable households for a defined period of time, specifically targeted at periods of transition. While the CTI model was originally focused on supporting those with high support mental health needs, academic papers cite its success with other homeless population groups. CTI is recognised by the Coalition for Evidence Based Practice in the US as a 'Top Tier' intervention and is in use across the USA, in Europe and in parts of South America.¹

The definitive nature and time-limited aspect of the CTI model is what really caught my attention, as it has the potential to reduce time spent in service by clients, offer realistic waiting times for prospective clients, and help meet the growing demands of local commissioners. I was keen to identify whether the success reported in previous studies could be replicated, both with alternative client groups and also in collaboration with existing support approaches. I had three core learning objectives for the Exchange:

- What are the key components that make the CTI model effective in supporting individuals with complex needs?
- Are the components of the CTI model transferable to different types of transition?
- If applicable to new client groups, can CTI be combined with other approaches, such as the Recovery approach, Psychologically Informed Environments and Housing First to achieve higher rates of engagement, sustainability and outcomes, especially in relation to health and employment?

Centre for Urban Community Services (CUCS)

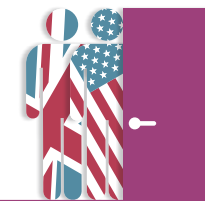
I was placed with the Centre for Urban Community Services (CUCS), a social service provider delivering both residential and community-based support services across New York City. CUCS are responsible for a number of programmes including the delivery of two shelters, several supportive housing sites, an outreach service in upper Manhattan and community-based services across the city. CUCS also deliver training to professionals across the US, including the CTI model. CUCS operate one programme utilising a CTI approach, Home to Stay, which supports families from the shelter system into independent accommodation. This service formed the basis of my experience of CTI in action, supplemented by time spent at the Centre for the Advancement of CTI within Hunter College, Manhattan. My placement in New York was apt as there are a number of similarities between London and New York when it comes to the housing market and the challenges facing the homeless population. There are also a number of differences.

Contrasting US and UK contexts

In London, local authorities act as a gatekeeper to most housing resources, with eligibility for assistance determined by the outcome of a homelessness application. If rejected, the private rented sector is often the applicant's only housing option. The situation in New York is very different. Since the 1980s, New York has operated a 'right to shelter' for anyone who is homeless, meaning they are entitled to accommodation in shelters spread across the city. At present around 60,000 individuals, including families with young children and the elderly, live in the shelter system. Roughly 4,000 people sleep rough on the streets. An understanding of the shelter system and other housing available is crucial to reading my findings in their proper context, bearing in mind that the CTI model was created in response to the specific challenges of the New York shelter system.

Shelters in New York City vary in size, each housing anywhere between 40 and 200 residents nightly in dormitories, separated into single men, single women and family buildings. The shelter system is often derided, both by those working in the sector and those using the service. There is little enforcement of regulation. In many shelters, this leads to poor living conditions and environments where physical violence, drug dealing, substance use, prostitution, theft and sexual assault are common – both from staff and other residents.

The shelter system is meant to act as a temporary base before residents move into other housing. However, the constraints on the housing market (availability and affordability) and the



Michael Corbishley: CUCS, New York

Critical Time Intervention: learning from New York

support needs of those in the system mean that many stay in shelters for years, if not decades. As the shelter system accommodates families, this also means that some have lived their entire life within the shelter system.²

The shelter system influences client behaviour in a number of ways:

- **Isolation:** some clients actively avoid entering the shelter system through fear, therefore separating themselves from support services and sleeping rough.
- **Institutionalisation:** the guarantee and familiarity of the shelter system may reduce consequences of losing other accommodation, because they can return.
- **Increasing barriers:** the harsh environment of many shelters can reinforce negative behaviours, exacerbate existing support needs and create distrust between clients and service providers.

Some shelters, such as those operated by CUCS, are well run and achieve great success, but the general perception of the shelter system is a negative one.

Other forms of housing provision in New York:

- **Transitional housing:** residents live in a supported housing unit but for a temporary period with staff on site 24/7.
- **Supportive housing:** Support staff embedded into residential blocks of flats, staff offices on site, 24/7 security. Tenancies can be for life. Rents are subsidised, with the tenant responsible for 30% of their rent if they earn \$43,000 or less.
- **Low income housing:** similar to social housing, tenancies can be for life and rents are subsidised, with the tenant responsible for 30% of their rent if they earn \$43,000 or less.

- Private rented housing: tenants can get rent subsidies from the state but they vary. It is common for clients to pay 30% of their income towards rent even if they receive a subsidy.

Learning

The CTI model can be broken down as follows:

- A time-limited approach split into phases
- Clients progress through the stages based on the amount of time passed, regardless of their personal position
- Intended to support clients during a period of transition
- Aims to enable clients to develop formal and informal support networks in the community that help sustain their recovery and prevent a return to homelessness.

There is a degree of flexibility in how the CTI model can be implemented, but the original model has three phases split over a nine-month period, each lasting three months. The model can include a fourth phase, known as pre CTI.

Pre CTI – Relationship development

Aimed at developing a relationship with a client before they start a period of transition such as engaging with a client in prison prior to their release. This stage helps develop a relationship between worker and their client and lay the foundation for the rest of the programme.

Phase 1 – Transition period

Beginning once the client starts their transition (i.e. move from a hostel to their own flat), it includes intensive support to assess the client's existing resources. This phase includes a

high level of contact, ideally face-to-face, and going with the client to key appointments. Clients are helped to select and work on a maximum of three core goals. New providers are introduced in this stage with the worker present and ready to act as both an advocate and mediator.

Phase 2 – Test and adjust

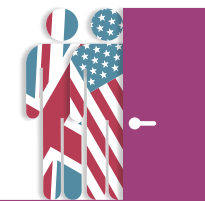
Focusing on testing the support network put in place during phase one and making adjustments where needed to ensure it works to the clients benefit. The worker encourages clients to solve problems for themselves, while acting as a source of reassurance and guidance where needed. The worker also engages with the client's support network to ensure all parties involved are aware of the client's needs, and that they will be withdrawing support after phase three, while mediating any problems that arise.

Phase 3 – Transfer of care

Overseeing the transfer of responsibility to community resources that will provide the ongoing support to the client. Termination of phase three is not abrupt, rather it should seem natural, given the slow withdrawal of support from the worker over the three phases. The worker's main priority in phase three is to ensure community support providers are in regular contact with each other and the client. Ideally a collective meeting (including the client) takes place one month prior to case closure.

Findings

As mentioned above, my Exchange was focused on CUCS' Home to Stay programme and time with the Centre for the



Michael Corbishley: CUCS, New York

Critical Time Intervention: learning from New York

Advancement of CTI. The Home to Stay programme was winding down due to a cut in its funding, which meant there was a reduced staff team and a limited number of cases still active. While this was unfortunate in terms of exposure to the model, it also proved beneficial in that the service had been comprehensively assessed and I was given a final dataset to assist my research into CTI.

Is CTI effective?

The Centre for the Advancement of CTI has a range of published papers outlining the efficacy of CTI in supporting vulnerable adults in periods of transition. Many of these papers include controlled study groups and were completed over periods of time lasting up to two years. While this evidence base is indicative of the CTI model's success, the Home to Stay programme provided an opportunity to see what the model's impact looks like on the ground.

Home to Stay started off as a pilot project working with around 40 families in the shelter system who were eligible for the LINC II rental subsidy. The service was designed to move these families into their own homes and support them to sustain their tenancies. Following the success of the pilot, the programme was expanded across the entirety of New York's shelter system for all families eligible for the LINC II subsidy.

The programme ran for seven years in total and 626 families were referred. 503 families were enrolled, with 351 moving on to their own accommodation. 152 families remained in the shelter system at the time the service was closing.

The discrepancy between the referral and enrolment rate was largely linked to families losing their entitlement to LINC II

after being referred, rendering them ineligible for the service. Of all families enrolled on the CTI programme, the service reported a 70% move on success rate. Of those families who moved on, there was a 99% tenancy sustainment rate when the service was closing. The main barrier for the 152 families that remained in shelters was the lack of market availability in the private market, especially for those reliant on the voucher system (landlords dislike the system, as vouchers can be made redundant according to the wishes of whoever holds political office).

Overall, the use of the CTI model within the Home to Stay service can be said to be effective. The 70% success rate is similar to the 66% improved success rate referenced in many of the publications listed on the Centre for the Advancement of CTIs website.

Barriers and challenges

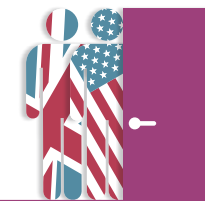
There were a number of barriers experienced by the Home to Stay team. Home to Stay adopted the classic CTI model of three phases split over nine months, with phase one starting at the point of referral. However, as housing was not always readily available (often a wait of several months), some families were making their transition in phases two or three, which severely limited the time left to embed the families' new support networks. Home to Stay ended up adapting their model so that phase one could be as long as 9 months, with phases two and three remaining as three month segments. Home to Stay also reported problems in sourcing new support services once families had moved due to a lack of consistency in local support services across the city. This led to a time extension for 25% families in the service as they required longer support with tenancy sustainment.

Both of these barriers call into question the effectiveness of CTI in its original form. Dan Herman from the Centre for the Advancement of CTI was keen to stress that the CTI model can be adapted, but that retaining fidelity to the outlined approach is vital. The Centre, alongside CUCS, have designed fidelity guidance (accessible on their website) to help organisations retain their commitment to the CTI model.³ Either way, it is clear that the availability of housing and local support services can place a significant strain on the CTI model's time-limited nature. The lack of these resources in New York placed a strain on staff contact time, as they were sourcing accommodation and community support, instead of delivering direct interventions. This does not seem to have impacted on the service's outcomes, but was clearly an area of frustration for staff. In addition, the service experienced typical challenges of client engagement, partnership work and seemingly obstructive state agencies.

Key Components of CTI

Staff recognised key components which aid the success of CTI. A core part of CTI is its narrow focus of support, with the typical support plan limited to three areas at any one time. Within Home to Stay, the service goals focused on Income, Housing and Tenancy Sustainment, meaning that staff were confident delivering a core package of support. Group workshops in the pre CTI stage provided a foundation in these areas.

The structure of the phases also meant that staff and clients were clear on how support plans would progress, the level of intervention that would be delivered and, typically, when support would draw to a close. Not only did this reduce clients' anxiety about case closure, but it also allowed staff members to plan and organise their time more effectively.



Michael Corbishley: CUCS, New York

Critical Time Intervention: learning from New York

Crucially, the success of the CTI model depends largely on the skills, knowledge and commitment of staff. CTI requires staff to be skilled in three core approaches:

- A harm reduction approach
- Knowledge of the cycles of change
- Use of Motivational Interviewing.

James Kennedy, one of the leading trainers in the CTI model, felt that without this base knowledge staff would struggle to guide their clients effectively through the phases of CTI and towards a successful outcome.

Does CTI work with different types of transition?

It is clear that CTI has been used and proven to be effective in supporting a range of client groups going through a period of transition. This transition is often from some form of institution into the community, such as a homeless shelter to a flat, a psychiatric ward to a supported living project, or from a prison to a new home. However, the ideas behind the CTI model of time-limited and focused support can be seen as universally applicable to other transitions, such as moves into employment, education or other structured activities. The components that make CTI a success could also be applied with the same client groups in other settings. With that in mind, the time-limited nature of CTI may restrict its applicability to clients who are street homeless, given the time it may take to engage this group or source the relevant documentation and appropriate accommodation. Unlike Housing First, where support has no time limit, CTI doesn't offer that level of reassurance. While CTI's efficacy is clear

when taking clients from an institution, it is unclear that it would be as effective when working with a street homeless population.

CTI and other approaches

CTI relies on the utilisation of other support approaches, such as the Harm Reduction Approach, and psychosocial interventions including Motivational Interviewing. There is nothing to suggest that CTI would not work well with other approaches such as the Recovery Approach, Psychologically Informed Environments or Trauma Informed Care. If anything, the more skilled and knowledgeable staff are, unsurprisingly, the more effective it seems they will be in delivering a CTI model.

With this in mind, my experience of CTI with Home to Stay suggest that, while it bears similarities with the Housing First model, the two approaches have significant differences. In both cases, clients do not need to be deemed 'ready' before moving into accommodation, but the time-limited nature of CTI poses as a sharp contrast to the open-ended nature of Housing First. As my learning from Home to Stay shows, some clients struggle with support available on a fixed time frame, but for CTI an end point must be set.

CTI also has the potential to be used in employment. While moving from an institution to your own home is a huge transition, and one which many clients find unsettling, the move into work can be just as big. The effectiveness of CTI in supporting clients in periods of transition is clear and it would be of interest to see the model applied not only within housing but to education, training and employment.

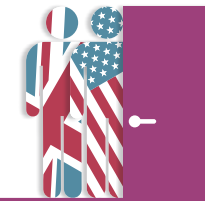
Applying learning in England

CTI is proven to be more effective in supporting clients in a period of transition than typical casework approaches. The cyclical nature of homelessness is a huge challenge in the UK so any model that can help tackle it must surely be welcomed, both by professionals and those in receipt of services. However, before the model can be deemed the success it is in the US, it must be trialled and evaluated on a larger scale here in the UK.

The 2017 Exchange has been a fantastic platform for trying to make this happen. Two participants this year (myself and Alex Smith), coming from opposite ends of the UK, have explored the CTI model. Both Alex and I have joined the international CTI network via the Centre for the Advancement of CTI and are connected with professionals in the US, Europe and South America. We delivered an initial CTI workshop at Homeless Link's national conference in July 2017. Alex and I are in the process of setting up a UK CTI network so that we can continue to share best practice and knowledge around the model.

The effectiveness of CTI is impressive and, within SHP, we have started to look at how a CTI model could complement our existing services in London. With a service model in mind, we are approaching potential funders with a view to launch in 2018. In SHP, we are especially keen to explore the use of a CTI model in supporting people not only to transition into housing but also into structured activity such as work.

I believe that, through the creation of a UK Critical Time Intervention network, a strong evidence base for the model



Michael Corbishley: CUCS, New York

Critical Time Intervention: learning from New York

can be created. This will require the support of Homeless Link and the Centre for the Advancement of CTI, led by Alex and me, as we continue to champion our learning within the sector.

Conclusion

Critical Time Intervention, like any support model, has its challenges and barriers. Most notably, the time-limited nature and phased approach are a significant shift away from standard casework approaches. The almost regimented nature of the CTI model can make it seem unlikely to succeed. Yet the CTI model's results in practice have shown it to significantly increase client's chances of sustained success following a transition. It is clear that CTI is not suited to every client group or to clients in every type of vulnerable situation. However, I am convinced that the CTI model has its place with the UK social care sector and can be an effective weapon to combat the rising levels of homelessness we are currently experiencing. Any model that can effectively support long term moves away from support services should be encouraged and I am keen to see how the model works in a UK environment.

Notes

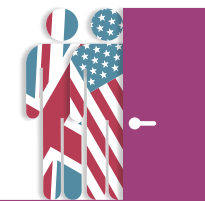
1. www.toptierevidence.org
2. The 'Invisible Child' article series by the New York Times captures this situation in more detail. www.nytimes.com/projects/2013/invisible-child/#/?chap=1
3. www.criticaltime.org

Daniel Auflick

Employment First: homelessness,
social enterprise and opportunity in London

Providence Row
London





Daniel Auflick: Providence Row, London

Employment First: homelessness, social enterprise and opportunity in London

Housing is the solution to ending homelessness. This is evidenced all across the United States; from the 'tiny house' movement in Denver, CO to Bergen County New Jersey, the first community in America to end chronic homelessness.

Erie County and the City of Buffalo in New York State are no exception to this rule. Over five years ago, this geographic area had almost 400 chronically homeless individuals living on the streets ('sleeping rough'), in emergency shelters, or in other places not meant for human habitation such as abandoned homes. As of June 2017, that number has shrunk to single digits, hovering around 5, in large part due to an influx of supportive housing units and a system wide embrace of the housing first service model. More housing has worked and achieved great results, but now what? The US Department of Housing and Urban Development (HUD) is expecting homeless service providers in the US to start addressing other areas of need for this extremely vulnerable population, most notably around increasing earned income and building pipelines to employment.

Unfortunately, there is no large scale infrastructure locally in the Buffalo Niagara region or nationally across the United States that specifically targets this area of work. Individuals with long histories of homelessness and other complex needs are forced to 'adapt or fail' to existing workforce development programs that do not take into account their unique histories. In short, the low demand approach of 'Housing First' does not have a comparative intervention in the employment training field. Much of this gap in services is related to funding regulations that dictate how projects are structured, who they can serve, and what measurements constitute program success.

Social enterprise offers a possible solution. The Social Enterprise Alliance (2017) defines social enterprise as an approach that melds social mission with business strategy. Social enterprise has no one form. It is instead a diverse spectrum of opportunities, with for profit businesses on one end and traditional non-profit charities residing at the other end. The United Kingdom has embraced this approach with open arms, and for good reason. Social enterprise in particular offers the public sector in the UK an investment that in the end saves tax monies, promotes small business, and has a social mission (Richardson, 2013). Unfortunately, within the US this model has not been as attractive to federal, state, and local governments.

The research conducted through my participation in the 2017 Transatlantic Practice Exchange was aimed at exploring what local charities in London are doing at the grassroots level in order to increase access to training and employment opportunities for individuals experiencing homelessness through various social enterprise models. Ultimately, a foundation would be laid for me to answer the question: Is social enterprise a sustainable tool to successfully engage, empower, and employ this particular population?

Supplemental areas of inquiry included:

Reinventing the wheel?

- How do social enterprise oriented programs in the UK compare to the more "traditional" public options related to employment assistance and job training?
- Of these polarities (Social Enterprise vs Traditional), what model is most effective at serving individuals experiencing homelessness and why?

Social enterprise in action

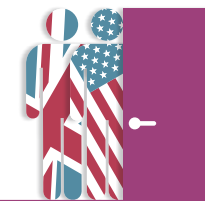
- How are social enterprise programs in the UK structured to cater to specific homeless populations, such as rough sleepers, long term homeless, those with complex needs, etc.?
- What specific types of social enterprise service models are used with this population (i.e. volunteer, work placement, living paid wage, etc.)?
- How are volunteers utilized to support a social enterprise and any additional programming?

The balancing act

- What strategies are used in order to balance business needs with client needs?
- How do social enterprises operating in this sector define success?

Providence Row and RISE Bakery

Most of my brief 10-day stint in London was spent in the East End in the borough of Tower Hamlets. This is an area of contrasts. It is a borough that borders London's core business district and the City of London 'proper'. It is called home by billion dollar transnational corporations like HSBC and JP Morgan. It also claims the title as the poorest borough in London and 6th poorest area in all of England. At least 25% of the population can be categorized as income deprived and 53% of children residing in the borough live in poverty (London Poverty Profile, 2017).



Daniel Auflick: Providence Row, London

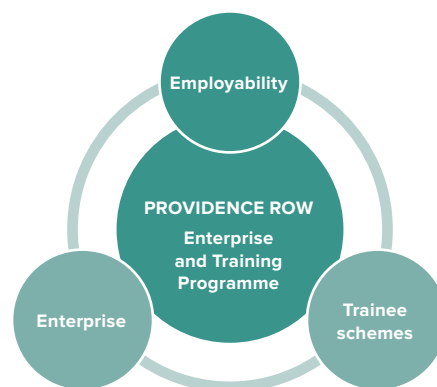
Employment First: homelessness, social enterprise and opportunity in London

It is within this context that Providence Row operates and has done so since 1860. Founded on the shoulders of Father Daniel Gilbert and the Sisters of Mercy, Providence Row was created with the aim of reaching out and serving East London's most vulnerable. Years later, after various transformations, the charity is still steeped in its core Catholic values of compassion, justice, and inclusiveness and provides an entire spectrum of supports to those experiencing homelessness and poverty in Tower Hamlets and beyond.

Providence Row provides everything ranging from hot meals and showers, to more intensive services focused on education enhancement, employment training, substance use and mental health supports, and accommodation (housing) assistance. Last year alone, over 1,300 individuals were welcomed into the day centre, also known as the Dellow, and 841 individuals were provided with advocacy services related to housing and welfare benefits.

The focus of my energy was set on Providence's Enterprise and Training Program. This employment training program is comprised of five core Providence Row staff members and an array of dedicated volunteers. The program itself can be broken down into three key spheres: employability, enterprise, and trainee schemes.

The interconnectedness of the enterprise and training program elements is intentional. It is an attempt to layer services in a way that can provide holistic supports to a diverse set of participants. Ultimately, the program's goal is to create low demand programming that can target and engage those deemed hardest to serve. That could range from street homeless individuals with active substance use to others currently in psychiatric facilities or recently released from prison. This approach to service provision is at the core of all Providence Row programming.



Employability refers to the wide array of workshops and groups offered at Providence Row that focus on building individual skills related to information technology, budgeting, networking, resumé writing, and interview techniques. In 2016-2017, over 114 individuals attended employability workshops. Trainee schemes range from four to ten week long work experience interventions that engage participants in productive employment activities in the areas of catering, gardening, and baking. Providence Row also operates a client driven social enterprise, Rise Bakery, which works with clients to produce and then sell high quality brownies to customers and business all over London and the UK. Rise Bakery not only generated over £16,500 of income from sales in 2016-2017, but over 80% of Rise participants reported decreased substance use and improved mental well being.

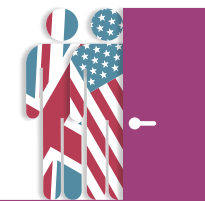
Context, context, context

Upon arriving in London I had an overwhelming feeling of discouragement in my ability to generalize and adapt research

findings from an “American” perspective. I am by no means an expert on homelessness program and policy in the States. This fact was compounded by my overall lack of knowledge around the UK's cultural values and the intricacies of its welfare state. This feeling diminished when I quickly learned that the causes, effects, and solutions to homelessness in the UK had glaring similarities to those same topics in the States. With that being said resounding differences did exist. Those differences were primarily steeped in the UK's history, politics, and governmental structure.

First and foremost, like many countries on the European continent the welfare benefits afforded to citizens in the UK are generous compared to those available for Americans. These benefits are highly centralized through the national government and are primarily divvied out at that level through the Department of Work and Pensions (Spicer, 2017). Although recent cuts to public benefits across the UK and a transition to a Universal Credit system has homeless advocates worried, the fact remains that things such as a national housing benefit, a rental subsidy available to all UK citizens, exist in order to prevent and address homelessness. There is no such national benefit that exists across all 50 states in America.

Public benefits are one practical example of where the UK and US systems differ immensely. Another more abstract and culturally based concept involves public attitudes and values related to understanding homelessness services and solutions. For instance, the Housing First model reigns supreme across all of America as the most important intervention to assist individuals in exiting homelessness. This logic is based on prioritizing those that are most vulnerable,



Daniel Auflick: Providence Row, London

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making obtaining housing priority number one, and above all else respecting an individual's inherent right to remain on the streets rough sleeping. In contrast, London and elsewhere in the UK have channeled resources into the No Second Night Out model. This approach stresses the realistic harms associated with rough sleeping, and focuses on immediately engaging an individual new to the streets in a 'single service offer' to get off the street and start exploring accommodation or reconnection options available to them.

Neither systemic approach is right or wrong. They are in many ways working on addressing the same goal: rapidly decreasing rough sleeping and street homelessness. What becomes apparent is that a country's values and beliefs play a strong role in how solutions to social problems are planned, constructed and executed through direct service programming.

Learning

My goals of studying social enterprises throughout London that are serving homeless and at risk populations meant more than just exposure to Providence Row and RISE Bakery. However, my first days were spent listening, watching, and learning the various pieces of the homeless sector puzzle in the UK through the Providence Row lens.

Much of my baseline knowledge came through interactions with the staff and management of Providence Row's Advice and Support team. It is this group of individuals who are on the frontline providing case management services to individuals at risk of or experiencing homelessness. They focus on

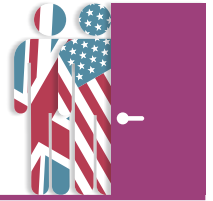
advocating for benefits, supporting reconnections for those that are from outside Tower Hamlets or London, and assisting with potential accommodation options. It immediately became apparent that there are multiple degrees of difference in the US definition of homeless and the definition used in the UK. Various criteria must be met by an individual for a local authority (similar to a US county) to deem them 'statutory' homeless and provide accommodation assistance. For instance, one such criteria, includes identifying if the individual falls under a 'Priority Need Group.' Those with priority need include families, pregnant women, youth aged between 16-17, and individuals fleeing or experiencing domestic violence. Other factors include assessing if an individual is 'unintentionally' homeless. Single individuals, many with various disabling conditions, are not immediately prioritized by local authorities under these guidelines.

This large gap in public housing for single homeless adults, also known as "non-statutory" homeless, means other resources around employment and training assistance become important tools to survive, thrive, and exit homelessness. Jobcentre Plus is the government sponsored entity which is responsible for assisting individuals on benefits in searching for and obtaining employment. In the UK individuals who are unemployed have an array of benefit options available to them. That includes a Job Seekers Allowance (JSA) for those that are work ready, and the Employment and Support Allowance (ESA) tailored to folks who wish to work but are not ready due to various barriers. The caveat of the scheme is that individuals must abide by an agreement to look for work. In theory that agreement can be flexible and based on client needs. However in practice, homelessness is a topic generally downplayed, ignored or absent from Jobcentre

Plus assessments. This one size fits all approach results in poor employment outcomes for individuals experiencing homelessness and can eventually result in sanctions, which is a temporary cancellation of benefits.

This overall lack of responsive mainstream employment-related interventions for those who are homeless points to the need for agencies like Providence Row and others to fill this niche in creative and flexible ways. Charities have a unique ability to not just understand the homeless experience, but many of them are able to provide wrap around supports for participants in their programs in relation to health, wellness, and housing. The same cannot be said for Jobcentre Plus. Social enterprise is one avenue where this is happening, real time at Providence Row with Rise Bakery and at other organizations throughout London.

Speaking of other organizations and charities, my journey took me on a whirlwind tour of London's social enterprise scene. An array of coffee shops, cafés, retail, and furniture shops were left in my wake. All were classified as social enterprises and some of them were specific to individuals experiencing homelessness, while others targeted those in recovery from substance use, individuals with developmental disabilities, and low income housing tenants. Those enterprises that have stood the test of time demonstrated that the supports, structure, and goals of the enterprise must be in line with the population being served. For instance, Café from Crisis in the heart of East London serves up tasty high quality breakfast, lunch, and caffeinated beverages to the public. As a brick and mortar operation with a heavy dose of customer service for staff members and trainees, homeless individuals recruited into the Crisis program must be at a high level of stability in



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order to succeed and for the entire operation to be successful. Paper & Cup, another social enterprise café that employs individuals in recovery from substance use, must be intentional about targeting participants who are ready and able to take on the type of responsibility associated with a restaurant style business. In contrast, Rise Bakery by Providence Row, which specializes in online sales and bulk orders delivered to local businesses, lacks the constraints of fixed hours and intimate customer interaction. As a result, Rise is able to serve individuals who are at multiples stages of readiness for employment. That includes those that are rough sleeping on the streets, and others who are actively using or experiencing heightened mental health symptoms.

Who is being served by the enterprise matters, but equally as important is how they are being served. Restoration Station, a vintage furniture social enterprise located in the heart of Shoreditch, primarily provides trainees in their programs with experience, skills, and training around woodworking, upholstery, and furniture repair. Trainees are not paid any wage, and instead a focus is put on the more intangible aspects of participation, which for some could mean a safe and positive place that encourages abstinence from drugs or alcohol. Providence and Rise Bakery take a similar volunteer focused approach. Trainees are not paid, which assists in allocating more resources to overall program infrastructure. This type of structure also safeguards against boundary confusion and dual relationships which easily occur when a client is also an employee. Wage paying enterprises include Café by Crisis and Old Spike, a coffee roasting enterprise located in South London. The goal of these two programs in particular is to invest in the individuals they serve by aiming to offer real employment options and opportunities. Their

egalitarian structures recognize that profits of the respective enterprises should be reinvested into the drivers of the products; in this case the program trainees and former trainees turned employees.

Defining success for a social enterprise is similar to predicting the weather. The answer you get depends on who you ask and when you ask them. This theme ran consistently throughout many London based social enterprises. Program success for one enterprise could mean failure for another. But that in essence is the beauty of social enterprise. Measurement of success rests in the eye of the beholder. Rise Bakery for example primarily measures success through profit generation, number of individuals participating in the Bakery trainee scheme, and measureable self reported decreases in substance use by trainees. Crisis Café also measures profit; however it is a less important measure, and instead the primary focus is on the number of employed trainees the program serves in the fiscal year.

Applying learning in the US

Social enterprise is no panacea to ending homelessness or alleviating all barriers to employment faced by those experiencing it. But it does represent a useful tool to supplement existing workforce development programming in the US and beyond. Local communities, homeless service organizations, and policy makers in Washington D.C. should consider the following steps.

- Advocate with county and state social service agencies in order to include homelessness as an area of inquiry when individuals present to seek public benefit assistance.

- Push for more integration and collaboration of local homeless services agencies with public benefit and welfare systems as it relates to employment assistance and training.
- Promote and recognize the intangible benefits of low barrier programs related to employment
- HUD and local COCs should be devoting more time and funding to stabilization services (including employment), not just housing services.
- Provide more public funding dollars to facilitate social enterprise scholarship in the United States as it relates to employing hard to serve populations.

Conclusions

The inherent value of work was at the core of this research and my entire transatlantic adventure to London. Instead of being used as a tool to disenfranchise, segregate, and divide, employment should be empowering. Social enterprise embodies this spirit and is able to act as the vehicle for everyone in society to exercise their inherent right to work. It also creates an environment for organizations and communities throughout the US, but specifically in Buffalo, to create programming that is self-sustainable, flexible, and responds to the immediate employment needs of those who are experiencing or have experienced homelessness. Did I also mention it harnesses the free market ideals of capitalism? Sounds like a win-win to me.

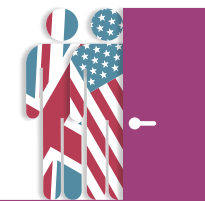
An aerial photograph of Bristol, England, showing a dense urban landscape with a mix of historic stone buildings and modern structures. The city is built on a hillside, with a prominent church spire visible in the center. The background shows a vast residential area with many small houses.

Isabel Kindberg

Building stable social connections in the lives of young people experiencing homelessness

1625
Independent People
Bristol





Isabel Kindberg: 1625 Independent People, Bristol

Building stable social connections in the lives of young people experiencing homelessness

The population of young people who are homeless in Los Angeles County as of June 1, 2017 is estimated by a recent census at 6,000, a number that jumped 61% from 2016.¹ This can be attributed to a rise in homelessness in Los Angeles and, also, to growing awareness and coordination amongst providers around counting strategies, but it is still vastly under representative of the scope of youth homelessness in this city. Young people experience homelessness for a variety of reasons but, in large part, have some history with involvement in broad social systems such as foster care or the justice system. Individuals and specifically men of color are overrepresented in the population of young people who are homeless as these systems are often skewed to target low income minority populations. Because institutional racism and classism in the US are so deeply embedded in our history, culture and, consequently, in these systems, young people that come from marginalized communities in Los Angeles are often reared in deeply traumatic environments in which skills such as trust and self-worth do not have space to develop.

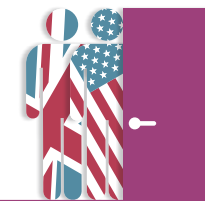
My Friend's Place, along with a group of youth serving organizations that belong to the Hollywood Homeless Youth Partnership (HHYP) have explored the role of social support, or stable social connections, in relation to our overall goal which is to support the young people we serve in exiting homelessness permanently. And, through the HHYP's work on housing, it has become clear that providing a place to live on it's own is not sufficient in breaking the cycle of homelessness. While it has been determined that building permanent social connections is deeply important for youth to thrive in housing, the question remains as to the intervention or the tool providers can use to support youth in creating these connections.

Learning objectives

Through my exchange at 1625 Independent People (1625ip) I explored the ways in which the organization and the homeless services system in the city of Bristol help to foster permanent social connections in the lives of young people experiencing homelessness. I also examined the relationship between the youth-specific supportive housing system in Bristol – represented by 1625ip's continuum of housing accommodations – and programming throughout the organization to better understand ways in which homeless providers in Los Angeles can learn to build an environment in which to foster social connections. Due to the fact that this area of study, relationships, is hard to quantify and not tied directly to specific policies on a macro scale, I chose to focus on programming and theoretical structures that 1625ip has put in place to provide space for relationships to foster and grow in the lives of young people. The peer educator and mentorship programming at 1625ip, as well as the presence of the Restorative Approaches framework within the hostel/housing environment address different areas key to building relationships. These programs allow for young people to grow experience in competency building and self-worth while also acknowledging the difficulties in emotional regulation and interpersonal dynamics that arise from childhood trauma. Because of the presence of this trauma, we, as providers, often become centric within a young person's support system. This presents a problem in that boundaries within a provider/youth relationship are such that a providers are not always available. Also, youth services are often in place until the age of 25 at which time a young person 'ages out'. This aging out process, in turn, can bring up previous traumatic losses and rejection as many young people who reach this point have few social connections to fall back on.

Cultural Context: UK vs. US – similarities and differences

In looking at the differences between homeless services in the UK and the US, there seems to be much overlap in the system framework between homeless services and housing provision in general. However, the difference in scale of the number of homeless individuals living in Bristol and Los Angeles respectively, coupled with what appears to be an overall greater level of acuity and vulnerability in terms of trauma experienced, physical health and mental health amongst the homeless population, and, specifically, the population of homeless young people in Los Angeles, lends itself to what is a very different application of this framework. In speaking with homeless services providers and outreach workers at St Mungos in Bristol, I was informed that on any given night there are 100 individuals 'sleeping rough', or sleeping outdoors in a place not meant for human habitation.² Los Angeles, on the other hand, maintains the largest population of unsheltered homeless individuals in the United States. According to The Los Angeles Homeless Services Authority's (LAHSA) 2017 Homeless Count the number of unsheltered homeless individuals was tallied at 42,828 and 3,540 of those individuals are unsheltered young people.³ 73% of total homeless individuals in Los Angeles remain unsheltered and sleeping outdoors, without options for shelter or accommodation.⁴ While it is important to note that the number of unsheltered individuals in Bristol does not represent the number of people experiencing homelessness in general, Bristol, unlike Los Angeles, is able to house, either temporarily or on a longer term basis, a significant portion of its homeless population. This ability to provide housing, even on a short term basis, is



Isabel Kindberg: 1625 Independent People, Bristol

Building stable social connections in the lives of young people experiencing homelessness

notable in addressing not only the differences between the systems in place for homeless young people in the UK and US but also in addressing the question of how to build stable social connections in young people's lives. Young people who have access to some form of housing accommodation when experiencing homelessness are then less likely to experience the severity of the far reaching and serious trauma that living on the streets, unsheltered, inevitably brings. Having access to showers and bathrooms, getting regular sleep in a single location, having to adhere to some kind of schedule or routine, and, most significantly, having clearer pathways through which to build relationships with caring adults, are ways in which we know that the effects of childhood trauma can be reduced. Because Los Angeles is unable to shelter such a large portion of young people experiencing homeless, they are exposed to different and, it seems, more severe trauma for longer periods of time, which result in greater impact on their ability to move out of homelessness.

Also, in the UK there appears to be a greater sense of community buy-in, notably on the part of the police force. The UK College of Policing⁵ specifically addresses ways to respond to 'vulnerable people' by taking a person in environment approach that considers 'personal factors, situational factors and risk for harm' and asks that police coordinate with 'partner organizations' to reduce environmental risks of harm for vulnerable people. This is significant in understanding the cultural differences between the experience of homelessness in the US and UK in that education around vulnerability within the police force in Los Angeles appears to be lacking as evidenced by several highly publicized incidents in which homeless individuals

died during encounters with police. While efforts are being made within LAPD to boost coordination with homeless services and to encourage 'compassion and empathy' toward homeless individuals, the presence of heavy handed tactics, brutality and criminalization of people who are vulnerable and homeless, still persists.⁶ These tactics are also highly present in the treatment by police in the US of people of color who, as a result of an extensive history of institutionalized racism, make up the greatest portion of the homeless population. This lends itself to a strong sense of fear and alienation for homeless young people tied to the street-based environment in which they exist every day. While there is no doubt that racism by police and in general is also present in the UK, there appear to be differences in the ways in which homeless young people are afforded opportunities to seek help and support from community members and leaders in each respective country. The possibility of a young person of color experiencing homelessness in the US and encountering danger when interacting with police reduces the likelihood of engagement and creates fewer opportunities for positive experiences with the 'the system' at large. This informs a sense of distrust in general and creates more barriers around building stable and healthy social connections that may support youth in moving out of homelessness.

1625 Independent People

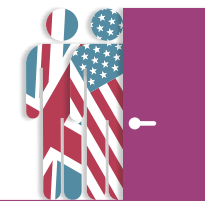
1625 Independent People (1625ip) is an organization in Bristol which aims to help young people in crisis, age 16 to 25, move out of homelessness and toward independence by way of providing supportive services. There are many different programs within 1625ip including both drop-in case

management services, and also programs meant to serve more specific populations. Some of these programs include the Future 4 Me program which serves young people leaving or at-risk of entering the foster care or the justice systems; Future Builders, an employment program for young people at-risk which provides training in the construction industry; Ask Us, a referral and advice service which provides short term case management; and a host of peer leadership and community engagement programming. Also, 1625ip has several housing programs including two hostels, or temporary shelters with on-site supports, as well as housing accommodations in the community which are attached to off-site supportive services. 1625ip uses the Psychologically Informed Environment (PIE) framework as a foundational theoretical approach positioning itself as a 'learning organization' or an organization which provides space for both staff and young people's ideas to be shared and considered. A key foundational aspect of PIE includes the presence of 'reflective practice', or mandatory group supervision for staff, peer supporters and community mentors, in which consultation around interventions as well as acknowledgement of successes and challenges takes place.

Learning

Restorative Approaches

Restorative Approaches is an intervention based on Restorative Justice, a practice used mostly in a legal setting as a way to mediate the relationship and responses between someone who has caused harm and someone who has been harmed. Restorative Approaches, however, can be used in any setting to create a safe space to talk about conflict and



Isabel Kindberg: 1625 Independent People, Bristol

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work toward healing and growth. The 2015-2016 annual report at 1625ip cites the notable success of implementing Restorative Approaches with the young people they serve. The report recognizes the intervention's positive impact on preventing escalation during conflict and building verbal and emotional communication skills. 1625ip uses this technique in myriad environments but, specifically, in their hostels – which appeared to resemble the drop-in center milieu in the US more closely than drop-in services in the UK. Restorative Approaches is based on a set of five core beliefs to be called upon in times of conflict when working toward resolution. They include the agreement that:

- Everyone has a unique perspective and a valued contribution to make;
- Our thoughts influence our feelings and actions;
- Our actions and words affect those around us;
- All our actions are strategies we have chosen to help us meet our needs at the time of the conflict; and
- The individuals affected by the conflict are the best to decide how to move forward in collaboration with each other.

After a conversation is facilitated implementing these core beliefs, a plan is made using the SMART goal template to ensure that the follow-up plan is specific, measurable, achievable, realistic and time-bound.

The use of restorative approaches is innovative in a milieu with young people and can be directly applied to the question of how to help young people build stable social connections. Because young people experiencing homelessness are under a great deal of stress and, grappling with the effects of long term trauma, they often have difficulty utilizing emotional

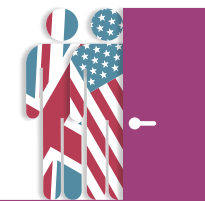
regulation techniques when they are triggered. This may result in verbally aggressive or violent behavior that, in many cases, leads to a young person being asked to leave the milieu on a temporary or, in some cases, permanent basis, further alienating the young person from both peer and provider supports while also further reinforcing the often present core belief that a person is unheard and unloved. This scenario often leaves young people without the opportunity to both give and receive empathy from a person with whom one is experiencing conflict and without the space for a third party to bear witness to the discomfort and distress of residual trauma. Also, encouraging Restorative Approaches and teaching communication skills to young people in this environment addresses what the field now knows to be the neurological effects of negative attachment experiences in early childhood. This intervention normalizes the presence of rupture in relationships and allows for healing and trust to be built out of the conflict which then helps to close the neurological space left open and vulnerable by these negative experiences. Restorative Approaches, then, teaches the skills to help empower young people to repair their own relationships rather than to rely on those in positions of authority to dole out punishments for behavior. Young people can then utilize the communication skills taught in Restorative Approaches to both help maintain existing and also build new relationships in their lives, rather than perpetually living in that rupture zone without a network of social support.

Peer education, mentoring, participation programming

At 1625ip there are many different programs which give young people access to relational opportunities that exist outside of the provider/client dyad. I found this kind of programming

particularly important in terms of fostering social connections as young people in these contexts can access people outside of the homeless services world and form relationships that may extend beyond the confines and boundaries that are intrinsically part of the provider role. Essentially, young people can meet individuals who are not being paid to provide support but, rather, are invested in their well-being for reasons that are only personal. This includes adult community members, peers and former 'service users' who act as mentors, and also peers who share similar interests. 1625ip's mentoring programming includes extensive training around boundaries, therapeutic techniques, and active listening. All mentors, peer or otherwise, work within the PIE framework, as do paid staff. Mentors are asked to be involved in the same monthly reflective practice, or group supervision and to remain engaged and connected to the community of supporters that are similarly involved with the young people.⁷

This feature of the mentorship programming is particularly interesting in terms of Peer Education as many of the individuals who participate in this program are not very far removed from their own experience of homelessness. By involving Peer Educators in the process of caring for young people in crisis, there is an opportunity to prevent their further recidivism back into homelessness. They build their own competencies and self-confidence while gaining experience working in a professional field. It is also a way for young people who have utilized services in the past and may have 'aged out of services' at this point to stay involved with the organization and maintain those positive attachments. Involvement in Peer Education seems to support the possibility of accessing post-traumatic growth. Peer Education and



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involvement in reflective practice also takes place in time for young people who have experienced challenging life events to discuss their own emotions and countertransference that may arise from the work, giving therapeutic space to connect with others while processing these feelings.

1625ip also maintains a broad range of off-site group activities in the community in which staff and volunteers co-lead workshops. The most popular is a soccer workshop that takes place down the street from 1625ip's headquarters at a local recreation center. This is meant to support young people in competency building activities, but do so in the community space. The 1625ip 2015-2016 Annual Report cites participation workshops specializing in upcycling furniture, cooking on a budget, and life-skills and tenancy, and emphasizes the success of the Youth Board which works with 1625ip staff to provide feedback and input around the agency's services.⁸

While youth services in Los Angeles are also highly aware of the benefits that participation activities and workshops can provide, I found it notable that a significant portion of these activities take place outside of agency walls, in partnership with other youth providers in Bristol. This extensive field-based group work seems to provide the opportunity for young people to build connections closer to the community in which they live or exist on a more regular basis. Often in Los Angeles, we ask young people to participate in activities on-site at organizations themselves, which fosters a relationship to the provider's place, location and community. This is very helpful in terms of engaging young people experiencing homelessness when they are in crisis as on site activities create opportunities to build relationships within the organization and connect

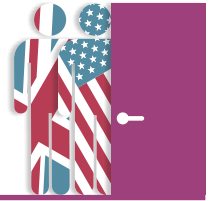
young people to important resources, like housing for instance. However, once a young person actually obtains housing, they frequently have few social connections in the area where they live. This is, in part, due to a shortage of affordable housing in Los Angeles and, again, a history of marginalization of low income individuals and people of color. However, by moving away from the agency as the central venue for participation activities, and creating more space for offsite activities – especially in the communities in which many young people find housing such as South Los Angeles – the young people are afforded the opportunity to, perhaps, connect with volunteers or mentors closer to the reality of their own lives and build connections outside of the provider's immediate scope. I recognize that for many youth-serving organizations in Los Angeles, the infrastructure in terms of staffing and time needed to provide this kind of field-based work is not currently in place. However, there seems to be an opportunity to begin discussing how these sorts of community-based activities may be able to support young people experiencing homelessness in building stable relationships outside of the street-based communities and homeless services that so often act as the main line toward social connection in the lives of the young people we serve.

Applying learning in the US

The Hollywood Homeless Youth Partnership's innovations and best practices work group, throughout the last year, has been conducting research around permanent social connections, and gathering information from young people and the provider community around how to best support youth in building these connections. With this goal in mind, I plan to share my

research and findings with the seven HHYP agencies across Los Angeles and will also be presenting on the information I learned within my own agency. I will be working with the leadership team at My Friend's Place to understand the best way to continue contributing to the learning around permanent social connections and encouraging innovative thinking around this topic throughout the youth-serving community in Los Angeles.

It seems, as well, that the PIE framework, and the need for a supportive environment and reflective practice for all staff in a youth serving agency promotes the presence of self-awareness and healthy boundaries which inform our relationships with the young people. Due to the intensity and scale of homelessness in Los Angeles and the US as a whole, there is often a gap in the provision of appropriate support given to providers, which can translate to diminished empathy, compromised judgement and all around burn out. The effects of this lack of support are transferred to the young people, which perpetuates a cycle of harmful relational experiences. Providing deliberate and routine processing space for staff to discuss their work seems to allow for positive modeling of healthy relationships.



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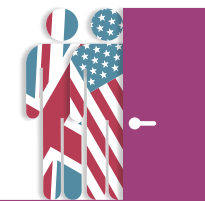
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Nicole Bramstedt

Engaging the private rental sector to address homelessness

Crisis
Edinburgh
and London





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Engaging the private rental sector to address homelessness

Nicole Bramstedt is the Director of Policy at Urban Pathways, a 42-year-old homeless services and supportive housing nonprofit serving homeless adults in the New York City metropolitan area.

Background

Two homeless shelter statistics shed light on single adult homelessness in New York City. First is the average length of a City shelter stay. From Fiscal Year 1999 (FY99) to FY16, a single adult's length of stay more than tripled, from 108 days¹ to 355 days.² Second is the percentage of single adults returning to shelter within a year of permanent housing placement. From FY01 (17.2%)³ to FY16 (18.9%),⁴ nearly one in five adults returned to shelter within a year. This is nearly nine times the percentage for families with children.

Single adults are thus increasingly bottlenecking in shelters, and when they are housed, they too often return to shelter within a year. This implies a lack of permanent housing exit options. It also indicates homeless adults struggle to maintain their tenancies, possibly due to unsuitable housing, unaffordable rent or insufficient aftercare while housed.

To some extent, better exit options and sustained tenancies are on the horizon. Over the next 15 years, New York State and City governments will create 35,000 units of much needed supportive housing. This alone will not address these persistent issues though. Not all homeless adults will need supportive housing, nor will they be eligible.

Given the lack of affordable housing and the need for more exit options, what about better engaging an existing housing supply – the private rental sector (PRS) – so it better fits the purpose

of housing homeless individuals? While the PRS often causes homelessness, it may be part of the solution, particularly in the low-vacancy, high cost market of New York City.

I believe our best policies arise when two things occur. First is when we proactively dialogue with stakeholders, addressing concerns and stigmas. Second is the coming together of stakeholders. Sometimes they have a common interest, albeit a different reason for the interest. Other times, they have different interests, with those seeking policy change recognizing and addressing this to improve policy.

To my frustration, this has not occurred in New York City homelessness as it should. The City has engaged landlords in addressing homelessness to some extent. It outreaches to landlords about its Living in Communities rental subsidy, offering signing bonuses and security deposits to encourage renting to those with subsidies. It will provide a 2% rent escalator for new scattered-site supportive housing to address landlord concerns about low rents. But more should be done.

Concerns and stigmas about renting to homeless individuals will not disappear. Now is the time to research practices to better utilize the PRS.

One place to look for guidance is the UK. The UK, particularly London, and New York City share similarities regarding homelessness. Homelessness, by each's definition, is increasing – 130% in London and 63% in New York City since 2010. Both provide an inadequate housing benefit for those receiving welfare. New York State's monthly shelter allowance for a single adult on public assistance has been \$215 since 1971. In the UK, those under age 35 typically receive a housing

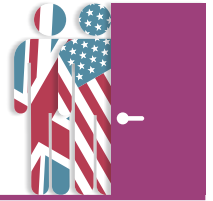
allowance to only cover renting a room in shared housing. Rent increases also far surpass wage growth in both. In New York City, from 2000-14, median rent increased 19% while household income decreased 6.3%.⁵ In England, from 2011-17, rent increases (14.6%) surpassed wage growth (10.4%).⁶ This is heightened in London where rent increases (21.6%) are nearly four times wage growth (6.3%).⁷ Each also has a diminishing supply of social or public housing, obligating using the PRS to house those homeless. In the UK, the social housing waiting list – over 1.8 million households – has increased 81% since 1997.⁸ In New York City, 257,143 families are on the public housing waiting list.⁹

Research questions

To learn how we can engage the PRS to address homelessness, I spent three weeks at Crisis UK. My strategy was two-fold. First, to assess how Crisis identifies landlord concerns. Then, to examine how Crisis works with landlords to house homeless individuals amid these concerns. Three research questions guided me.

- What strategies has the UK developed to understand and build relationships with landlords, before or once homeless individuals are housed?
- What strategies are utilized in the UK to encourage and support landlords to rent apartments at below market rent?
- How does the UK overcome opposition to sourcing housing for Housing First?

Initially my questions included engaging an additional stakeholder – communities. This was too wide in scope. With each day at Crisis, I realized how many layers there are to their PRS work.



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Crisis

Crisis is a 50-year old homeless charity working to end homelessness through services, research and campaigning, and housing. It provides services at 12 sites – Skylight Centers – in England, Wales and Scotland. Skylights engage members – those who take an introductory tour and participate in education, employment, and wellbeing services. Skylights also provide housing services. Housing coaches work with members to find and sustain private rentals. They conduct groups to help members become familiar with housing services, prepare for tenancy and search for properties.

Crisis also provides broader housing assistance to government and organizations working to house homeless individuals in the PRS. Since 1997, Crisis has worked to make the PRS a viable housing option for this population. Its work focuses on funding, supporting and delivering Help-to-Rent projects, which support homeless individuals and landlords to make the PRS a viable housing option. It's within this broader housing work that I spent my Crisis placement, with their Edinburgh and London housing teams.

Findings

Homeless individuals encounter similar barriers to renting in the UK and New York City. These include an unstable rental history, unaffordable rent and a dearth of affordable housing. There are also landlord barriers: refusing to rent to those paying rent with a government program, charging access costs to rent and having biases about renting to homeless individuals.

Crisis uses these barriers as opportunities to engage the PRS so it better fits the purpose of housing homeless individuals. It works to understand landlords' concerns. Then, it works to address them at the individual, housing and advocacy levels.

Understanding landlords' concerns

Crisis works to understand landlords' concerns about renting to homeless individuals. This ensures housing projects and homeless policies address concerns. It also sends a message to landlords that they are a stakeholder, creating an earlier dialogue versus a reactive response to a problem.

Crisis commissioned landlord surveys for its Home – No Less Will Do campaign. In its housing work, Crisis learned landlord attitudes about renting to homeless individuals were a barrier to accessing PRS housing. It commissioned Sheffield University to research landlord attitudes and homeless individuals' landlord experiences, surveying nearly 1,000 landlords and interviewing individuals, landlords and landlord organizations. It found: 82% of surveyed landlords unwilling to rent to homeless individuals due to a perceived greater risk of rent arrears and intensive management demands; when renting to homeless individuals, 18% of surveyed landlords increased the deposit and 16% increased the rent.

Addressing landlords' concerns via pre-tenancy support, tenancy support and advocacy

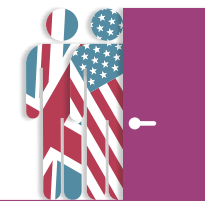
Once Crisis understands landlords' concerns, it develops strategies responsive to their concerns: pre-tenancy and tenancy support for homeless individuals, tenancy support for tenants and landlords, and policy recommendations and homeless advocacy campaigns responsive to concerns.

Pre-tenancy support for homeless individuals

Crisis addresses landlord barriers to renting by working directly with homeless individuals on landlord concerns pre-tenancy and during tenancy. This helps prepare individuals to live on their own and maintain a tenancy. As Crisis' Private Renting Program Manager stated, "what's good for the tenant is good for the landlord."

At London Skylight, potential members attend a housing induction to acquaint them with Crisis' housing services. This two-hour group covers topics including an individual's housing priorities and compromises. For example, one man came into the group set on living in a certain London borough but left understanding he would need to be flexible in his housing search. I was impressed with these early candid conversations to acquaint individuals with the realities of the tight London rental market and the need to adjust housing expectations in light. After housing induction, members attend a Mini Renting Ready workshop. This addresses how to search for housing, the type of housing to search for and the rent one can afford. Post Mini Renting Ready, members work with a housing coach and attend a property searching club. Crisis staff also support tenants during tenancy. This may be offering an accredited Renting Ready course with topics including housing rights, money management and communicating with roommates and landlords. Or it may be housing coaches providing aftercare for up to 12 months after move-in.

Tenancy support enhances exit options and tenancy sustainment. It facilitates the transition to housing, helping individuals address barriers to access it. According to staff at Crisis and other UK providers, landlords like tenancy training and are more inclined to offer tenancies to those who have



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shown commitment to it. It also addresses the informational inequities among individuals unstably housed, equipping them with information they lack to maintain tenancies such as housing rights. A more informed tenant would know the eviction grounds and their right to counsel in New York City housing court, and thus contest an eviction instead of entering shelter.

Support is also provided to homeless individuals moving into permanent shared housing. An example is Scottish provider Trust in Fife's program called Tenancy Share, a transitional housing program helping those under age 35 move into shared housing. Before individuals move to shared housing, the transitional housing program matches them with their shared roommate via a matching assessment, discussions and meetings. Staff also support roommates, pre-tenancy and during tenancy.

Matching attempts to improve a byproduct of the unaffordable housing market for homeless adults: shared rental housing. It prepares individuals for shared housing so they are not blindly moving into it. It also gives tenants a support system during transition to and residence in housing. This enhances tenancy sustainment. From 2013-16, Tenancy Share created 45 shared tenancies with a six-month tenancy sustainment rate of 90%.

Tenancy support to tenants and landlords via help-to-rent projects

Crisis also supports tenants and landlords during tenancy by funding and advising Help-to-Rent projects. Help-to-Rents provide support to landlords and tenants to make the PRS a viable housing option. They support tenants via tenancy training and aftercare to help them overcome barriers to tenancy sustainment. They help landlords by offering selling points that

address their concerns. Projects may provide a deposit guarantee to cover rent arrears or property damage, if landlords view homeless individuals as financially risky. Or projects may provide aftercare and regularly engage with tenants and landlords, if landlords want a named contact to address tenancy issues.

An example is Trust in Fife's Help-to-Rent project, Fife Keyfund. Fife negotiates a one-month written guarantee, instead of a cash deposit, with the landlord who may claim it if there is property damage. Fife maintain regular contact with tenants, including visiting and working with them to save towards the deposit. Staff also help landlords resolve tenancy issues. Results are positive. From 2014-15, Fife Keyfund created 318 tenancies with an average 85% tenancy sustainment rate.¹⁰

Based on my conversations with Crisis staff and providers, tenancy support entices landlords to rent to homeless individuals, even at lower rents. Landlords like the consistent support by reputable providers. According to Trust in Fife staff, landlords buy into Fife Keyfund because they know Fife provides tenancy support. Financial incentives also reduce landlords' perceived risks. According to the Board Chair of the English provider Nomad Opening Doors, landlords respond well to incentives. And due to the support and incentives, landlords return to Help-to-Rents even after leaving to the commercial market, finding Help-to-Rents are easier.

Engaging landlords beyond financial incentives and tenancy support

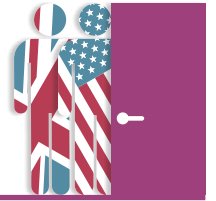
Providers utilize strategies, besides financial incentives and tenancy support, to get landlords to rent to homeless individuals. An example is Glasgow Homeless Network and

its PRS housing first pilot. It taps into its existing landlord relationships to recruit landlords. It also uses data from its housing first social housing pilot to address landlord reservations about homeless individuals being a financial and management risk. These data include a 100% tenancy sustainment rate for the 22 homeless individuals with active substance abuse issues. That no tenants were evicted addresses landlord concerns that renting to homeless individuals is risky. Data also include the low maintenance costs landlords incurred in the prior pilot, which addresses concerns that homeless individuals cause increased property damage.

Advocacy

Crisis recognizes its common interest with landlords in resolving homeless issues and engages them in policy recommendations and advocacy campaigns to address the issues. An example is its efforts to enhance homeless prevention assistance for adults. Prior to the recent Homelessness Reduction Act, local authorities weakly executed their duty to advise and assist adults coming to them with a notice of eviction. In response, Crisis recommended statutorily obligating authorities to assist people earlier in the eviction process when threatened with homelessness. It coupled this with a recommendation for more government funds for authorities to assist them. This would prevent evictions and address landlords' concerns about authorities returning tenants to the property without assistance until bailiffs evict them.

Crisis then engaged landlords in advocacy efforts to adopt the recommendations. It reached out to landlord associations and membership groups that publicly supported the bill. This provided connections to Conservative members of Parliament



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as well as member landlords. Crisis also invited landlords to lobby members of Parliament by signing an online petition and directly advocating to them. This was critical. As this was a private members bill, Crisis could publicly lobby members and thus force their hand so they were not seen as unsupportive of homeless reduction efforts.

Applying learning in the US

After my placement, I am disseminating my learning within and external to Urban Pathways. Internally I am sharing my learning with staff and clients in meetings and program advocacy groups. I stress the need to think differently about addressing homelessness with different stakeholders coming together. Externally, I am disseminating my learning in meetings, presentations and writings. I have presented to the Safety Net Activists, a group of currently and formerly homeless individuals advocating for changes in welfare policies. I submitted a proposal to conduct a session on tenancy training with Crisis' head of housing, Chris Hancock, at the 2018 Institute for Children, Poverty and Homelessness conference. I also included suggestions about landlord engagement in my presentation at Care for the Homeless' 2017 Policy Forum on Preventing and Ending Homelessness. In addition, I have written an op-ed in Gotham Gazette, a New York City online publication – Engaging the Private Rental Sector to Address Homelessness.

During dissemination, I emphasize four recommendations for New York City homelessness to improve exit options and tenancy sustainment:

Provide tenancy training in shelters, drop-in centers and safe havens

New York City should offer tenancy training like Renting Ready in shelters, alternatives to shelter such as drop-in centers and safe havens, and supportive housing. This may be particularly useful for those most estranged from housing - chronically homeless adults and those exiting the criminal justice system - as well as those lacking housing experience - homeless youth and those exiting foster care. The City could pilot a program involving these groups, and assess its impact by tracking tenancy length and returns to permanent housing.

Utilize matching for homeless individuals placed in shared permanent housing

New York City should implement a pilot program akin to Tenancy Share. Drop-in center, safe haven or shelter providers would match shared housing roommates as well as provide support during transition to and tenancy in shared housing. Those ripe for a pilot are youth aging out of foster care and homeless youth in drop-in centers or shelter. Matching would provide these individuals with support, particularly valuable given their diminished support systems. The housing itself would equip them with independent living skills and build their rental histories.

Develop a housing pilot program for adults exiting transitional housing and in need of tenancy support

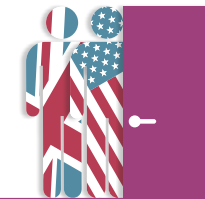
New York City should develop a housing pilot for single adults in transitional housing exiting to permanent PRS housing and in need of tenancy support. This would address the lack of exit options and tenancy sustainment issues.

The pilot would be modeled after the Fife Keyfund and the City scattered-site housing program. The pilot for adults with unstable rental histories would mirror scattered-site housing. The transitional housing provider would rent units from PRS landlords and sublet them to clients moving to permanent housing. Ideally, after the first year, the individual would enter into a lease with the landlord instead of subletting. The pilot for adults with more stable rental histories would mirror Fife Keyfund in which the housing provider would negotiate a lease for their client. In both, the housing provider would be the named contact, addressing any tenancy issues. Keeping the provider provides continuity for the tenant and ensures the landlord has contact with those most familiar with the tenant.

Engage landlords in homeless advocacy

As Crisis did around the Homelessness Reduction Act, New York homeless advocates and elected officials should recognize their common interests with landlords and engage them in policy recommendations and advocacy campaigns. An issue ripe for this is New York State's inadequate monthly housing benefit for a single adult on public assistance - \$215 since 1971. Just as English landlords benefit from obligating local authorities to assist tenants early in eviction, New York landlords gain from a higher housing benefit. It addresses their reservations about renting to public assistance recipients who often struggle to pay their rent with a low benefit, opening the PRS to more tenants.

Encouragingly, earlier this year, New York City's largest landlord group endorsed a New York State bill addressing the inadequate shelter allowance. In March, the Rent Stabilization Association endorsed the Home Stability Support bill proposed by State Assembly Member Andrew Hevesi to create a State



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subsidy to supplement the shelter allowance.¹¹ Advocates and elected officials should capitalize and use this opportunity to bring other Conservative State legislators on board.

Conclusion

In the 2016 Transatlantic Practice Exchange Report, Homeless Link's Mark McPherson touched on value of the Exchange – the opportunity to work differently and look outside traditional boundaries and thought processes to address homelessness. This is what attracted me to the Exchange and my Crisis placement and what I strive to always keep from it. To address New York City homelessness, we must push to look outside the traditional boundaries that we work within and better engage the PRS. It addresses the reality of the supply of homeless housing that the PRS can provide. We cannot build our way out of homelessness. It also provides an opportunity to not repeat the mistakes of the past like failing to fully engage the PRS in homelessness. Ending homelessness requires various sectors working together.

Notes

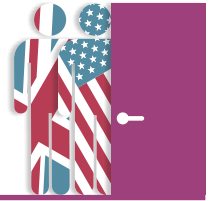
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Tyler Harmon

Young, queer and homeless: different countries, similar story

Albert Kennedy Trust
London, Manchester,
and Newcastle





Tyler Harmon: Albert Kennedy Trust, London, Manchester and Newcastle

Young, queer and homeless: different countries, similar story

Due to the rising costs of housing, unequal distribution of wealth, increasing rates of poverty, and decreasing access to health care, homelessness has become a global epidemic that affects all kinds of people including youth and young adults. According to the True Colors Fund, 1.6 million youth and young adults experience homeless every year in the United States with up to 40 percent of them identifying as LGBT+.¹ In order to see how disproportionate the rate of homelessness is among this demographic, it is important to understand that LGBT+ youth make up only 7 percent of the total youth population in the US. Locally, a recent census found that 43 percent of the homeless youth in the District of Columbia identify as LGBT+.² In 2015, The Albert Kennedy Trust conducted a survey that was carried out over 473 housing providers in England, Scotland, and Wales interviewing homeless youth between the ages of 16 and 26. The survey results indicated that of the homeless youth surveyed, 24 percent identified as LGBT+.³

Although the data is not perfect and is likely an underestimate across the board, it is easy to observe the staggering difference of US data compared to the UK data. Why are youth in the US that identify as LGBT+ almost twice more likely to experience homelessness than those in the UK? What are the major causes of homelessness for young people that identify as LGBT+ in the UK? What role does religious influence on culture play on these statistics? What programming strategies have been successful in combatting LGBT+ youth homelessness in the UK? Are the service providers in the UK following best practices by having youth-led programming? Also are coordinated efforts in place to foster a community of support effort to combat youth homelessness? These are the primary questions that drove my research on LGBT+ youth homelessness.

Albert Kennedy Trust

In April 1989, sixteen year old Albert Kennedy died from falling from the roof of a parking garage in Manchester after being chased by several attackers in a car. Albert was a runaway youth, part of the foster care system, and identified as LGBT+. It is believed that he was being bullied and harassed by homophobic attackers that chased him and ultimately caused him to jump/fall from the roof of the parking garage. Cath Hall was a heterosexual foster carer who recognized that this was not an isolated incident of hate crime toward LGBT+ young people and the current systems in place were not meeting the full range of needs of LGBT+ young people. As a result, Cath founded the Albert Kennedy Trust in 1990 to provide LGBT+ young people with a place to go if they were kicked out of their parent's house or the care system.

The Albert Kennedy Trust (AKT) has service locations in London, Manchester, and Newcastle. The charity is now comprised of 18 staff, 3 senior practitioners, 1 case worker, and 160 volunteers total with service locations in London, Manchester, and Newcastle. In May 2017, I spent two weeks in the United Kingdom shadowing the Albert Kennedy Trust at each of their service locations. AKT utilizes several different housing programs/service models in the UK to combat homelessness among LGBT+ young people.

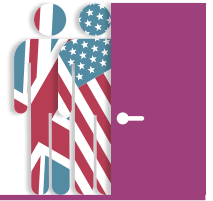
Differences and similarities

It is important to understand a few key differences between the US and the UK. To begin, there is a stark difference between social benefits in the UK and the US. While public

benefits are rather difficult to obtain and have very strict criteria in the US, many benefits including housing are essentially an entitled right to citizens in the UK. Consequently, there is a big difference in the culture around receiving public benefits. Overall, the UK has a much stronger public benefit system that provides a more comprehensive system of support for those in need of assistance.

An unfortunate similarity I found is that the UK has very similar, unstable political climate much like the US policies of the Conservative Government which are putting a strain on public resources and funding. The future of public benefits seems very unclear in both the US and UK.

In the US, many homeless youth under the age of 18 are wards of the state and are part of the Foster Care system where a minor is placed into a group home or private home of a certified caregiver, or foster parent. The UK has a similar system of care referred to as Local Authority Care that takes legal responsibility for some children under 18 that are made the subject of a care order. Although the UK does not have Continuum of Care that the US has, some Local Authority areas implement a similar approach called the Positive Pathway. This Positive Pathway framework is adopted by some Local Authorities and is more targeted to housing for young people and homeless prevention strategies at a local level. Even though this framework is not implemented nationally, the Local Authorities that have chosen to adopt it have found it to be an effective strategy. London, for example has 32 boroughs, each with its own Local Authority. Some of these have a Positive Pathway that takes a more micro approach to ending and preventing homelessness. In the US, there is generally



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only one Continuum of Care for an entire city and county that takes a more macro approach to serve a much larger area and population.

To no one's surprise, both the US and UK share a common problem of affordable housing, or lack thereof. I found that housing market and available resources in London, Manchester, and Newcastle to be very similar to Washington, DC and the surrounding counties in the metropolitan area. The capital cities of London and Washington, DC have offensively expensive housing markets that cater to an upper class income level. Unless you are wealthy, most people in these cities can only afford to rent rather than buy and many can only afford to rent a bedroom in shared housing. Therefore, finding housing and/or moving back into housing is exceptionally challenging for people, especially young people who often have many barriers to entering housing. Cities outside the capital city such as Manchester and Newcastle in the UK and Alexandria, Virginia and Silver Spring, Maryland in the US generally have a more affordable housing market, but not by much. Consequently, the housing market and overall cost of living in the capital cities versus the more suburban, smaller cities has a direct impact on the housing programs and resources available to those in need of public benefits. I have found that the capital cities of both London and Washington have far more limited resources available than the smaller cities. For example, the Albert Kennedy Trust in London focuses more on Host Homes and short-term transitional [shared] housing strategies due to such a high cost rental market, while the AKT in Newcastle has the capacity to offer longer term transitional housing in which the young person actually gets their own apartment due to a much lower cost housing market and cost

of living. Similarly, many housing programs and providers in Washington are very short term and focus on shared housing while many programs in the smaller cities are able to provide longer term assistance and have more private spaces like apartments available at a more affordable price.

Learning

As mentioned above, the housing programs that AKT offer have a direct correlation to the housing markets and costs of living in each city. AKT in London and Manchester house a lot of homeless LGBT young people in Host Homes which is a cost-effective and supportive housing intervention strategy. AKT in London also has another program called Purple Door Project that operates as a transitional housing facility that offers safe housing and temporary accommodations for young people. AKT in Newcastle has the capacity to temporarily house some of their LGBT+ young people in their own one bedroom apartment with their AKT Outpost program.

Host Homes

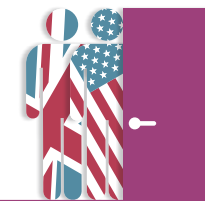
AKT in London and Manchester place a lot of their efforts into providing young people with Respite Accommodations which is often referred to as Host Homes in the US. This intervention strategy is considered a shelter diversion and is geared toward providing young people with an alternative to the shelter system and street life which is very unsafe for young people, especially those that identify as LGBT+. The young person is matched with a community partner who has the capacity to host a young person on a temporary basis in their home. This allows the young person to have a safe and supportive place to stay, develop life skills, receive case management, work on plans

that may include family mediation, and work out other long term housing solutions. This approach provides young people with a safe place and draws supports within their own communities that help ensure that they are not drawn into the street youth lifestyle and/or protect them from sexual and economic exploitation that is a common result from the street lifestyle.⁴

AKT recruits local hosts in the community that have the space to accommodate as well as the effort to put into creating a supportive environment where a young person can heal and work on goals. AKT has a strict vetting process for new and potential hosts and although the hosts are not paid, they are provided with a small stipend to cover some of the expenses of caring for the young person that they are hosting. They also actively seek out hosts that identify as LGBT+ so the hosts can have a better understanding of the challenges of the LGBT+ young people. After a young person is connected with services and meets with a case worker for intake, they are then matched with a potential host by a volunteer advocate that works hard to make sure that the young people are being matched to a host that is a good fit and vice versa. The volunteer advocate then provides case management, works with the young person on goals such as employment, and ensures that things go smoothly in the host home. Host Homes has been a very successful strategy and it fosters a community effort in combatting homelessness among LGBT+ youth in the UK.

Purple Door Project

The Purple Door Project follows a transitional housing model of temporary accommodation and is housing option offered by AKT in London and Newcastle. The program is designed to provide safe housing to young people while a Supported



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Housing Worker provides individualized case management and a plan to obtain longer-term accommodation. Most importantly, the young people are taught important life skills such as cooking, doing their laundry, cohabitation, budgeting. In London, the accommodation is based on a six bedroom house with shared living areas. When a young person enters this program, they are provided their own room for up to three months while working on goals to secure a longer term housing accommodation. Considering that the Purple Door Project is funded entirely on individual donations without any corporate sponsorship, it is a costly program, especially in London. Young people cannot stay here completely free of cost and must pay something toward rent if they can. This is a great practice as it trains the young people to have financial responsibility and how to prepare to pay rent in the future.

AKT Outpost

The Albert Kennedy Trust offers another housing program for LGBT+ young people in Newcastle upon Tyne and serves the North East of England. Originally, the program was called the Outpost Housing Project and was established in 1995 in response to hate crimes, homophobia, and rejection of LGBT+ young people who subsequently found themselves living in risky, vulnerable circumstances or made homeless.⁵ This program provides temporary accommodation for young people aged 16-25. With the help of partnerships with the local housing organizations, this program has the capacity to provide young people with fully furnished flats for up to 18 months. Aside from offering safe housing to the young people, this program also provides the young people with participant-centered case management that provides wrap-around

services to address independent living skills, employment assistance, furthering education, substance abuse treatment, social integration, and self-confidence.

Findings

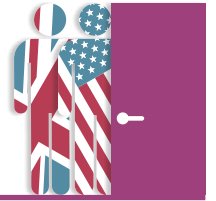
In order to address one of my targeted research questions, I was given the opportunity to speak with some of the young people receiving services from AKT. I was interested in why many young people that identify as LGBT+ become homeless in the UK. Although some of the research that AKT conducted in the UK suggested that 77% of young people believed that their sexual orientation and/or gender identity was a causal factor in rejection from home, the young people that I was able to speak with reported that their families were somewhat accepting of their identity but their family conflicts were rooted in economic factors such as poverty and financial resources. However, I was only able to speak with a few young people and I do believe the statistic presented is accurate. Aside from family rejection, other research conducted by AKT shows that young LGBT+ people also cited mental, emotional, sexual abuse, as well as physical violence forced them to leave their family homes.

Originally, I was interested in learning what role religious influence on US culture and UK culture plays on the rates of homelessness among LGBT+ young people. However, I found these variables extremely difficult to measure in order to have numerical data. Just as in the US, same sex marriage is also legally recognized in the UK. I do find it interesting that all churches and religious institutions in the UK can and do register as charities just as non-profits do which is somewhat

similar to tax exempt status of religious institutions and nonprofit organizations in the US. Based on my discussions with staff at various service providers in the UK, I was informed that many shelters and charities are trying to move away from faith-based ties and funding in order to serve more people without the conditions of religious institutions. The Metro Community Church in Newcastle is apparently very LGBT+ friendly and inclusive even though Newcastle upon Tyne is considered to be a more conservative area. Even though I was expecting to find an overwhelming difference between the religious influences on the UK culture the US culture; that did not turn out to be true considering that the religious climate seemed to be about the same.

Positive Pathways

Although the UK does not have Continuums of Care like in the US, they do participate in similar coordinated efforts called the Positive Pathway and the London Youth Gateway. Developed by St. Basils in Birmingham, the Positive Pathway is a national framework designed to assist the local authorities and other community partners more effectively prevent homelessness among 16-25 year olds and promote better outcomes for young people experiencing homelessness or at imminent risk.⁶ Similar to a Continuum of Care, this framework coordinates efforts of the local government agencies and charities providing homeless services. However, the Positive Pathway is more focused and targeted by being organized around specific age groups and each Positive Pathway is tied to specific borough and local authority. Essentially, the Positive Pathways is a systems approach that provides structure and a standard for how service providers for young people should collaborate together in order to best serve the youth, avoid



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duplication of services, and prevent unnecessary barriers to housing. This framework also places a lot of emphasis on homeless prevention strategies rather than just focusing on literal homelessness, which is very important. The Positive Pathway model does a great job of ensuring that the services that are being provided are 'youth proofed' and keeping the individuals' needs in mind to lead the services. Maintaining a youth led or youth proofed organization is a critical best practice in order to effectively serve young people. Because there are no set standards for services or approaches at the city level due to everything focusing on the borough level in the UK, I can see how it may be challenging to keep consistency among the different boroughs and each Positive Pathway.

London Youth Gateway

Unlike the Positive Pathway framework, the London Youth Gateway provides an innovative single pathway approach to young people from every borough and is not limited to a local borough connection. This framework is a unique partnership comprised of well-established service providers like New Horizons Youth Center, Alone in London, DePaul UK, and Stonewall Housing. The London Youth Gateway is funded by London Councils and is a working partnership that combines the resources of day center, specialist advice services, emergency accommodation, and an LGBT+ service provider to provide a full range of wrap-around services to young people in need of housing services.⁷ Rather than duplicating the services that are already available at the local, borough level, the Gateway supplements these services in order to fill gaps in services. When I met with the staff at New Horizons, I learned that their impact is wide and they connect to young people at

many levels such as prisons, schools, and work closely with many other youth providers including the Albert Kennedy Trust. Without a doubt, New Horizons is unlike any other youth day center that I have ever seen considering that they offer so many diverse kinds of services including music therapy and other specialized training programs.

This Positive Pathways and London Youth Gateway frameworks have proven to be highly effective in maintaining best practices in serving these vulnerable young people in the UK. Although the US employs a similar approach to coordination with local Continuums of Care, I think this more focused approach of Positive Pathways should be replicated in the US in order to provide more structure and set a national standard to services for our vulnerable young people. Most importantly, it would put more efforts into homeless prevention strategies as well rather than just focusing on those that are literally homeless. Moreover, I think that the US could learn a lot from the London Youth Gateway approach by having several providers in an area partner together to eliminate barriers to access services and fill in the gaps in services in each community. Also, I think the US could be doing more in terms of connecting with young people at different levels such as in the schools, jails, and juvenile detention centers. In order to establish an effective strategy for homeless prevention among this demographic of young people, stronger outreach and connections in schools and jails are needed considering that this is where the most vulnerable young people are.

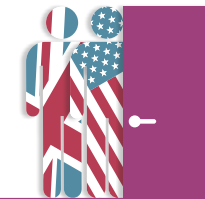
Youth proofing

I was also interested in learning if and how programs that serve homeless LGBT+ young people UK are "youth-proofed"

and youth-led programs. I found that my host organization, the Albert Kennedy Trust, do an exceptionally fantastic job of maintaining youth input in the services that they provide. For example, AKT holds a youth conference every year in October in which the young people that they serve come together to discuss their needs, what services they are lacking, and what is working and what is not working in terms of programming. This is a crucial best practice for programs that serve youth considering that the youth know what they need more than the adults that serve them. As a result, 94 percent of all of the young people that AKT served in 2016 rated their services as good or very good. Each year, AKT also has Youth Strategy Day in which they bring young people together and engage them in providing input on organizational direction. This has been a highly successful strategy in maintaining a youth-led program and most importantly, AKT has followed up and implemented the suggestions of the young people.

InterAKT digital mentoring

The idea of digital mentoring was a suggestion from the youth at one of AKT's youth strategy days. The youth voiced their concern that there is not enough ways to reach out and receive emergency assistance that is convenient young people. With the guidance of the young people, AKT designed an innovative mentoring pilot program that creates a unique way for young people to reach out and get the assistance that they need through an online venue. The goal for this program is to provide crisis intervention to youth in need and reach more youth in crisis with the convenience of the internet. Young people in need can access InterAKT and receive mentoring services through social media or online chat from the website. AKT is working to have several volunteer mentors



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on duty to provide 24 hour coverage. Youth can view mentor profiles and choose who they would be most comfortable working with. Services are available via online chat, verbal phone calls, text, and/or video chat like Skype. Short term and long term mentoring can be available and the mentor will provide community resources and referrals as immediate crisis intervention if necessary.

Conclusion

Although I was not able to identify exactly why young people that identify as LGBT+ in the US are twice more likely to experience homelessness than those in the UK, I do feel that I have an understanding of why the numbers may be lower. With the exception of a couple of organizations, housing programs that serve this demographic seem to be rather new in the US while the UK seems to be further advanced in their strategy for ending and preventing LGBT+ youth homelessness. This is apparent when looking at their innovative strategies in place such as the Positive Pathways and the London Youth Gateway that provide coordinated community efforts and set a standard for best practices. Many of the service providers in the UK seem to have been doing this work for decades. Based on my experience, all of the service providers that I met with seemed to have a priority in keeping their services youth proofed and even have developed creative ways to maintain this. The UK has also taken innovative approaches to programming for young people, specifically AKT's InterAKT digital mentoring program. I think that is a practice that could be implemented here in the US along with more focused, coordinated efforts.

Notes

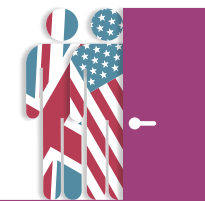
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2. www.washingtonpost.com/local/social-issues/nearly-half-of-homeless-youth-are-lgbtq-first-ever-city-census-finds/2016/01/13/0cb619ae-ba2e-11e5-829c-26ffb874a18d_story.html?utm_term=.395d57136fb3
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Wendy Scott

Creating healthy systems to end chronic homelessness

Fulfilling Lives
Brighton & Hove





Wendy Scott: Fulfilling Lives, Brighton & Hove

Creating healthy systems to end chronic homelessness

The opportunity to learn how to address resolving homelessness through a new lens was so appealing to me that applying for the Exchange was an easy decision. No community has determined how to perfectly serve those experiencing homelessness. With best practices, vouchers and principles all used to guide practice; we still have struggles in our community. There are not enough shelter beds, housing is still unaffordable to most low-income households and accessing services in the community can be daunting. When considering a target area in which we could do better, I came across Fulfilling Lives and Making Every Adult Matter (MEAM) in the UK. Both programs are intended to change the lives of those with the most chronic and complex needs, impact public policy and help those who are unsheltered (in the UK referred to as rough sleepers), and improve access to systems and housing. During my time, I focused on better understanding how these programs use existing community resources to meet those most in need, how do these programs reduce self-harm, mental health crisis and improve overall quality of life, how do these programs stabilize housing, how do these models complement trauma informed care practices and what recommendations would staff have if they could make any adjustments to the program model.

Cultural context

Most of my Exchange experience was spent with the staff of Fulfilling Lives, south-east project in Brighton/Hove, Hastings and Eastbourne, while my experience with MEAM was with the outreach team.

Brighton, England is second to London in terms of unsheltered homeless people in the UK. Many people experience

homelessness for similar reasons to those in the US. They include lack of affordable housing especially for low-income households; long waitlists for affordable and safe housing; disability, mental health and substance use challenges. Additionally, Brighton is considered a tourist city and with many from London vacationing in Brighton, the housing available in the city has decreased while the market values have increased. In looking at how the UK addresses homelessness the following factors stand out.

Coordinated entry

If someone is experiencing homelessness in the UK, they may seek advice or accommodations from the 'Council' or local government office. This includes those who have been legally or illegally evicted, there's a risk of abuse or violence, safety concerns including but not limited to overcrowding. Households are prioritized based on circumstances and eligibility. Most households with minors under 18 years old, or people otherwise considered in 'priority need' such as the pregnant or elderly, are assigned housing so working with unsheltered homeless people in the UK usually means working with single adults.

Health care

National health care in the UK allows each citizen access to services through their primary provider, who makes necessary referrals. While this is not a perfect system and staff identified barriers to access particularly with rough sleepers and those with complex needs, the healthcare system is designed to allow every person access to healthcare at no cost.

Shelters

In Brighton, the day centres provide basic care to rough sleepers and service providers often times provide assistance on-site.

Brighton Housing Trust

Brighton Housing Trust (BHT) is the lead organization for Fulfilling Lives in the south-east region. With over 250 staff, they are an organization with a rich array of services including legal advice for asylum seekers and those with debt related issues, day centers, immigration services, training and development services, mental health and addiction services, and housing.

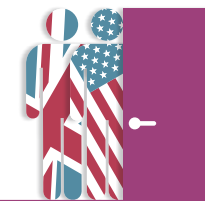
BHT's mission, achieved through its services, is "combating homelessness, creating opportunities, promoting change." Since the 1960s BHT has developed a comprehensive range of services, working in partnership with other organizations, to meet the needs of homeless, insecurely housed and vulnerable men and women. Their services aim to tackle both the causes and effects of homelessness and poverty.

According to its website, in 2011/12 BHT worked with over 11,000 men and women providing practical and preventative services, advice and legal representation, information and guidance in order to improve the quality of people's lives. In 2016, BHT worked with 6,843 people and prevented 2,055 households from becoming homeless. Its day center was open for 288 days and assisted 306 people move off the streets. The Phase One, a 52 bed hostel provided a high level of support for rough sleepers with multiple and complex needs.

Fulfilling Lives

The Fulfilling Lives program in the Southeast region was awarded funding of about \$10 million over eight years with the following three goals:

- Improving quality of life for those with complex needs



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- Reducing barriers or changing systems impacting those with complex needs
- Creating new national policy with direct influence from people with lived experience.

While BHT is the host organization, the program director supervises local delivery teams from other partner agencies who work across Brighton and Hove, Eastbourne and Hastings. The staff consists of those with lived experience, women's specialists, dual diagnosis specialists, area leads and service improvement officers. Caseloads are intentionally small – about six to eight people per caseload – for the purpose of engaging those most vulnerable.

Learning

During my time in the UK, while my focus was the Fulfilling Lives program, I was able to shadow other services and programs that contribute to the homeless service delivery system. The First Base Day Centre, Phase One Hostel, council meetings, street outreach and user groups were able to provide me with a broad perspective of the community's work to end homelessness. What I heard often was the importance of working in partnership and the community's shared commitment to resolving homelessness.

What I appreciate most about the Fulfilling Lives program was their ability to adapt, be reflective, analyze the data they are seeing, and plan for moving forward. Because the program was developed to address the needs of people with complex problems in a new and practical way, their original projections and approaches continue to be adjusted. Their commitment to

serving clients well is the foundation for service delivery. With that said, one of the objectives of Fulfilling Lives is working to create a seamless service delivery system for anyone experiencing homelessness. The component of Fulfilling Lives that is different from other programs in the community is the intentional and ongoing practice, at every level, of changing systems and improving lives by integrating the knowledge and skillset of those with lived experience. Fulfilling Lives takes client-centered service plans and right to self-determination to another level by seeing that the service delivery is driven by those who have lived experience. By doing this and using the Ladder of Citizen Participation change model which is discussed below, more sustainable change occurs.

Action groups

Each city has action groups led by a project consultant. Members of the action group – typically 5-10 people – have lived experience and are either currently involved in services or had recent involvement in services. Their time is volunteered for up to 18 months of weekly or bi-monthly 2-hour meetings. Those newer to the program observe more, while those who have served longer are more involved and intentional in goal-setting for the group. Each action group is tailored to address their city's barriers particularly for people with complex needs. These volunteers are mentored by the project consultants. These volunteers are experts by experience and are the backbone of the system and service review work in Fulfilling Lives.

Project consultants

Project consultants are staff with lived experience and they guide the action groups and provide mentorship to the members. They are a bridge between the action

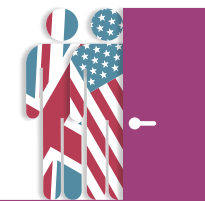
group members and the service lead officers. The groups I shadowed had staff with excellent group leadership skills.

Area leads / service lead officers

The area leads' direction and advocacy comes directly from the action group members and project consultants. Any goals and service delivery systems that create barriers for those with complex needs are approached by the area leads, who in turn assist agencies to reduce recidivism and improve client engagement. The area leads work on barriers to progress with project consultants and case managers, who are directly responsible for assisting those on their caseload with accessing a service that could end their homelessness.

Case managers

With the team, case managers receive and process nominations from the community for client referrals. Clients are not self-referring or self-seeking. Nominations come primarily from other agencies who know of clients that are chronically homeless and have repeated contact with law enforcement, service providers, hospitals and medical professionals. Case managers actively work one-on-one with small client caseloads of those with complex needs and assist them with accessing services and housing. The client caseload is those in the community with severe and persistent need who, but for the Fulfilling Lives program, may not engage in services. Clients are rough sleepers and may not even know they have been nominated for the program. In working with the clients, after rapport has been established and services have been implemented, barriers that arise are shared with the action group. The action group can, in turn, aid in the improvement of a system or increase access to living accommodation even if temporary.



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Creating healthy systems to end chronic homelessness

Case managers use engagement models and interventions that in many ways are similar to those in the US. The city of Brighton, in particular, also has a community system wide database, similar to our HMIS, but only used for the purpose of reducing duplication of services to clients. Service models and best practices include ethical boundaries, Cognitive Behavioural Therapy (CBT), Mental Health First Aid, Trauma Informed Care (TIC), Stages of Change, Wellness and Recovery Action Plans (WRAP), the STAR assessment tool, ladder of involvement and Psychologically Informed Environments (PIE). Additionally, because of national health care, when clients are nominated for services, a baseline of the number of ER and/or hospital visits can be gathered. Understanding how homelessness can decrease the frequency of hospital visits and services is part of the Fulfilling Lives program.

Service user engagement coordinator

The service user engagement coordinator assists with maintaining best practices within the user groups and encourages needed systems change in the community. This staff person in the south-east region is a psychologist and her expertise is largely guided by the Ladder of Citizen Participation developed by Sherry Arnstein, which is discussed more in the conclusion.

The senior manager provides day-to-day oversight of the Fulfilling Lives program and leads discussion among the council and senior management with partnering agencies, initiating change at management levels. One component of this work is presenting case studies which expose the layers of challenges involved, which in turn can initiate change to a system or within an organization. Additionally, quarterly outcomes are measured and reviewed at the national level.

There are additional staff, such as community counsellors/therapists, who are part of the service delivery team for those clients in the program. Adjustments to structure can be made depending on the availability of funding and client needs.

Findings

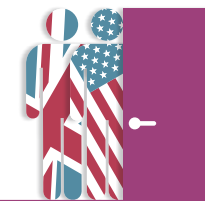
Fulfilling Lives, in its desire to reduce medical, mental health, physical crisis and law enforcement involvement of homeless people with complex needs, first understands the importance of knowing the frequency of user engagement in these areas. During the nomination/referral process, hard base lines are gathered pulling the frequency of hospitalizations, arrests, and medical visits. I was told that because of national health care, and with permission, baselines for medical care sought can be more easily gathered. In meeting the need of each client directly, these baselines are able to assist in assessing clients and where particular needs may be present.

Fulfilling Lives never intended to replace existing services. On the contrary, the program works to utilize existing services in a more practical way for every person that may need access. This could be as simple as not requiring a person to receive a pre-appointment call, which if you are homeless and without a phone, can cause high appointment cancellations. Also, it may mean negotiating for a client to be re-approved to see their primary care physician for medical needs and referrals after years of missed visits resulting in the client being dropped by their provider. Assisting Fulfilling Lives client entry into existing programs and services results in reducing barriers for other consumers as well, because policies are adjusted to improve access and engagement. If people's medical, mental health

and addictions needs are given attention by professionals, there is an improved quality life. Improved quality of life results in reduced involvement with law enforcement, and other systems. This model also requires extensive support and collaboration among those with lived experience, front line workers, executive leadership, law enforcement and the Council. These meetings can take place weekly, bi weekly or monthly depending on the group.

Fulfilling Lives began working with clients in January 2015. As of March 2017, it had worked with 59 clients across three jurisdictions and 12 clients had their cases closed. Initially, client caseloads were to be twice as high, but due to the intensity of the intervention caseload recommendations were reduced from 15/caseworker to 6-9/caseworker. Clients were also worked with over a longer period of time than originally anticipated. The intention was never to serve every person experiencing homelessness that has complex needs, but rather those with more entrenched and long term multiple and complex needs. Additional challenges included high staff turnover in the first few years of the program.

Fulfilling Lives is in year three of an eight year planned run, and some of the client cases have been open since the program began direct services. Most client cases are expected to remain open for at least two years. In March 2017, 40% of the client caseload had been open longer than 24 months. In March 2017, it was reported a total of 15 case closures, four were planned and 11 were unplanned closures. Of the unplanned closures, four moved out of the area, two died, three did not engage in the project, one was sentenced to prison for a long period, and one is in long term psychiatric



Wendy Scott: Fulfilling Lives, Brighton & Hove

Creating healthy systems to end chronic homelessness

care. Of the four planned closures, some of the factors that led to success included a period of stability, less engagement required, reduction of risk, stable housing, identified move-on support and effective multi-agency working involvement. As of March 2017, only one of 15 clients in Brighton is at immediate risk of losing their housing accommodation. The other 14 were in temporary accommodation.

When asked what is the most challenging aspects of the Fulfilling Lives model, responses varied. Staff all seemed hopeful and encouraged by the project but identified the chaotic nature of working with a rough sleeper who has complex needs. A case manager in Brighton shared her attempts to build rapport for months with a client who was frequently intoxicated and would defecate on himself. Needless to say, this client is now receiving services, has housing accommodations and continues to work with his case manager. Other challenges included the intensity of the work, lack of predictability, and clients with precarious health factors that complicate and heighten the need for housing and safety that may not be immediately available.

The PIE model, which is widely used in the UK with persons experiencing homelessness, is defined as: “taking into consideration the psychological makeup – the thinking, emotions, personalities and past experience – of its participants in the way that it operates.” Homeless Link defines PIE as an approach to supporting people out of homelessness, in particular those who have experienced complex trauma or are diagnosed with a personality disorder. The PIE model and TIC complement each other in terms of creating as much emotional safety as possible for a client and staff.

Applying learning in the US

Since the Exchange, discussion has taken place within our organization, board and some discussion has taken place within our Continuum of Care (CoC). At this time, our community is in process of reorganizing our CoC so healthier partnerships and improved transparency as to how our system works with those experiencing homelessness reflects the learning of my Exchange experience. There has been some discussion at the agency level regarding how to engage service users more in our discussion of service delivery. Greensboro Urban Ministry has always been committed, when possible, to hiring staff with lived experience. My desire is that in the near future we can begin looking at how this can occur intentionally, with an action group to assess our new CoC, coordinated entry process, and service delivery models.

Conclusions

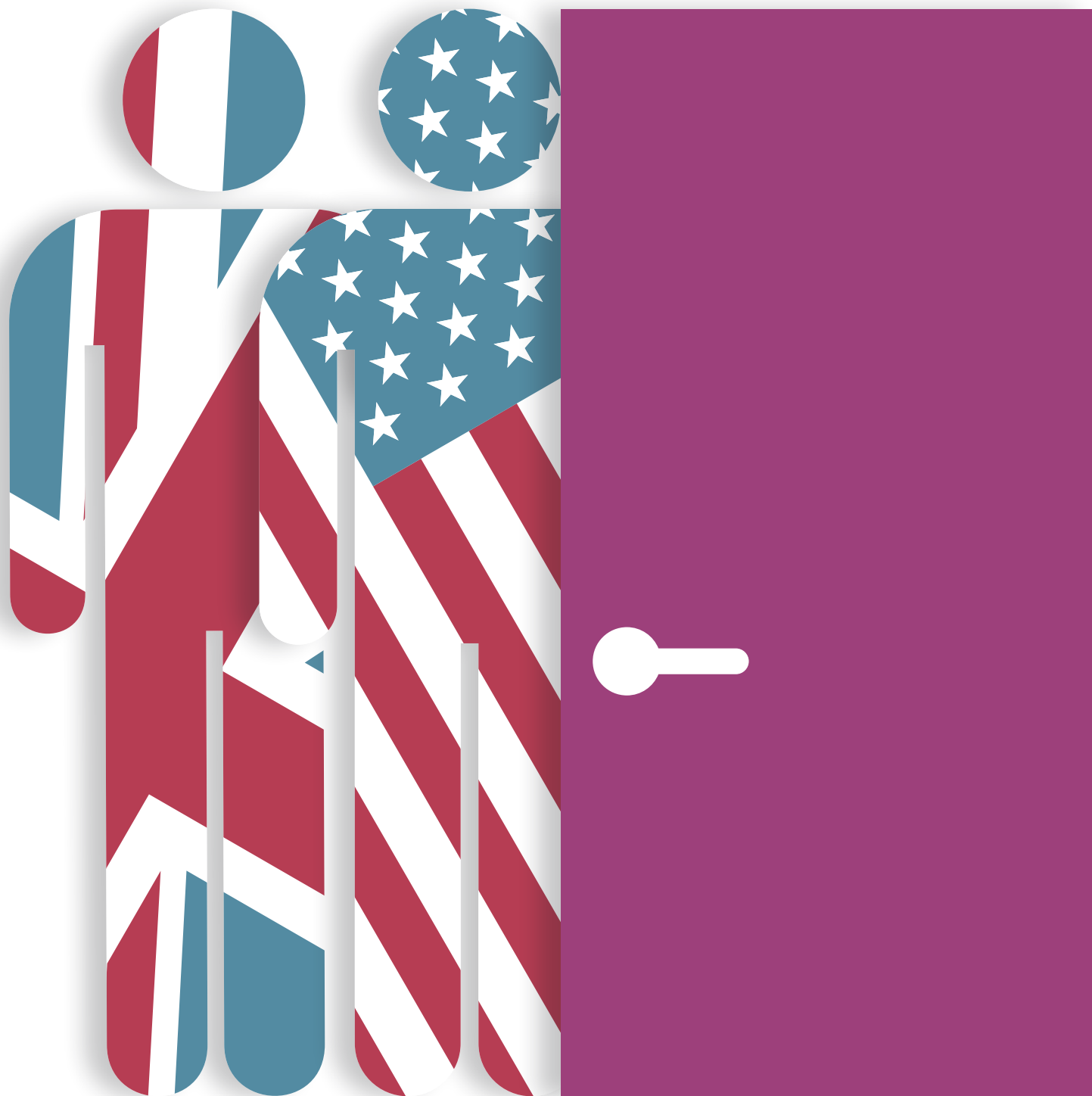
Fulfilling Lives is committed to ensuring that people experiencing homelessness that have complex needs have equal access to services, thereby improving their quality of life. Clients in the program are similar to those in our own community that agencies avoid working with because they are seen as too difficult. These are clients with missed appointments, the chronically homeless, those who suffer from addiction and severe and persistent mental illness, and those who die on the streets even after attempts to engage them in services and implement risk reduction.

User engagement is a critical component to understanding how our community can best reduce barriers and improve

success by getting people unsheltered into housing and accessing services. User engagement is fundamental to seeing people with lived experience as the experts of systems change, because of their knowledge of the working parts. A fundamental change in how service workers and professionals work with service users is required, recognizing that positive outcomes cannot be delivered effectively to or for people, but that they are achieved with people, through equal and reciprocal relationships. This involves sharing decision-making power with service users, meaning that their voices must be heard, valued, debated, and then, most importantly, acted upon. Partnership goes one step further by enabling service users to play roles in delivering the services that they have designed. In practice this can take many forms, from peer support and mentoring to running everyday activities or making decisions about how the organization is run. What really matters is that people's assets and capabilities are recognized and nurtured, that people share roles and responsibilities to run the service, and that professionals and services users work together in equal ways, respecting and valuing each other's unique contributions. With this understanding, I can see our programs at Greensboro Urban Ministry modelling how service user involvement supports building healthy systems and ending chronic homelessness.

Notes

1. http://england.shelter.org.uk/get_advice/homelessness/help_from_the_council_when_homeless/priority_need
2. www.bht.org.uk
3. www.bht.org.uk/services/fulfilling-lives





What we do


Homeless Link is the national membership charity for organisations working directly with people who become homeless or who live with multiple and complex support needs. We work to improve services and campaign for policy change that will help end homelessness and secure a sustainable future for supported housing.


Let's end homelessness together

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