

# Understanding the Role of Emergency Shelter in Ending Homelessness

## Low Barrier and Housing Focused Shelter

August 2, 2021

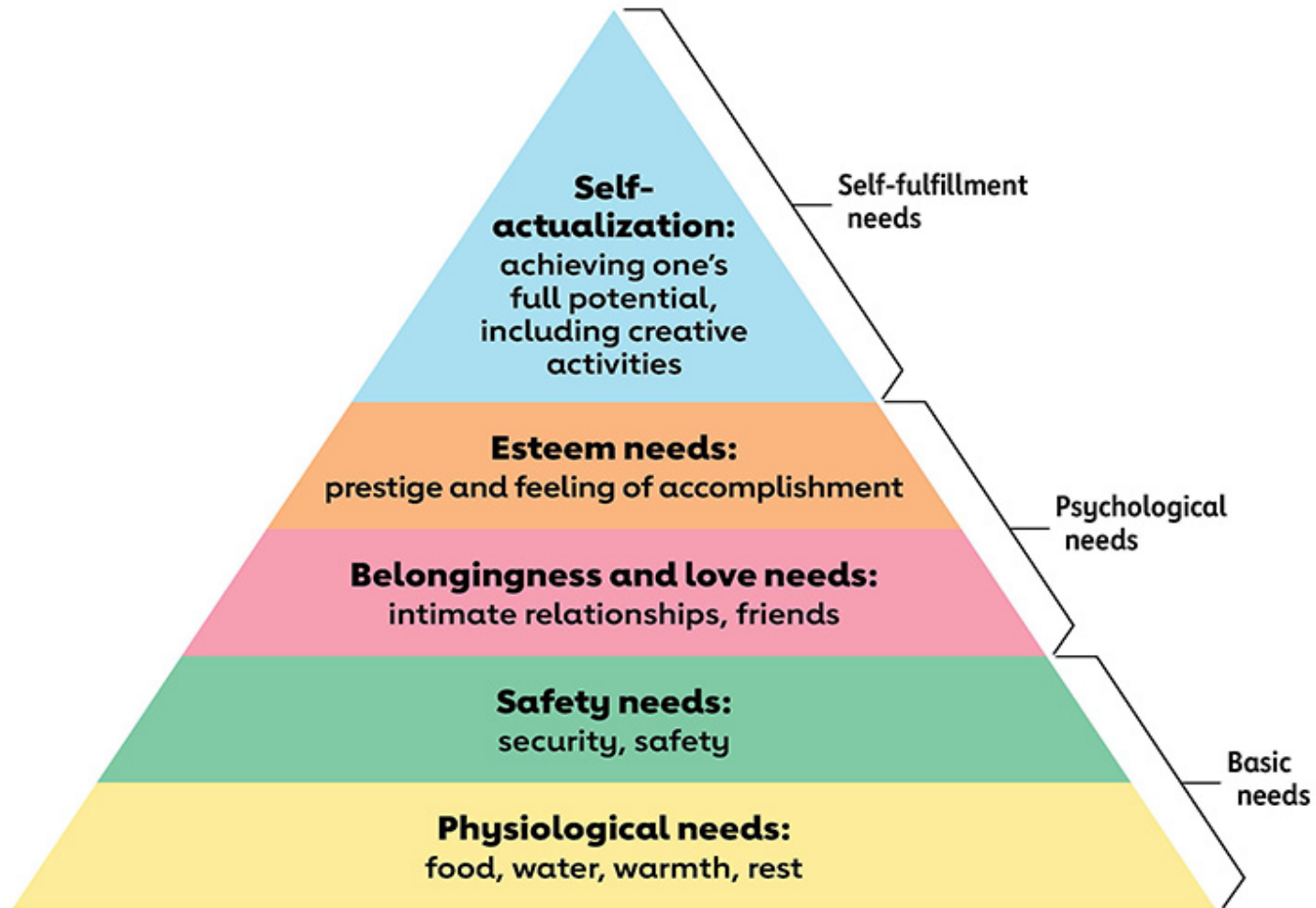
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**Homelessness  
is a public  
health concern**

# Maslow's Hierarchy of Needs



# Effective Homeless Response System: GOAL

**House** people as quickly as possible and  
**divert** people from imminent homelessness whenever possible

**End Homelessness =  
Make homelessness rare, brief and one-time**



# It takes a village: Define your role in it!

Homeless system is part of a **network** of supports and services:

- Its Goal = Getting people from homeless to HOUSED!

## Homeless System's Role

Ensure interventions are scaled, accessible, and tailored

**Get People Housed ASAP!**

Make necessary and appropriate **connections** to **keep** people housed

## NOT the Homeless System's Role

Solve poverty

Create ideal living situations

"Fix" people

**Warm  
Handoffs!**



## Community Service Partners

Healthcare  
Mental & Behavioral Health Services  
Childcare  
Transportation  
Education & Training  
Employment  
Income Supports

**SERVICES!!!!**

# Use the Collective Impact\* Approach

## 1. Common Agenda

- Housed People are NOT Homeless!!!

## 2. Shared Measurement System

- Returns to homelessness & LOS
- Monitoring equitable access and outcomes

## 3. Mutually Reinforcing & Equitable\* Activities

- Navigating the housing process (reducing barriers)
- Individually tailored housing stabilization
- Linkages with identified natural and community supports

## 4. Continuous Communication

- Clearly identified communications channels and processes

## 5. Backbone Organization

- Single organization identified to be the link



# Key Elements of Emergency Shelters in an Effective Crisis Response System

- Housing First Approach
- Safe & Appropriate Diversion
- Immediate and Low-Barrier Access
- Housing-focused, Rapid Exit Services
- Data to Measure Performance



# Homelessness is Misunderstood & It Impacts Shelter Practice

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- Almost everyone with poor credit history is housed, not homeless.
- Almost everyone with a history of evictions is housed, not homeless.
- Almost everyone with a felony conviction is housed, not homeless.
- Almost everyone who is a registered sex offender or sexual predator is housed, not homeless.

-Orgcode



# Use the Housing First Philosophy

- ***BELIEF*** that ***everyone*** is ready ***for housing***
- Homelessness is a **housing** problem
- Housing First means **housing** fast, not housing only
- Service needs are **unique** to each individual household
- Service participation is **voluntary**



# Shelter Adopts Housing First Principles

## Philosophy Shift

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- Homelessness is foremost a housing problem
- Everyone is ready for housing **now** if they choose
- Permanent housing is a right to which all are entitled
- People should be returned to or stabilized in permanent housing as quickly as possible and voluntarily connected to resources necessary to sustain that housing

# Housing First Philosophy in Practice

- Housing First is NOT a “program”, but the adoption of the Housing First Principles across the shelter
  - Belief by all staff that guests are housing ready
- Housing First is NOT a one size fits all approach
  - Everyone’s housing plan is unique to them
- Housing First is NOT housing ONLY
  - Services are more effective when someone is in a permanent setting
- Shelter is NOT a destination
  - Shelter is life-saving, but ONLY housing ends homelessness

# Housing First Advances Race Equity

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Black/African Americans disproportionately...

- Are evicted
- Have criminal records
- Face unemployment
- Are underdiagnosed with MH and other health conditions

**So,** if you are screening out for these things, who's disproportionately affected?

# Safe and Appropriate Diversion Philosophy Shift

**Diversion before Intake!**

Shift From	Shift Towards
Are you willing to enter shelter and follow our rules?	Is the place you were staying safe? What can we do to help you remain there? What can we do to help you find a safe place other than shelter?
What programs are you eligible for? Who has a bed?	What would resolve your current housing crisis?
Beginning with eligibility determinations and intake questions	Begin with brainstorming and structured problem-solving conversations about household's situation and resources
Beginning with screening and assessment tools and shelter waitlists	Support crisis resolution to avoid shelter entry through problem solving conversation

An isometric illustration of an emergency shelter room. On the left, there are several beds with purple bedding and white pillows, each with a small nightstand and a lamp. On the right, a group of stylized human figures in dark blue and grey are gathered together, representing a diverse group of people seeking shelter. The background is a plain, light brown color.

In order to play a critical role  
in ending homelessness,

**EMERGENCY SHELTERS MUST BE ACCESSIBLE  
TO ANYONE WHO NEEDS HELP.**

# Immediate and Low-barrier Access

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- Requires **checking our own biases** about who we think "should" be in shelter and why we might feel anxious about serving different populations
  - People shouldn't have to "earn" being in shelter
  - We shouldn't be trying to heal or fix people's behaviors – it doesn't work
  - We should be supporting change in people, rather than trying to change their behaviors

# Immediate and Low-barrier Access Does NOT Mean Low Expectations

## **LOW-BARRIER DOES NOT MEAN**

- Not having rules or expectations of shelter participants
- Allowing people to act in ways that are unsafe to themselves or others
- Letting anything happen or letting everyone in
- First-come, first-serve
- Forgetting about safety of clients and staff



# Immediate and Low-barrier Access

## Operational Shift

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### Screening people in, not out

- Shelter is open 24/7
- People do not have to line up for a bed each night or leave early in the morning
- No drug and alcohol testing to get in **or** to stay in
- No criminal background checks to get in
- Not requiring income to get in
- Not requiring “housing-readiness” to get in
- **Allowing people, pets and possessions**

# Immediate and Low Barrier Access Practice Shift

- Change staff role from being “program monitors” or “house parents” to being housing navigators and partners with clients
- Re-frame statements like, “they are not working the program so they have to leave” to “the housing plan doesn’t seem to be working so the case manager should work with the client to revise it so it is more achievable”
- Train staff in conflict resolution, crisis de-escalation, trauma-informed care
- Use motivational interviewing and strength-based approaches



# Immediate and Low-barrier Access

## Philosophy Shift

- Shelter is life saving
- It should be easy to access
- It should be easiest for the most vulnerable



## Practice Shift

- Few to no prerequisites to shelter
- No sobriety requirement
- No waiting list
- Coordinated entry
- Prioritize households with the most needs
- 24/7 access
- Equal Access Rule compliance
- Rules should only pertain to safety

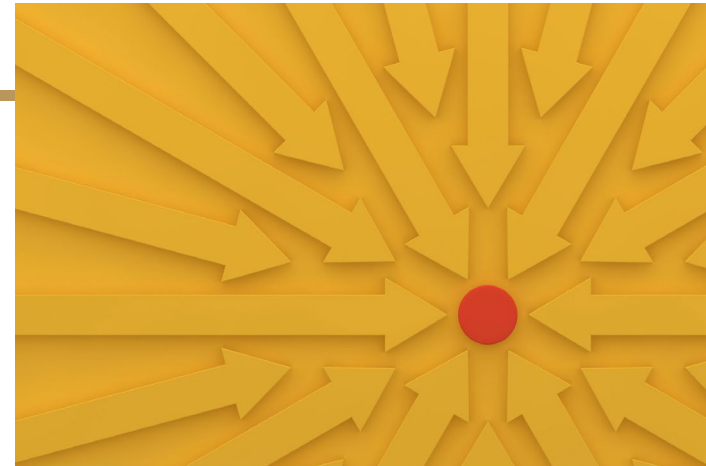
# Activity: Which option creates most access?

Option A	Option B
10pm Curfew to secure shelter bed	No curfew with expectation that guests indicate their return to shelter
Inebriated guests can enter shelter	If guests is presumed to be UI, they cannot enter shelter
Shelter guests with active addiction must engage in services to gain access to PH support	Shelter guests with addiction will engage in PH planning from Day 1 and voluntarily get connected to services during/after the housing process
Guest must have and show ID to access shelter	Any guest regardless of ID status can access the shelter

# Housing is the goal!

## From Homeless...

- Housing plan created on Day 1
- Guest leads housing plan
- No prereqs to housing



## ...to Housed!

- Shared Housing
- Temp housing with long term PH plan
- ADUs
- Studio Apartments



# Diversifying Your Approach

Perception of service need based in bias

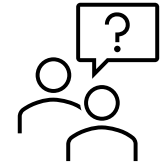
Diverse groups have diverse service needs

Idea of "**service**" and "**stability**" looks different for everyone

- Might not fit your/organization/CoC's idea of "services"
- "Nontraditional" to you might be "traditional" for others

Support network needs to be culturally relevant

# Ask yourself...



- How do we “Right Size” our shelter?
- How can we improve our data and use it to inform our decisions about shelter?
- Does x decision increase or decrease access?
- Are we perpetuating racism or eliminating racial disparities?
- Does x decision align with the housing first philosophy?
- What community connections are needed to get and keep people housed?
- Do we have training needs?
- How does x decision impact our efforts to end homelessness equitably?

# Questions?





# Contact

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