

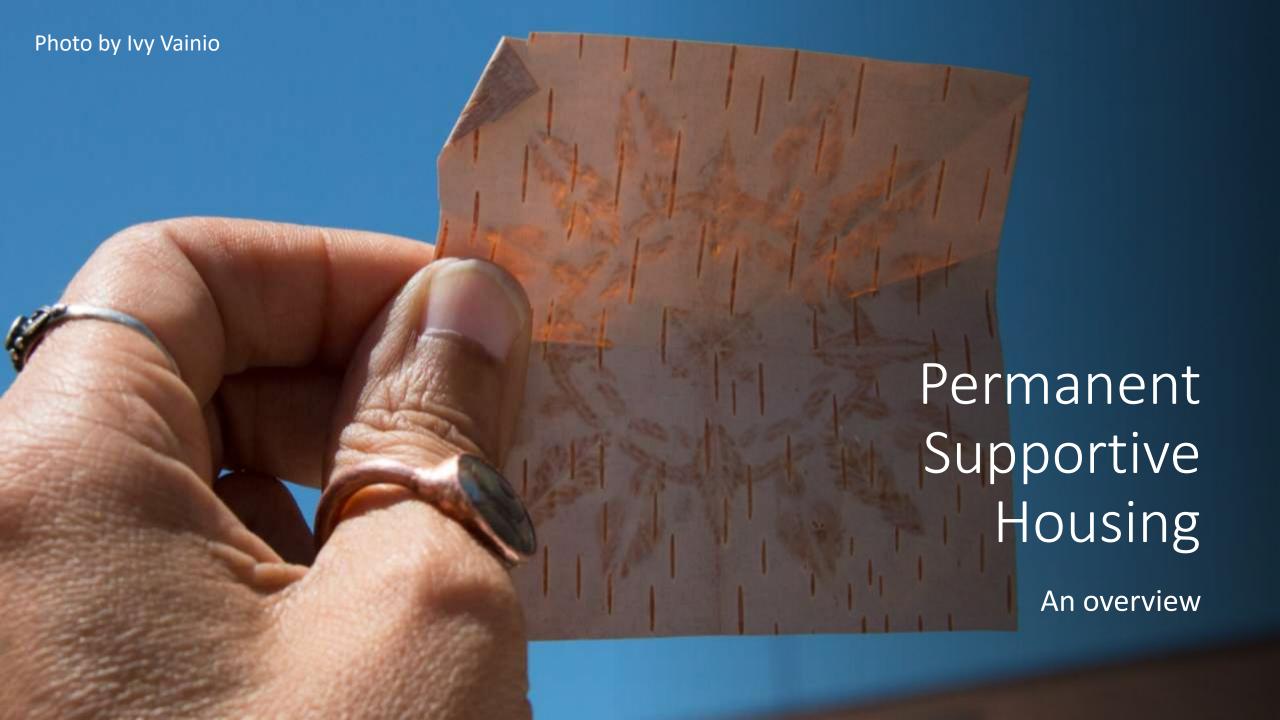






- Supportive Housing Consulting business by partners CEO Zoe LeBeau & CFO Katie Symons
- Over 40 years of collective experience working with Tribes, rural & urban communities
- Experience from direct homeless services to affordable housing development
- Offer "PSH Toolkit" in Colorado, Project Management & Technical Assistance







## Supportive Housing

- A cost-effective, outcomedriven, & more humane solution to ending homelessness
- Serves families & individuals struggling with untreated trauma, addiction, mental health and/or other disabilities
- Provides subsidized housing with supportive services





## ...is not time-limited

(may be permanent for some)

- Allows for open-ended stay
- Focuses on long-term housing stability
- Provides long-term housing options that clients get to decide when they're ready

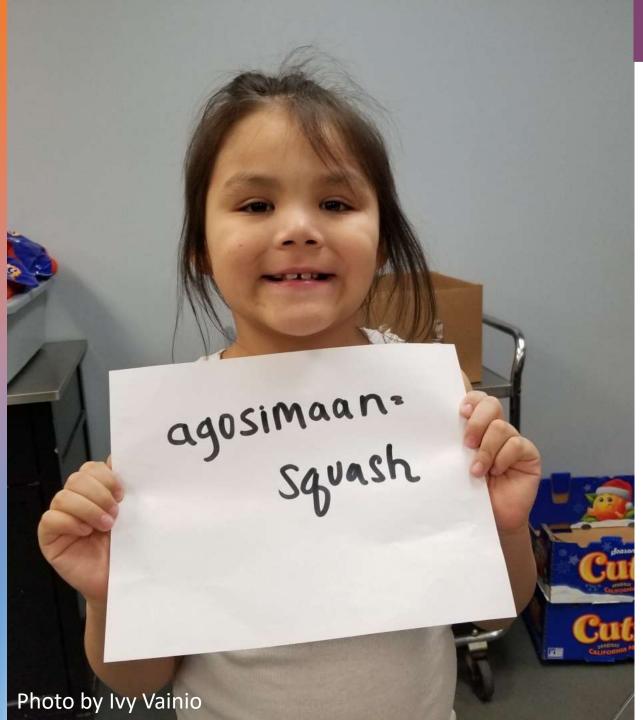




### ...is affordable

- Residents pay no more than 30% of their income on rent
- Subsidies must be attached to the PSH building





### ...is independent living

 Provides tenants with a lease for their unit

 Focuses on helping tenants adjust to living in a housed environment

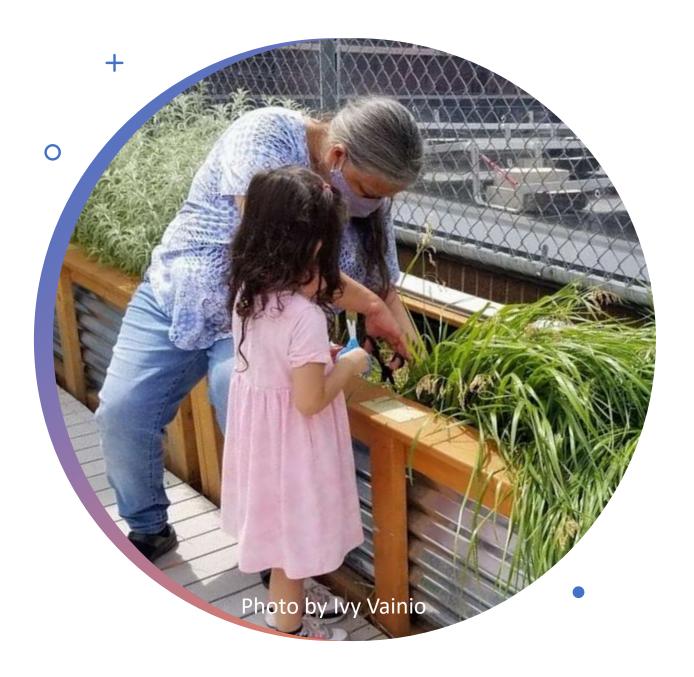
Supports tenants in treating past traumas

## Who lives in PSH?

Families & individuals who are

- Homeless, including those living on the streets & in shelters
- Living in overcrowded conditions and/or couchsurfing
- Being discharged from prison or other systems of care
- Living in places not meant for human habitation, i.e., cars, garages, abandoned buildings, etc.





## Who lives in PSH?

#### Families & individuals who have

- Experienced various past traumas, including ACE
- Serious chemical dependency and/or mental health issues who need supportive services to maintain stable housing
- Frequently utilized emergency services in the community because they lack stable housing

## Benefits of PSH

- Reduces stress caused by doubled-up & overcrowding
- Reduces use of crisis & institutional services
- Produces better outcomes than the more expensive crisis care system
- Significantly reduces recidivism rates
- Ends cycles of homelessness



### Who else benefits from PSH?

- Affordable housing providers
- Human service providers
- Tribal Governments
- Families & the community



### **Supportive Housing is NOT**

Shelter
Group Home
Transitional Housing
Residential Care Facility
Treatment Center



## Tenant centered services

- Offer meaningful choice
- Use input from tenants to design services options
- Provide culturally relevant & appropriate services
- "Start where tenants are at"



## Services are the key

- Center around populations served
- Flexible in responding to comprehensive resident needs
- Voluntary with participation not being a condition of residency
- Independent focus specifically on housing stability
- Individualize services that fit the needs of each resident



## The keys to working services

- Services should be comprehensive, culturally relevant, and tenant-drive
- Services focus on Housing Stability
- Services must have effective engagement strategies, staffing and supervision, service partners and linkages and collaborative relationship with Property Management





### Tenant Centered Services

- Services are individualized, not "cookie cutter"
- Tenants involved in the design, development, and implementation of their plans – empowered
- Strengths-based approach to goal setting
- Assessments and service plans updated regularly



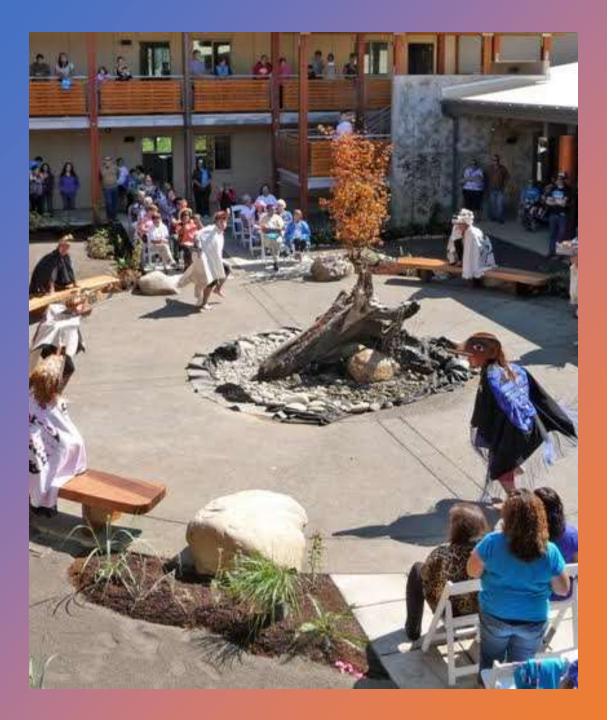
### Tenant Centered Services

Ideally: 15:1 tenant to care manager ratio

Services staff may include front desk staff, care managers, housing advocates, traditional language teachers, cultural and spiritual practitioner, mental health professionals, mentors, peer specialists or navigators, activities coordinator, children's program staff, property management or leasing assistant, maintenance technician, program or housing manager







### Housing First

- Housing is a human right.
- People do not need to be "housing ready."
- Housing should never be used to coerce people into services they would otherwise not choose.
- Housing & services are interconnected but with separate criteria for operation and evaluation.



## 5 Principles of Housing First

- No pre-conditions to be considered "housing ready"
- Self-determination in participating in services
- Harm Reduction & recovery
- Client-drive supports
- Social integration and community building



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# Examples of Harm Reduction

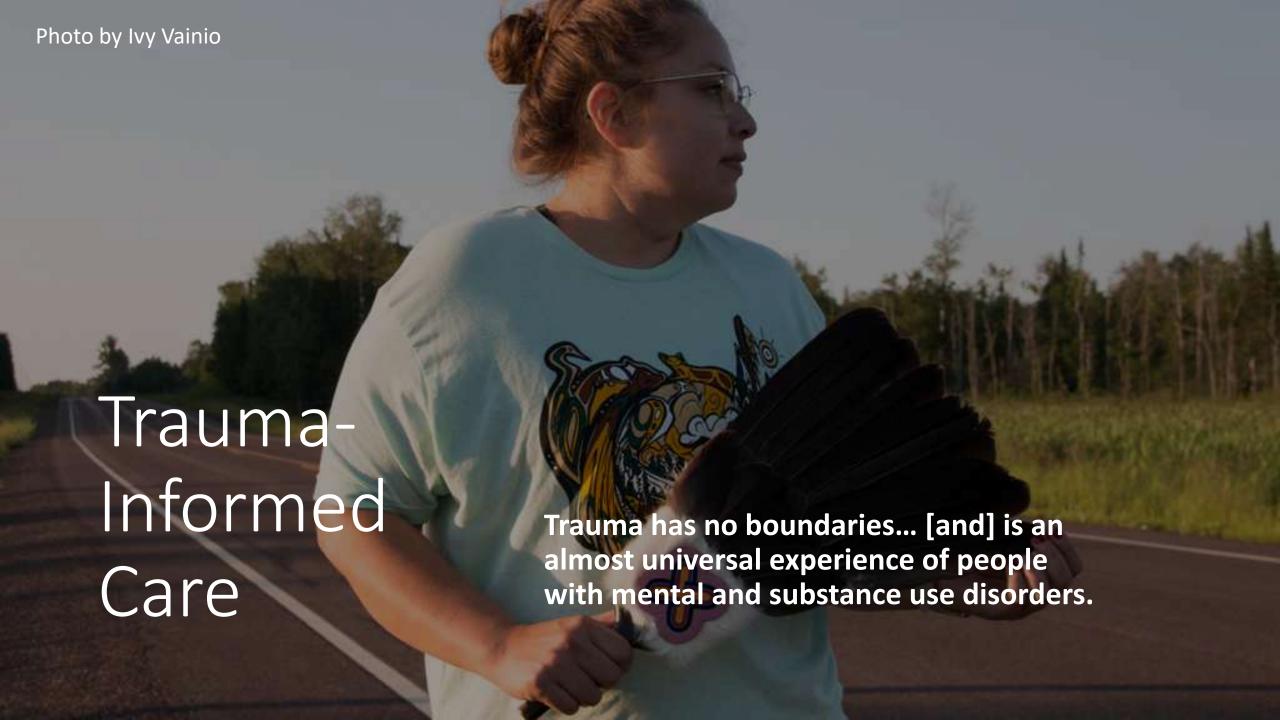
- Sunscreen
- Condoms
- Seat Belts
- Bicycle Helmets
- Designated Drivers
- Blood Alcohol Levels
- Nicotine Patches/Gum
- Needle Exchange
- Blood Pressure Medication
- Cholesterol Medication

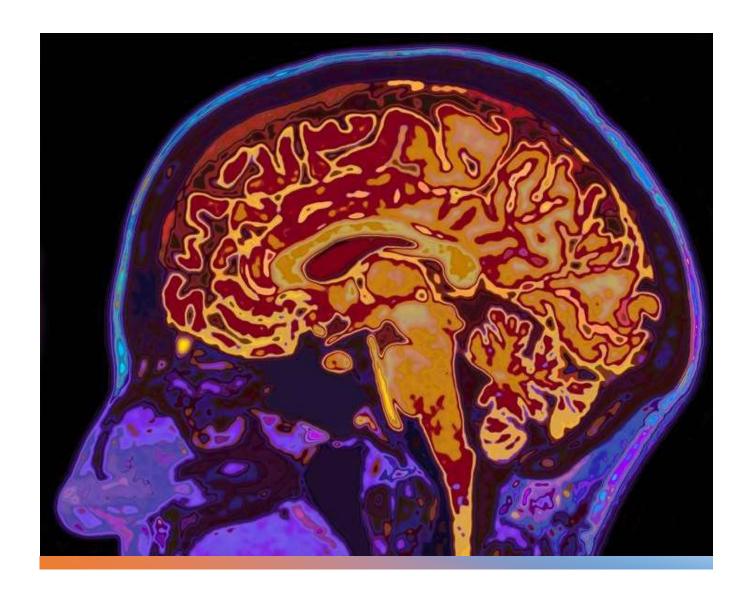
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# Harm Reduction Framework

- Accepts that licit and illicit chemical use is part of our world
- Chooses to minimize its harmful effects rather than ignore, stigmatize, or condemn chemical use
- Uses motivational interviewing to strengthen personal motivation for and commitment to a specific goal identified by the tenant
- Incorporates strengths-base programming





### What Does Trauma Look Like?

- Intense stress that overwhelms our biological psychological and social coping capacity.
  - Activates survival responses
- Shuts down non-essential tasks
- Impedes rational thinking







Fight Flight Freeze

### Trauma Responses

### Trauma Informed Care

- People living supportive housing have experienced trauma
- Supportive housing works to understand what trauma is, what trauma responses look like & how staff can respond appropriately



Expressions of anger Flashbacks

Irritability Nightmares

Sleeplessness Difficulty concentrating

Feelings of grief or sadness Hard time making decisions

Difficulty feeling happy Dissociation/spacing or zoning out

Fatigue, exhaustion Memory problems

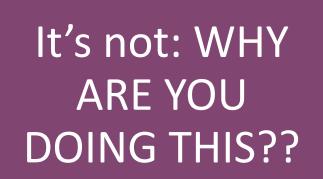
Lowered immune response Headaches

Easily startled Over protectiveness

Feelings of guilt Social Withdrawal

Feelings of helplessness Alcohol/Drug use

#### Common Trauma Reactions



It's: What happened to you in the past to cause you to react this way?















#### Being A Good Relative

- Understanding Trauma
- Basic Needs
- Safe Space
- Showing Up
- Service Connecting
- Cultural Resourcing
- Self Care





In this section

- The Development Process in Supportive Housing
- Development Timeline
- Who is part of the Development Team?
- Finding the right partners
- Financing options (LIHTC, FHLB, IHBG, etc.)
- Questions and Answers

### 5 (Real) Phases of Development

- Concept
- Feasibility
- Deal making
- Construction
- Operations





## Be honest about your capacity

- Don't try to be everything in the project
- Get creative
- Supportive housing works best when there are clear roles and delineations



#### Development Team

brings a variety of skills, knowledge, expertise & resources together to develop & operate supportive housing

- Consultants/developers
- Architects
- Service providers
- Community development entities
- Housing authorities
- Community mental health centers

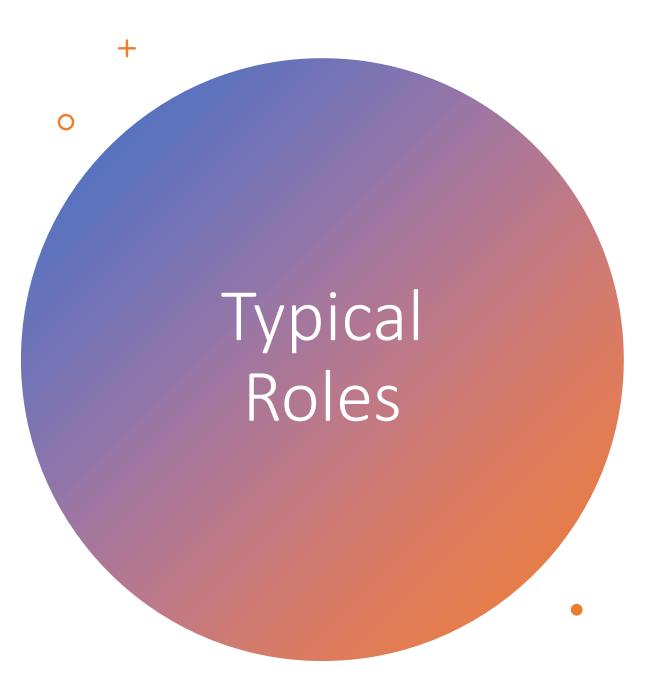


The Development Team

Supportive housing brings together 3 very different disciplines:

- Development
- Support Services
- Property Management

Variety of partners needed to make project a success



- Owner and/or Sponsor: legally responsible for project, driving force behind the project
- **Developer:** delivery of complete, functional project ready for occupancy
- Architect works with the team to design with Trauma-Informed Design in mind
- Property Manager: real estate management and operations for completed project
- Service Provider(s): design and implementation of the supportive services plan and evaluation

#### **Process for Selection**













Decide what role you need

RFP vs. RFQ

Interview process: who should be involved

Develop interview questions

This is Hard!

Developers/consultants

don't typically love

supportive housing

#### Alphabet Soup!

- IHBG Indian Housing Block Grant
- FHLB AHP Federal Home Loan Bank
- Affordable Housing Program
- ARPA American Recovery Program Act
- LIHTC Low-Income Housing Tax Credits



# Project Concept Plan

- Define your project concept: Who, what, why, and how
- Start to identify funding sources
- Assess your capacity

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Secure redevelopment funding

#### PART 1: TARGET POPULATION

1. Who are you proposing to serve? Who is your Target Population? The target population will influence the design of the building, the program, and the type of service and/or operating funding.

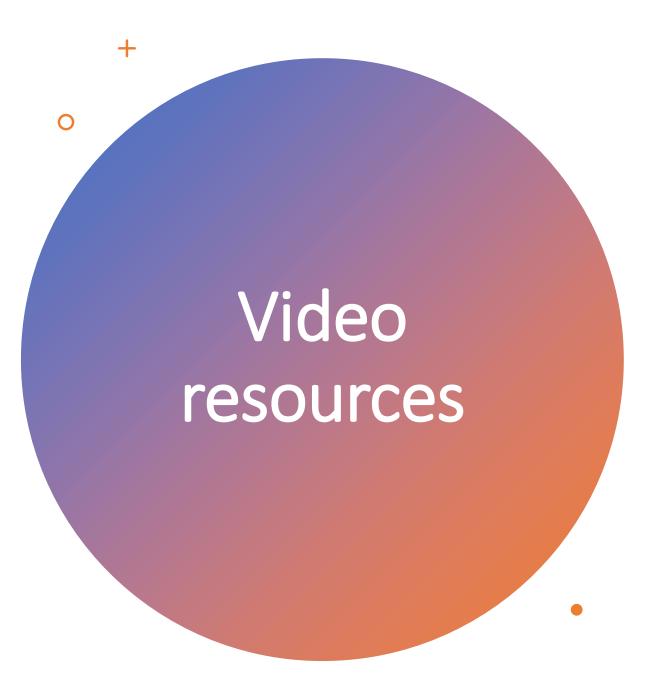
- o youth
- single adults
- o families
- veterans
- families experiencing domestic violence

- long term/chronic homeless
- o homeless
- extremely low income (30% AMI or less)
- both singles and families

o other:	

#### 2. What issues and needs to you expect the population to have?

- mental health
- chemical dependency
- dual diagnosis
- HIV/AIDS
- History of homelessness
- other disabilities:



No Losers (New San Marco: Duluth, MN) <a href="https://youtu.be/ETGd2EP4z70">https://youtu.be/ETGd2EP4z70</a>

AICHO (Duluth, MN)

https://www.youtube.com/watch?v=bz 2YjRXIIzY&feature=emb\_l

How Childhood Trauma affects health across a lifetime:

https://www.youtube.com/watch?v=95 ovIJ3dsNk

Everything you think you know about Addiction is wrong:

https://www.ted.com/talks/johann\_hari everything\_you\_think\_you\_know\_ab out\_addiction\_is\_wrong?language=e n



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