

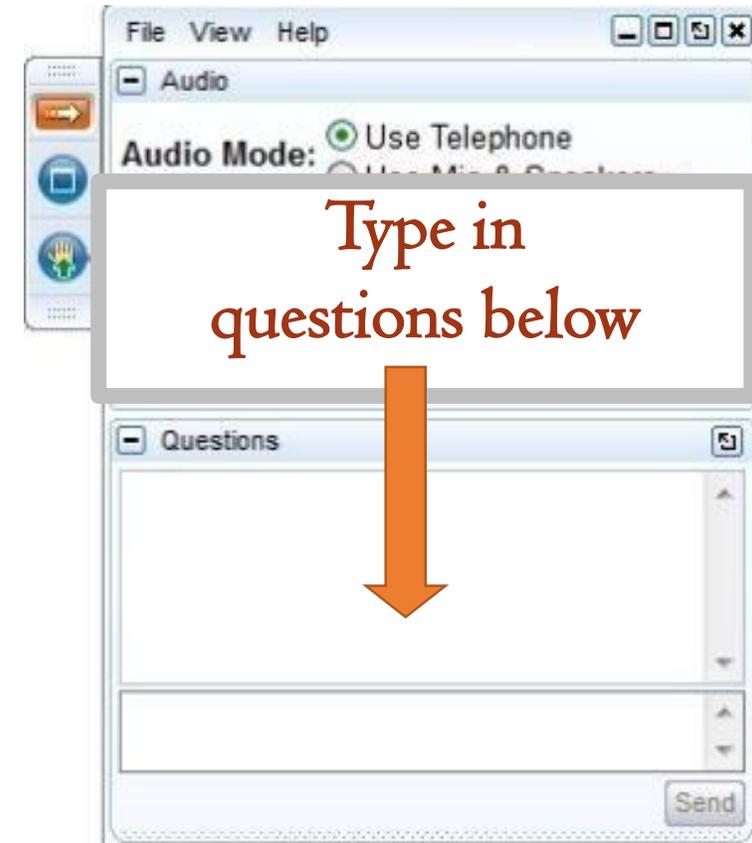


Shelter Diversion 101

December 17, 2020

House Keeping

- Because this is a webinar, attendees are muted
- Please type any questions you have into the Questions Box
- We are recording this webinar and the recording and slides will be available in our Webinar Library at www.cceh.org



Speakers

Diana Berube

Program Manager for Prevention and Exit Strategies

CT Coalition to End Homelessness

Amber Freeman

Training and Technical Assistance Coordinator

CT Coalition to End Homelessness

About the Connecticut Coalition to End Homelessness

Founded in 1982 to provide a voice for the non-profit organizations, faith-based groups, and municipal governments responding to then emerging crisis of homelessness, the Connecticut Coalition to End Homelessness is the leading statewide organization supporting efforts to end homelessness.

Mission

The Connecticut Coalition to End Homelessness, in partnership with members and communities throughout the state, creates change through leadership, advocacy, and building the capacity of members and the field to respond to environmental challenges.

Our collective mission is to prevent and end homelessness in Connecticut.

Vision

A statewide system capable of ensuring that homelessness is rare, brief, and non-recurring.

CCEH's Roles and Functions

Data and Analysis: Administer statewide administrative data system on homelessness, conduct data analysis and research to inform and influence practice, policy, and funding decisions related to ending homelessness.

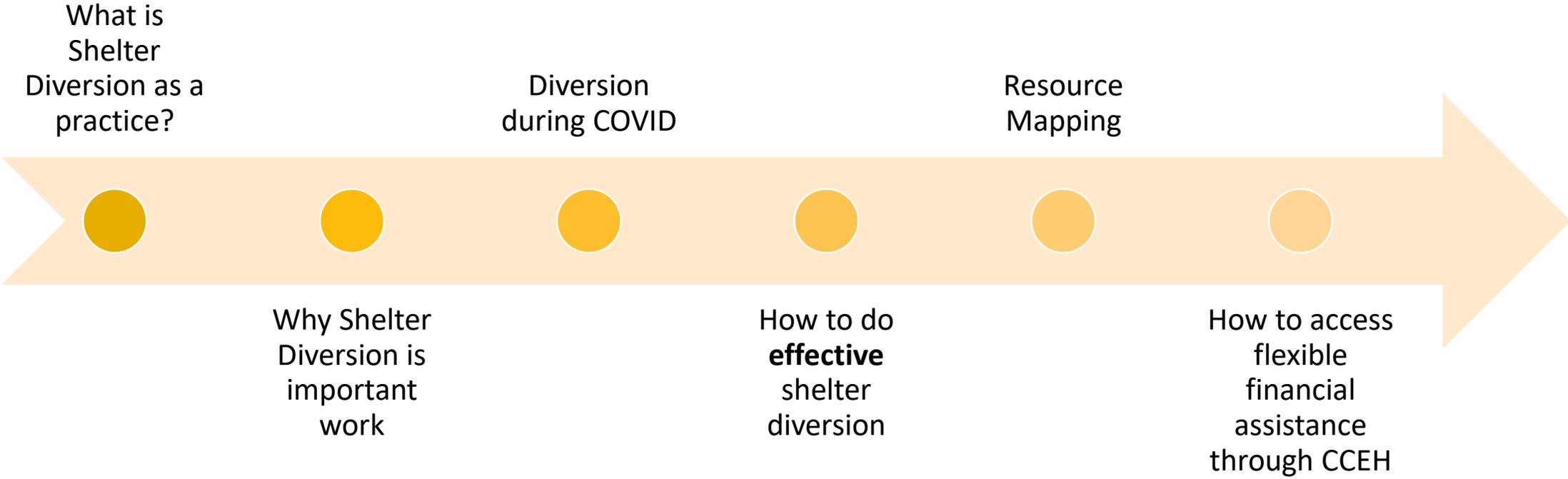
Training and TA: Working with providers to help them build capacity, share, learn and implement best practices.

Advocacy: Educating elected officials (state and federal), the public, philanthropic partners about the problem, the solutions, and the resources we need to end homelessness.

Community Impact: Strengthen local collaboration, create (and support adherence to) policies and procedures, provide staff support in communities, and ensure quality.

Client Financial Assistance: Raise money to fill gaps in emergency resources that frontline workers can access to help clients.

Agenda





Basics of Shelter Diversion

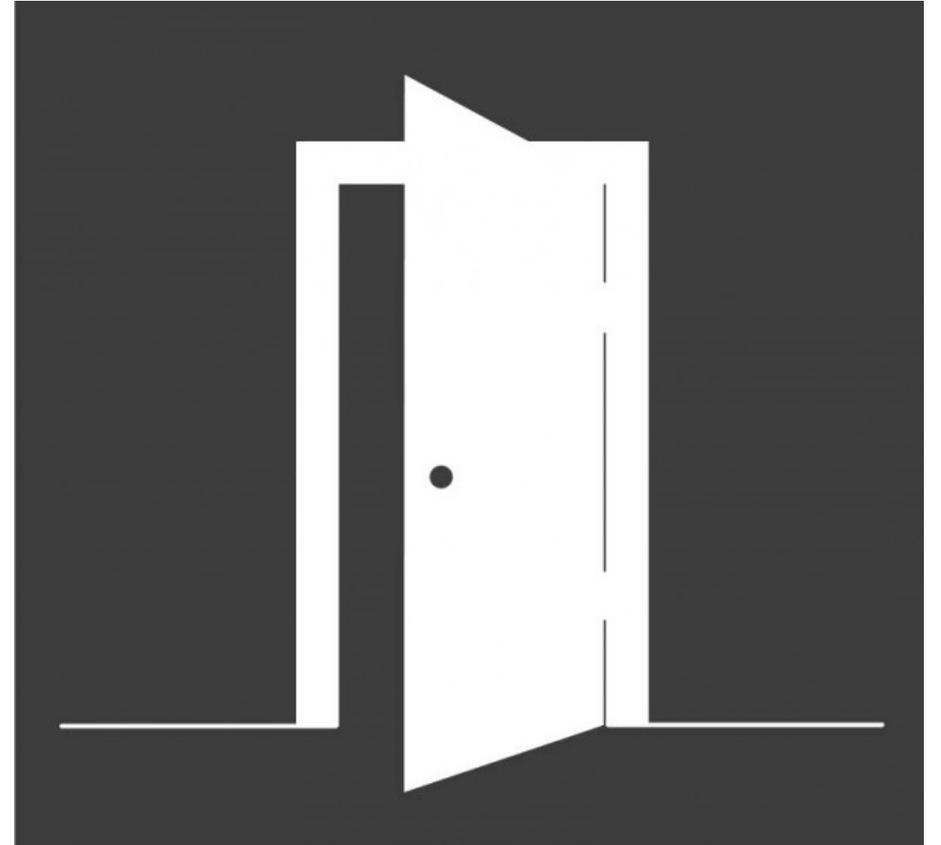
Prevents and Ends Homelessness

Shelter Diversion is a strategy that prevents homelessness at the front door of shelter

Goals:

- Help people identify immediate alternative housing arrangements
- Connect them with services and/or financial assistance to help them secure and maintain permanent housing.
- Develop long-term housing plan

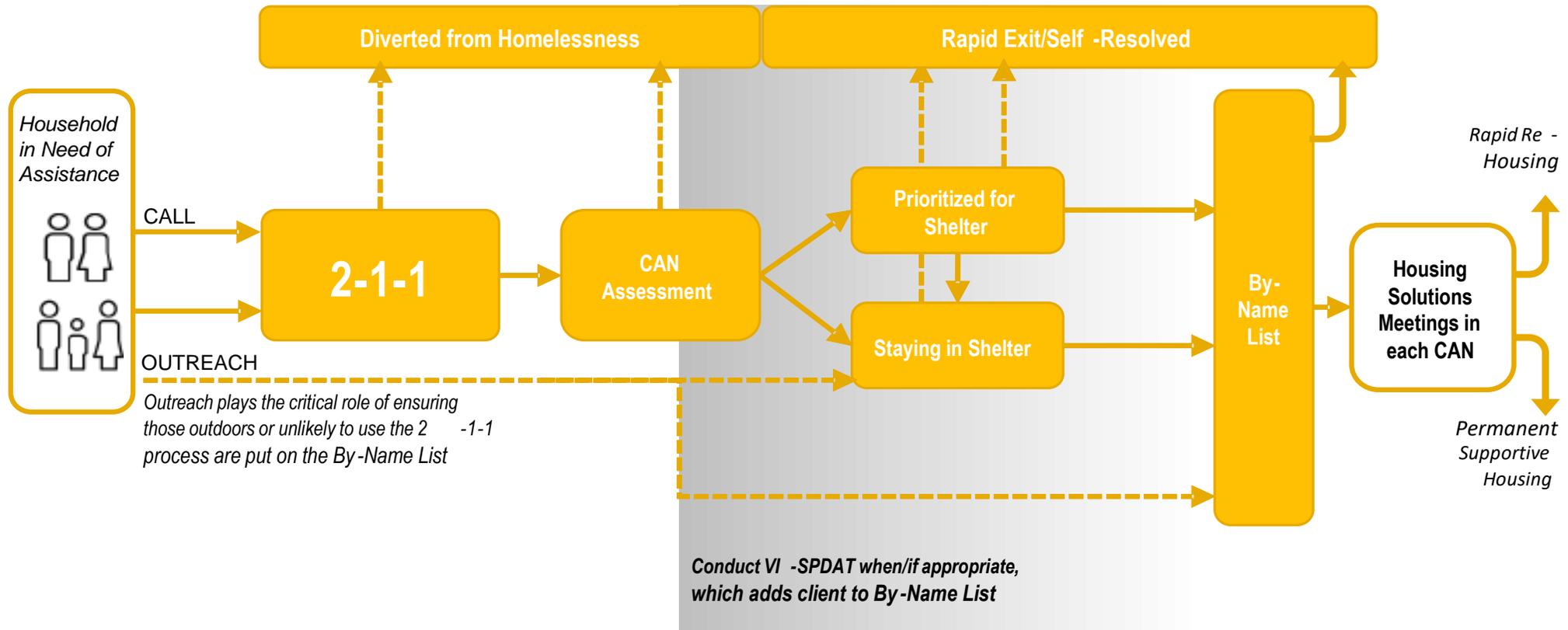
Every effort should be made to divert clients to other housing solutions at their first contact with the homelessness response system.



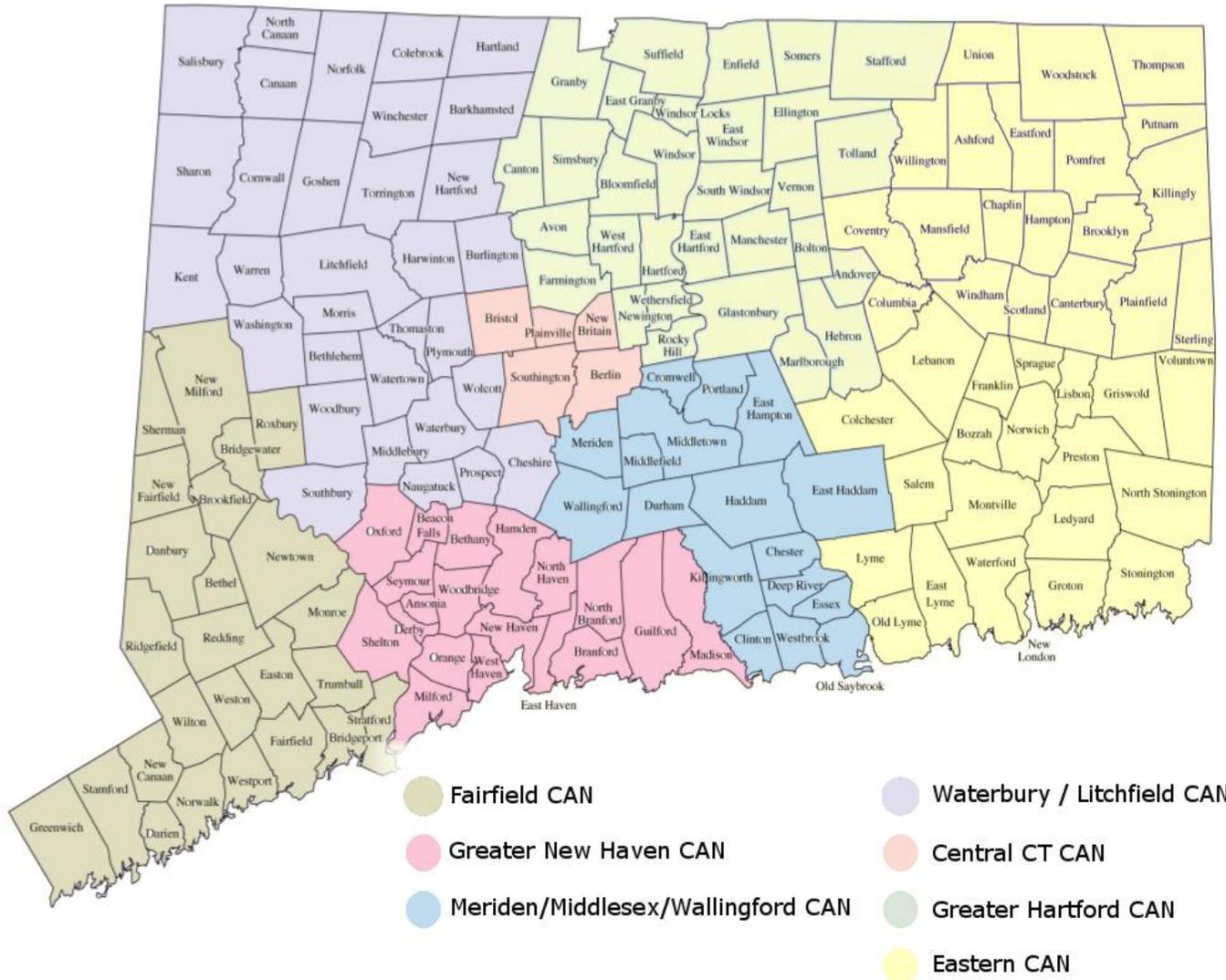
Connecticut's Homeless Response System

CAN System Overview

A high-level diagram of the coordinated access process from entry to exit



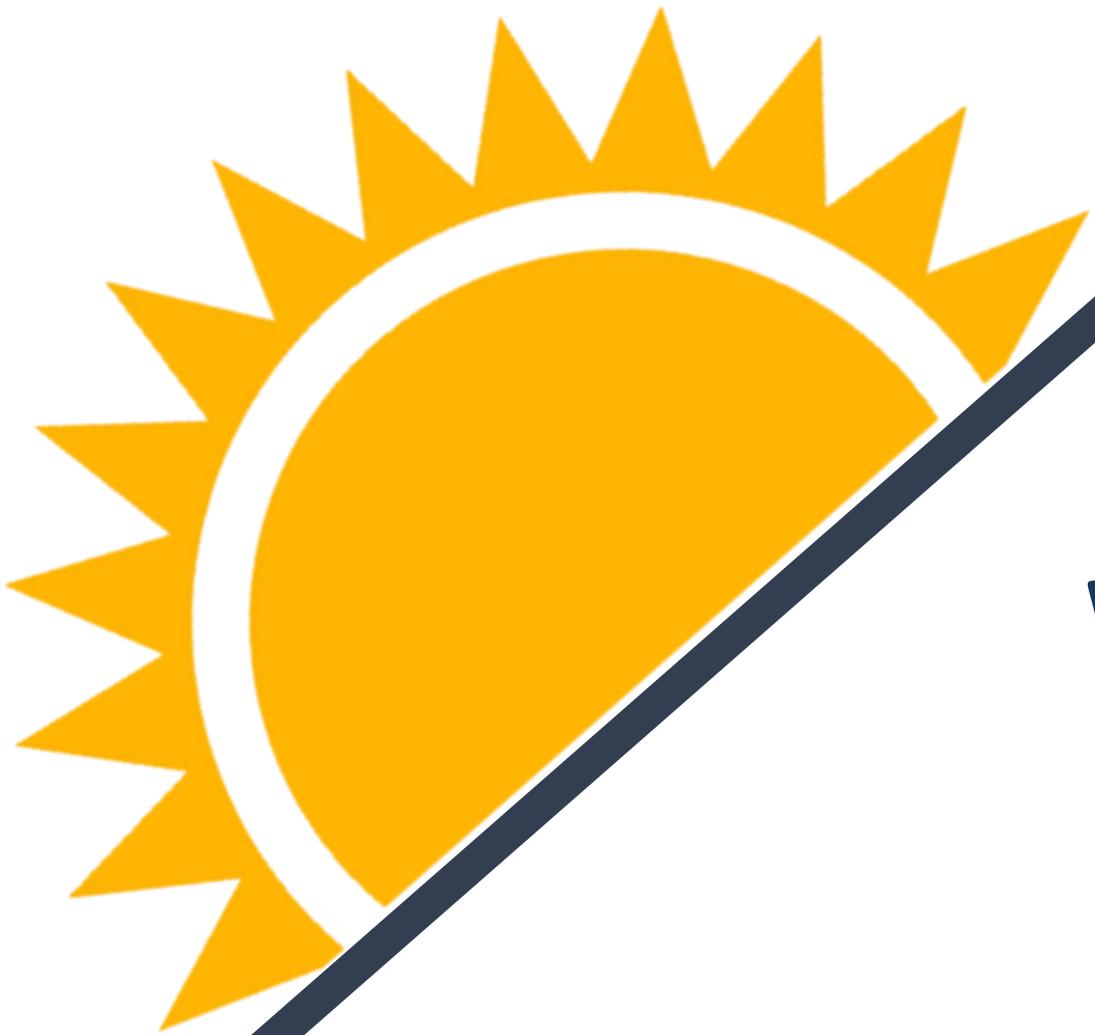
Coordinated Access Network Regions



- Starting in 2014, homeless services (emergency shelters, housing providers, homeless outreach, etc.) in Connecticut became organized into seven regional networks, known as ‘**Coordinated Access Networks**’ or ‘**CANs**.’
- Within each CAN region, homeless services providers coordinate to **divert** households from shelter, manage access to **shelter**, conduct homeless **outreach**, and match homeless households to **housing** program vacancies.
- Data on CAN performance is available at <https://cceh.org/data/interactive/> and <https://ctcandata.org/>.

Shelter Diversion is Housing Resolution





Why Do Shelter Diversion?

Summary of this section

- Prevents experiences of homelessness
- Better utilization of resources
- Cost Effectiveness
- Reducing trauma in children
- Reducing repeat experiences of homelessness

Reasons to Implement Diversion

- Improves system outcomes by reducing entries into homelessness
- Improves quality of life by helping people avoid the stress of shelter stays
- Conserves and targets resources – shelter beds used only when needed
- Cuts down on shelter waitlists

Cost Effectiveness of Diversion

Diversion assistance can be:

- Simple phone conciliation (no assistance funds)
- Mediation + small amount of food (\$35)
- Greyhound bus ticket (\$30-\$500)
- Other assistance like utility bills or back fees (\$200)
- First Month Rent + Deposit (\$1000+)



Less expensive than:

- Rapid Rehousing (\$5000 +)
- Shelter stay (Shelter bed is \$8600 more than Sec 8 subsidy)*
- Street homelessness (\$2414 more in hospitalization vs. housed person)



Reducing ACES In Children

Children who experience homelessness:

- Greater negative health outcomes ¹
 - Asthma, allergies, respiratory infections, ear infections, inflammation, etc.
- More hospitalizations
- Predicts future episodes of homelessness ²



¹ Cutuli, J. J., et al. "Adversity and Children Experiencing Family Homelessness: Implications for Health." *Journal of Children and Poverty*, vol. 23, no. 1, 2016, pp. 41–55., doi:10.1080/10796126.2016.1198753. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6171526/>

² Glendening, Z., & Shinn, M. (2018, September). Predicting Repeated and Persistent Family Homelessness: Do Families' Characteristics and Experiences Matter. Retrieved July 2, 2019, from <https://www.acf.hhs.gov/opre/resource/predicting-repeated-and-persistent-family-homelessness-do-families-characteristics-and-experiences-matter>



Shelter Realities

- Low-barrier
- Wet shelter
- Reduction of rules/policies
- Privacy
- Safety
- Minimal Staffing
- Hours
- Trauma
- Congregate setting during current pandemic

Coordinated Assessment Analogy

Think of Coordinated Assessment as the emergency room of homeless services.

1. Patient (client) comes for emergency service.
2. Patient is triaged (Coordinated Assessment).
3. Multi-disciplinary approach to treating and releasing.
4. ER's and hospitals in general operate from a treat and release as soon as possible approach.

Other than cost/insurance coverage, why is there such a focus on quickly releasing back home?

Why is this also true for shelters?

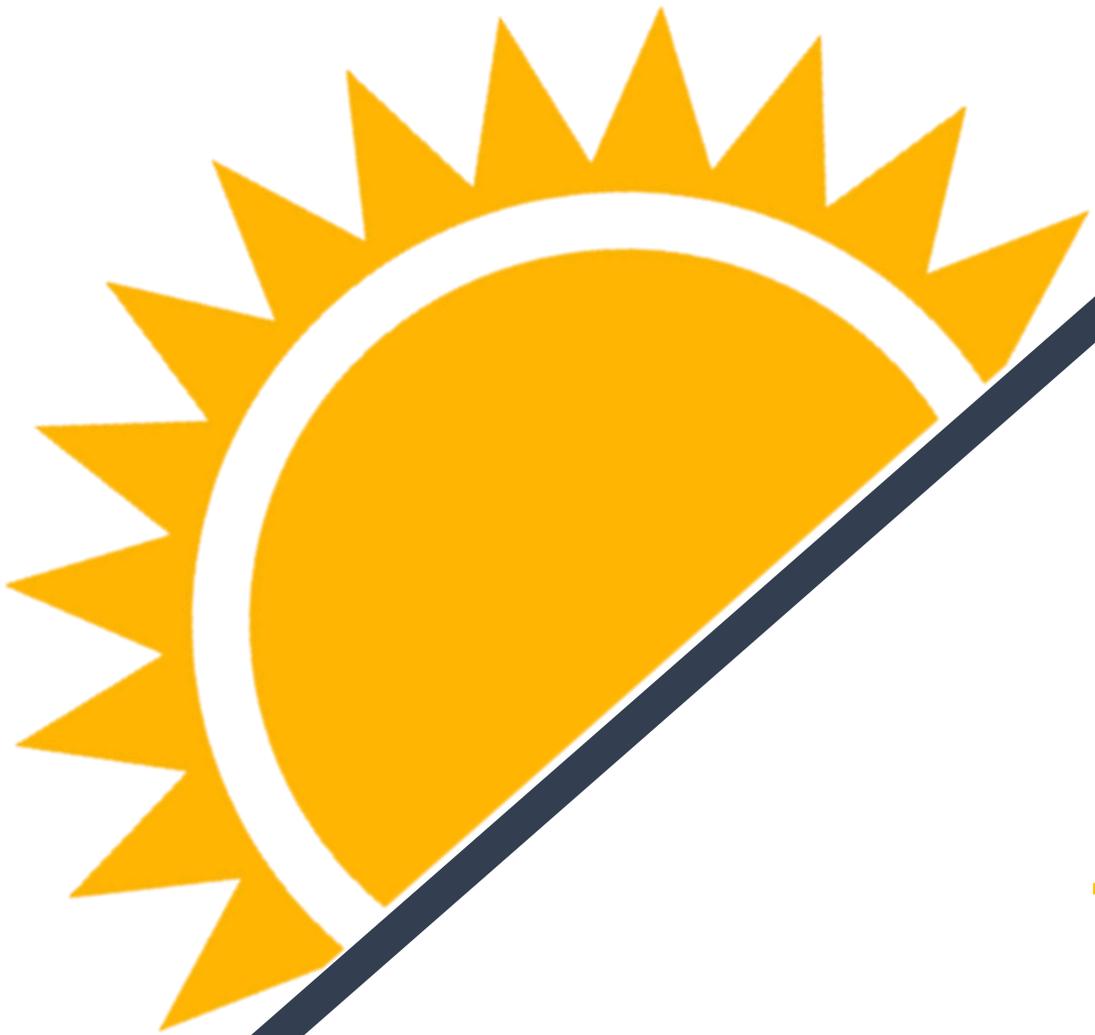
Types of Homelessness

- “Literal” homelessness refers to people sleeping out on the street or in a place that is not meant for human habitation (ex. In a car or abandoned building)
- “Imminent” homelessness refers to the risk of losing housing within a short time period (ex. Facing eviction or family/friends kicking someone out of a home)

Category 2	Imminent Risk of Homelessness	<p>(2) Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none">(i) Residence will be lost within 14 days of the date of application for homeless assistance;(ii) No subsequent residence has been identified; <u>and</u>(iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing
Category 3	Homeless under other Federal statutes	<p>(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ul style="list-style-type: none">(i) Are defined as homeless under the other listed federal statutes;(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;(iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; <u>and</u>(iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers

What is couch surfing?





How to Do
Effective Shelter
Diversion

Creating a Safe Space

Briefly introduce yourself

- Name, organization, role
- Describe the conversation
- Ask permission
- Difficulties of phone call vs. in person

Focus should be on
making the client
feel comfortable and
not judged!

A Culture Shift: The Core Values of a Trauma-Informed System of Care

Safety

Ensuring physical
and emotional
safety

Trustworthiness

Making tasks clear
and maintaining
appropriate
boundaries

Choice

Prioritizing choice
and control

Collaboration

Maximizing
collaboration and
sharing of power

Empowerment

Prioritizing
empowerment and
skill-building

Cultural Responsiveness

Cultural, historical, and
gender issues

Adapted from Roger Fallot, PhD and Maxine Harris, PhD, Community Connections, Inc.

Approach at Coordinated Entry

FROM

TO

What programs are you eligible to enter and who has a bed?

What would resolve your current housing crisis?

Assessment/eligibility

Structured problem solving conversation about their household situation and resources

Intake or put on waitlist

Support crisis resolution to avoid shelter entry

Shelter Diversion is a Conversation

You

- Listening
- Identifying Natural Supports and Resources
 - Identifying and Highlighting Strengths
- Providing information and guidance
- Myth busting & Reality Testing

Person in Housing Crisis

- Sharing their Story
- Developing their own housing plan
 - Asking Questions
 - Taking steps (with guidance, as needed) to secure and maintain permanent housing

Problem-Solving Conversation

- Can you tell me about why you are seeking emergency shelter today?
- What are all the other things you tried or thought about trying before you sought shelter today?
- How long have you been staying there?
- What is the primary/main reason that you had to leave the place where you stayed last night?
- Are there additional reasons why you can't stay there any longer?
- Where did you stay before that?
- Do you think that you/you and your family could stay there again temporarily if we provide you with some help or referrals to find permanent housing or connect with other services?
- What resources do you have right now that could help you and your family find a place to stay temporarily or find permanent housing?

Common “Barriers to Housing”

Housing First – The belief that housing is a basic necessity that must be prioritized before an individual can pursue other personal goals and work towards improving their quality of life.

Low-Income

Lack of Family or Friends

Substance Abuse

Criminal Record

Mental Illness

Foreclosure/Past Evictions

Pet Owner

Active and Empathetic Listening

- Why do it? What might listening accomplish?
- What is hard or easy about this?
- What is active listening?
- What is empathetic listening?

National Alliance on Mental Illness:

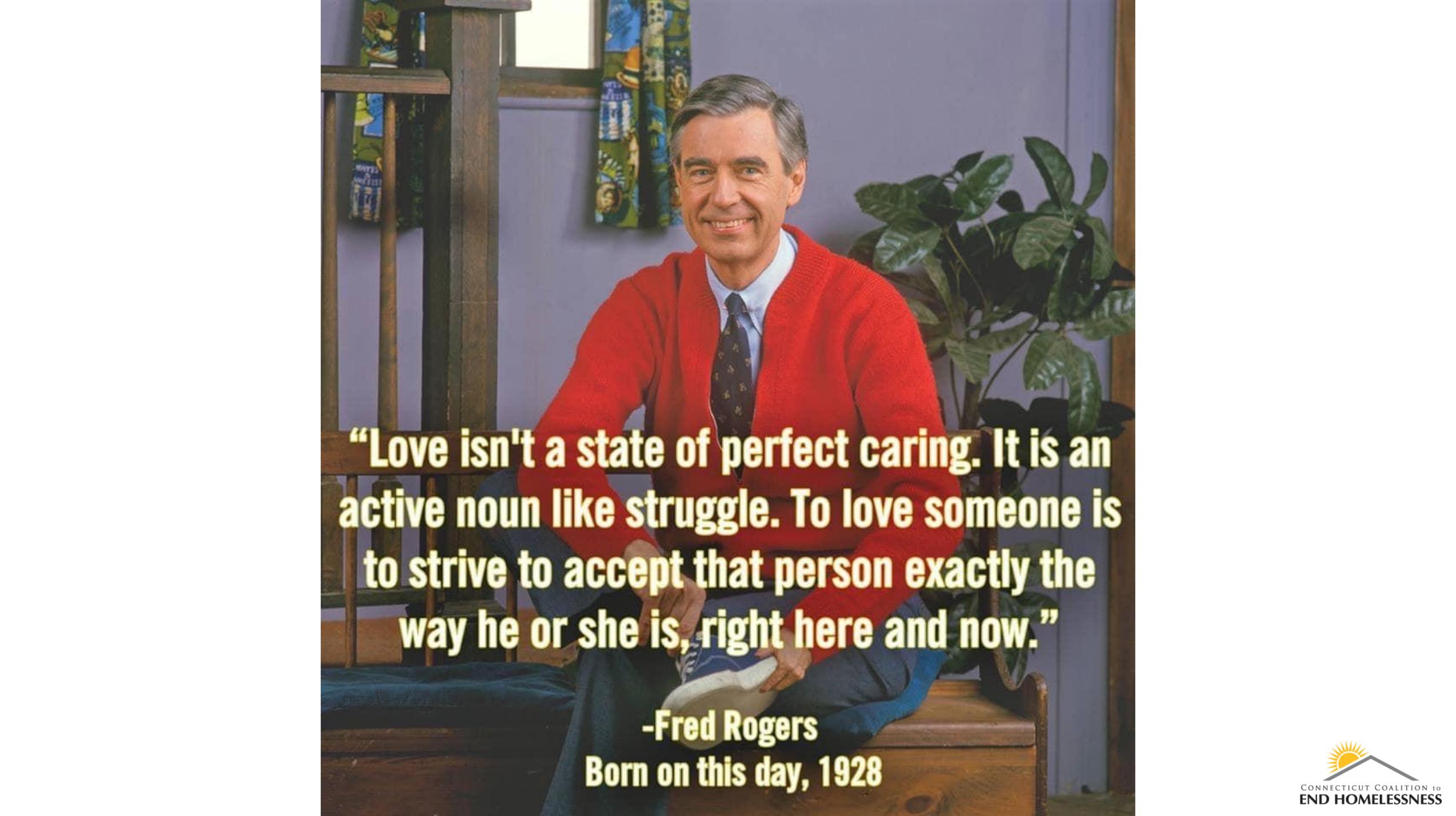
Empathy is the intimate comprehension of another person's thoughts and feelings without adding our own judgment or expectations.

Cultural Awareness

- Explicit Bias
 - “Explicit bias” refers to the attitudes and beliefs we have about a person or group on a conscious level.
- Implicit Bias
 - attitudes towards people or associate stereotypes with them without our conscious knowledge

Implicit Bias test:

<https://implicit.harvard.edu/implicit/>



“Love isn't a state of perfect caring. It is an active noun like struggle. To love someone is to strive to accept that person exactly the way he or she is, right here and now.”

**-Fred Rogers
Born on this day, 1928**

Highlighting Strengths

Explore past strengths – this step has two purposes:

1. Help identify times when **they have been of help or support to others.**
2. Begin to identify networks and support persons that may be able to help them with income or housing.

Our clients may feel dependent – we can help them remember times of **interdependence.**

What were things like for them when things were going better?

Who have they helped?

Who are their allies, friends, and family members?

Motivational Interviewing

1. Ask open-ended questions
2. Affirm positive behaviors
3. Listen reflectively
4. Summarize

Motivational Interviewing: Do's and Don'ts

Do:

- Explain what the conversation is going to be about
- Ask permission to discuss their housing situation
- Focus on understanding the person's worldview

Don't:

- Do not give advice
- Don't try to solve out the problem
- Have distractions while the person is speaking
- Speak over them/ cut them off

Responses to Motivational Interviewing

With MI done well client will...

- Feel understood and accepted
- Be more willing to follow plan
- Have feelings of hopefulness
- Be engaged

With MI done poorly client will...

- Feel judged and disrespected
- Be less likely to follow **YOUR** plan
- Shift back towards hopelessness
- Disengage

www.motivationalinterviewing.org for more on this topic

Moving Forward

After we have listened, then explored past strengths, what **housing options** do they want to pursue:

1. Going back to live with friends and family.
2. Returning to their own residence.
3. Temporarily diverted as they seek new housing.
4. Relocating to a safe, permanent place out-of-town.

What other needs
has the client
identified?

Housing Possibilities

Family, kin, or
other natural
support

Return to or get
their own
residence

Sober Home

Temporarily
diverted as
they seek new
housing

Relocating
permanently to
safe place out
of town

Shared housing

Discussing Safety Concerns with Doubled-Up Families & Individuals

Sleeping Arrangements

Ask about the sleeping arrangements for the whole family and individual family members.

“We want you (and your children) to be safe. Please think about the home where you could stay tonight”

Physical Space

- Are the heat, lights, running water, and plumbing all working reliably?
- Are there any problems with rodents, bugs, animal(s) or any other pests?
- Do you have any concerns about getting in or out of this home? (reference to having safe access and unrestricted exit)

Behavioral Health

- Is there drug or alcohol use or sales in the home that could hurt you or your child(ren)?
- Can the parent decide who has access to their child(ren)?
- Is there anything you need to do in order to stay in this home that makes you uncomfortable? Are there any “strings” attached to living there?
- Does anyone in this household physically hurt or threaten you, your child(ren), or anyone in the home?
- Does anyone in this household verbally or emotionally hurt you or your child? (belittling you, extreme sarcasm or put downs, negative comments that hurt your self-image)
- Is domestic violence or trafficking a reason that they are seeking housing assistance today?

Special Considerations due to COVID

- Ask if they or anyone in the home has:
 - a fever
 - a new or worsening cough and/or shortness of breath/difficulty breathing
 - contact with someone who was sick in the past 14 days
 - Health conditions (a blood disorder, kidney, liver, heart or lung disease, diabetes, high blood pressure, or any immunosuppressed conditions including medication-induced)
- Encourage social distancing, wearing a face mask, and washing hands regularly

Staying with family/friends



This may require some mediation!

Returning to own residence



- **May require landlord mediation**
- **Education on Fair Housing laws**
- **Mediation in Housing Court**
- **Flexible funding assistance**

Temporarily Diverted



- **Family/Friends understand time frame of stay**
- **Plan is in place to achieve more stable housing**
 - **May provide assistance with housing search**
- **Flexible funding assistance can reduce time spent with natural support**

Helping to Relocate out of town



This should only be done when verification of safe and stable housing has been achieved!

Shared Housing

- Can be achieved through formal written roommate agreement
- Each party understands rules and financial obligations
- Landlord may allow for separate leases



Benefits of Shared Housing

- **Financial** - reduced rent burden, pooled expenses for utilities, access to better neighborhoods, childcare, transportation, etc.
- **Interpersonal**- develops support network, reduces isolation, reduces stress
- **Provider benefits**- reduces length of stay, a solution to battle low vacancy rates/high rent communities/not enough subsidy funding, etc.





Resource Mapping in your Community

Resource Mapping

- Job Centers and local Temp Agencies
- Childcare options; Care 4 Kids application
- Substance abuse treatment
 - 24/7 DHMAS ACCESS line and transportation 1-800-563-4086
 - Ctaddictionservices.com
- City Fair Housing Officer/Technician and local Fair Housing Atty.
- Adult Education Services
- Veteran Services
- Elderly Protective Services
- Drop-In Centers/Showers/Clothing Closets/Basic Needs
- Local McKinney-Vento contact information

What do you need help with?

Search resources in Connecticut

<input type="text" value="Search services or programs"/>	<input type="text" value="ZIP code, city, or address"/>	<input type="button" value="Search"/>
--	---	---------------------------------------

To find resources outside Connecticut, use your state's 211. [Find your local 211](#)

Who else to connect with...



Municipal offices can be a great resource and have a wealth of knowledge about their unique cities/towns. Have locations, contact information readily available for clients.

Check their bulletin boards for timely information!



**How to Access
Flexible Financial
Assistance
through CCEH**

CCEH Emergency Assistance

Youth Homelessness Demonstration Project

- Rapid Exit and Shelter Diversion funds for **18-24 year olds**

Shelter Diversion

- Funds to keep **individuals and families** from experiencing episodes of homelessness and entering shelter

Rapid Exit

- Funds to keep episodes of homelessness as brief as possible for **families and individuals**

What's Needed?

Agency must have
signed MOU with
CCEH

Staff completing
request must have
attended CCEH
Diversion training

Access to HMIS
database and
client records

Allowable Expenses

- Security deposits
- Partial rent subsidy
- Rental arrearages
- Utility deposit or start up costs
- Utility arrearages
- Rental application fees
- Moving expenses
- Pet expenses
- Transportation expenses (including car repairs, bus passes, etc.)
- Past due medical bills
- Childcare costs
- Other costs associated with achieving shelter diversion as long as included in Housing Stabilization Plan
- Think outside the box!

When Diversion isn't possible...

- If possible connect client to CAN Outreach worker
- Make sure client contact information is accurate
 - When available provide email; assist with creating a gmail account, etc.
- Give client a way to check in
 - Your contact- email and text options, walk-in options
 - Client should not leave feeling calling 211 is the only way to connect back

Scenarios

1. Identify strengths the person has
2. Make a list of some clarifying questions you would ask.
3. Develop potential outcomes or plans for this person based on the information they've shared, keep in mind that in actual practice you will be taking into account client choice

Scenario 1

- Sam is in his early 50's. He's been in and out of emergency shelter for the past five years since he was released from a one year incarceration.
- Sam's family has tried to help and take him in on a couch on several occasions, including a brother and a cousin that both live near by, but it always ends in either verbal or physical dispute, and Sam is afraid of the police getting called.
- Sam has worked a few side jobs under the table for a friend that is a local mechanic, but nothing consistent. He has had trouble finding work because of his felony background.
- Sam feels his only option now is to get back into shelter and await a voucher for housing. He has been sleeping outside in the park for the past month since the last time his brother kicked him out.
- Sam has missed his last two appointments that he scheduled through 211, but showed up today with his all of his belongings in a backpack and looking very disheveled. He is embarrassed to admit he hasn't showered since leaving his brother's apartment.

Scenario 2

- Kathryn and her 5 year old daughter were displaced from the apartment that she was renting for the last three years following a fire in the building last week.
- Red Cross provided a \$500 gift card which she has used to pay for a hotel stay and has exhausted.
- Kathryn was in the apartment at the time of the fire and is visibly trembling during her appointment as she describes the experience.
- Kathryn has full time employment at the local post office but has not been back to work since the fire, nor has her daughter been to school.
- Kathryn tells you that her only family is a sister that lives in the state, but she is an hour commute away from her. Her sister is willing to help but doesn't know how.
- Kathryn has been calling her landlord, but has not gotten any response.

Scenario 3

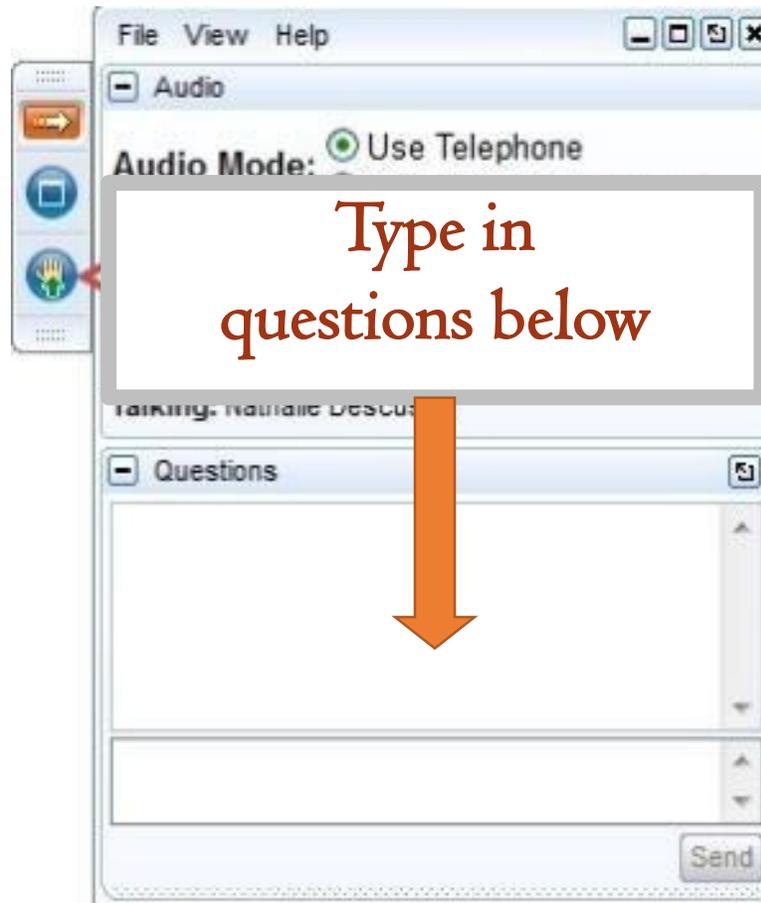
- Fred and Joy are a married couple that have been sleeping in their car for the last 5 months. They recently relocated from Maine after his father died and most of the family went their separate ways.
- Joy has a high school friend that she reconnected with on Facebook. She lives in Connecticut and when she heard of the couple's circumstances invited them to come and stay with her. However, upon arrival, the couple realized her living conditions were not healthy. There was mold and evidence of infestation in her small apartment. So, the couple decided it was better to sleep in the car. They use a rest stop on occasion for showers.
- Joy suffers from Bipolar Disorder and is on disability benefits receiving \$771/month.
- Fred has had multiple injuries to his back and was in a serious motor cycle accident years ago with an injury to his head. He has trouble remembering small details and gets confused easily while answering assessment questions. Fred is applying for disability benefits as well. He has already applied 2 times and has been denied. He is in the appeal process.
- Both present at the time of their appointment with swollen legs and complaining of pain in their ankles and feet making it difficult to get around.

Questions?

Diana Berube

Dberube@cceh.org

(860)721-7876 x105



Additional Questions and Training Needs?

Contact training@cceh.org