CONNECTICUT COALITION to END HOMELESSNESS

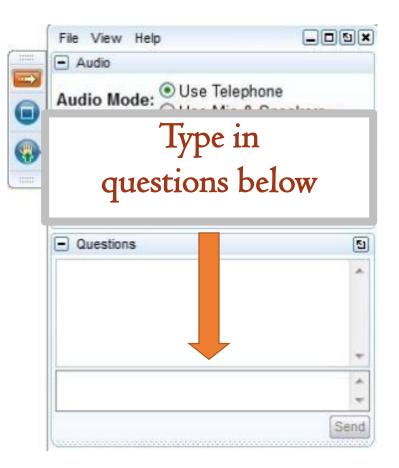


Working with Youth

February 25, 2021

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 emailed and will also be available in our Webinar Library.





Speakers

Carl Asikainen Program Manager of Field Mobilization CT Coalition to End Homelessness

Diana Berube

Program Manager of Prevention and Exit Strategies CT Coalition to End Homelessness

Amber Freeman Training and Technical Assistance Coordinator CT Coalition to End Homelessness

Roy Graham

Youth Special Projects Coordinator CT Coalition to End Homelessness

Rachel Spears

Youth Intern CT Coalition to End Homelessness

Glori Bowman

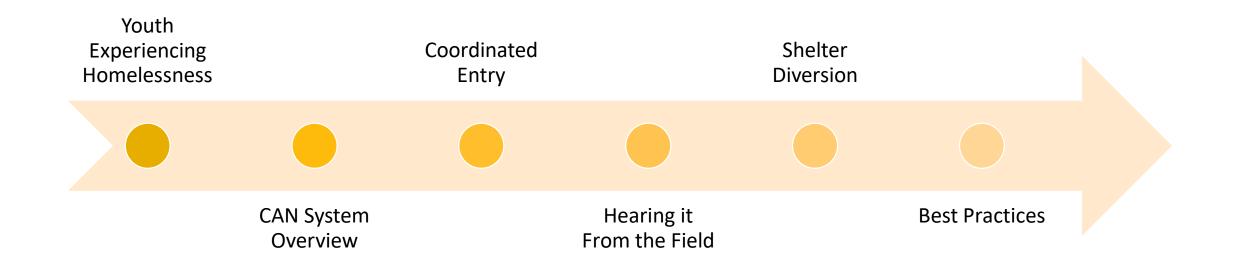
Housing Coordinator Youth Continuum

Kaylynn Sholomicky

CAN Youth Navigator Mental Health Connecticut, Inc.



Agenda





Youth Experiencing Homelessness

Youth Experiencing Homelessness in America

•On a single night in 2019, 35,038 unaccompanied youth were counted as homeless. Of those, 89 percent were between the ages of 18 to 24. The remaining 11 percent (or 3,976 unaccompanied children) were under the age of 18.

•50 percent of homeless youth are unsheltered — sleeping outside, in a car, or some place not meant for human habitation.

•The Alliance <u>estimates</u> that over the course of a year, approximately 550,000 unaccompanied youth and young adults up to age 24 experience a homelessness episode of longer than one week. More than half are under the age of 18.

National Alliance to End Homelessness: <u>https://endhomelessness.org/homelessness-in-america/whoelessness/youth/</u>

Youth Experiencing Homelessness in CT

- 2020 Youth Outreach and Count estimated 7823 experienced homelessness or housing instability.
- 5361 were unstably housed and 2462 were literally homeless at a point during the year.
- 2018 and 2019 estimates by the CT State Department of Education show 5015 youth struggling with housing. 3650 doubled up, 783 in shelter, 529 in motel/hotel, 53 unsheltered.

- 88 youth headed households 18-24 in shelter in CT from 1/1/21 to 1/31/21.
- 55% report being unsheltered upon entry to shelter.
- Currently calculating the number of youth 18-24 out of DOC during 1/1/21 to 1/31/21
- Currently calculating the number of youth engaged in RHY programming
- Youth in Placement with DCF as of 10/1/20: CIP 3982 (43% foster care, 36% relative care, 7% special study, 6% independent living, 6% congregate care)



What Causes Youth Homelessness?

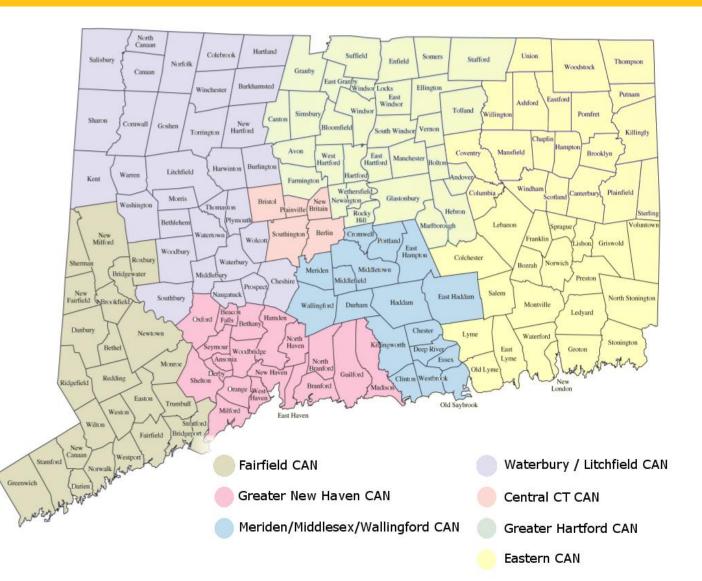
Family Conflict	Poverty and Housing Insecurity	Racial Disparities	Mental Health and Substance Use Disorders
Involvement with Child Welfare and Juvenile Justice Systems	Trauma	Youth who identify as LGBTQ	Pregnant and Parenting Youth
	Youth with Special Needs or Disabilities	Youth of Color (particularly African- American and Native American youth)	



NAEH: https://endhomelessness.org/homelessness-in-america/who-experiences-homelessness/youth/

Coordinated Access Network

Coordinated Access Network Regions

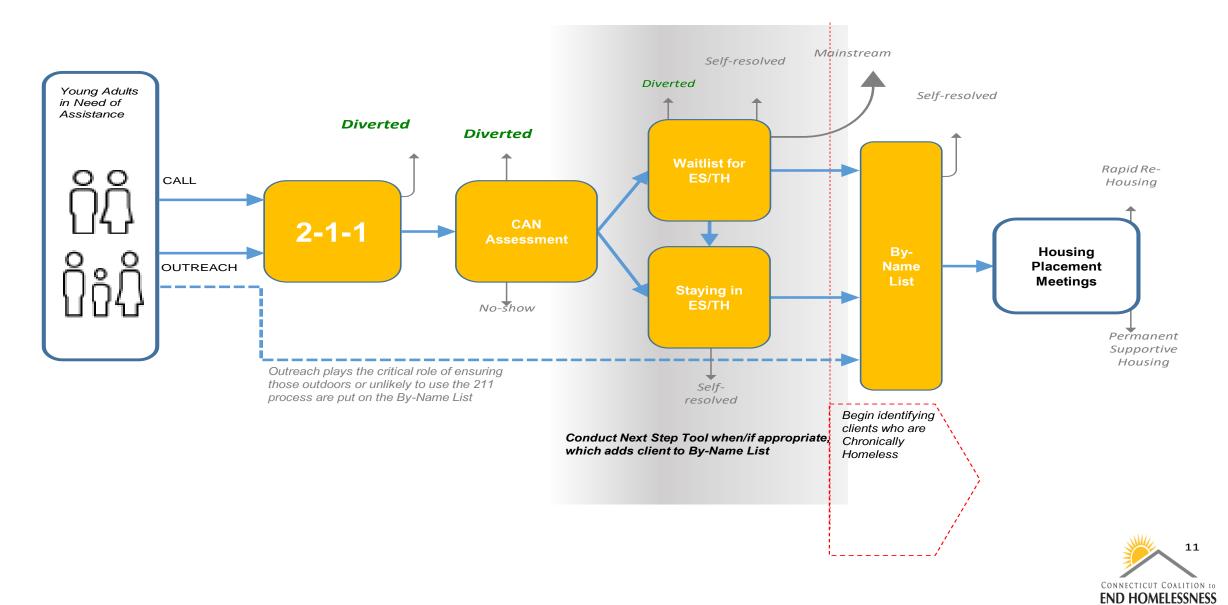


- Starting in 2014, homeless services

 (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 <u>https://cceh.org/data/interactive/</u> and <u>https://ctcandata.org/</u>.



Connecticut's Homeless Crisis Response System



Category 1	Literally Homeless	 (1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (i) Has a primary nighttime residence that is a public or private place not meant for human habitation; (ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or (iii) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
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Category 2	Imminent Risk of Homelessness	 (2) Individual or family who will imminently lose their primary nighttime residence, provided that: (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	 (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: (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; and (iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers 	

Category 4	Fleeing/ Attempting to Flee DV	 (4) Any individual or family who: (i) Is fleeing, or is attempting to flee, domestic violence; (ii) Has no other residence; and (iii) Lacks the resources or support networks to obtain other permanent housing
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 Additional resources may be available to individuals experiencing domestic violence and may be directed to those services during the initial 211 call

Youth Coordinated Entry Toolkit

Young Adult Coordinated Entry Toolkit

The **Young Adult Coordinated Entry Toolkit** is a resource compiled with various information that is **intended** to support coordinated entry staff and youth providers connect youth experiencing a housing crisis or homelessness to community services and housing solutions.

• The Toolkit is beneficial because it is a roadmap for providers to figure out the necessary information that is needed for assisting youth

 System Overview: Crisis Response for Youth experiencing severe housing instability or homelessness

• Coordinated Access Network Appointment

• Tools You Can Use

2.

3.



Questions for Shelter Diversion Strategies

- Do you have a safe place to go in an emergency?
- Are there any friends or family aware of your housing crisis?
- Is there someone we can call to let them know you're safe?
- Who did you live with when you were last stably housed?
- Where is somewhere you can go when you need someone to talk to?



Questions For Accessing Mental Health Resources

- Does the youth currently have a diagnosis that includes any mental health issues (such as depression, bipolar disorder, PTSD, psychotic disorder, schizophrenia)?
- Did the youth have any psychiatric hospitalizations or out of home placements i.e. residential/group home?
- Has the youth ever been prescribed medication for mental health related issues?
- Before they turned 18, did they experience any trauma such as physical abuse, sexual abuse, or neglect?

Resources

• CCEH Webinar on <u>Services for Young Adults Webinar by Department and Mental</u> <u>Health and Substance Abuse</u>



Questions for Substance Use

- Does the youth want to be connected to services for substance use assistance?
- If youth is pregnant and using substances, are they willing to be connected to a health provider and services to assist them?
- Are there substances that you've been using to deal with the stress of your housing situation? How do you feel about your substance use?

<u>Resources</u>

• <u>CCEH Substance Use Services Webinar DMHAS Access Line Enhancements and</u> <u>Transportation Information</u>



Services of the Department of Children and Families

- Was the young adult committed to DCF upon turning 18, currently unmarried, not on active duty in the military, and under the age of 21?
- If yes to the above that are in the military, they are ineligible for DCF Reentry services and first point of contact should be the Department of Veteran Affairs. Crisis housing might be available. For more information, contact the Veteran's Advocacy and Assistance Line at 1-866-928-8387.

Resources:

- <u>DCF Website</u> includes list of Regional offices
- <u>Mandated Reporter Training</u>
- <u>Public and Private Partnership in Ending Youth Homelessness</u> Presentation
- by DCF and Youth Continuum



The Importance of Outreach

Outreach

Outreach is providing services remotely or in-community AND is also a set of practices, trauma informed, strength based, housing first...

Goal in CT is to expand the network of partners (professional and other) to identify and refer young people to assistance.

Natural allies in this work:

- McKinney Vento liaisons
- Youth service bureaus
- Community Action Agencies
- PATH (DMHAS)

New Efforts:

- My Town Cares—Non-HMIS users and municipal level organization to address homelessness, connect with CAN. Info here https://cceh.org/my-town-cares/.
- Outreach grants now through DOH in communities throughout the state.



Hear it From the Field:

Youth Providers Roles and Responsibilities

Youth Providers Roles and Responsibilities

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Shelter Diversion

Diana Berube

Program Manager of Exit and Prevention Strategies

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.*



Shelter Diversion is Housing Resolution



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



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?

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?

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

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!

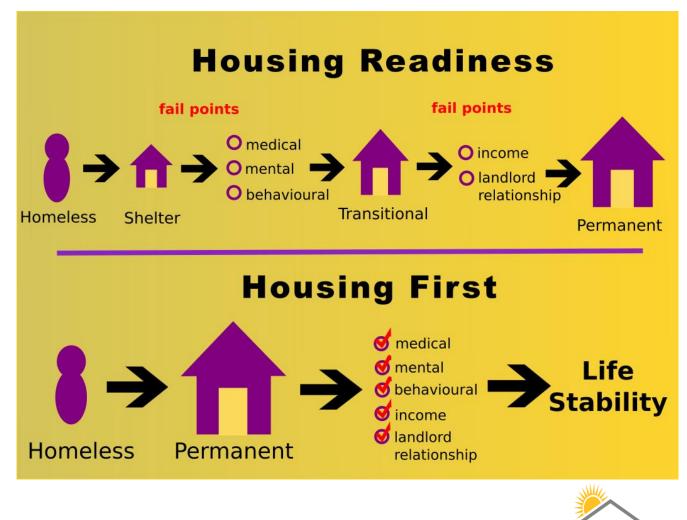


Housing First + Best Practices for Working with Youth

Housing First Approach

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.

- Homelessness is a problem with a solution, the solution is housing.
- For everyone. Whether you follow the rules or not. Whether you are "compliant" with treatment or not. Whether you have a criminal record or not. Whether you have been on the streets for one day or ten years. Permanent housing is what ends homelessness. It is the platform from which people can continue to grow and thrive in their communities.
- Housing First is a philosophy that values flexibility, individualized supports, client choice, and autonomy. It never has been housing only, and it never should be.



END HOMELESSNESS

Making Homelessness Rare, Brief and Non-Recurring

Step One:

Making Homelessness Rare – housing plans begin at intake. Cocreate a vison and set goals.

Step Two:

Make Homelessness Brief – use active and empathetic listening. Client led problem solving.

Step Three:

Make Homelessness Non-recurring – highlight strengths. Referrals to state and local agencies. Connections to employment, education, mental health and other supports.



Goals

- Focus on solving the housing crisis.
- Support and help them on a path for housing stabilization.
- Help resolve issues that impede access to housing.
- Connect client to community resources and services.
- Self-Sufficiency.



Housing- Focused	• (• E \ • (By starting with what h working again. Jtilize other community	ing stabilization ip of the plan - needs to work for the clients (not for us). what has worked previously, we increase the odds of it mmunity and state resources – link to services early hake sure they are working		t
	-	good tenant. Prepare clients to be g	ood tenants.		
		Trauma-	Housing-		

Informed

Focused

Housing Retention Focused

- Housing Plan goals focused on compliance with lease and how client will pay rent to maintain housing
- Housing Plan goals are SMART: Specific, Measurable, Achievable, Relevant, and Time-limited
- Focus on short-term goals
- Plan updated regularly
- Intensity increases if needed



Impact of Conflict and Crisis

Conflict and crisis can impede the ability to:

- Be hopeful and confident
- Clarify goals
- Effectively advocate for oneself
- Take back control
- Have positive interactions with people





Family Conflict – STRIVE Mediation

Almost 90 percent of runaway youth in shelters and 75.5 percent in residential programs reported family dynamics as critical issues leading to their homelessness.

STRIVE – Support to Reunite and Involve Each Other

STRIVE intervention consists of 5 sessions based on cognitive-behavioral and family systems. The model aims at improving family relationships by:

- Increasing emotional regulation
- Enhancing communication skills
- Improving conflict resolution skills
- Increasing establishment of boundaries and consistency

*Note – STRIVE does not replace family counseling, or sessions with licensed therapists.



Client Empowerment & Ownership

- Empower: to make (someone) stronger and more confident, especially in controlling their life and claiming their rights.
- Empower them to make their own decisions. Work alongside the client as a partner.
- Shift the conversation from
 - "What can we do to help you?" to
 - "What is your plan to become and remain housed?"





Motivational Interviewing

Motivational interviewing is a person-centered technique for strengthening an individual's own motivation and commitment to change.

- Key skills:
 - **Open-ended questions** No yes/no questions
 - Affirmations Positive comments
 - Reflections Rephrasing
 - Summaries Summing up key points of the conversation
 - Solicit Change Talk Ask questions about the desired change



Upcoming Motivational Interviewing trainings: <u>https://cceh.org/events/</u>

Community Connections

- Focus on client building a support network outside of the program.
- Provide client with independent problem solving skills and resources outside of the program.
- Connect client to mainstream and community-based services that will continue to assist them after services have ended



Examples of Community Connections

- Employment
- Adult Education
- Utility Assistance
- Food Assistance
- Churches
- Support Groups
- Dental/Medical

- Youth Mentoring
- Legal Assistance
- Parenting/Parent Support
- Financial Assistance/Literacy
- Volunteer Opportunities

- Transportation
- Counseling
- Substance Treatment
- Social Security



General Resources

Developmental Disabilities

- Department of Developmental Services: List of Program and Services
- Making Good Choices About Your DDS Services and Supports

LGBTQ Services

LGBTQ Resources CCEH Webpage

Domestic Violence

 <u>CT Coalition Against Domestic Violence CCEH</u> <u>Webinar on Housing and Serving Domestic</u> <u>Violence Clients</u>

Trafficking

- <u>CCEH Resource page on Homeless Youth and</u> <u>Trafficking</u>
- <u>National Human Trafficking Helpline</u>
- <u>Love 146</u>

Sexual Assault

<u>CT Alliance to End Sexual Violence</u>

Veterans

• <u>Veteran's Affairs CT Healthcare Systems – Resources</u> for Homeless Vets

Legal Aid

- Statewide Legal Services of CT: <u>https://slsct.org</u>
- Center for Children's Advocacy: <u>https://speakupteens.org</u> or <u>www.cca-ct.org</u>
- CT Fair Housing Center: <u>http://www.ctfairhousing.org</u>
- CT Institute for Refugees and Immigrants: <u>https://circt.org</u>

Connecticut

What do you need help with?

Search resources in Connecticut

Search services or programs

ZIP code, city, or address 🔅 🔅

Find your local 211

Search

To find resources outside Connecticut, use your state's 211.

Questions?

For any additional questions contact: training@cceh.org

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