

Meeting Room 3-4 Recovery Track

# Housing is Prevention and Healthcare: Low Barrier Models and Supports

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# Housing Is Prevention and Healthcare: Low Barrier Models and Supports

2023 NC SUMMIT ON REDUCING OVERDOSE

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# The Importance of Housing

Housing is more than just physical shelter. It is a social determinant of health and is essential for individual physical, emotional, and socioeconomic wellbeing. Housing affects communities, governments, and nations through its impact on the economy, healthcare system, workforce, and more.

-- Substance Abuse and Mental Health Services Administration (SAMHSA)













# **Overall Challenges**

People who are low-income with SUDs face additional barriers to affordable housing.

- Federal statutory requirements impose time-limited bans against living in HUD-assisted housing for people evicted for drug-related activities.
- Federal policies also allow housing agencies to prohibit people who have histories of past drug use or are considered at-risk of engaging in illegal drug use from receiving assistance.
- These policies can deny access to housing, which causes homelessness.
- Homelessness impacts people, communities, systems of care
  - Child <u>development and outcomes</u> later in life, i.e. income, educational achievement, generational housing stability, mental health
  - Costs more money (ex: Million Dollar Murray)
  - Public health issue: creates new health issues and exacerbates existing ones

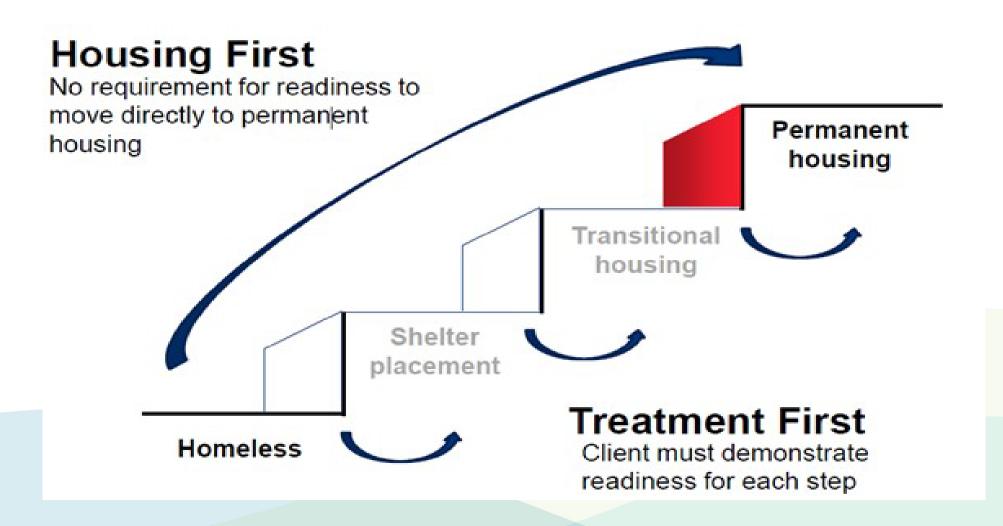


# The Importance of Housing

- Stable housing plays a vital role in overdose prevention, harm reduction, as well as recovery from substance use disorders (SUDs).
- Inability to pay rent and the threat of losing housing can lead to stress that triggers chaotic substance use or return to use.
- HOMELESSNESS IS A HOUSING PROBLEM
  - Researchers test a range of conventional beliefs about what drives the prevalence of homelessness in a given city—including mental illness, drug use, poverty, weather, generosity of public assistance, and low-income mobility—and find that none explain why, for example, rates are so much higher in Seattle than in Chicago. Instead, housing market conditions, such as the cost and availability of rental housing, offer a more convincing explanation.



# **Housing First VS Treatment First**





# The Housing First Model: Why it is Better

- Higher housing retention rates
- Lower rates of return to homelessness
- Significantly reduces the use of crisis services and/or institutions (911/first responders, hospitals/ERs, etc.)
- Improved physical and behavioral health outcomes
- Applicants not rejected based on credit history, rental history, minor criminal convictions, or other so-called indicators of "housing readiness", many of which are not evidence-based
- Tenants have a good deal of autonomy and can choose both their housing as well as their supports
- Lower rates of drug and alcohol use



### The Housing First Model: Core Components

- The Housing First model provides housing no matter where a person is in their drug use or recovery
- Few to no programmatic prerequisites to permanent housing
- Low barrier admission policies
- Rapid and streamlined entry into housing
- Supportive services are voluntary
- Tenants have full rights, responsibilities, and legal protections
- Practices and policies to prevent lease violations and evictions
- Applicable in a variety of housing models



# **Housing First vs. Treatment First**

- Housing First is the most effective approach to ending homelessnes for most people, including those with substance use disorders.
- Provides people experiencing homelessness who are in recovery from substance use disorders several options – including supportive housing and recovery housing – to address their health and housing needs.
- With Housing First, each person is offered a tailored approach including access to stable, affordable housing, linked with voluntary services as needed – to help them become and stay safely and stably housed.
- While this approach will be different for everyone, the goal is the same: to quickly end homelessness and provide individuals with the support they want and need.



# **Housing First vs. Treatment First**

- Living without stable housing can drastically worsen health, exacerbate mental illness, and increase dangerous drug use
- Treatment First model demands participants "prove" they are "ready" and earn permanent housing.
  - Paternalistic
  - Punitive: ties rights to housing to behavior, can lose housing for using drugs
- Research comparing the two models showed more people likely to leave
   Treatment First programs and more likely to use drugs than those in Housing
   First



# **Types of Housing First Interventions**

- Supportive Housing
  - Supportive Housing (PSH) combines affordable housing with intensive, voluntary, coordinated services.
  - People live independently in apartments or single-family homes in residential neighborhoods (place of their choosing), with access to services.
  - Evidence shows supportive housing:
    - Effectively ends homelessness
    - Reduces healthcare and corrections costs
    - Leads to better treatment outcomes
      - Those in supportive housing reduce their use of substances over time.
         Available studies indicate that supportive housing works at least as well

         if not better than other treatments available in the community to
         help people experiencing homelessness reduce their substance use.



# **Types of Housing First Interventions**

Fidelity to the Permanent Supportive Housing model is KEY

- Permanent Supportive Housing
  - Substance Abuse and Mental Health Services Administration (SAMHSA):
    - SAMHSA defines PSH as, "...decent, safe, affordable **community-based housing** that provides tenants with the rights of tenancy under state and local landlord tenant laws and is linked to **voluntary and flexible supports and services** designed to meet tenants' needs and preferences," in their <u>Permanent supportive housing</u>: How to use the <u>Evidence-Based Practices KITs</u>.





# **Types of Housing First Interventions**

#### Fidelity to the Permanent Supportive Housing model is KEY

- United States Interagency Council on Homelessness: <u>Fact Sheet with SAMHSA on</u> <u>Housing First in PSH</u>
  - Integration: Federal law and the Olmstead Supreme Court decision support the need for PSH to be provided in integrated settings. Such settings may be scattered-site housing or housing in which units are available to people who do not have disabilities or histories of homelessness.
  - Flexible, voluntary services
  - Choice of housing
  - Separation of housing and services
  - Decent, safe, affordable





### **PSH Works & Improves Outcomes!**

- Improved quality of life (goal attainment/community integration/recovery)
- Housing stability and retention/reduce return to ALFs, justice involvement
- Improved health outcomes
- Reduced time spent homeless
- Reduction in admission to emergency rooms
- Reduction in hospitalizations
- Greater participation in mental health and substance abuse treatment
- Cost effective AND the person's more desired housing option



# TAC Types of Housing First Interventions

- Another component of the continuum of housing supports is Rapid Re-Housing (RRH)
- Rapid Re-housing is tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services. in order to support individuals in quickly obtaining and maintaining permanent housing.
- Evidence Based Practice which has been proved effective in assisting individuals in securing and maintaining housing while simultaneously addressing other goals
- Focuses on quickly ending homelessness through
  - Reducing length of time experiencing homelessness
  - Exit individuals quickly into permanent housing
  - Limit returns to homelessness



# Rapid Re-Housing

- There are three core components to RRH
  - Find: Housing Identification
    - Recruiting landlords, removing potential barriers, securing housing
  - Pay: Rent and Move-in Assistance
    - ✓ Time-limited financial support, usually up to 6-months, to allow individual to transition and work on other self-directed goals to promote housing stability
      - Upon completion of the program, individuals maintain the housing and pay rent on their own
  - Stay: Individual-driven Case Management and Services focus on accessing supports to stay in housing
    - Time-limited supports that collaborate with individual to address barriers to housing stability



# **Recovery Housing: The Challenges**

- Not all residents have been standardized or accredited which <u>can</u> make it vulnerable to inconsistent implementation, substandard housing, and predatory practices
- Some recovery housing is more restrictive and narrow in its definition of recovery (ex: not allowing Medication Assisted Treatment (MAT))
- Many recovery residences have residents split the cost of housing expenses, thus costs
  can vary depending on area rent and number of individuals residing in housing



# **Recovery Housing Best Practices**

- Funding Recovery Residences that accept Medication Assisted Treatment (MAT)
- Recovery Residents referral and acceptance should be based on what is best for the recovery of individual
- Standardization/Certification of residences that receive state-support
- Recovery Residents are part of a housing continuum
  - Individuals have different paths to recovery and some may choose to support recovery in drug/alcohol-free environments
  - Should be connected to other systems of care and continuums of housing (May require support for integration)
- Some states have offered scholarships, which go directly to the operator, to support rent while a person obtains income
- Resource: National Alliance for Recovery Residences Standards and Code of Ethics



# **Housing Options**

- People need a safe place to live to fully engage in harm reduction, substance use treatment, or recovery services.
- No intervention is one size fits all, everyone has unique needs and circumstances (that change over time)
- Personal choice is key
- Settlement funds provide an opportunity to utilize a Housing First approach that leverages existing infrastructure and addresses the unique needs of each community



# **Creating Housing First Opportunities**

- Policymakers can create additional supportive housing by:
  - Providing additional rental assistance and other housing resources;
  - Reinvesting savings created by supportive housing that reduces use of health services and corrections to increase the supply of rental assistance;
  - Making greater use of Medicaid services for supportive housing;
     and
  - Targeting supportive housing only on those who need it.



# **Creating Housing First Opportunities**

- Housing First approaches with settlement funds can include:
  - **Eviction prevention** helps people remain stable in their current housing and can also prevent overdose
  - Rent assistance, connections to legal help (ex: OC Housing Helpline), utility assistance flexibility is key
  - Move in assistance can help someone access housing otherwise unavailable due to high cost of applications, security deposit, utility deposit(s)



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# Housing Is Prevention and Healthcare: Low Barrier Models and Supports

# Q&A Session

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