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| Housing First, Harm Reduction, and Trauma Informed Care |
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**Learner Guide: Heartland Housed January 2024**

# Housing First

# What is a Housing First Approach?

* Quick access to housing
* Voluntary and robust supportive services
* Centered on tenant choice and education
* Low barrier and targeted
* Promotes housing stability
* Embraces a Harm Reduction approach

**Understanding the Impact of Racial Disparities and Culture**

* Across the United States, the percentage of people of color experiencing homelessness is greater than their percentage of the overall population
* It is important to **acknowledge the racial disparities within the homeless system** and how it impacts the individuals we work with; this is also important in understanding who we are engaging with and how their experiences may differ
* An important strategy is utilizing ***cultural humility***, which incorporates a lifelong commitment to self-evaluation and self‑critique to redress the power imbalances in a given relationship. This includes understanding historical and current context.

# Barriers to Housing

**Structural/Institutional Barriers:**

* Transportation
* Limited housing inventory​
* Lack of culturally appropriate services​
* Restrictive application requirements​
* Complex processes​
* Limited opening hours (9-5 M-F)

**Factors that can contribute to Individual Barriers:**

* Language​
* Literacy​
* Behavioral health​
* Physical health​
* Justice involvement​
* Eviction history​
* Poor Credit

# Strategies for Addressing Structural Barriers

**Provide Culturally Appropriate Services**

* Ensure program staff reflect the community served​
* Know the language needs of your community – do your policies and practices reflect those needs?​
* Provide multiple ways for households to access services and communicate needs
* Meet people in community when possible (go to them vs come to us)

**Simplified Application Process**

* Minimize the hoops (how many steps in the process)​
* Be clear and consistent with process​
* Use Plain Language​
* Provide multiple access points​
* Be clear about prioritization

**Housing Search**

* Housing navigators​
* Connections to landlords /landlord pools​
* Tools/resource for housing search​
* Transportation assistance​
* Access to computer/phone​
* Training on Fair Housing​
* Partnership with tenant rights and/or legal aid

# Housing Stability Strategies

* Lease Education​
* Renter Skill Building​
* Connections to community​
* Eviction Prevention Plans​
* Crisis Response Plans

# Promoting Housing Stability: Questions to Ask

* How do you approach wants vs needs- and how do those factors into choice?
* How do we support people when issues come up?
* How do we get comfortable asking people what skills and support they need?
* How can we provide structure- without being rigid, and while allowing for flexibility?
* Identifying ways to reduce barriers in your community and program(s): what are you doing now- and what can you do moving forward?

**Fundamentals of Harm Reduction**

***The philosophy of harm reduction promotes and supports the right of people who use substances and engage in other risky behaviors to be treated with dignity and respect; their right to exercise self-determination related to use; and their right to a collaborative approach in therapeutic relationships*.** – Midwest Harm Reduction Institute

**Harm Reduction Principles**

* Understands that most people change gradually and experience ups and down
* Emphasizes self-determination, is person-centered, and encourages honesty
* Non-judgmental, non-coercive provision of services and resources
* Individualized; no two people are the same or have the same journey
* Builds upon once success at a time
* Empowers individuals to choose their own goals
* Fosters individual growth, discovery, and decision-making

**What Harm Reduction Is Not:**

* Means of Enabling – affirming behaviors are ok to continue
* “Anything Goes” – ignoring consequences or shields
* Path to traditional treatment programs – “hooking” people into care
* Passive – avoiding hard conversations

# Harm Reduction in Practice

**Harm Reduction is an approach to working with individuals and families that, if used effectively, can:**

* Help people open up and be honest about their substance use/relapse
* Help you to find out more information about someone’s drug use while keeping them safe, which helps tailor the intervention and strategies
* Reduce the impact of stigma
* Increase trust, foster engagement, build a relationship
* Improve public health with individuals as well as community-wide
* Recognize how the complexity of poverty, racism, class, isolation, trauma, sex-based discrimination (and other inequalities) affects peoples’ vulnerability and capacity for effectively dealing with behaviors related to harm
* Empowers individuals to choose their own goals
* Fosters individual growth, discovery, and decision-making

# What can Harm Reduction look like?

* Low tar cigarettes
* Helmets
* Seat belts and airbags
* Narcan

# Getting Buy-In on a Harm Reduction Approach

* Consider who can help to lead the effort to implement a harm reduction approach in your organization. Who needs to be on board and in the know?
* What can you do to communicate a harm reduction approach?
	+ Formal training
	+ Lunch and learns
	+ Informal opportunities
* Make sure everyone is on the same page
	+ Directly address questions, concerns, and misconceptions
	+ Use real examples and case studies, role playing
	+ Utilize a specific team, task force or committee for ongoing engagement and feedback

# Implementing Harm Reduction Policies

* Get staff input
* Create opportunities for discussion on what harm reduction looks like for the organization and how the approach will be applied
* Provide training and support on the application of harm reduction
* Provide opportunities for discussion and coaching for staff around harm reduction
* Have a plan for training & supporting property management and other non-services staff
* Be clear and consistent with staff on what is expected and how harm reduction principles will be applied
* Communicate regularly

# Trauma-Informed Care

# Types and Impacts of Trauma

***Individual trauma results from an event, series of events, or set of circumstances experienced by an individual as physically or emotionally harmful or life-threatening with lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being. -****Substance Abuse and Mental Health Services Administration (SAMHSA)*

**Types of Trauma**

* Large-Scale Events: The things you see in the news. This might include things like war, or natural disasters.
* Interpersonal Events: This category might include things like assault or interpersonal violence- and also includes things that aren’t physical, such as divorce, or loss of a loved one.
* Historical Trauma: Includes planned violence or segregation, or prevention of cultural or spiritual practices designed to deculturate and assimilate an entire group of people.
* Systemic Trauma: Something that creeps into the fabric of society. It can be overt or covert- and builds up over time.
* Racial Trauma: Complex trauma resulting from the ongoing experience of oppression and subordination. Mental and emotional injury caused by encounters with racial bias

**Three “E’s” of Trauma**

* Events: may include actual or threat or harm; may occur once or repeatedly over time
* Experience: how the individual assigns meaning to an event; may be traumatic for one person and not another
* Effects: may occur right away or have a delayed onset; a key component of the experience of trauma. Connection between event and effects may not be realized

**Examples of the Effects of Trauma**

* ​Hypervigilance​
* Inability to cope with everyday stresses​
* Everyday experiences may have negative associations​
* Lack of trust/poor relationships​
* Challenges in cognitive processes (memory, attention, regulating behavior)​
* Limited ability to rationalize

# SAMHSA’s Six Key Principles of a Trauma-Informed Approach

**Trauma-Informed Care (TIC):** adoption of principles and practices that promote a culture of safety, empowerment and healing.

* Realizes the widespread impact of trauma and understands potential paths for recovery.
* Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system.
* Responds by fully integrating knowledge about trauma into policies, procedures, and practices.
* Seeks to actively resist re-traumatization.

**Six Key Principles:**

1. Safety: This isn’t just physical safety – but also emotional safety. Examples include:
	* Rules for when someone can enter a unit​
	* Security features ​
	* Good connections with service providers (mental health services, human services)
	* Own keys, locks
2. Trustworthiness and transparency: People feel safe when they know what to expect, and also that people will follow through. Examples include:
	* Tenant leadership/Input​
	* Quality improvement​
	* Hiring peers​
	* Tenant education
3. Peer support: By connecting those we work with to peers; it can help folks to flourish and gain support in a way that we are unable to provide. Examples include:
	* Tenant leadership/Input​
	* Hiring peers
4. Collaboration and mutuality: walking with a person side-by-side, instead of walking behind or in front of a person. Your clients’ goals should be exactly that: theirs! Examples include:
	* Co-creation of goals (driven by client)
	* Seeking and implementing input
5. Empowerment, voice and choice: By providing even the smallest of choices, we can help to bring back some dignity as well as agency to people. Examples include:
	* Self-care​
	* Adopting Trauma informed policies​
	* Shared decision making/tenant leadership​
	* Policies that support staff
6. Culture, history and gender: Culture, gender identity, and what’s happened in our past shapes who we are; it’s important to be sensitive to these things and incorporate them so that people feel comfortable.
	* Commitment to diversity and inclusion​
	* Anti-racist approach​
	* Adopting policies and protocols​
	* Community events and programs

Resources

* [www.csh.org](http://www.csh.org)
* <https://www.youtube.com/watch?v=QpyYPscNzLw&list=PLn2dcn1mdW4oAhzNDrCrI0AGx11FJ_ukC&index=3> (Principles of Housing First)
* <http://www.samhsa.gov/medication-assisted-treatment/treatment#medications-used-in-mat> SAMHSA Harm Reduction and Substance Use Interventions
* <https://www.orgcode.com/free-resources/p/honest-monthly-budget-worksheet> (A Harm Reduction resource that supports conversations about finances and substance use)