

**DATE:** December 18, 2007  
**TO:** Children and Families Commission of Orange County  
**FROM:** Michael M. Ruane, Executive Director   
**SUBJECT:** Commission Workshop - Services to Homeless Children and Families

**SUMMARY:**

The second of three scheduled workshops in Commission priority areas will take place immediately following the Commission meeting.

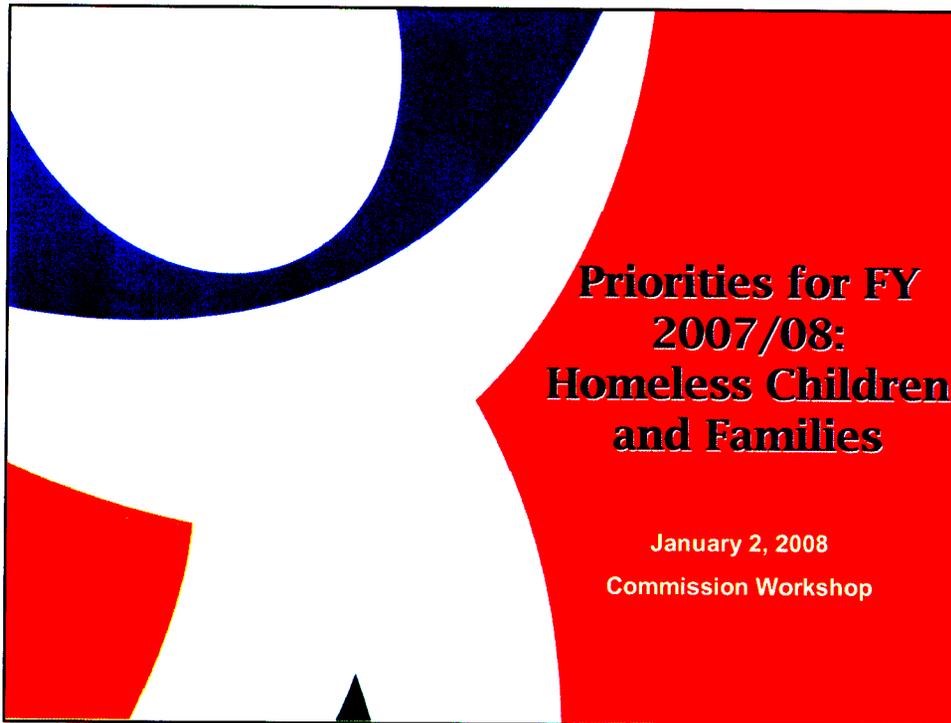
The intention of the workshop is to review relevant data and existing community efforts in the area of services to homeless children and conclude with a potential plan for follow-up actions.

The next workshop is scheduled on the following dates:

Proposed Date	Topic Area
May 7, 2008	Developmental Delays- Speech and Language

Enclosed are:

- 1. Presentation on Services to Homeless Children and Families**  
*This is the main presentation material for the workshop.*
  
- 2. Background information on the Housing First Model- National Model to Serve Homeless Families**  
*This information is reference material provided by the speaker from Beyond Shelter, and is not the focus of the workshop presentation. It describes a homeless prevention service model utilized nationwide.*



## Session Objectives



- Understand scope and challenges of addressing family homelessness in Orange County
- Review current Commission investments and opportunity to further leverage investments
- Review opportunities to expand Commission's investment based on successful models
- Set priorities and next steps

## Defining Homeless



- Under current law, children fall through a gap between the definitions used by the Department of Education ( McKinney-Vento), the Department of Housing and Urban Development (HUD), and other service agency definitions.
- Definitions that require multiple moves within a year to be considered homeless and be eligible for services cause greater instability in the lives of vulnerable children and youth.

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## Defining Homeless



### HUD Definition

Someone that lacks a fixed, regular, and adequate nighttime residence and an individual who has a primary nighttime residence, that is:

- a supervised publicly or privately operated shelter designed to provide temporary living accommodations
- welfare hotels, congregate shelters, and transitional housing for the mentally ill
- an institution that provides a temporary residence for individuals intended to be institutionalized
- A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings

### McKinney-Vento (Education)

Children and youth that:

- share housing of other persons due to loss of housing, economic hardship, etc
- live in motels, hotels, trailer parks, or camp grounds
- live in emergency or transitional shelters
- are abandoned in hospitals
- are awaiting foster care placement
- the primary nighttime residence is a public or private place not designed for sleeping
- live in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings
- are migratory

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## Counting the Homeless



- McKinney-Vento (Education)
  - Requires school districts to designate a Homeless Liaison who identifies homeless children to ensure their equal opportunity for educational attainment. Their counts include children living in motels, with multiple families, foster care, etc (see previous slide for all categories)
- HUD's protocol for counting
  - Point In Time Counts
    - Conducted on one night per year
    - Count homeless people living in emergency and transitional shelters (programs that usually last from 1 to 24 months) or on the street in places "not meant for human habitation" – places like parks, cars, abandoned buildings, doorways or sidewalks
    - Most recent Point in Time study, January 2007, recorded 27,732 homeless
  - Emergency vs. Transitional
    - Emergency Shelters offer temporary short-term shelter to homeless individuals and families
    - Transitional Housing facilitates the movement of homeless individuals and families to permanent housing by providing housing with services generally up to a two-year period

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## Homeless Children in OC



- Projection of Homeless per McKinney-Vento definition:
  - 3,264 children that are in motels or shelters (FY 05/06)
    - 1,369 under age five\*
    - 1,895 school age (for FY 05/06)
    - 9,747 school age children live in overcrowded conditions (families doubled or tripled up in apartments)
  - 13,011 children who are homeless or in overcrowded housing.
- With the exception of San Diego County, Orange County has fewer homeless students than the nation, state, and similar and neighboring counties. On average, in a group of 1,000 students, 3.7 would be homeless in Orange County compared to 5.5 statewide and 8.3 nationwide.
- Levels of homelessness vary significantly by school district. In Buena Park School District, 18 out of 1,000 are homeless. Centralia (also in Buena Park), Magnolia (in Anaheim) and Anaheim City School District all have more homeless students than the state average.

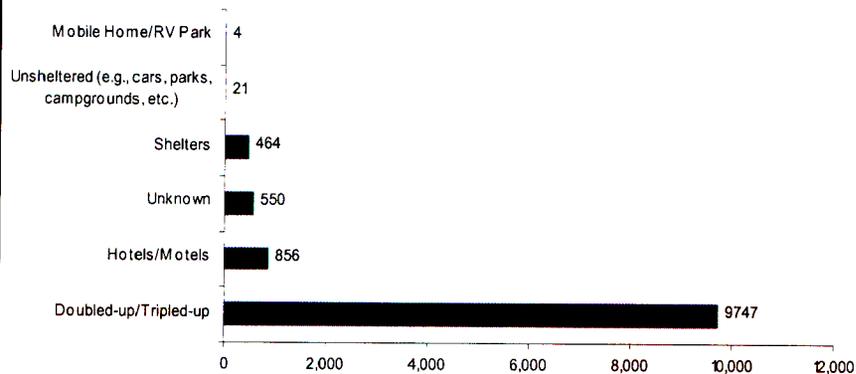
\*estimated amount based on previous research conducted by Burt, et al for the Urban Institute that indicates 42% of all homeless children are under the age 5.

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## School Age Homeless Children



Primary Nighttime Residence of Children and Youth Identified as Homeless/Unstably Housed (K-12)  
Orange County, 2005/06



Source: 2007 Report on the Conditions of Children in Orange County, 2007. Based on data reported by the Orange County Department of Education consistent with the McKinney-Vento Homeless Assistance Act. <sup>8</sup>

## Homeless Children



- Critical Issues for the Child Development
  - Younger children are the largest cohort of homeless children. Younger students are more likely to be homeless or unstably housed than older students.
  - Homeless children are more likely to show developmental delays and health problems, impacting school readiness and success.
- Low income, young and single parenthood, and domestic violence all contribute to homelessness among young children.

## Resources Available to Homeless



- Approximately 68 Emergency Shelter and Transitional shelters
- 3,400 Beds available
  - Emergency shelter beds- 1,512
  - Transitional shelter beds 1,888
- Permanent Supportive Housing Beds 1,875

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## Commission Investments



- Strong Families Strategic Goal Area
  - HomeAid Strategic partnership for shelters and transitional housing
    - Fullerton Interfaith New Vista Shelter (\$200,000 1/1/06-12/31/10)
    - Casa Teresa Transition House (\$1,365,000 1/1/04-12/31/08)
    - Precious Life Shelter (\$350,000 1/1/07-12/31/08)
    - Orange County Rescue Mission
      - Village of Hope (\$150,000 1/1/06-12/31/06, \$839,600 capital expenses for 192 bed emergency & transitional)
      - Buena Park (30 year term \$1,300,000)
  - Funding transitional housing programs
    - Colette's Children's Home (\$210,000)

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## Commission Investments



- Supportive Services for Families:
  - School Nurses and Public Health Nurses
  - Family Resource Centers
  - Health linkages to primary and specialty care services
- Support for Anaheim Motel Family Initiative: Mixture of service providers who promote service accessibility and utilization to strengthen families.
  - VNA
  - Public Health Nurses/Health Care Agency
  - Orange County Rescue Mission
  - Magnolia USD and Anaheim City SD
  - Social Services Agency
  - Magnolia Park Family Resource Center
  - City of Anaheim

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## Strong Families Results



- 493 life skills classes held
- 37,763 bed nights provided for children 0-5 and families
- 717 psychological counseling sessions provided
- 1,742 case management meetings held
- 116 parents enrolled in educational programs
- 38 families living independently after graduating

Based on Fiscal Year 2006/07 Data

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## Immediate Challenges



- Increasing demand for shelters and housing
  - Recent closures:
    - Temporary closure of Catholic Worker Shelter/ Isaiah House, Santa Ana
    - Closure of Lincoln Inn Motel in Anaheim
  - Increasing demand at emergency armory shelters managed by St. Vincent de Paul
- Continued housing affordability challenges despite sub-prime mortgage crisis and resultant impact on prices
  - Hourly wage needed to afford a median-priced one-bedroom apartment in Orange County is \$23.81 above typical homeless wage of \$10 per hour or less. (2007 Conditions of Children).

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## Presenters



- Ryan Macy-Hurley, Institute Coordinator, Beyond Shelter, Inc. Los Angeles, “Housing First Model”
- Margie Wakeham, Families Forward, “Increasing Demand for Services in Orange County”
- Dr. Steve Callaghan, Hoag Memorial Emergency Medicine and Medical Director OC Rescue Mission Clinic
- Public Health Nursing Representative, Motel Services Collaborative

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## Local Service Provider Perspective



- How are the critical needs of the homeless families in Orange County being met?
- What are the unique needs of children? What are successful ways that these needs are being met?
- Given the Commission's role in promoting school readiness and supportive services, how can the Commission assist these families in successfully transitioning to permanency?

## Housing First 101

### The Housing First Approach for Homeless Families

Presented by  
**Beyond Shelter**  
1200 Wilshire Blvd, Suite 600  
Los Angeles, CA 90017



Emergency shelters and transitional housing are simply “stepping stones.” If at the end of our interventions and our support, the homeless are still homeless – or at risk of another episode of homelessness – then what have we really accomplished?



Homelessness ends when an individual or family is stabilized in permanent, affordable housing, whatever that permanent housing type may be – and whatever the support systems that must be in place to help them stay there.



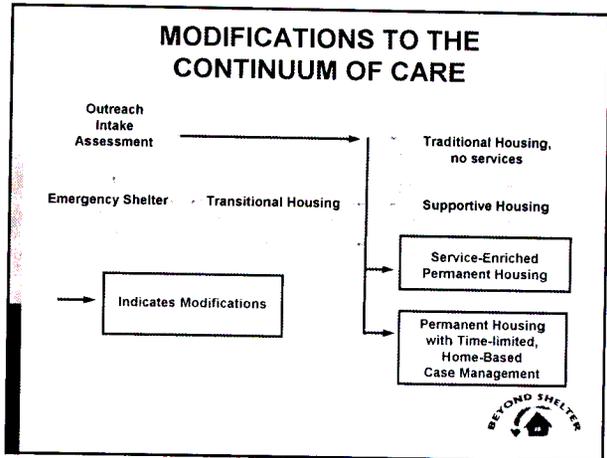
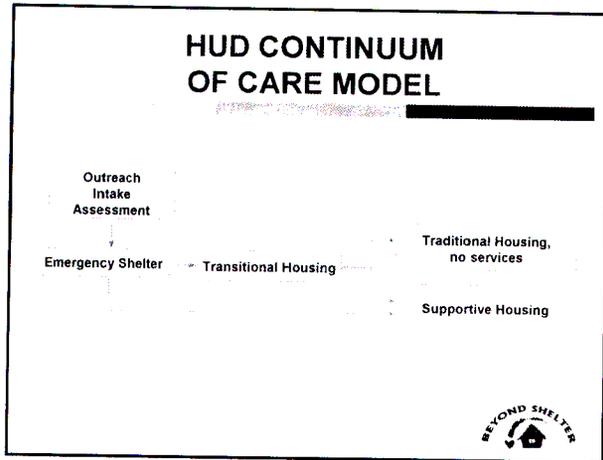
## NAEH 10-YEAR PLAN

In 2000, The National Alliance to End Homelessness produced a *Ten Year Plan to End Homelessness* in the United States.

Within that Plan, the housing first approach is recommended for most homeless populations, including persons with psychiatric and addiction disorders.

The emphasis of the housing first methodology is on the immediate return of homeless individuals and families to permanent housing.





### ADDITIONAL HOUSING OPTIONS

- Service-Enriched Housing – Private or nonprofit rental housing, with crisis intervention and services coordination (& often program activities) available to all residents, regardless of special needs.
- Permanent (scattered site) Apartment with Home-based Case Management – Available through outside sources, either time-limited or long-term.

### THE HOUSING FIRST APPROACH

Moves homeless families into permanent rental housing *as quickly as possible*, with the services traditionally provided in *transitional* housing provided after relocation into permanent rental housing. The basic goal of “housing first” is to “*break the cycle*” of homelessness and prevent a recurrence.

What differentiates a housing first approach from other housing models is that there is an immediate and primary focus on helping families and individuals, including those with substance abuse addictions and/or psychiatric disabilities, quickly access and sustain permanent housing.



Regardless of the population served, what characterizes a program as taking a Housing First approach is simply:



- There is a focus on helping individuals and families access and sustain permanent housing as quickly as possible and that housing is not time-limited;



- Intensive services are delivered primarily following a housing placement to improve housing stability and individual or family well-being; AND



**•Housing is not contingent on compliance with services – instead, participants must comply with a standard lease agreement and are provided with the services and supports that are necessary to help them do so successfully.**



**The housing first approach provides a critical link between the emergency & transitional housing systems and the community-based social service, educational, employment and health care systems that bring about stability, neighborhood integration and improved health and welfare of families and individuals.**



**The approach has been adapted for work with homeless families and chronically homeless individuals.**

**Program models vary depending on the target population and the resources that are available.**



## **TWO PREMISES OF HOUSING FIRST**

**Permanent housing should be the central goal of our work with people experiencing homelessness.**

**By providing permanent housing assistance immediately and up front, we can significantly reduce or eliminate the time people spend in homelessness.**



While acknowledging and addressing the personal factors that contribute to family homelessness, the housing first methodology also directly addresses one root cause of the problem: the lack of affordable housing.



The housing first approach helps families and individuals (including those with special needs) to move into permanent housing of many different types, including housing in the private rental market, often with a subsidy – and then offers home-based services (often time-limited and transitional) to help them stabilize and maintain their housing.



## COMPONENTS OF HOUSING FIRST

- Crisis Intervention and Stabilization
- Intake and Assessment
- Assistance Moving into Permanent Housing
- Home-Based Case Management (time limited & transitional or long term)



## Components of the “Housing First” Methodology



**STEP 1: CRISIS INTERVENTION  
& SHORT-TERM STABILIZATION**

Among families, this phase usually includes emergency shelter services and short-term transitional housing geared to special needs, i.e. domestic violence, substance abuse treatment, stabilization.

Among the chronically homeless, on the other hand, models may place individuals directly into apartments without a period of short-term stabilization and without conditions on sobriety or abstinence.



Some models, however, place families with special needs immediately into permanent housing, master-leasing the unit for a period of time while the adult head-of-household engages in treatment or recovery.



This practice is not common, however, among family programs. While Housing First programs for chronically homeless individuals may not require sobriety for participants, such a requirement among families is vital in order to ensure child protection.



**STEP 2: SCREENING, INTAKE  
& NEEDS ASSESSMENTS**

The "needs assessment" results in an Action Plan, including short and long-term goals and objectives with concrete action steps.

Can occur immediately or after stabilized in emergency services.



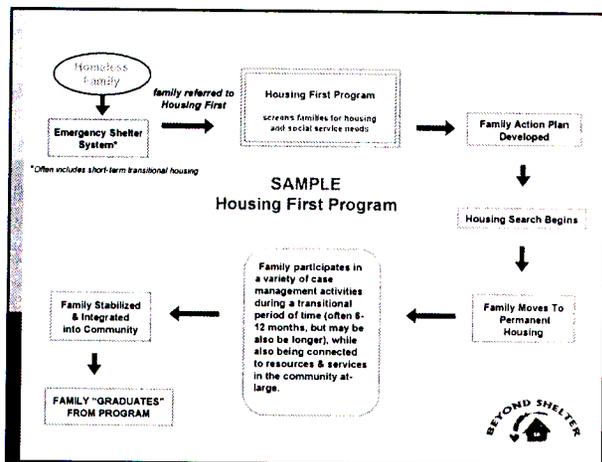
### STEP 3: ASSISTANCE MOVING INTO PERMANENT HOUSING

- Overcoming barriers to accessing affordable housing.
- Assistance applying for housing subsidies, move-in funds, etc.
- Tenant education.
- Assistance conducting housing search, presentation to owners, negotiating.



### STEP 4: PROVISION OF HOME-BASED CASE MANAGEMENT

- Intensive during the first 90 days.
- Intensifies during crises.
- Includes connecting people to community resources and services to meet their particular needs.
- May include longer-term case management for vulnerable and at-risk families and individuals.



### ADAPTATIONS

There is no single model for housing first programs. The basic methodology has been successfully adapted to a variety of target populations.

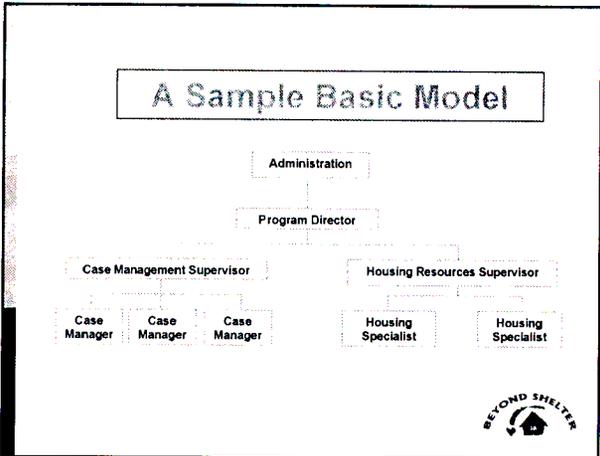
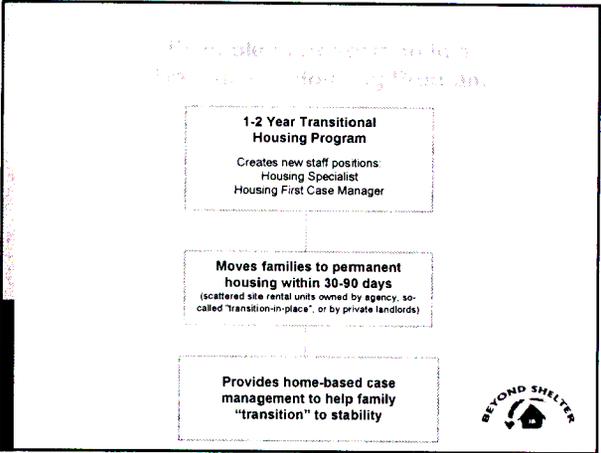
A housing first approach can be implemented by one agency or it can be accomplished through the collaboration of agencies, each providing specialized services.

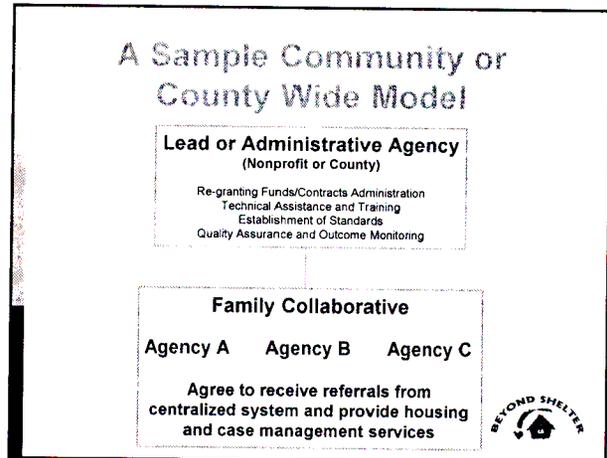
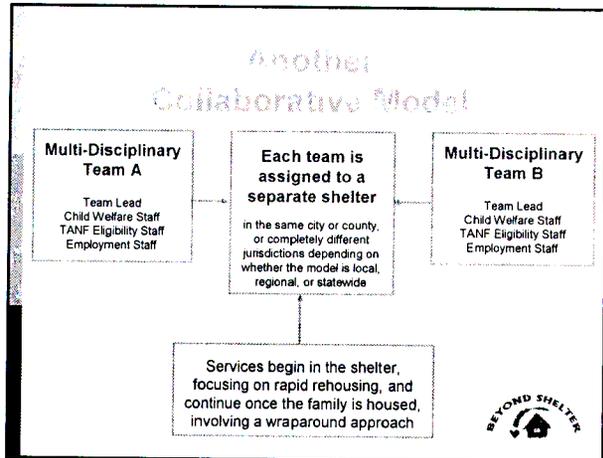
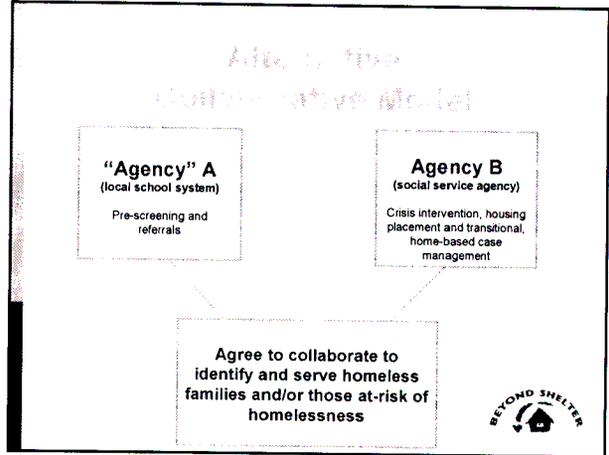
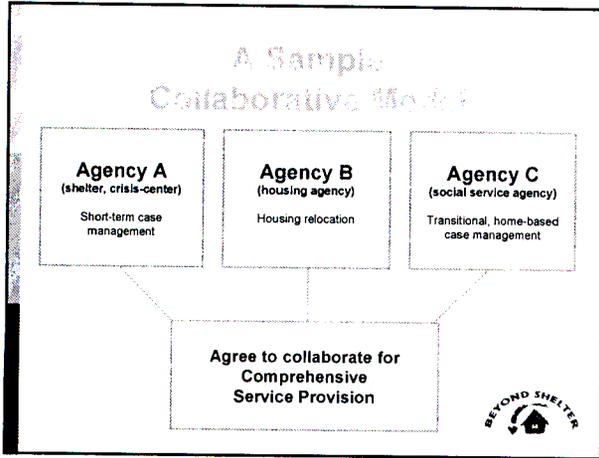


## Adapting Housing First to Transitional Housing Programs

BYOND SHELTER

**Transitional housing programs can incorporate the Housing First approach into their operations by limiting the amount of time families spend in the program and by making permanent housing assistance a central, front end feature of the program.**



## Assistance Accessing & Moving Into Permanent Housing



## THE HOUSING PLAN

The objective is to assist the family to obtain decent, affordable permanent housing in which they can stabilize and rebuild their lives. This requires a match between the housing unit and the family's needs. Suitable means decent housing in an environment which will be conducive to the family's stability in permanent housing.



## THE HOUSING SPECIALIST

If available, a Housing Specialist helps the family to identify and off-set (as much as possible) barriers to securing housing.

The Housing Specialist also works with the family to identify appropriate, and reasonable, housing search goals.



## BARRIERS TO HOUSING

- Credit History
- Income Source/Employment History
- Household Size/Composition
- No Rental History
- Lack of Move-In Funds
- Credit Check Fees
- Non-English Speaking
- Criminal History
- Discrimination
- Eviction History



## SYSTEMIC BARRIERS TO HOUSING

- Vacancy Rates
- Rents Too High
- Incomes Too Low
- Move-In Requirements
- Discrimination
- Lack of Move-in Funds
- Lack of Transportation



## ACCESSING SECTION 8

Recognizing the high cost of rental housing in most rental markets, it often becomes essential to develop working collaborations with local housing authorities. It is vital to explore possibilities with housing authority administration and not to assume that it cannot be done.



Sometimes there are special "set asides" or preferences that can be developed (particularly for families and/or people with special needs).



Due to the complete dearth or generally limited number of Section 8 vouchers available in communities, it has become increasingly essential to identify or develop alternative sources of funding for rent subsidies.



Some states and cities are using TANF-related subsidies. Others are using HOME dollars or local trust fund dollars to provide rental assistance. These funds may serve as “bridge” or stand-alone subsidies.



Other communities are experimenting with short-term and/or shallow rent subsidies, using public and private dollars, often combined with workforce development strategies.



## ACCESSING PRIVATE RENTAL HOUSING

- Know What You Are “Selling”
- Develop Relationships With Landlords
- Market The Program
- Warm Hits – Through Contacts
- Cold Calls And Community Searches
- Networking
- Follow-Up



## HOUSING ASSISTANCE

- Landlord/tenant education
- Advocacy for housing subsidies
- Transportation and coaching to meet potential property owners
- Referral to specific owners willing to rent to homeless families



- Assistance in overcoming bad credit, no credit or eviction histories, etc.
- Assistance in obtaining move-in funds
- Follow up to ensure stable relationship with property owner.



## Permanent Housing Options

- Scattered-site or clustered
- Private non-profit or for-profit
- Public housing
- Service-enriched housing
- Supportive housing
- Special needs housing
- Conventional housing



## Leaseholder Considerations

- Master-lease
- Co-lease
- Conventional lease



## Financial Assistance

- Government or private housing subsidies
- Application fees, security deposits, etc.
- Additional deposits, reserve funds
- Eviction guarantees
- Rent-to-prevent eviction



TRANSITIONAL  
**Home-Based  
Case Management**



**PRIMARY FUNCTIONS  
OF CASE MANAGEMENT**

- Assessment
- Planning
- Linking
- Monitoring
- Advocacy



The primary functions of home-based case management are to provide assistance to clients in life skills development and to link clients to other community organizations that provide services which they need. In Housing First, these services are most often “time-limited” and “transitional.”



They are often focused on helping the family overcome the trauma experienced during an episode of homelessness, to enable the family to regain stable living patterns or to develop stable living patterns for the first time.



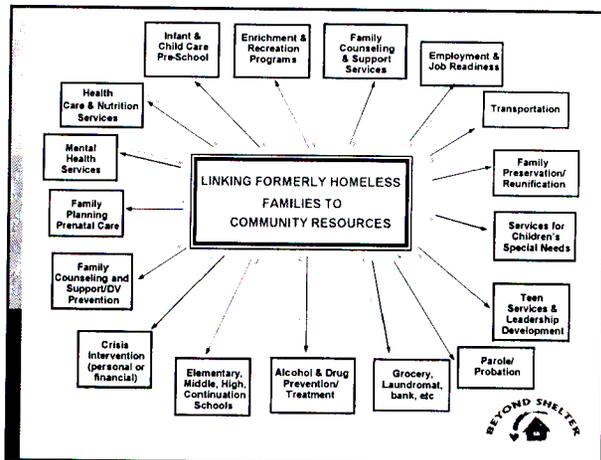
The case manager provides the core level of services and refers specialized services to "mainstream" programs in the community (i.e., substance abuse services, child care).

When specialized services are not available in the community, the Housing First provider may deliver the service themselves or advocate for another way of meeting the client's needs.



Some clients require more intensive home visits that include demonstrations of house-keeping skills, money-management and budgeting, development of grocery lists, parenting support.

Others need only assistance in identifying resources in the community and monitoring/ support to insure that they do not lose their housing if a crisis occurs.



## EXAMPLES OF SERVICES BY CASE MANAGERS

- Household management
- Money management
- Problem solving/survival skills
- Advocacy with welfare, CPS, legal, etc.
- Family and individual counseling
- Parenting education and support
- Relapse prevention
- Crisis intervention



## THE FIRST THREE MONTHS

Experience has shown that formerly homeless families are most at risk for another episode of homelessness during the first 90 days in permanent housing.



## EXPECTED OUTCOMES

Families Integrated  
into the Community,  
Attaining Improved  
Social and Economic Well-Being



## OUTCOME EVALUATION

### Short-Term Outcomes – For Families

- Movement from homelessness to temporary or permanent housing
- Decrease in psychological distress
- Decrease in substance use/abuse
- Participation in treatment, support, and training programs



## OUTCOME EVALUATION

### Short-Term Outcomes – Children

- Regular school attendance
- Improved health assessment/care
- Reduction of behavioral/school problems



## OUTCOME EVALUATION

### Intermediate Outcome – Mothers

- Increased residential stability
- Continued improvement in psychological functioning and reduction in symptoms and symptoms of distress
- Continued reduction in substance use/abuse
- Improved life management skills, including job/vocational skills and goal setting
- Increase self-esteem and feelings of empowerment



## OUTCOME EVALUATION

### Intermediate Outcomes – Children

- Continued reduction in behavioral and school problems
- Improved school performance and regular school attendance
- Regular health check-ups, inoculations, & improved health status



## OUTCOME EVALUATION

### Long-term Outcomes

- Achieve residential stability
- Psychiatric stability
- Abstinence/continued reduction in substance use/abuse
- Competency in life management
- Employment or engagement in productive activity
- Stability as a family unit

