



# Person-Centered, Trauma Informed Intake and Engagement: Resource Coordination, Therapeutic Supports and Programming to Support Successful Transitions

## Introductions



Alexis Steel, President Boston, MA





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Lety House where hope blossoms sundari foundation, inc.

Laura Klinefelter, Director of Intake Rai Johnson, Director of Wellness *Miami, FL* 



Kimberly Livsey, Chief Program Officer Atlanta, GA



Katie O'Brien, Executive Director Portland, OR



Patricia Bosman, Executive Director St. Louis, MO

"Poverty is not only about income poverty, it is about the deprivation of economic and social rights, insecurity, discrimination, exclusion and powerlessness."

— Irene Khan

Trauma Informed Admission into the shelter

First impressions

Team greeting

Safety - screenings

Calm environment to soothe anxiety

Resources/snacks/toys

Clinical Assessment: History prior to Lotus House Personal

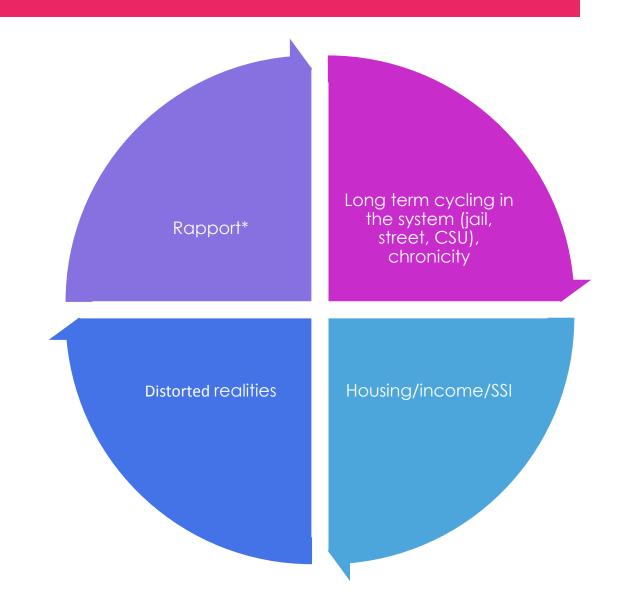
Education/work

Children

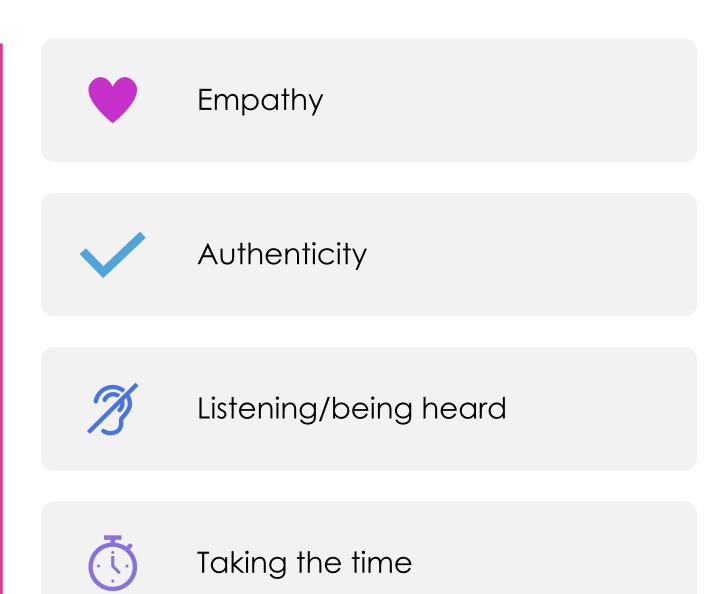
Medical/Mental Health

Legal

## Special Needs: Mental Health



## Person Centered





Therapeutic relationships - Regulation of the CNS

## Solutions



**Emotional Safety** 



**Hope** - Light at the end of the tunnel

### Rose Haven: An Introduction

### Portland, OR

- 2<sup>nd</sup> highest rate of unsheltered in country
- No government funding

### Low-barrier day shelter

- Serve women, kids and gender diverse guests
- Intake
- Community agreement





## A Starting Point: Providing Basic Needs



### **Basic Needs**

Service offerings
Trauma-informed
facility and practices

Promotion of dignity



### **Building Trust**

Consistency Community





## Supporting Individual's Needs

# Positioned to support guests self-defined needs

- Onsite Advocacy
- New Mental Health Program
- Conduit to outside agencies



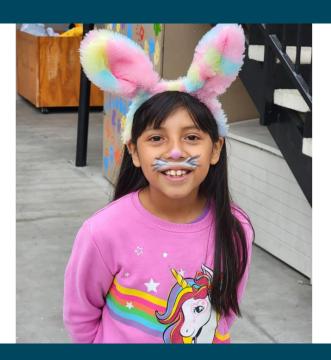


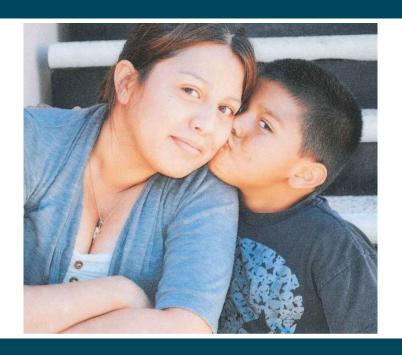
## Empowerment

## Love

## Accountability







To provide safe supportive environment and the resources for homeless and at-risk families with children to remain together while empowering them to become independent and self-sufficient.



## Case Management & Life Skills



## Addiction is a 3-fold Disease – A Mental Obsession, A Physical Allergy, and a Family Issue.

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# Understanding our Populations: "Risk Factors"

An attitude, belief, behavior, situation, or action that may put an individual, group, organization, or community at risk for alcohol, tobacco, and other drug-related problems.

- Factors are common to a number of problem behaviors such as delinquency, teen pregnancy, violence and school dropout, history of trauma, child abuse and neglect.
- Family history of substance abuse, depression, or anti-social personality disorder, drugs in the neighborhood, bad academic performance are examples.

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## Enhancing Protective Factors

"A Protective Factor is defined as an attitude, belief, situation, or action that builds resilience within an individual, group, organization, or community"

(Hawkins, Catalano & Miller, 1992)

- School, Family, Individuals or Peer and the Community Resources may be a Protective Factor
  - Protective factors exist to reduce tension and vary by age group

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## Enhancing Protective Factors @ Lotus

Recognizing guests with substance abuse histories within the context of collaborative, respectful WRAP (Wellness, Recovery, Action, Plan) partnerships through:

### **Holistic Approach**:

Support Guest's physical, emotional, social and spiritual wellbeing by providing NA/AA meetings and socio-educational groups including SA counseling and sponsorship.

## Develop trusting relationships:

Help the Guest establish a common vision where the Guest sees herself in the future.

## Engaging and Maintaining Service Delivery Networks:

Build a support network so that Guests are able to independently negotiate within the community.

#### Monitor outcomes:

Prioritize Lotus Alumni
Network Partnership
within our alumni
community to help
prevent and manage
personal crises. The
focus of the
partnership is self
management of life in
recovery, motivated
through hope and
inspiration.

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Atlanta Mission Hope Lives Here



### Education Services

### **Adults**

- Vocational assessment upon intake
- Each adult uses Personalized Service Plan
- Clients steered in paths that fits their need

### Children

- Children are assigned to advocate
- Educational Plans are developed for every client
- Coordinate with districts Homeless Education Liaison to ensure services
- Enroll all students within one week into local school
- Afterschool services for all / Personalized tutoring as needed



### Vocational Services

Workforce development program for every client at the end of our emotional services

### 5 Core Competencies:

- professionalism,
- teamwork,
- communication,
- time management,
- conflict resolutions





## Providing Positive Pathways Through Housing





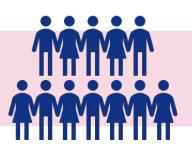
Provided Family
Shelter
& Young Parenting
Residential Services



Individualized, Wrap-Around Services to Create a Personalized Rehousing Plan



Pathways to Stable Housing: Transitional & Permanent Supportive Housing



Breaking Cycles of Multi-generational Poverty & Homelessness



## Transitional & Permanent Housing

### **Transitional Housing**

A positive step forward for young families

- Designed for young families- 18-24 years oldpost- young/teen parenting programs.
- Two years of placement prior to placing in permanent housing.
- Focus on bridging gaps in skills, addressing emotional and social challenges, and overcoming barriers to employment and increased financial independence.

### CASE STUDY:

St. Mary's Center for Women and Children

#### LIFE SKILLS

**85%** of young moms showed an increase in parenting and independent living skills

#### **EDUCATION AND EMPLOYMENT**

100% of young moms living in Transitional Housing are pursuing advanced degrees

100% of young families moving through SMC's continuum remain stably housed

Change comes from the Center

## Transitional & Permanent Housing



### **Permanent Supportive Housing**

A sustainable solution to combatting family homelessness



- Families residing in PSH are far more likely to remain stably housed (89% vs. 69%) long-term
- Costs up to \$23,000 a year less per person than shelter
- Meets urging for a range of housing options for families in crisis



## Housing First Model

### **Housing First-**

Sam Tsemberis, Founder and CEO of Pathways to Housing

- Assistance approach that prioritizes providing permanent housing to people experiencing homelessness.
- Serves as a platform from which they can pursue personal goals and improve their quality of life.
- Guided by the belief that people need basic necessities like food and a place to live first.

### Data- The Pros:

- Housing First led to a quicker exit from homelessness and greater housing stability over time compared with treatment as usual.
- Participants spent 73% of their time in stable housing compared with 32% of those who received treatment as usual.
- Housing First led to reduced time to housing placement (from 223 to 35 days) and higher housing retention rates than treatment as usual (98% vs 86%).

#### Data- The Cons:

- De-emphasizes short-term shelter.
- A recent UCLA study found that more than 75% of this population have a serious mental illness, and 75% have a substance abuse problem, and the majority have both. Without mandated programming, this will continue to be a barrier.

Change comes from the Center

# What's Next? Stabilization & Post-Shelter Support

Families begin a new path – one that leads to independence, stability, and self-sufficiency.

Each woman helped by The Haven of Grace becomes a stronger member of our community and eventually can begin giving back to those who helped her move forward.

- Support as needed to avoid homeless reoccurrence
  - Emotional and Behavioral Health Support
- Scholarships for continuation of education/trade school
- Individualized life skills coaching
- Financial Support
  - Rent & Utility Assistance
  - Emergency Childcare Funding
  - Automobile Emergency Assistance
  - Medical Co-pay Assistance







National Women's Shelter Net

