ICH Strategic Planning Committee
Homeward DC 2.0 Development

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Special Project Teams Recommendations

# Level-Setting for Strategic Planning

Strategic Plan

Objective #1: Reform the District's Crisis Response (Shelter) System

Key Strategies (Examples):

- Implement year-round access policy.
- Obtain data on needs of special populations to inform number, types, and design of facilities
- Develop community engagement strategy for each shelter replacement project
- Develop electronic tracking system to improvement mgmt. of facility maintenance requests.

Policies & Procedures

Grants, contracts, human care agreements, policies, and program manuals.
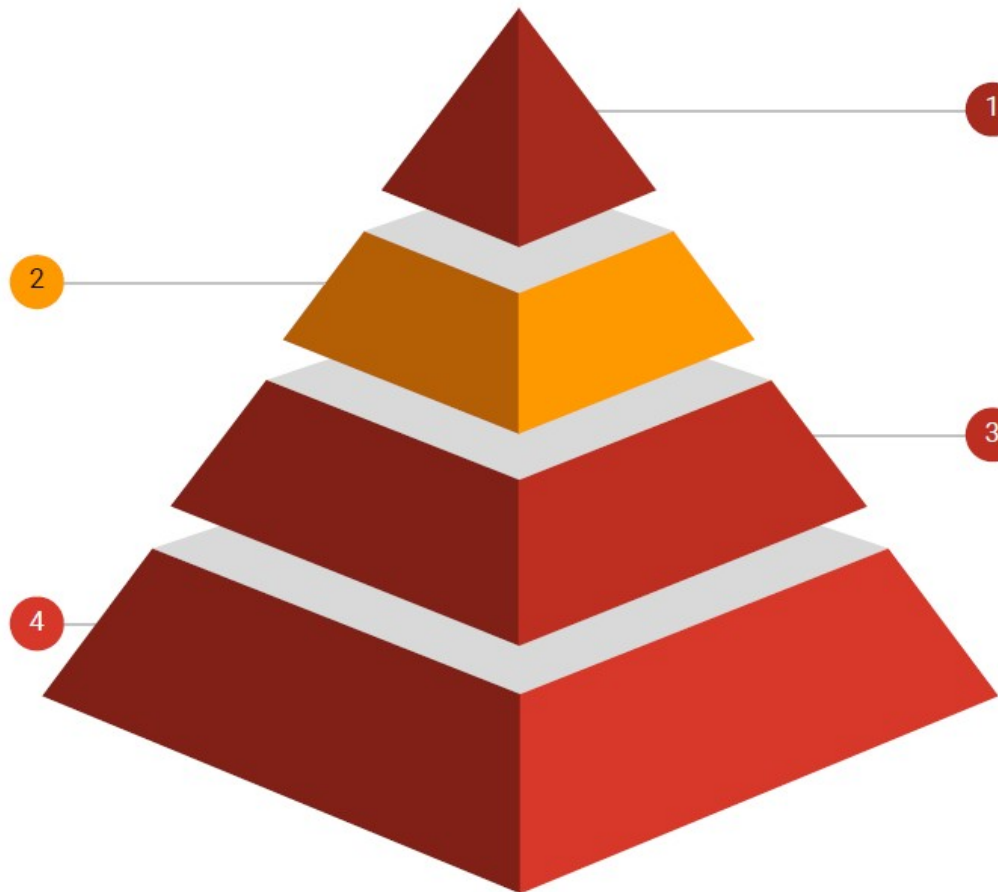
Mission Statement

End long term homelessness in DC by 2020 by making it rare, brief, and non-recurring.

Implementation Plans

- DC General Closure plan
- DC General Family Shelter Replacement Plan
- Daytime Services Plan

Level-Setting

❖ For the strategic plan, we are still working at a high-level.

➢ Remain focused on WHAT needs to be done to address a given problem.

➢ A more detailed plan for "how" (i.e., an implementation plan") will have to be developed once resources are dedicated (resources being financial and/or staffing)
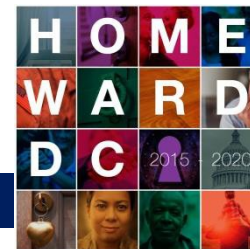
Work Groups

❖ Trauma & Violence/Coordination with DV System

❖ Addressing Racial Equity

❖ Addressing System Inflow (Homelessness Prevention)

❖ Complex Health Needs

❖ Building Provider Capacity

Note: following conclusion of employment data analysis project by The Lab & DOES (presented at September ICH Full Council meeting), we will have a work group develop recommendations re: employment & income.

Work Group #1:
Violence & Trauma

What problem needs to be addressed?

❖ Trauma can be a significant contributor to homelessness. It can also be a consequence of experiencing homelessness. The homeless services system must improve its ability to recognize and respond to individuals and families in a manner that is trauma-informed, offering resources and services that are safe, welcoming, and inclusive for all.

❖ Trauma and Homelessness in DC:

➢ The Women's Needs Assessment found that **nearly one-third** of unaccompanied homeless women in D.C. indicate that violence is the cause of their current homelessness or housing instability, and **63%** of unaccompanied homeless women with past experiences of violence and trauma report at least one act of violence against them during their current period of homelessness or housing instability.

➢ The Point in Time Count found that **19%** of homeless single adults and **33.6%** of homeless adults in families reported a history of domestic violence in 2018.

➢ In the 2018 Youth Count, **32%** of homeless youth had experienced violence from an intimate partner or spouse, and **59%** of those who have experienced any type of intimate partner violence attribute their current housing situation to that violence.

❖ There are a number of ways in which the homeless services system is not trauma-informed, including:

- ✓ Systems operate in silos which create barriers and gaps in services
- ✓ Lack of adequate system-wide training on trauma and trauma-informed care
- ✓ Failure to consistently offer person-centered services and choice
- ✓ Lack of trauma informed resources and spaces
- ✓ Failure to meet the needs of the high numbers of individuals and families experiencing domestic violence and community violence

❖ As we move to improve our system, we have the opportunity to learn and apply national research and best practices:

- ✓ National Alliance to End Homelessness
- ✓ Safe Housing Partnerships
- ✓ National Center on Domestic Violence, Trauma & Mental Health
- ✓ Additional links/reports

Strategy #1: Narrative Recommendations

- ❖ The Women's Needs Assessment, the recent PIT Plus Count, and the Youth Count all highlight that **trauma** is a predominant experience in the lives of people who are homeless and across all populations (age, gender, etc.)

- ❖ Given the significant presence and impact of trauma in the homeless population, the Homeward DC 2.0 plan must not only contain specific recommendations around how to address this reality, it must also guide all of the CoC's work to become more trauma informed .

- ❖ Homeward DC 2.0 is an opportunity to move our community/system toward one that offers **choice** and **safety** in housing and services for all who need them.

Strategy #1: Narrative Recommendations

❖ It is also critical that Homeward DC 2.0 guide the system's work toward greater **cultural humility** so that access to services and housing is not negatively impacted by who you are and how you identify.

❖ For that reason, this special project team recommends that the narrative of Homeward DC 2.0 include strong language that sets high standards for a trauma informed homeless services system that encourages cultural humility throughout the system.

Strategy #1: Narrative Recommendations

We recommend these definitions for use within the CoC:

❖ Trauma-informed (from DHS/DV Collaborative)

➢ The term trauma-informed is used to describe organizations and practices that incorporate an understanding of the pervasiveness and impact of trauma, including an understanding that a person is the expert of their own trauma. These organizations and practices are designed to reduce retraumatization, support healing and resiliency, promote safety for survivors and staff, and recognize the root causes of oppression, abuse and violence.

❖ Cultural humility (APA and DVRP)

➢ Cultural humility is a humble and respectful attitude toward individuals of other cultures that pushes one to challenge their own cultural biases, realize they cannot possibly know everything about other cultures, and approach learning about other cultures as a lifelong goal and process.

Strategy #2: Ad-Hoc Work Group on Trauma

❖ Create a time-limited Ad-Hoc work group on trauma. The work group will be responsible for:

- ✓ Supporting the ICH committees in identifying how to bring a trauma-informed focus to their work

- ✓ Providing leadership to the implementation of the recommendations outlined below including education, training, system evaluation and the development of transition planning protocols

As a CoC, we must expand our knowledge and skills around trauma and trauma-informed responses. To do so, we need to understand the strengths and limitations of how we are providing housing resources

- ➤ Identify the problem – where does the homeless services system fall short in providing housing and services in a trauma informed way (consumer engagement)
  - ✓ Provider level
  - ✓ Funder/Government Agency level
- ➤ Develop best practices, policies and protocols to make the system more trauma informed
  - ✓ Provider level example: how to provide security in a trauma-informed way
  - ✓ Government Agency level example: increasing flexibility in contracts to support DV case management to follow a family matched to FRSP
- ➤ Evaluate the system's progress toward becoming trauma-informed

- ❖ Out of the evaluative work of Strategy 2, develop meaningful and ongoing training opportunities for providers and government agencies on trauma-informed care that incorporates consumer voice and will reduce re-traumatization
  - ➢ Experiential learning models and adult learning theory techniques
  - ➢ DC specific
  - ➢ Funders and Government agencies/Provider/Housing Program Specific and targeted to the roles and responsibilities within provider organizations including leadership and management
  - ➢ Accountability – Training should not be seen as a checkbox, but an opportunity to build the expertise of our entire community. There must be a mechanism to ensure accountability.

Strategy #5: Funding Stream Mapping

- ❖ Government partners and TCP, as the HUD CoC Program Collaborative Applicant and recipient, develop a map of the funding streams that support individuals and families experiencing homelessness to identify:
  - ➢ Inconsistent Requirements Across Funding Streams
  - ➢ Inconsistent Definitions Across Funding Streams
  - ➢ Inconsistent Eligibility Requirements Across Funding Streams
  - ➢ Inconsistent funding and release of funding
- ❖ Improve system coordination based on the mapping information including targeting funding to system gaps, increase coordination between systems, and more strategically leveraging resources to meet the need

Strategy #6: System Transition Protocols

❖ Develop transition protocols for individuals who flow between multiple systems including the homeless services system to increase consumer choice and reduce re-traumatization

➢ i.e. individuals fleeing domestic violence and who are experiencing homelessness; young adults turning 25; individuals who become pregnant and parenting

Strategy #7: New Program Models

❖ Pilot new program models that address special populations and address the need for trauma housing, individuals and families fleeing domestic violence, and subpopulations

❖ Our work group expressed interest in the need for our system to be nimble and flexible. Space and time should be created to allow providers to innovate and try new approaches.

Prioritization

- ❖ All of the recommendations need to be implemented in FY20 and FY21.
  - ➤ First priority – form an Ad Hoc Work Group to provide leadership to the work within the ICH and empower the work group to refine and develop detailed strategies for the implementation of the recommendations
  - ➤ Second priority – there is an urgency to recommendation #6 – develop transition protocols for individuals who flow between multiple systems

Work Group #2:
Racial Equity

What problem needs to be addressed?

- ❖ Racial Equity
  - ➢ Most minority groups in the United States experience homelessness at higher rates than Whites, and therefore make up a disproportionate share of the homeless population.
    - ✓ By far the most striking disproportionality can be found among African Americans, who make up 40% of the homeless population despite only representing 13% percent of the general population. This imbalance is not improving over time.
      - o In DC, African-Americans make up 48% of the population and 88% of the homeless population
    - ✓ Systematic Racism, Poverty, Rental Housing Discrimination, Incarceration, Lack of Health Care/Mental Health Treatment, and The Homeless System's Response are some of the issues that contribute to the problem
  - ➢ This problem does not solely affect individuals experiencing homelessness but it is incredibly important to address within the Homeless Services System.
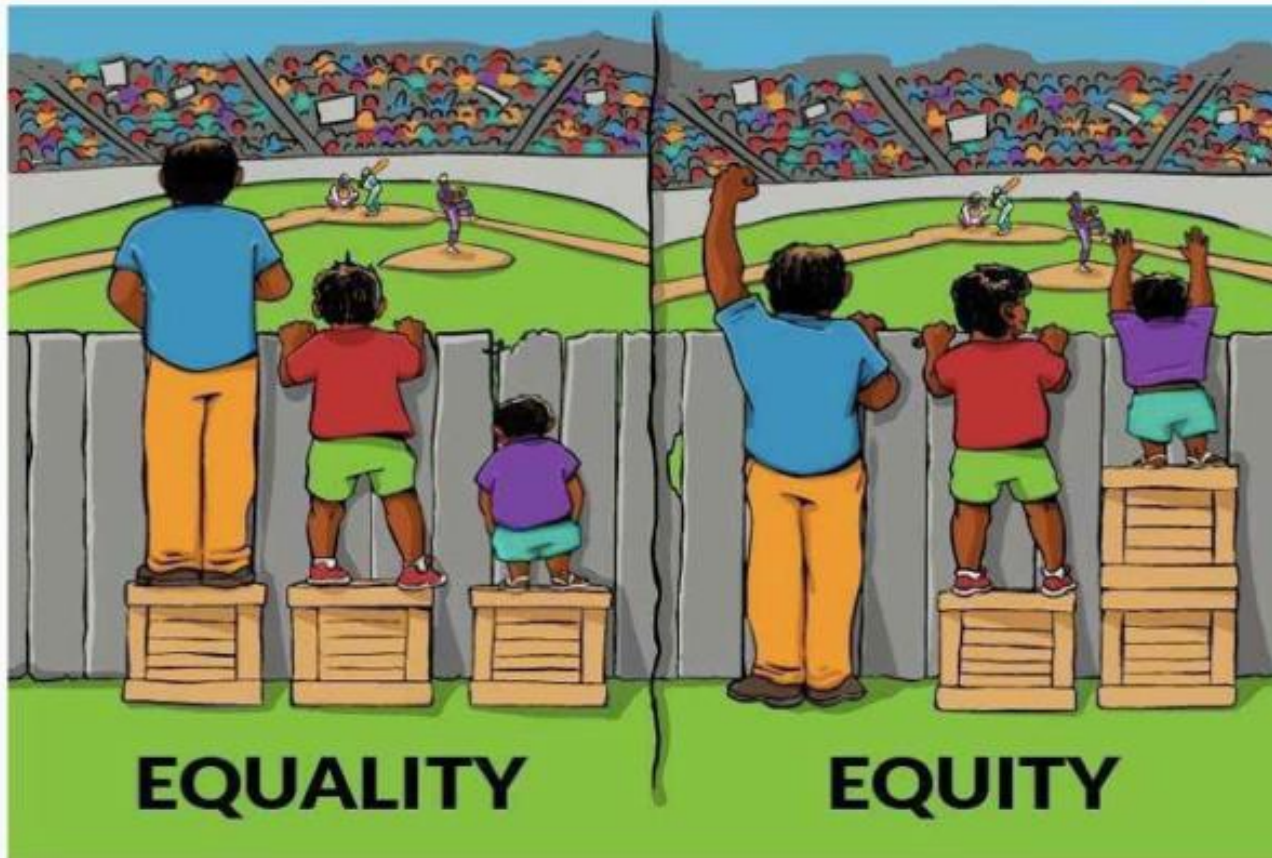
EQUALITY

EQUITY

Equality = Sameness
Equality provides the same thing for everyone.
This only works when people start from the same
place, history and set of circumstances.

Equity = Justice
Equity is about fairness, and providing people with
the resources and opportunities they need, given
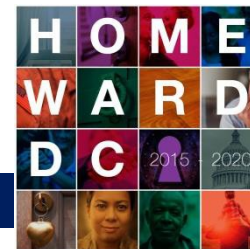their history and set of circumstances.

Adapted by the City of Portland, Office of Equity and Human Rights from the original graphic:
http://indianfunnypicture.com/img/2013/01/Equality-Doesnt-Means-Justice-Facebook-Pics.jpg

Issue Level-Setting

- ❖ There is significant research on this problem:
  - ➢ [National Alliance to End Homelessness – web content on Race and Homelessness](#)
  - ➢ On the Media Podcast: ["The Scarlet E., Unmasking America's Eviction Crisis"](#)
  - ➢ [Racial Equity Here Learning Report: Lessons from 5 Cities Operationalizing Racial Equity · Living Cities](#)
  - ➢ [The Center for Social Innovation, March 2018: Supporting Partnerships for Anti-Racist Communities](#)
  - ➢ Racial Equity Tools: [Learning and Evaluation Resources](#)
  - ➢ [Forefront by Next City, 2013 (web article): Separate and Unequal in Washington DC](#)
  - ➢ Budgeting for Equity: How to Advance Opportunity for People of Color in DC: https://www.dcfpi.org/wp-content/uploads/2019/04/Racial-equity-report-formatted.pdf
  - ➢ Report and Recommendation on Black People Experiencing Homelessness (LA): https://www.lahsa.org/documents?id=2823-report-and-recommendations-of-the-ad-hoc-committee-on-black-people-experiencing-homelessness.pdf

Strategy #1: Racial Equity Lens

- ❖ We need to put a "Racial Equity Lens" on all that we do
  - ➢ Incorporate a Racial Equity Component into each ICH Committee and Work Group
    - ✓ Include Racial Equity strategy in each work plan
  - ➢ Create a 1 year Ad Hoc Work Group to:
    - ✓ Determine how each Committee and WG can utilize a racial equity lens
    - ✓ Evaluate the current system for racial inequity
      - o This could be using programs/tools that already exist
    - ✓ Help create racial equity measures that can be tracked throughout the system (CAHP, DHS, DBH, etc.)
    - ✓ If needed, bring local experts in to provide training to the ICH
    - ✓ Understand what work is already going on in our city in this area
    - ✓ Normalizing / setting expectations for ongoing discussion of race / racial equity
    - ✓ Supporting / promoting direct service agencies in ensuring an anti-racist posture in their work
    - ✓ Addressing returning citizens

Strategy #2: Communication

❖ We need a unified voice in our commitment to racial equity and in our communication with internal and external stakeholders:

✓ Homeward DC 2.0 should include a statement of "Racial History" and a vision of "Racial Equity"

✓ Targeted work with ANCs and others to combat NIMBYism

✓ Media strategy for promotion of progress and quick response on problems

✓ Ensure information is shared in culturally competent language

✓ Public Awareness campaigns

Strategy #3: Leadership/Staffing

- ❖ Leadership by, and for, those with lived experience
  - ➢ Ensure that consumer advocate engagement is empowering and impactful
- ❖ Increase POC/those with lived experience of homelessness in leadership roles
- ❖ Increase POC/those with lived experience of homelessness in direct services roles

Strategy #4: Pursue Policies

❖ Pursue/support policies or legislation to address and/or prevent systemic racial bias, some of these topics may include discussions on:

➢ Zoning

➢ Rent Control

Prioritization

- ❖ Which strategies should be prioritized for immediate implementation (FY20/FY21)?
  - ➢ Incorporate a Racial Equity Lens in all that we do
    - ✓ Create an Ad Hoc Racial Equity Work Group to help us achieve this goal
  - ➢ Homeward DC 2.0 should include a statement of "Racial History" and a vision of "Racial Equity"

Work Group #3:
Addressing Inflow

What problem needs to be addressed?

- ❖ Inflow refers to people newly experiencing homelessness or returning to homelessness

- ❖ In our work to make homelessness a rare, brief, and one-time experience, reducing inflow is part of making homelessness rare and a one-time experience

- ❖ While we have been tremendously successful helping thousands of individuals and families obtain housing, high inflow (particularly for single adults) has been a barrier to reductions in homelessness

Issue Level-Setting

Inflow is complex!

There are many different types of inflow:

❖ DC residents becoming homeless

❖ People experiencing homelessness moving to DC

  ➢ Non-DC residents (with DC roots) coming back to DC

  ➢ Non-DC residents (no DC roots) moving to DC

❖ Institutional Inflow

  ➢ Criminal justice/incarceration

  ➢ Child Welfare

  ➢ Hospitals and other health-related institutions

❖ Domestic Violence/Intimate Partner Violence/Trauma

❖ Phenomenon of larger pool of people who cycle between street, shelters, staying with friends, hospital/jail, etc.

❖ People re-experiencing homelessness after PSH or RRH

And it's important to remember there is DC outflow to other jurisdictions

Strategy #1: Prevention/Diversion/Rapid Resolution

- ❖ Family homelessness prevention – continue improving and scaling targeted homelessness prevention efforts

- ❖ Project Reconnect (singles) – continuing program development, innovation, and scaling of Project Reconnect

- ❖ Creating a culture of diversion and housing-focused problem-solving across all programs – shelter, outreach, drop-in centers, and even training upstream systems (criminal justice, behavioral health, schools, etc.) on housing-focused problem-solving strategies

- ❖ Reviewing the system design of the singles system to identify multiple points for consistent diversion/rapid resolution: shelter intake, shelter return, street outreach, drop-in centers, etc.

- ❖ Using peers with lived experience in diversion strategies

Strategy #2: Regional Collaboration

- ❖ Regional movement is complex and nuanced, so building strong partnerships with regional partners will be critical for effective collaboration efforts

- ❖ Exploring data-sharing agreements to better understand regional movement and identify ways people to be served across jurisdictions (for example, using shelter in DC and obtaining housing through a Maryland resource)

- ❖ Piloting collaboration with some counties (Montgomery, Arlington, etc.) and using that collaboration to design broader efforts

Strategy #3: Collaboration between systems

- ❖ Criminal justice
  - ➢ Exit planning
  - ➢ Promoting family visits/connections during incarceration
  - ➢ Diversion/housing-focused problem-solving training as part of exit planning, READY Center, probation/parole, halfway houses, etc.
- ❖ Child Welfare
- ❖ Youth and adult homelessness systems

Prioritization

Priority Strategies

- ❖ Prevention/Diversion/Rapid Resolution Strategies
  - ➢ Project Reconnect (singles) and family homelessness prevention
  - ➢ Creating a culture of diversion and housing-focused problem-solving across all programs
- ❖ Regional Collaboration
- ❖ Collaboration between systems
  - ➢ Criminal Justice
  - ➢ Child Welfare
  - ➢ Youth and adult homelessness systems

Other strategies

- ❖ Key strategies from other ICH work/task groups
  - ➢ Employment, liveable wages (quicker connections to employment and work beds; emphasis on evidence-based employment programs; focus on job placement and retention; supported employment)
  - ➢ Affordable housing (including shallow subsidies)
  - ➢ Domestic Violence/Trauma
  - ➢ LGBTQ+ youth
- ❖ Collaboration with DC systems (more effective collaboration at client-level across organizations, between agencies within the homeless services system, between DC agencies)
- ❖ Shelter design – 24-hour, service-enriched shelters could facilitate prevention/diversion/rapid exit