



Moving Forward, Together:
Create a Range of Opportunities for Consumer Integration
Step 2—Identify Socially Valued Roles to
Increase Consumer Participation

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Consumers with experiences of homelessness participate in a variety of socially valued roles—from policy and planning, evaluation, involvement on consumer advisory boards (Glasser, 1999; Dailey, 2003), and research projects (Tripp et al., 2005; Howard & El-Mallakh, 2001). Increasingly, people with experiences of homelessness provide outreach, peer support, clinical services, access to benefits and entitlements, mentorship, training, and consulting. Many are active in advocacy and community education efforts, as well.

People with experiences of homelessness work in paid and unpaid positions in soup kitchens, homeless shelters, mobile outreach, jails, psychiatric facilities, drop-in centers, transitional housing projects, and on the streets. Even though some consumers often act in roles that are socially valued, others may be in less desirable positions. While providers of homeless services must frequently operate with extremely limited resources, payment should be equitable among those performing similar tasks.

The following section looks at provider-identified roles, augmented by the authors to broaden the range of possibilities: Administrative or Executive; Policy and Planning; Service Delivery; Advocacy, Community Education, and Training; and Homeless Services Evaluation. The matrix in Figure 1: Range of Roles, Titles, and Tasks for People with Experiences of Homelessness enumerates tasks and responsibilities associated with consumer-provider roles within the categories in Table 1: Range of Roles in Homeless Services.

Table 1: Range of Roles in Homeless Services

Administrative or Executive Positions
Director of Peer Services/Integration Program Director Drop-In Center Coordinator Consumer Integration Advisory Committee
Policy and Planning
Board Member Advisory Council Member Homeless Management Information Systems (HMIS) Policy Review
Service Delivery
<i>Peer Support and Outreach</i>
Peer Specialist, Peer Advocate Recovery Support Specialist Citizen Companion Group Leaders and Educator Case Managers and Assistant Outreach Team Member Clinician/Therapist Family Support Worker Mental Health Technician Acu-detox Practitioner
<i>Benefits/Entitlement Specialists</i>
Residential/Housing Coordinator Benefits Specialist Work Exploration Coordinator
<i>Support Staff</i>
Food Shelf and Clothing Drive Coordinator Soup Kitchen Worker Dishwasher, Custodial, Housekeeping File Clerk, Receptionist Parking Lot Attendant Mail Delivery, Driver
Advocacy, Community Education, and Training
Speaker, Trainer Writer, Artist Curriculum Developer Community Organizer Legislative Advocate
Homeless Services Evaluation
HMIS Implementation Focus Group Leader Consumer Satisfaction Survey Development Continuum of Care Count Team Member

A. Administrative and Executive Management

With very few exceptions, consumers are not in positions or with functions associated with the executive management of agencies. There are, however, examples of consumers working as the director of peer services/peer integration in traditional human service organizations addressing homelessness. This type of position reflects a model supported in many State mental health authorities, hiring Directors of Consumer Affairs to help guide departmental integration efforts on a statewide scale (Onken, 2004).

B. Policy and Planning

Increasingly, there is consumer representation in Federal homelessness initiatives that impact local policies. Consumer roles can include representing consumer advisory boards on national panels; serving on policy planning boards; or working with Federal agencies as consultants, trainers, advisors, or administrative staff (Barrow et al, 2007). For example, the U.S. Department of Housing and Urban Development (HUD) involves consumers in the implementation of Homeless Management Information Systems (HMIS). Some consumer roles in this process include leading and serving on steering and consumer advisory committees and workgroups addressing controversial issues around data and privacy concerns, as well as conducting peer-to-peer trainings (Tripp et al., 2005). People with experiences of homelessness may also assist in wording questions in a consumer-friendly manner, and designing brochures explaining HMIS to others (HUD, 2004).

- Create governance committees to involve consumers in decisions regarding program planning and development. Albuquerque Health Care for the Homeless has a Governance Committee composed of artists in its ArtStreet program, 85 percent of whom are currently or formerly homeless. The committee includes a staff representative who provides guidance from an agency perspective, and the members-at-large participate in the decision-making process, helping to select themes for art shows and suggesting artists to approach about leading Saturday workshops.
- Involve consumers in reviewing and adapting programming and policies to ensure they are in line with a recovery-oriented, person-centered mission and vision.
- Involve consumers in reviewing and adapting agency policies to increase the use of collaborative decision-making approaches (such as the use of health care proxies/safety/de-escalation plans, wellness, recovery, action plans).
- Solicit consumer input in setting standards to increase the number of people with experiences of homelessness involved with the agency and the range of roles.
- Request consumer feedback on how to tailor the agency environment better to accommodate people with experiences of homelessness.
- Increase consumer involvement on boards of directors to act as a liaison with the community, agency consumer advisory boards, or the peer integration coordinator.
- Support consumer efforts to gather information about consumer satisfaction, analyze that data, and generate policy and planning reports.
- Encourage consumer produced and delivered progress reports regarding the status of agency integration efforts.
- Ask people with experiences of homelessness to review and adapt language in agency literature and policies to be sensitive to consumer perspectives.
- Encourage people with experiences of homelessness to participate in Continuum of Care counts and follow-up meetings that impact funding decisions for service delivery.

C. Service Delivery

The majority of service delivery roles fall into three subcategories: Peer Support and Outreach; Benefit and Entitlement Specialists; and Support Staff.

Peer Support/Outreach and Benefits/Entitlement Specialists

There are a variety of titles assigned to the role of peer support and outreach, each with slightly varying responsibilities. People commonly have titles such as peer support specialists, peer advocates, citizen companions, recovery support specialists, and peer navigators. The purpose of peer support and outreach services is to build trust and connections with people who are currently homeless and to facilitate engaging them in services such as housing referrals, employment, benefit enrollment, mental health, primary health and substance use treatment, and peer support groups, with services delivered anywhere people reside.

One program in Idaho delivers peer support and outreach to very rural and isolated areas through a Citizen Companion program, while others work in extremely urban environments such as New York City (Felton et al., 1995). People engage formally and informally, using a variety of approaches from multi-disciplinary teams to meeting people one-to-one. Consumers may also participate in traditional clinical settings, providing everything from case management services to psychiatric services. They may bring a mix of “peer” and “clinical” skills to these positions (Dixon et al., 1997). Similarly, benefits and entitlement specialists are experts in systems navigation. Like peer support specialists, case managers, and outreach workers, they assist with finding and accessing housing, preparing for jobs, and securing Social Security disability and medical benefits. This type of systems navigation can take place in formal and informal ways and is frequently a terrific role for people with first-hand knowledge about the location of resources and how best to access them.

- **Collaborate with consumer-run agencies to provide peer outreach.**

An example of a promising approach is collaborating with consumer-run agencies to provide peer outreach teams to work in conjunction with traditional teams. Consumers Helping Others in a Caring Environment (CHOICE), based in New Rochelle, NY, offers homeless outreach, peer advocacy, and case management. People with experiences of mental illness, hospitalization, and homelessness design, manage, deliver, and supervise services (CHOICE Programs and Services, 2007). In 1999, CHOICE developed a Community Placement Team (CPT) providing peer outreach to people experiencing homelessness. Everyone on the Community Placement Team is formerly homeless and has a history of incarceration and addiction. This team works with a conventional outreach administration from Westchester County’s Department of Community Mental Health and New York Presbyterian Hospital’s Homeless Outreach Project.

- **Advocate for one or two consumers on each outreach team.**

Having more than one person with experiences of homelessness on outreach teams is helpful to ensure natural support (Carlson & McDiarmid, 1999).

Support Staff

A number of agencies reported consumer involvement in a variety of support staff roles. Some of the job titles and duties mentioned include stocking shelves and providing food at distribution centers; picking up donations, washing, sorting and ironing clothes for clothing drives; preparing and serving food; washing dishes at soup kitchens; providing custodial and housekeeping work in transitional housing and outreach offices; typing, filing, answering phones, and greeting people when they arrive; parking cars; providing transportation; and delivering the mail. Without support staff, most agencies would come to a grinding halt. There is little doubt that these positions often provide an important entrée into the service industry—building experience, camaraderie, and a sense of pride in having a place. Agencies should be mindful to involve consumers in socially valued roles across the agency.

D. Advocacy, Community Education, and Training

There are many examples of consumer-led advocacy, community education, and training efforts that are exciting, creative, and virtually limitless. Designing forums for people to share their stories of hope, struggle, and triumph is a powerful way to educate the public and generate “buy-in” from the community regarding the work done at the agency.

- **Develop a Speaker Bureau.**

Speaker Bureaus break down barriers and stereotypes between the general public and people with experiences of homelessness as they put a human face on the issue and inspire people to get involved. The Chicago Coalition for the Homeless has a speakers’ bureau composed of people currently and formerly homeless who give presentations at schools, conduct workshops, and train service providers working with consumers (Chicago Coalition for the Homeless, 2007).

- **Encourage consumer participation in local and national events.**

A powerful way to involve people with experiences of homelessness in community education is to encourage their participation at local public events like National Homeless Memorial Day ceremonies and at national conferences such as those sponsored by Health Care for the Homeless and the National Alliance to End Homelessness. Agencies will sometimes fund consumers to attend and give presentations at these conferences, and share the information acquired with the larger community upon their return. These engagements expose people with experiences of homelessness to networking opportunities and work done in the broader communities throughout the country.

Reflecting on the Detroit Memorial Day ceremony, one consumer reported,

"The speakers were three formerly homeless gentlemen instead of a minister or administrator of an agency serving homeless persons. Their messages reflected how the spirit of hope had saved their lives. The personal stories were an inspiration to all who attended"

("Homeless Person’s Memorial Day," 2007)

- **Identify space for creative projects (writing, art, radio, yoga, street theater, music).**

People with experiences of homelessness conduct public education and advocacy, including writing newsletters and articles, publishing newspapers, and writing books about their experiences. A consumer employee at one agency in Texas recently authored a book about his experiences and his advocacy vision (Waghorne, 2007), and others collected stories of people with experiences of homelessness and published them in anthologies (Susko, 1991).

- **Encourage consumers to develop curricula and deliver trainings.**

Consumers can play immensely valuable roles in developing curricula and conducting trainings on topics such as recovery, trauma, system navigation, HMIS,

mediation, and rights protection. Identifying local consumer leaders who could do presentations using a train-the-trainer model has the potential to excite others in getting involved similarly. While Certified Peer Specialist training programs typically focus broadly on mental health recovery, there is potential to tailor these trainings more specifically to the needs of people with experiences of homelessness. For example, as of 2006, PATH funds a Peer-to-Peer Homeless Outreach training program in Georgia, an adaptation of the Certified Peer Specialist Program focusing specifically on homelessness. Recruitment is from PATH programs and participants work primarily in homeless outreach. The Peer-to-Peer Homeless Outreach training gives consumers with experiences of homelessness opportunities to network with peer specialists throughout Georgia and to learn how to provide outreach from a “peer” rather than “clinical” perspective (“Peer-to-Peer Homeless Outreach,” 2007).

- **Support community organizing and advocacy opportunities.**

The Center for Urban Community Services (CUCS) in New York came out of the tenants’ rights movement and has a position for a community organizer. Someone with experiences of homelessness typically fills this position, organizes tenants in supported housing, and acts as a liaison between tenants and the agency advocacy committee. One year, the community organizer helped sign up the tenants, many of whom are people living with HIV/AIDS, for the annual AIDS walk.

E. Homeless Services Evaluation

Involving consumers in developing research agendas, survey instruments, and in the interpretation of findings is relatively new, particularly among people with histories of homelessness. In mental health service delivery research, consumers developed recovery instruments (Campbell, 1997), served as research subjects and informants through focus groups or other evaluation mechanisms (Van Tosh & del Vecchio, 2000), and obtained employment as data collectors and research assistants (Henry, Nicholson, Clayfield, Phillips, & Stier, 2002; Howard & El-Mallakh, 2001). The Consumer Quality Initiatives (CQI) in Roxbury, Massachusetts is an exciting example of a consumer-led evaluation effort with a sub-focus on homelessness. The CQI is a research and evaluation organization that brings consumer perspectives and experience interviewing people receiving services regarding their care, coding results, providing analysis, and developing reports. The staff of CQI conducted all of the interviews for a recent report, *The Dudley Inn: Qualitative Interviews with Chronically Homeless, Dually Diagnosed Residents of a Safe Haven Shelter*, which is available on the CQI website (Plachta-Elliott, Lincoln, & Delman, 2006).

- Develop a work group with consumers on designing consumer satisfaction survey questions.
- Have consumer advisory board members collect data through focus groups for feedback to agencies. The Client Board Advisory Committee for Albuquerque Health Care for the Homeless collects data through focus groups for the broader consumer community. The purpose of the data collection is to gather feedback regarding the agency as a whole and tailor that information to inform programming. In the process, consumers on the Client Board Advisory Committee develop skills in formulating questions, interviewing, and evaluation.

