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HRC HOMELESSNESS RESOURCE CENTER

ANNUAL REPORT 2010

HRC
PRODUCTS

HRC'S
AWARD-WINNING
WEBSITE

Acknowledgements

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Center for Mental Health Services
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services
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Annual Report: *2009-2010*

Homeless Programs Branch

Division of Services and Systems Improvement

Center for Mental Health Services

Substance Abuse and Mental Health Services Administration

U.S. Department of Health and Human Services

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Welcome Letter

The Homelessness Resource Center (HRC) was launched in 2006 to create a learning community of providers, consumers, policymakers, researchers, and government agencies at federal, state, and community levels dedicated to identifying and disseminating evidence-based and promising practices for preventing and ending homelessness among people with mental health and substance use disorders, and trauma histories. The HRC is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and operated by the Center for Social Innovation

In four years, HRC has accomplished a great deal. The HRC has become a nationally recognized source of high quality training and resources on best practices for improving homeless service delivery. Across the country, homeless service providers and program administrators look to the HRC for trusted information. Over the past year, HRC focused on expanding training and technical assistance opportunities and marketing and disseminating HRC knowledge-based products.

In 2009–2010, the HRC training team visited 16 cities and trained 1,517 homeless service providers during 17 training events. HRC training focuses on giving providers the skills, knowledge, and tools they need to provide effective trauma-informed, recovery-oriented, culturally competent care based on evidence-based and promising practices.

HRC continues to expand opportunities for online learning. In 2009–2010, HRC webcasts offered virtual training opportunities to 5,779 people. HRC disseminated "Strategies for Change," five online training modules developed by SAMSHA's Knowledge Application Program. In addition, HRC developed content for four online training modules. All HRC online training modules will offer Continuing Education Units.

In 2010, HRC made several improvements to the HRC website. Numerous user-driven revisions were implemented, including a redesigned homepage, a directory of state-specific local resources, and integration with social media. One indication of the success of the improvements is growth in web traffic: visits to the HRC website increased 41% between 2009 and 2010.

In 2009–2010, two HRC projects focused on understanding the needs of two vulnerable sub-groups at high risk for homelessness: LGBTQI2-S youth and refugee families. HRC convened an Expert Panel and launched a Listening Tour to help advance cultural competence and build the knowledge base of best practices for serving LGBTQI2-S youth who are homeless. HRC also conducted a Listening Tour to understand homelessness prevention and risks among refugee families.

In the coming year, HRC will continue to expand the reach of training, technical assistance, knowledge, and resources to help prevent and end homelessness. In particular, HRC will promote best practices for providing and sustaining supportive housing, promoting recovery from mental illness and substance use, providing trauma-informed care, supporting veterans and military families, and ensuring that people experiencing homelessness receive the full benefits of health care reform.

We look forward to another year of working together to support the homeless service workforce.

Sincerely,
Kristen Paquette, M.P.H.
Project Director
Homelessness Resource Center
Senior Associate
Center for Social Innovation

What is the Homelessness Resource Center?

The Homelessness Resource Center fosters the development of an interactive learning community of providers, consumers, policymakers, researchers, and government agencies at federal, state, and community levels—with the goal of bringing together state-of-the-art knowledge and promising practices to prevent and end homelessness among people with mental health and substance use disorders, and trauma histories.

The Homelessness Resource Center seeks to improve the daily lives of people affected by homelessness and who have mental health and substance use problems and trauma histories.

How We Achieve Our Mission

» Increasing awareness, knowledge of resources, and capacity to help people experiencing homelessness

» Integrating and transforming homeless service systems

» Supporting the implementation of the 10-year plans to end homelessness

» Supporting integration of PATH and SSH within HRC

» Facilitating communication and collaboration among providers, researchers, policymakers, and consumers

What Is The Homelessness Resource Center?

In all of its work, HRC strives to be a:

» Continuous learning community

» Center of excellence

» Clearinghouse for state-of-the-art information and resources

» Capacity builder

Our Work

» Training and technical assistance

» Publications

» On-line learning opportunities

» Networking

Our Work Is Guided By A Commitment To:

» Fostering a trauma-informed recovery system

» Integrating consumers in all aspects of our activities

» Ensuring cultural and linguistic competence

» Improving access to mainstream services for people experiencing homelessness

» Supporting the PATH and SSH programs

» Coordinating our activities with other federal efforts

ʜʀᴄ's *Founding Vision*

When the Homelessness Resource Center launched in 2006, the HRC project team developed a multi-year strategic plan and mapped out four key strategic goals to guide its work:

Strategic Goal 1:
Evidence-Based Practices

Determine the evidence base for exemplary and promising practices in the homelessness field. Support strategies for increasing the level of evidence and implementing these practices in real-life settings.

Strategic Goal 2:
Workforce Development

Increase workforce capacity through technical assistance and training.

Strategic Goal 3:
Plans to End Homelessness

Support states in their efforts to implement their 10-year plans to end homelessness.

Strategic Goal 4:
Homelessness Prevention

Develop a conceptual framework for implementing a homelessness prevention strategy and promote its application.

Table of Contents

Collaborative Partnerships

The Homelessness Resource Center (HRC) is the only national training and technical assistance center dedicated to serving all of the nation's homeless service providers, regardless of grantee status. HRC works closely with a wide range of collaborative partners to maximize the impact and extend the reach of HRC resources, training, and products. HRC connects diverse stakeholders—service providers, consumers, policymakers, researchers, and federal, state, and local government—who share the common goal of improving the lives of people who are homeless.

HRC will continue to expand the breadth and depth of collaborations and partnerships to improve resources, training, and technical assistance. In particular, HRC will reach out to stakeholders to identify how we can help prepare homeless service providers for the implementation of health care reform.

Collaborating with SAMHSA's Projects for Assistance in Transition from Homelessness & Services in Supportive Housing

HRC regularly collaborates with SAMHSA's Projects for Assistance in Transition from Homelessness (PATH) and the Services in Supportive Housing (SSH) technical assistance centers. All three provide training and technical assistance to improve services for people who are homeless or at risk of homelessness and who have serious mental illness, substance use disorders, and trauma histories.

Highlights from 2009–2010 collaboration include:

» In 2009–2010, HRC and PATH hosted three joint regional training events for homeless service providers in St. Cloud, Minnesota, Columbia, South Carolina, and El Paso, Texas. These events included a training track for PATH grantees, focused on data collection and Homeless Management Information Systems (HMIS). HRC and PATH trainers collaborated to adapt HRC's training curriculum, *Promoting Wellness: An Integrated Approach to Homeless Service Delivery*, to the needs of providers in each community.

» HRC recruited PATH and SSH grantees to help test the HRC Cost Analysis Tools and provided cost analysis technical assistance to four PATH and SSH grantees.

» HRC profiled PATH and SSH grantee programs in feature articles published on the HRC website. Articles focused on innovative approaches to implementing evidence-based practices such as Supported Employment and Motivational Interviewing.

» HRC implemented improved navigation tabs on the HRC website to direct HRC users to the PATH website and SSH Online Community Network.

» The newly developed SSH Online Community Network is hosted via the HRC website.

» HRC and PATH continued to collaborate to share content and offer improved functionality to HRC and PATH users. The HRC updates were made available to the PATH website without any additional cost.

» On September 9, 2010, HRC hosted a collaborative planning meeting with PATH, SSH, Co-Occurring and Homeless Activities Branch (CHAB), and Co-Ocurring Disorders Initiative (CODI) staff members.

The Homelessness Resource Network

Homeless Service Providers

The Homelessness Resource Network (HRN) is a unique collaboration among three of SAMHSA's technical assistance centers and the Homeless Hub, Canada's leading source for homelessness-related research, policy, and best practices. The HRC provides coordinating leadership for the HRN partners. In addition to HRC, HRN member websites include:

» SAMHSA's Projects for Assistance in Transition from Homelessness: http://pathprogram.samhsa.gov

» SAMHSA's Center for Substance Abuse Treatment's Co-Occurring and Homeless Activities Branch: http://chab.samhsa.gov

» York University's Canadian Homeless Hub: http://www.homelesshub.ca

The four HRN member websites share a common digital library of nearly 11,000 resources and interactive functionality, including social networking tools. Each HRN member website has a customized user interface tailored to its particular audience, while also leveraging the network's shared resources and saving costs.

Homeless service providers play a critical role in the nation's strategy to end homelessness. They work under challenging conditions and face diminishing resources in the current economic climate. HRC is dedicated to improving providers' access to knowledge and training in evidence-based practices to better serve people experiencing homelessness. HRC consults regularly with homeless service providers to understand their needs and how HRC can respond.

The HRC's network includes providers, researchers, consumers, and policymakers across the country. As HRC learns about innovative programs helping people to heal from homelessness, substance use, mental illness, and trauma, we share what we learn and connect people doing similar work. HRC builds relationships with providers and programs, shares what is learned, and connects people in the network.

HRC Advisory Steering Committe

The HRC is guided by an Advisory Steering Committee of leaders in the homelessness field. Committee members include researchers, advocates, policymakers, providers, consumers, and representatives from federal agencies. Committee members include representatives from the U.S. Interagency Council on Homelessness, U.S. Department of Housing and Urban Development, the U.S. Department of Veterans Affairs, the U.S. Department of Labor, the Health Resources and Services Administration, the Administration for Children and Families, and the Substance Abuse and Mental Health Services Administration. The Committee is co-chaired by Fred Osher and Carol Wilkins.

The Committee convened in December 2009 to review HRC accomplishments and provide guidance on work in progress. The meeting also included progress reports from SAMHSA's Co-Occurring Disorders Initiative, Services in Supportive Housing, Projects for Assistance in Transition from Homelessness, and Knowledge Application Program. Committee members shared information on new federal initiatives to end homelessness and identified building new partnerships as an important priority for HRC in 2010 and beyond.

A list of current ASC members can be found at the end of the report.

Key Collaborators

- » Advocates for Human Potential
- » American Journal of Orthopsychiatry
- » Boston University's Center for Psychiatric Rehabilitation
- » Cloudburst Consulting Group
- » Columbia University's Mailman School of Public Health
- » Columbia University's Center for Homelessness Prevention Studies
- » Community Voice Mail
- » Cyclogram Media
- » Health Resources and Services Administration
- » HHS' Office of the Assistant Secretary for Planning and Evaluation
- » Human Resources Research Organization
- » ICF International
- » Informatics Studio
- » National Center on Family Homelessness
- » National Health Care for the Homeless Council
- » Open Health Services and Policy Journal
- » Relyon Media
- » SAMHSA/CMHS' Child, Adolescent, and Family Branch
- » SAMHSA/CSAT's Co-Occurring and Homeless Activities Branch
- » SAMHSA's Co-Occuring Disorders Initiative
- » SAMHSA's Health Information Network
- » SAMHSA's Knowledge Application Program
- » SAMHSA's Office of Program Services
- » Schneider Institutes for Health Policy, Heller School, Brandeis University
- » U.S. Department of Housing and Urban Development
- » U.S. Department of Labor
- » U.S. Department of Veterans Affairs
- » U.S. Interagency Council on Homelessness
- » Veterans Affairs Supportive Housing
- » Westat
- » York University's Canadian Homeless Hub

Substance Abuse and Mental Health Services Administration

Homelessness Resource Center
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🗺 **Need Help Now?** Click Here to Find Resources in Your State for Homeless Service Providers

Second Opinion
An Integrated Treatment Group for Dual Disorders

1 2 3 4

SOAR
SSI/SSDI Outreach, Access, and Recovery

🗻 Features

Opening Doors: Federal Strategic Plan to Prevent and End Homelessness

by US Interagency Council on Homelessness (USICH)

Opening Doors serves as a roadmap for joint action by the 19 USICH member agencies along with local and state partners in the public and private sectors. The plan puts us on a path to end veterans and... [read more...]

💬 Add Comment   📎 Share This   🔁 Find Related

Comments Requested: Strategic Plan 2010 – 2015 (Draft)

by Glied, Sherry

📢 Voices from the Field Blog

Five Years After Katrina: Reaching Out in New Orleans

Shamus Rohn
Director, Abandoned Buildings Outreach Project

Max is crying today. Once thing ago we found him living in an abandoned house in the Mid City neighborhood of New Orleans. The house has not been touched since flooding from Hurricane Katrina as evidenced by ...
Read More

The HRC Website

An Award-Winning Website

Since it was launched in 2008, the HRC website has become a recognized and respected source of high quality information and tools for those committed to improving services for people experiencing homelessness. Website traffic numbers offer one measure of the HRC website's growing popularity. Traffic to the HRC website increased 41% between September 2008 and August 2010. Since late 2009, the HRC website has seen between 15,000 and 18,000 visitors every month.

In 2010, the HRC website was honored with two website awards. The Web Marketing Association awarded the HRC website with an "Industry Standard of Excellence" award in the government category for Outstanding Achievement in Web Development. The HRC website also won a 2010 New Media "Standard of Excellence Award," in the government category.

In "The 10 Most Notable Homelessness Stories of 2009," the HRC website was highlighted as a notable government website in the category of "Homelessness Takes to the Web," by Change.org's End Homelessness website.

Learn, Connect, Share: User-Driven Revisions to the HRC Website

In response to feedback from users, HRC introduced revisions to the website in 2010. The revisions included a redesigned homepage, a blog, a "Get Help Now" section, Facebook Integration, and more.

» **Enhanced, More Intuitive Homepage Design**
The new homepage design offers more content in a simplified and intuitive design.

» **Integrated Login with Social Media, including Facebook, Yahoo!, Twitter, Google, AOL, and others**
The HRC website is now integrated with all major social media sites, enabling users to use one login for the HRC as well as Facebook, Google, Yahoo! and others. Integrated login allows users to link their HRC profiles with their online social networks and to share HRC content more easily via social media.

» **Enhanced Social Networking Features**
Enhancements include a redesigned profile page for HRC community members, making it easier for members to connect with each other. Community members can upload a profile photo. These enhancements integrate seamlessly with the HRC website's Web 2.0 features, such as rating and commenting on resources.

» **"Need Help Now": Resources for Homeless Service Providers**
Providers told the HRC that they needed easy access to local resources to help them refer clients in need. "Need Help Now" lists major resources by state, as well as national resource directories.

» **Voices from the Field, HRC's Blog**
A place for providers, HRC trainers, and others to share thoughts, opinions, and reflections on how to improve services for people experiencing homelessness.

» **"News from the Web"**
A new feature on the HRC homepage offering the top news headlines on homelessness.

» **Redesigned Topic Pages**
HRC refined and redesigned the website's topic pages to improve users' access to resources.

» **Improved Navigation Bar**
The redesigned navigation bar includes tabs for SAMHSA's SSH and PATH programs.

HRC's Original Feature Articles

The HRC website publishes a fresh batch of original feature content every two weeks. HRC feature content translates research, shares innovative models for service delivery, highlights the success of evidence-based practices, and profiles leaders in the field. HRC feature articles are paired with selected resources from the HRC digital library, offering readers the opportunity to learn more. They are grounded in research and emphasize the human connections and stories at the root of all homeless services work. HRC feature content spans a wide range of topics, issues, and themes. The following section highlights a small sample of HRC feature web articles.

Trauma-Informed, Recovery-Oriented Care

HRC profiles programs across the country providing trauma-informed, recovery-oriented care for people transitioning out of homelessness. In Ohio, Amethyst, Inc. provides housing and integrated treatment for women and children who have experienced homelessness, substance use, mental illness, and/or trauma. Amethyst provides five years of transitional housing and gender-specific, trauma-informed services. The agency's leadership includes women in recovery. It is also a tobacco-free program and offers holistic wellness services. In 2009–2010, HRC published multiple feature articles highlighting different aspects of this innovative program, including "Smoking Against the Odds," "A Wellness Program to Help Women Recover," and " Q & A with Lori Criss: Helping Women to Heal."
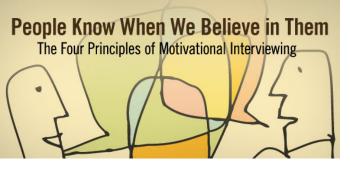
Virginia O'Keeffe is a founding member of Amethyst, Inc., a program for women in recovery. Amethyst offers gender-specific, trauma-informed treatment and services. Virginia is open and honest about her own recovery from substance use. She shares that she grew up in a household that could have been "the poster child for the addictive dysfunctional family." It also became a home that was a place of healing after her father entered recovery. Now, she shares her own recovery story to help change the public face of women in recovery and to combat the stigma associated with addiction.

Recovery and Disclosure

Q&A with Virginia O'Keefe, Founder of Amethyst, Inc.

Promoting EBPs: Supported Employment

HRC promoted best practices for Supported Employment programs by publishing feature articles on Central City Concern's Individual Placements in Supported Employment program. In "Individual Placements in Supported Employment: Promising Results," HRC shared findings from the Portland, Oregon program's two-year retrospective study on the impact of Supported Employment, which showed a 71% success rate. Another article, "Walking Side by Side on a Path to Supported Employment," profiled an Employment Specialist who shares her strategies for building trust and support with people seeking employment.

"In the context of an empathic relationship, we seek to help people tap into their own wisdom and wishes."
Ken Kraybill, Training and Technical Assistance, *specialist for the Homelessness Resource Center*

Promoting EBPs: Motivational Interviewing

The HRC website offers a unique space for the expertise, insights, and contributions of human service providers and people in recovery. Feature articles on the evidence-based practice of Motivational Interviewing focus on the transformative relationships that unfold between consumers and providers. Throughout 2009–2010, HRC featured several articles highlighting the techniques and spirit of Motivational Interviewing. Articles included "People Know When We Believe in Them: The Four Principles of Motivational Interviewing" and "A Gift in My Lap."

"One day, I happened to run into David at a construction site. He pulled some things out of his rucksack, including an antique pharmacy glass bottle from the 1800s," explains Alan Pickett, a Mental Health Outreach Nurse. Out of this small exchange, Alan learned that David had a strong interest in antiques. It was a genuine hobby. The story of Alan and David's journey exemplifies the spirit of Motivational Interviewing and the remarkable healing that comes from this approach to outreach.

Profiling Leaders in the Field

Veterans and Homelessness

"My passion is helping homeless veterans come off the street. Helping people to overcome obstacles and assisting vets in finding health and happiness is what helps me." —Mary Ross, Operation Stand Down, from HRC's "Standing Down for Women Veterans: One Woman's Story," published November 11, 2009.

The HRC published multiple articles on veterans and homelessness, including a special focus on female veterans at risk for homelessness. Of the estimated 107,000 currently homeless veterans, 7,000 are female veterans. Women who are veterans have four times greater risk of homelessness compared to their civilian counterparts. HRC published "In Their Own Words: Homeless Female Veterans Share Their Stories," highlighting the experiences of female veterans experiencing homelessness and providers who serve them. Another HRC article highlighted how HUD's Homelessness Prevention and Rapid Re-Housing (HPRP) funding is preventing homelessness among veterans. HRC also published articles about the new Women Veterans Comprehensive Healthcare Center in Nashville, Tennessee and Community Circles of Support for Veterans' Families, an innovative new model of support for veterans' families.

HRC writers interview leaders in the field, offering them an opportunity to reflect on progress made and the challenges ahead for improving services for people experiencing homelessness.

» *"What sustains me is recognizing the gap between the services people have access to and what we know about what works. It is important to me to be part of a community that works to close this gap. With the appropriate supports, care, and respect, I know that people with co-occurring disorders can succeed in achieving their goals."*—Fred Osher, M.D., Director of Health Systems and Service Policy for the Justice Center of the Council of State Governments, profiled in "What Sustains Me: Reflections of a Leader in Co-Occurring Disorders and Treatments."

» *"I hope that we can continue to invest in solutions, be flexible, adaptable, and let people experiment. That is how we got where we are today. It is not because one group had the answer and received all the money. I also hope that people understand that we are going to change the problems in our world by changing ourselves; this has to be reflected in our organizations."* —Martha Fleetwood, Executive Director, Homebase, profiled in *"*Martha Fleetwood on Sustaining Ourselves and Our Communities."

» *"Homelessness is a form of extreme poverty. I believe we have to deal with poverty more broadly. We must address poverty to address homelessness."*—Stephen Gaetz, Executive Director of Canada's Homeless Hub, profiled in "Punk Rock, Poverty, and Policy: Mobilizing Research on Homelessness."

Standing Down for Women Veterans

One Woman's Story

Voices from the Field: SAMHSA's Homelessness Resource Center Blog

Reaching Out
Four Years After Hurricane Katrina

The HRC's *Voices from the Field* blog is a place for providers, HRC trainers, and others dedicated to improving homeless service delivery to share opinions, thoughts, and reflections. Through the blog and feature content, HRC writers are building a nationwide network one person at a time, every day. As HRC reaches out to people working in the field, we open doors to further the process of learning, sharing, and connecting. *Voices from the Field* offers a space for providers and HRC trainers to connect and share what we are learning.

Voices from the Field is a dedicated space for providers to share the challenges they face on a daily basis. HRC Guest Blogger Shamus Rohn is director of the Abandoned Buildings Outreach Project at UNITY of Greater New Orleans. On the HRC Blog, he shares the challenges of reaching out in Post-Katrina New Orleans:

Max is 42, is living in one of the 55,000 buildings still abandoned nearly five years after the floodwaters receded. When my co-worker Katy and I met him, we told him we'd do everything in our power to get him into permanent housing.

We also explained it could take a long time.

When will we be able to house Max? I hope soon, but I fear it could take many months or even years given the staffing and resources we have compared to the size of the homeless problem we face.

I can't justify pushing his case for a Permanent Supportive Housing slot ahead of the woman I met the night before in her late 50's with full-blown psychosis, mental retardation, and a drinking issue worse than his. Nor can I ethically push it ahead of the 61-year old man sharing his squat, who has more severe psychiatric and medical conditions and just as much time living on the streets.

The hard fact: there are hundreds of others in even worse shape who languish on our registry of disabled homeless people waiting to be housed.

—from "Five Years After Katrina: Reaching Out in New Orleans," by Shamus Rohn, published August 24, 2010.

Cross-Promotion & Content Sharing Partnerships

Change.org's End Homelessness Blog

Brainline.com

InforUm.org (now PovertyInsights.org)

Throughout 2009–2010, HRC developed new cross-promotion partnerships to market HRC resources to wider audiences. These partnerships expand the reach of HRC resources and allow HRC to offer special content.

Change.org's End Homelessness Blog highlighted several HRC articles in thematic blog posts. "Homeless Teens, In Their Own Words" highlighted a HRC article of the same title, drawing attention to the challenges faced by teenagers living in family shelters.

The Change.org coverage adds impact to HRC articles—in the form of an additional 4,900 readers and 37 "re-tweets" (posts to Twitter).

A relationship with Brainline.org offers the HRC the opportunity to share resources related to Traumatic Brain Injury. InforUm.org (now Poverty Insights.org), a website dedicated to a national dialogue on housing, poverty, and homelessness, has re-published original HRC feature content on best practices for homeless service providers.

Building the Homelessness Resource Network

The HRC website is the founding member of the Homelessness Resource Network (HRN). The HRN includes four homelessness resource centers that share a digital library of resources related to homelessness. Each website serves a distinct audience and is designed and branded to reflect each resource center's identity. In addition to HRC, HRN members include PATH, CHAB, and Canada's Homeless Hub.

Under HRC's coordinating leadership, HRN partners work together to improve access to shared digital resources. The HRN partnership enables all member websites to have access to improvements implemented by any partner site. In 2010, the HRN partners collaborated to upgrade the websites' shared search functionality. The new faceted search functionality allows users to customize search criteria and how search results are displayed by using several filters. The faceted search functionality offers powerful features to enhance users' experience of the HRN partner sites.

In 2010, HRN partners collaborated to improve quality control of the nearly 11,000 resources in the shared digital library. As the digital library grew, partners recognized that there needed to be a better process to ensure quality control and to avoid duplicate resources. As a first step, HRC worked with HRN partners to create a guide for a standardized resource entry process across the network.

To facilitate collaboration to maintain quality control, HRC improved coordination between system administrators across the network. HRN members now have enhanced access to control the quality of shared resources and to avoid duplication within the digital library. HRN members are committed to providing the highest quality resources to users across all four websites. As a result, the HRN's shared Digital Library offers an improved user experience.

"Connecting with clients means giving them the same respect, courtesy, and privacy that you would want if you were in their shoes. Showing you care doesn't cost anything."
HRC Provider Network member Bobbi Jo Evans shares her thoughts and advice on how to connect with others. She offers practical tips for how to build trust and support clients as they move through the housing process.

Summary of September 2009–September 2010

200,791 VISITS

616,653 PAGEVIEWS

3.07 PAGES VIEWED PER VISIT

3.36 AVERAGE MINUTES ON SITE

"I love the concept of following people, I am so ready for new information to come my way!"

-Comment from a new HRC member

Shared Digital Library

3,820 HRC entries were available for viewing at the end of October 2008

10,914 HRN entries were available for viewing at the end of September 2010
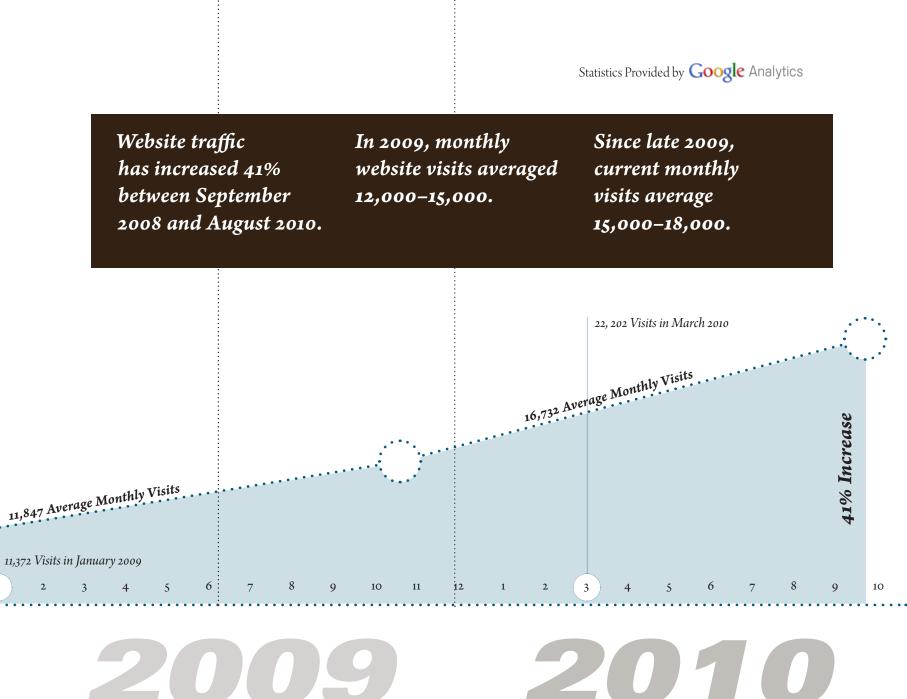
Statistics Provided by **Google** Analytics

Website traffic has increased 41% between September 2008 and August 2010.

In 2009, monthly website visits averaged 12,000–15,000.

Since late 2009, current monthly visits average 15,000–18,000.

22, 202 Visits in March 2010

16,732 Average Monthly Visits

11,847 Average Monthly Visits

41% Increase

11,372 Visits in January 2009

| 10 | 11 | 12 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

08   **2009**   **2010**

Where do HRC users come from?

41% Search Engines

26% Direct Traffic

8% Other

25% Referring Sites

Summary of September 2009–September 2010:

200,791 visits

616,653 pageviews

3.07 pages/visit

3.36 average time on site (in minutes)

Where do HRC users come from?

41% Search Engines

26% Direct Traffic

25% Referring Sites

8% Other

More users are visiting the HRC site:

Average monthly visits September 2008–August 2009: **11,847**

Average monthly visits September 2009–August 2010: **16,732**

Increase: **41%**

Paradigm Shift?

HRC Training & Technical Assistance

Training the Homeless Services Workforce: HRC's On-Site Training & Technical Assistance

Training the homeless services workforce in evidence-based and best practices is at the heart of HRC's mission. As SAMHSA's only non-grantee specific homelessness technical assistance center, HRC fills an important gap by providing high quality training that is open to all homeless service providers. In 2010, providers in communities across the nation saw increased demand for homeless services. At the same time, programs continued to face budget cuts. As a consequence, agencies have limited resources to support staff training.

To meet this demand, HRC expanded training and technical assistance opportunities to reach more homeless service providers across the country in 2009-2010. The HRC training team visited 16 cities and trained 1,517 people through on-site training opportunities. HRC offered on-site training through regional trainings, on-site technical assistance, and conference workshops. This year, HRC also expanded opportunities for online learning.

HRC Regional Trainings: Promoting Wellness—An Integrated Approach to Homeless Service Delivery
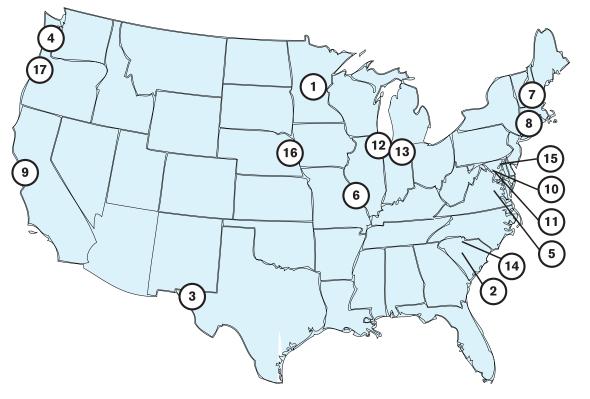
In preparation for each HRC regional training event, the HRC team develops relationships with local community stakeholders to identify local training needs. Together, they develop an agenda, including customized training workshops to reflect each community's unique needs. These sessions are integrated alongside HRC's core training curriculum, *Promoting Wellness: An Integrated Approach to Homeless Service Delivery*. The curriculum includes modules on Motivational Interviewing, traumatic stress and homelessness, trauma-informed services and settings, basic medical information for non-medical providers, best practices for outreach and engagement, involving consumers as colleagues, and self-care for providers.

In 2009–2010, HRC expanded the core curriculum to include workshops on veterans, youth, leadership, Critical Time Intervention, communities of practice, and working with hard-to-reach populations.

HRC and the PATH TA Center collaborated to co-sponsor three of this year's four regional trainings. Within these three trainings, a dedicated training track on PATH data collection was offered to PATH providers. The PATH program also sponsored sessions on Housing First and Supported Employment, which were open to all participants.

HRC regional trainings are open to all service providers on a first-come, first-served basis, and are always free of charge. In addition, HRC provides a limited number of scholarships for consumers to cover the cost of travel and lodging. Participants who complete the two-day HRC training curriculum are eligible to receive Continuing Education Units.

Facing photograph from HRC Regional Training in Tacoma, WA on September 21st, 2010. Photo courtesy of Steven Samra.

"The trainers were bright, passionate, knowledgeable, gentlefolk— all the sessions I attended were top notch."

- Columbia, SC Regional Training Participant

Regional Trainings: Promoting Wellness— An Integrated Approach to Homeless Service Delivery

1. **St. Cloud,** MN
   November 2009
   124 trained

2. **Columbia,** SC
   March 2010
   89 trained

3. **El Paso,** TX
   May 2010
   103 trained

4. **Tacoma,** WA
   June 2010
   193 trained

Embedded Conference Technical Assistance

5. **Homeward's Best Practices 2009 Conference Richmond,** VA
   September 2009
   Multiple Workshops
   64 trained

6. **National Faith-Based Conference on Mental Illness St. Louis,** MO
   September 2009
   Homelessness and Mental Illness
   20 trained

7. **New Hampshire Statewide Conference on Homeless Services Concord,** NH
   October 2009
   Self-Care; Traumatic Stress and Homelessness
   105 Trained

8. **2010 True Colors Conference Hartford,** CT
   March 2010
   Working with Homeless LGBTQI2-S *Youth*
   16 trained

9. **National Health Care for the Homeless Conference San Francisco,** CA
   June 2010
   Creating Healthy Organizations; Traumatic Stress and Homelessness
   154 trained

10. **National Alliance to End Homelessness Conference Washington,** DC
    July 2010
    Pre-Conference Workshops on: Introduction to Motivational Interviewing & Trauma-Informed Care
    80 trained

11. **National Alliance to End Homelessness Conference Washington,** DC
July 2010
Outreach and Engagement Strategies; Sober Living and Treatment for Women Experiencing Substance Use and Homelessness
57 trained

12. **National Conference on Women, Addiction and Recovery Chicago,** IL
July 2010
Providing Sober Living and Treatment for Women Experiencing Substance Use and Homelessness
24 trained

HRC's On-Site Technical Assistance

13. **On-Site** TA: **Elkhart,** IN
January 2010
Motivational Interviewing
202 trained (2 sessions)

14. **On-Site** TA: **Rock Hill,** SC
April 2010
Implementing 10-Year Plans to End Homelessness
20 trained

15. **On-Site** TA: **Baltimore,** MD
May 2010
Advanced Skills in Motivational Interviewing
26 trained

16. **On-Site** TA: **Omaha,** NE
July 2010
Case Management; Motivational Interviewing; and Cultural Competence
125 trained

17. **On-Site** TA: **Portland,** OR
August 2010
Trauma-Informed Care
115 trained

Trends In Numbers Of People Trained

2007–2008:
On-site: 1,037

Virtual: 528

Total: 1,565

2008–2009:
On-site: 732

Virtual: 1,369

Total: 2,101

2009–2010
On-site: 1,517

Virtual: 6,257

Total: 7,774

"This was a highly effective training which will benefit the participants as employees and in their personal lives."

-From Executive Director of Central City Concern, Recipient of On-Site Secondary Trauma training.

Participants in HRC regional trainings consistently indicate that HRC helps them to improve their work. When asked to evaluate how the HRC training impacted their use of best practices, providers express confidence in new knowledge and skills. For example, as a result of their participation in the HRC regional training in Columbia, South Carolina, providers indicated increased confidence in:

» Ability to provide trauma-informed care
  11% pre-training to 25% post-training;

» Ability to practice self-care:
  23% pre-training to 40% post-training;

» Ability to use motivational interviewing skills:
  23% pre-training to 46% post-training;

» Ability to integrate consumers in programs:
  23% pre-training to 31% post-training.

HRC's On-Site Technical Assistance

In 2009–2010, HRC expanded on-site technical assistance opportunities. In response to requests from agencies, HRC sent trainers to five different states and trained 488 homeless service providers. For each technical assistance request, HRC trainers work closely with agencies to create curricula tailored to local needs.

HRC TA is free and preference is given to agencies that are not eligible for technical assistance from grantee-specific sources. HRC works closely with the requesting agency to ensure that other community agencies are invited to participate.

HRC Conference Workshops

HRC maintains a regular presence at the all the major national conferences attended by homeless service providers. HRC regularly offers pre-conference institutes and workshops dedicated to developing the skills and core competencies needed to deliver homeless services effectively. Popular training topics include Motivational Interviewing, traumatic stress and homelessness, skills for outreach and engagement, and others. HRC workshops weave together theory and practical methods to help providers apply evidence-based practices to their daily work.

Participants consistently share that HRC training makes a difference. *"I have been struggling with how to work with some of my challenging clients. The information we discussed in the training will really help me to better serve them. I feel like I have gotten some very important new knowledge from this training,"* remarked one participant.

HRC's Online Training

Strategies for Change: Online Training Modules with Continuing Education Units

In 2010, HRC launched *Strategies for Change,* five online training modules designed for service providers and community stakeholders working to end chronic homelessness. The modules were developed under SAMHSA's Knowledge Application Program and are being disseminated by HRC.

The Strategies for Change modules provide state-of-the-art knowledge to help end chronic homelessness. They include practical advice for planning, organizing, and sustaining a comprehensive, integrated system of care designed to end homelessness for people with serious mental illnesses and/or co-occurring substance use disorders.

Strategies for Change includes five self-guided, stand-alone modules. Each one can be taken individually. The modules are available on the HRC website, and include:
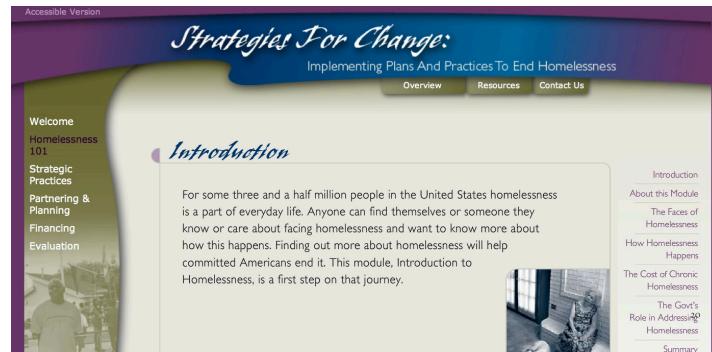
» **Homelessness 101:** Basic facts and figures on homelessness, including a discussion of causes and individual and societal risk factors.

» **Strategic Practices:** Information on evidence-based and promising community-based practices.

» **Partnering and Planning:** Strategies for creating partnerships and community planning to leverage resources.

» **Financing:** Practical tips on how to finance services.

» **Evaluation:** An overview of evaluation strategies to help determine if programs are having an impact on ending chronic homelessness.

Upon completion of each module, participants are eligible for CEUs from the following accrediting agencies: National Association of Social Workers (NASW), the Association for Addiction Professionals (NAADAC), and the Commission for Rehabilitation Counselor Certification (CRCC).

SAMHSA KAP's Strategies for Change. Five Online Modules with CEUs. (Modules developed by Westat)

Online Training Modules (In Development)

In 2010, HRC developed original content for three interactive online training modules. The modules were developed in response to requests from homeless service providers for low-cost, online, on-demand training opportunities. All HRC online training modules will offer CEUs to participants and will be available free of charge on the HRC website. HRC plans to release the following modules in the coming year:

Serving Youth who are LGBTQI2-S and Experiencing Homelessness: What We Know and What We Can Do.
Twenty to forty percent of the homeless youth population is believed to identify as lesbian, gay, bisexual, transgender, questioning, intersex, and two-spirit (LGBTQI2-S). This module helps providers explore their beliefs about LGBTQI2-S youth and challenges common misconceptions. The module presents best practices for working with this highly vulnerable population. It integrates clips from training videos on serving LGBTQI2-S youth developed in partnership with SAMHSA's Child, Adolescent, and Family Branch.

Creating an Inclusive Workforce in Homeless Services: Consumer Integration. Integrating consumers is an important step toward providing recovery-oriented care. This module explores the characteristics of a recovery-oriented organizational culture, discusses the strengths that consumers bring to service delivery, and provides concrete steps to help agencies integrate consumers. The module was developed in collaboration with Boston University Center for Psychiatric Rehabilitation.

Becoming Trauma-Informed: Using the Trauma-Informed Self Assessment. This module is designed to help service providers understand best practices for trauma-informed care and how to use the "Trauma-Informed Organizational Self-Assessment Tool." The self-assessment helps providers understand traumatic stress and assess their organization's ability to provide trauma-informed care. This module was developed in collaboration with The National Center on Family Homelessness.

Taking it to the Streets: Outreach and Engagement. This online training package provides training for new outreach workers and other providers. It helps providers learn best practices for conducting street outreach, developing relationships, and engaging with consumers.

Virtual Technical Assistance

In 2009–2010, HRC offered virtual technical assistance on cost analysis for homeless service programs. Technical assistance was provided over the phone using the prototype of the HRC Cost Analysis Tools. HRC provided 10 agencies with virtual TA on various aspects of cost analysis, including several SSH and PATH grantees.

In addition, the HRC team regularly fields requests for information, resources, or assistance via e-mail, telephone, or mail. Requests may range from a consumer in search of shelter resources, a provider looking for information on how to offer trauma-informed care, or a request for an HRC trainer to provide on-site training.

Effective Street Outreach:
Why It's important,
How YOU can do it better

Housing Options Made Easy: Operating a Peer-run Supportive Housing Program for Families

Guiding People Toward Change: The Spirit of Motivational Interviewing

HRC 2009–2010 Webcasts

In 2009–2010, HRC hosted eight webcasts, training 1,880 people through live participation. Webcasts are a powerful and cost-effective way to reach providers with highly targeted training topics. HRC webcasts encourage audience participation with real-time polls to collect audience input and a chat function to submit questions to presenters. Each webcast session offers time for questions and answers.

To participate, users need only an internet connection and a phone line. Some agencies report that staff will gather as a group to participate in a webcast together. All HRC webcasts are archived as podcast recordings and presentation slides, available for free download on the HRC website. Between September 2009 and September 2010, 3,899 people downloaded the archived, on-demand recordings and presentations.

What About You? Tools to Promote Self-Care
January 2010
242 trained

Guiding People Toward Change: The Spirit of Motivational Interviewing
Session 1: February 2010
Session 2: March 2010
2,984 trained

Operating a Peer-Run Permanent Supportive Housing Program: Housing Options Made Easy
March 2010
474 trained

Effective Strategies for Outreach: Why It's Important, How YOU Can Do It Better
April 2010
828 trained

Trauma-Informed Care: Youth Drop-In Centers and Beyond
May 2010
641 trained

Revitalize Your Community's 10-Year Plan to End Homelessness: Lessons from Portland, OR
June 2010
320 trained

Assessment in Supported Employment with People Experiencing Homelessness
July 2010
120 trained

*indicates both live participants and viewers of downloaded archived presentations.

Cost Analysis

My Projects   Log Out

Project Title

| Program Basics | Line Item Cost Allocation | Capital Costs | Measure Outputs | Measure Outcomes | Supportive Housing | Results Summary |

Program Basics

To begin, click on the "Create or Edit Your Program" button. Enter the name and type of the program or service you wish to evaluate, the year or fiscal year from which the data have been taken, and the region in which your program operates. Once you create your program, you may edit your program details at any time by clicking on the "Create or Edit Your Program" button or by clicking the desired item in the list.

Program Name	Program Description	Program Type	Using Data From Fiscal Year	Region	Urban Status
Northeast Shelter	This is my emergency shelter in the Northeast	Emergency Shelter	2009	Northeast	Rural

⊕ Create or Edit Your Program

Next Step ▶

🔺 Learn More About This Step

This tool produces an estimate of the value of services to individuals experiencing homelessness. The tool allows you, the user, to enter program expenses and program outputs to get costs per client and per unit of service. Research has shown that providing services to individuals experiencing homelessness can result in reduced utilization of emergency care, detox, jail, and shelter beds. While homeless service programs often understand their own costs and performance, they may not know what other services are used by

? Help

Help Item One
... ... etudo ulciscor, acsi gravis, esca luptatum neo gemino populus. Dignissim molior ex abluo ulciscor nonummy lobortis jumentum, immitto. Plaga roto incassum...

HRC Products

Cost Analysis: Web-Enabled Calculator

Homelessness comes at a very high cost—to individuals, communities, and systems of care. A growing body of research demonstrates that communities ***save money*** by providing permanent supportive housing to people experiencing homelessness. In short, it is proven to be more cost effective to provide permanent supportive housing than to leave someone on the streets or in shelters. The research shows that providing housing to someone experiencing chronic homelessness results in reduced utilization of publicly funded services such as police, emergency and impatient hospital services, and the correctional systems.

Documenting the cost savings associated with supportive housing provides communities with a powerful argument for creating permanent supportive housing units. However, few homeless service agencies or communities have the resources to hire researchers to conduct a cost study.

In 2009, HRC launched a project to bridge the gap between research and practice related to cost analysis in the field of homeless services. Our objective was to create easy-to-use tools to help homeless service programs assess and analyze the costs and cost savings associated with providing services.

HRC convened an Expert Workgroup on Cost Analysis to provide an overview of needs in the field and to identify a scope of work for the creation of HRC cost analysis tools. Dr. Donald Shepard, a health economist and expert on cost effectiveness at the Schneider Institute for Health Policy at the Heller School, Brandeis University led a team to create the tools.

Together with Dr. Shepard's team, HRC created a prototype of the HRC Cost Analysis Tools as a sophisticated Microsoft Excel™ spreadsheet. Throughout 2010, the team worked closely with homeless service programs across the nation to test the prototype. In the process, the team provided cost analysis technical assistance to ten homeless service programs, including youth shelters, Health Care for the Homeless programs, permanent supportive housing programs, emergency shelters, and other programs.

During the testing process, program administrators expressed enthusiasm for the tools. However, some found the Microsoft Excel™ spreadsheet format daunting. In response, HRC worked closely with Informatics Studio, experts in user-centered design and technology, to create an easy-to-use, web-enabled Cost Analysis Calculator.

What does the Cost Analysis Calculator do?

It gives program administrators the tools to:

1. **Calculate the total cost for a program.** *For example, an agency could compare the costs of two shelter sites, or compare the costs of two different approaches to delivering services, like a mobile vs. fixed clinic.*

2. **Calculate the cost per unduplicated client for a program, or other output.** *For example, an agency can calculate their costs per person, per bed night for an emergency shelter.*

3. **Calculate the cost per outcome for a program.** *For example, an agency could determine the cost per client stably housed for one year, or determine how much funding is needed to achieve a 60% rate of housing retention for one year.*

4. **Estimate the cost savings associated with providing a client with supportive housing.** *For example, several agencies in a community could average their estimated cost savings to get an idea of the community-wide cost savings associated with providing supportive housing.*

Building the Knowledge Base, Disseminating Research: Special Journal Issues

Next Steps

The beta version of the Calculator will be tested and refined through late 2010. In addition, HRC will create three web-based video tutorials designed to help program administrators learn how to use the tools and understand cost analysis in homeless services. The web-enabled Calculator and tutorials are expected to be available on the HRC website in 2011.
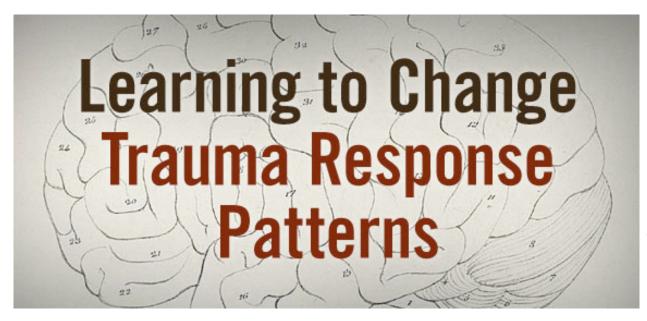
In 2009, HRC guest edited two special issues of peer-reviewed journals. The Special Section of the American Journal of Orthopsychiatry on the theme of "Homelessness and Parenting" was released in the fall of 2010. "The Future of Homeless Services: Special Issue" of the Open Health Services and Policy Journal was released in March 2010.

The two special issues stand as important contributions toward building the knowledge base on the role of services and supports in helping people to exit homelessness. Between the two special issues, 15 original research articles were published on topics including trauma-informed care, approaches to homelessness prevention, parenting in supportive housing, the linkages between foster care and homelessness, the homeless services workforce, and more.

HRC launched targeted marketing and dissemination campaigns around the release of each special issue, including special HRC web content. HRC sponsored free open access to the electronic full text of the special section of the American Journal of Orthopsychiatry. The Open Health Services and Policy Journal also offered free open access to all articles. Bound copies of the Homelessness and Parenting special issue were made available free of charge and demand was so high that all copies were distributed within two weeks of release.

"It was never a goal of mine to be homeless, but it happened."
Gladys Fonfield-Ayinla shares her story of struggling with domestic violence, homelessness, and chronic illness while caring for her young daughter. She offers recommendations to improve systems of care for parents and children, advocating for an end to "one size fits all" service models. This is an excerpt from a commentary published in the American Journal of Orthopsychiatry as part of the Special Section on Parenting and Homelessness.

"This is the mother lode!!!!!! Thank you so much for your time and energy this morning. You folks have done a great job with this presentation. Thanks again, ever so much!"

—Email response to receiving the Traumatic Stress Training Package, Kim Cudebec, Clinical Administrator, Serenity House of Volusia, Inc.

A trauma survivor shares her story of struggling to understand the complexities of trauma response in her life. Trauma re-enactment leaves an unpredictable mark on her life, often when she least expects it. She describes her path toward understanding trauma patterns and creating positive change. Her story is a powerful illustration of the need for trauma-informed care.

HRC Expert Panels,
Workgroups,
& Listening Tours

LGBTQI2-S Youth Experiencing Homelessness

Expert Panel

It is estimated that between 20 and 40 percent of youth experiencing homelessness identify as lesbian, gay, bisexual, transgender, questioning, intersex, or two-spirit (LGBTQI2-S). These youth are among the most vulnerable of the homeless population. LGBTQI2-S youth experience homelessness as a result of multiple, often interrelated factors, and a growing body of literature documents the risks and vulnerabilities they face. Youth who are LGBTQI2-S and homeless are at high risk for substance use, mental health issues, self-harming behavior, and sexually transmitted diseases. They experience higher rates of physical and sexual exploitation than heterosexual, non-transgender homeless youth. Transgender youth are especially vulnerable.

Homeless service providers may misunderstand youth who identify as LGBTQI2-S and experience homelessness. Many do not have the knowledge, skills, and language to discuss issues of sexual and gender identity with youth. They may feel uncomfortable or unable to accept LGBTQI2-S youth and adequately identify and care for their needs.

As a national training and technical assistance center supporting homeless service providers, the HRC is committed to advancing cultural competence and building the knowledge base of best practices. As a first step, HRC convened an Expert Panel on February 4, 2010 to better understand the needs of LGBTQI2-S youth who are homeless.

Expert Panel members included consumers, service providers, researchers, advocates, and policymakers. In addition, observers from several federal agencies participated. HRC prepared a briefing paper with a review of the literature on LGBTQI2-S youth and

Expert Panel Members:

Seth Ammerman, MD
Stanford University, Lucile Packard
Children's Hospital, Mountain View, CA

Colby Berger, Ed. M, LCSW
Adoption & Foster Care Mentoring,
Boston, MA

Edward Bonin, MN, FNB-BC
Tulane University Health Sciences Center,
New Orleans, LA

Amy Dworsky, PhD
Chapin Hall at the University of
Chicago, Chicago, IL

Sarah Paige Fuller, MSW
City of Norfolk, Office to End
Homelessness, Norfolk, VA

Kayla Jackson, MPA
National Network for Youth, Washington, DC

Marc LeJeune, LCSW
Outside In, Portland, OR

Ayala Livny, M. Ed
Youth on Fire, a program of
Cambridge Cares About AIDS,
Cambridge, MA

Jody Marksamer, Esq
National Center for Lesbian Rights,
San Francisco, CA

Sara Mindel, LICSW
Sexual Minority Youth Assistance League,
Washington, DC

LaKesha Pope, MPA
National Alliance to End Homelessness,
Washington, DC

Quianna Sarjeant
Youth on Fire, a program of
Cambridge Cares
About AIDS, Cambridge, MA

J. Daneé Sergeant
Tulane University Drop-In Center, Kenner, LA

James M. Van Leeuwen, PhD
Denver's Road Home, Denver, CO

Les B. Whitbeck, PhD
University of Nebraska-Lincoln, Lincoln, NE

Jenniffer Zogg
New Avenues for Youth, Portland, OR

Listening Tour Sites

Youth on Fire
Cambridge, MA

Larkin Street Youth Services
San Francisco, CA

Outside In
Portland, OR

The Ruth Ellis Center
Detroit, MI

UCAN *Host Home Program*
Chicago, IL

The Drop-In Center at Tulane University
New Orleans, LA

homelessness and what is known about best practices for serving this population. Panelists were asked to envision next steps toward a greater understanding of effective service delivery models. Together, the panelists discussed gaps in knowledge and lags in translating research into practice, focusing on services, engagement, and best practices, and building community networks.

Expert Panel participants emphasized the need to further research the service needs of LGBTQI2-S youth, to develop clear guidelines and best practice recommendations, and to develop and disseminate training to promote greater cultural and linguistic competence. As one outcome of the Expert Panel, HRC produced "Learning from the Field: Summary of Proceedings of the Expert Panel," available on the HRC website.

Listening Tour

As a first step toward addressing the Expert Panel's recommendations, HRC launched a Listening Tour to learn from agencies serving LGBTQI2-S youth. The goals of the Listening Tour were to learn about different approaches to serving LGBTQI2-S youth experiencing homelessness, identify promising practices, and share what was learned.

HRC worked closely with Expert Panel members to identify agencies that serve homeless youth, with either specialized programs for LGBTQI2-S youth or strategies to reach out to this population. HRC selected each Listening Tour site based on geographic diversity and programmatic focus. The objectives for the Listening Tour included:

Objective 1: Review approaches to serving the needs of LGBTQI2-S youth who are homeless.

Objective 2: Identify promising practices.

Objective 3: Recommend concrete steps to develop and disseminate a service model that includes best and promising practices.

HRC conducted one-day site visits to each agency. The agenda included structured discussions with staff at multiple levels and youth consumers. HRC summarized what was learned from the Listening Tour in a report, "Learning from the Field: Programs Serving Youth Who Are LGBTQI2-S and Experiencing Homelessness."

Next Steps

The Expert Panel will review the summary report and submit it for review. Once approved, HRC will disseminate findings from the report. HRC is developing an online training module designed to help providers understand the vulnerabilities faced by LGBTQI2-S youth experiencing homelessness. The module provides information on how to provide culturally competent care. It will offer Continuing Education Units to providers who successfully complete the module. In addition, HRC continues to offer web-based training materials on serving LGBTQI2-S youth in the form of original feature articles, webcasts, and other resources in the HRC digital library.

Workgroup on Homeless Women, Sober Living, and Treatment

In 2009, HRC received a technical assistance request from Amethyst, Inc., an Ohio-based agency providing housing and addictions treatment to women experiencing homelessness. The agency knew it was not alone in providing integrated treatment and housing to women and wanted to connect with similar programs across the country within a community of practice. Amethyst asked HRC to help facilitate a dialogue among agencies to share lessons learned and best practices for providing integrated sober housing and treatment to women experiencing homelessness.

As a first step, the HRC workgroup identified nine programs and held conversations with each to learn more about different program models and service needs. Next, the workgroup facilitated a group discussion to review and validate findings. Participants expressed interest in forming an online community of practice.

In July 2010, workgroup organizers facilitated workshops to share the workgroup's preliminary findings at SAMHSA's Women, Addiction and Recovery Conference in Chicago, IL, as well as at the National Alliance to End Homelessness Conference in Washington, DC.

Next Steps

HRC will continue workgroup activities, including developing an online community of practice and identifying ways to facilitate an ongoing national dialogue about best practices for providing integrated housing and treatment for women.

Amethyst is a leader in long-term, gender-competent addiction and trauma treatment for homeless women and their families in Central Ohio.

Workgroup Organizers:

Lori Criss
Chief Operating Officer
Amethyst, Inc.,
Columbus, OH

John Rio
Senior Program Associate
Advocates for Human Potential

Deb Werner
Project Director
Women, Children & Families
Technical Assistance Project,
Advocates for Human Potential,
Topanga, CA

Deborah Stone
*Social Science Analyst/
Federal Project Officer*
Homelessness Resource Center,
Homeless Programs Branch,
SAMHSA/CMHS

Kristen Paquette
Project Director
Homelessness Resource Center,
Center for Social Innovation

A Wellness Program to Help Women in Recovery

Homelessness Resource Center Annual Report 2010

Understanding and Preventing Homelessness Among Refugee Families

In late 2009, HRC received reports of refugee families experiencing homelessness in the U.S. As part of HRC's mission to support homeless service providers to better serve vulnerable populations experiencing homelessness, HRC launched a project to learn more about the needs.

The HRC team undertook a Listening Tour to learn about refugees' circumstances in three cities: Denver, Colorado; Boston, Massachusetts; and Salt Lake City, Utah. In each city, the HRC team held informal structured discussions with a wide range of community stakeholders. In addition, HRC met with representatives from refugee resettlement agencies from across the country.

HRC learned that the current system of supports and services for newly arrived refugees is not sufficient to prevent some refugee families from becoming homeless. The combination of prioritizing the admission of increasingly vulnerable and at-risk refugees, while providing limited supports is leading to increasing numbers of refugee families at risk for homelessness. In an attempt to avert a crisis of refugee homelessness, resettlement agencies are under increasing strain. Many agencies have few resources to prevent refugee families from going homeless. Providers report that refugee families are often forced to double up with other families, migrate to other states in search of better opportunities, or seek out homeless shelters.

The U.S. refugee resettlement program operates within a larger political climate that is increasingly unfriendly to immigrants, and by extension, other newcomers. Refugees may incorrectly be lumped into the category of economic migrants, despite the fact that refugees receive legal entry and legal authorization to work in the U.S. Refugee providers emphasize the need for public education—as well as

training for homeless service agencies—on the status of refugees in the U.S. Providers stress that "refugees can't go back. This is their home now." Yet, as refugee providers reach out to mainstream sources of assistance, they may encounter reluctance to serve refugees. Often, this is due to the misconception that refugees are not legally entitled to receive benefits.

In this context, refugee providers and homeless service providers emphasize the need for increased collaboration between the two systems. In particular, providers emphasize that the homeless service system is not prepared to provide culturally competent care for refugees, many of whom arrive with complex trauma histories.

In 2010, HRC produced a report, "Off the Radar: Growing Risks for Homelessness Among Refugees in the United States," which provides an overview of what HRC learned regarding:

» The complex factors leading to growing risks of homelessness;

» Innovative strategies and collaborations to prevent homelessness;

» The invisibility of homelessness among refugees;

» The high costs of homelessness;

» Training and technical assistance needs for both homeless service providers and refugee resettlement providers.

As part of the HRC's goal of improving services to prevent and end homelessness, the report offers recommendations for training and technical assistance to increase the capacity of the homeless service system to better serve refugees at risk for or experiencing homelessness.

Next Steps

HRC will share the findings of the listening tour with stakeholders in refugee resettlement and homelessness prevention. In addition, HRC will offer web-based training materials on the situation of refugees in the U.S. and the increasing risks of homelessness faced by this highly vulnerable group. Materials will include original feature articles, webcasts, and other resources in the HRC digital library. To determine how HRC can best meet homeless service providers' needs for training, HRC will consult with providers in communities where the needs are greatest.

"Refugees are powerful survivors. Refugee kids are resilient despite their past trauma experience. They adjust well to their new country and new schools."

—Refugee resettlement provider, Houston, Texas

Who Is A Refugee?

Refugees arrive with legal permission to live and work in the U.S., and include children, adults, and families who have been forcibly displaced from their homes, fled war zones, survived torture, or have faced other forms of persecution in their home countries. Since 1975, the United States has offered a safe haven to more than 2.6 million refugees from over 60 countries.

To receive refugee status, a person must be unable or unwilling to return to his or her home country due to persecution or a well-founded fear of persecution on the basis of race, religion, nationality, and membership in a particular social group, or political opinion. Refugees undergo an extensive screening process prior to arrival.

The U.S. resettles more refugees than any other country, numbering nearly 80,000 in 2009. Iraqis, Bhutanese, and Burmese are currently the largest groups of refugees resettling in the U.S.

2010-2011 *Advisory Steering Committee Members*

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Director, Health Systems and Services Policy Justice Center
Council of State Governments

Carol Wilkins, M.P.P.
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VA Community Care Center

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U.S. Interagency Council on Homelessness

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Director, Homeless Veterans Program Office
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Marti Knisley, M.A.
Director, Community Support Initiative
The Technical Assistance Collaborative

Chris Koyanagi
Policy Director, Bazelon Center for Mental Health Law

Charlene LeFauve, Ph.D.
Branch Chief, Co-Occurring and Homeless Activities Branch,
Center for Substance Abuse Treatment
Substance Abuse and Mental Health Services

Mollie Lowery, M.A.
Consultant

Sue Marshall
Executive Director, The Community Partnership for the
Prevention of Homelessness

Mary Anne Myers, Ph.D.
Senior Study Director, Westat

Chanson Noether
Division Manager for Criminal Justice
Policy Research Associates

Jim O'Connell, M.D.
President, Boston Health Care for the Homeless Program

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