

AHMA-PSW 2025 CONFERENCE & EXPO



DRIVING CHANGE
IN AFFORDABLE HOUSING
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Supportive Housing & Homelessness 101

Sabrina F. Alesana MSW & Jo Dominguez BA



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AHMA-PSW

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Today's Presenters



Sabrina F. Alesana (she/her), MSW
Sr. Program Manager
CSH



Jo Dominguez (he/they)
Sr. Program Manager
CSH

Agenda

- ❑ Welcome and Introductions
- ❑ Causes of Homelessness
- ❑ Defining Homelessness
- ❑ What is supportive housing and best practices
- ❑ How people get connected to permanent supportive housing



About CSH

CSH is 501c3 nonprofit intermediary organization and CDFI that advances **supportive housing** as an approach to **help people thrive**.

Since our founding in 1991, CSH has distributed more than **\$1.7 billion in loans and grants** that has created over **467,000 homes for individuals and families** exiting long-term homelessness.



csh.org

What We Do

CSH takes action through our three lines of business.

Policy & Advocacy
We promote concrete policies and strategies that advance more supportive housing development.



Community Investment

We are a CDFI and invest resources to increase availability and sustainability of quality, affordable housing aligned with services.

Strengthening the Field

We provide training, technical assistance and thought leadership to the housing and services sectors.

Meet Dorothy...



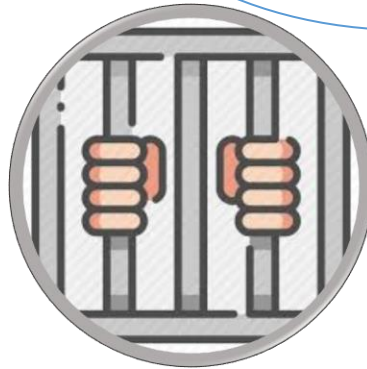
What causes homelessness?



Systemic Failures

28.5% of Californians in Prison are African-American

Rate of Foster Care is 4-5X Higher for African-Americans & Indigenous Populations than Average



20% of Californians Leaving Prisons Discharge to Homelessness



Almost 50% of Families in LA County Child-Welfare-Involved Families Currently or Recently Homeless



45% of Frequent Hospital Users are Homeless



11,000 Californians Living in Nursing Homes Because They Would Otherwise Be Discharged to Homelessness

Homelessness is a Housing Problem

Getting to the roots

While each person's story is unique, many Californians fall into homelessness for the following reasons:



Rising rent & housing costs



Stagnant wages



Insufficient affordable & supportive housing



Exclusionary zoning

→ Rising housing costs

80% of people making less than 30% of their area's median income spend **more than half** of their income on housing, and **none** can afford the average rent in **any** California county.

→ Stagnant wages

Since 2000, median rent has **increased 35%** while the median income of renters has only **increased by 6%**. And those living on SSI only receive **\$1,040 per month**, **\$560 short** of the average monthly rent.

→ Insufficient affordable & supportive housing

We need affordable homes to prevent extremely low-income Californians from falling into homelessness.

→ Exclusionary zoning

In 1916, white neighborhoods began designating parcels of land for single-family use to prevent Black and Indigenous people from moving in. By 2021 three-quarters of developable land statewide was zoned for single-family housing. As a result, Black and Indigenous Californians have been **disproportionately kept from accessing housing and building wealth**.

**How does the
federal
government
define
homelessness?**



HUD Definition

I. Individual or family who lacks a fixed, regular, and adequate nighttime residence meaning:

- Has a primary nighttime residence in a public or private place not meant for human habitation;
- Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for charitable organizations or by federal, state, and local government programs) or;
- Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

Definition of Chronic Homelessness

Lives in a place not meant for human habitation, shelter, or institution

AND

- Has been homeless continuously for at least 12 months or on at least 4 separate occasions in the last 3 years equaling at least 12 months

AND

- Experience a disability.
- Can meet if residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital or other similar facility *for fewer than 90 days* and met all criteria above before entering the facility.

Some California programs include no 90-day restriction

What are Solutions to Homelessness?



Permanent Housing Solves Homelessness

By the numbers =

181,399

of people experiencing homelessness at a single point in time = number of people waiting for a home they can afford

3-4

Ideally, one shelter bed turns over 3-4 times per year and focuses on offering services connecting people to housing = don't need a shelter bed for every person experiencing homelessness

225,000

of California households with unmet housing need = not expected to self-resolve, cannot access housing with existing # of housing units we have now

55%

Decrease in percentage of veterans experiencing homelessness over 12 years, resulting from housing subsidies + services

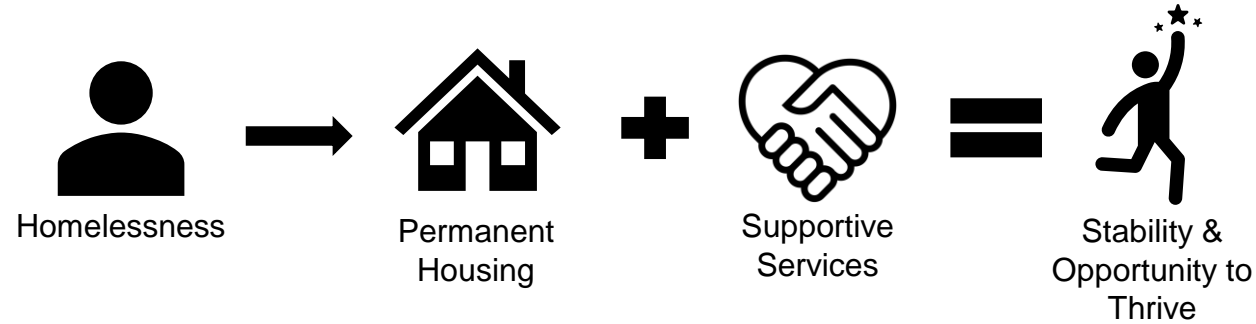
63%

Decrease in percentage of people experiencing homelessness in Houston = dedicated, ongoing funding for housing + Housing First approach

15%

Decrease in percentage of people experiencing homelessness in Monterey over 4 years = funding for housing subsidies + Housing First approach

What is Supportive Housing?



- Supportive housing is a proven solution that helps people facing complex barriers to housing thrive and break the cycle of homelessness
- Supportive housing combines affordable housing and extremely low rents with support services that help people who have experienced chronic homelessness thrive and live with stability in permanent housing with no time limit on their residency

What are the components of permanent supportive housing?

Supportive Housing

1. Property and Housing Management

2. Housing

3. Supportive Services

4. Quality Standards

Supportive Housing is for People Who:

Are experiencing chronic homelessness.

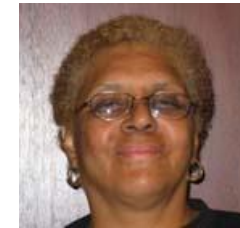
Cycle through institutional and emergency systems and are at risk of long-term homelessness.

Are experiencing homelessness and challenges to housing stability.

Are living with chronic health conditions

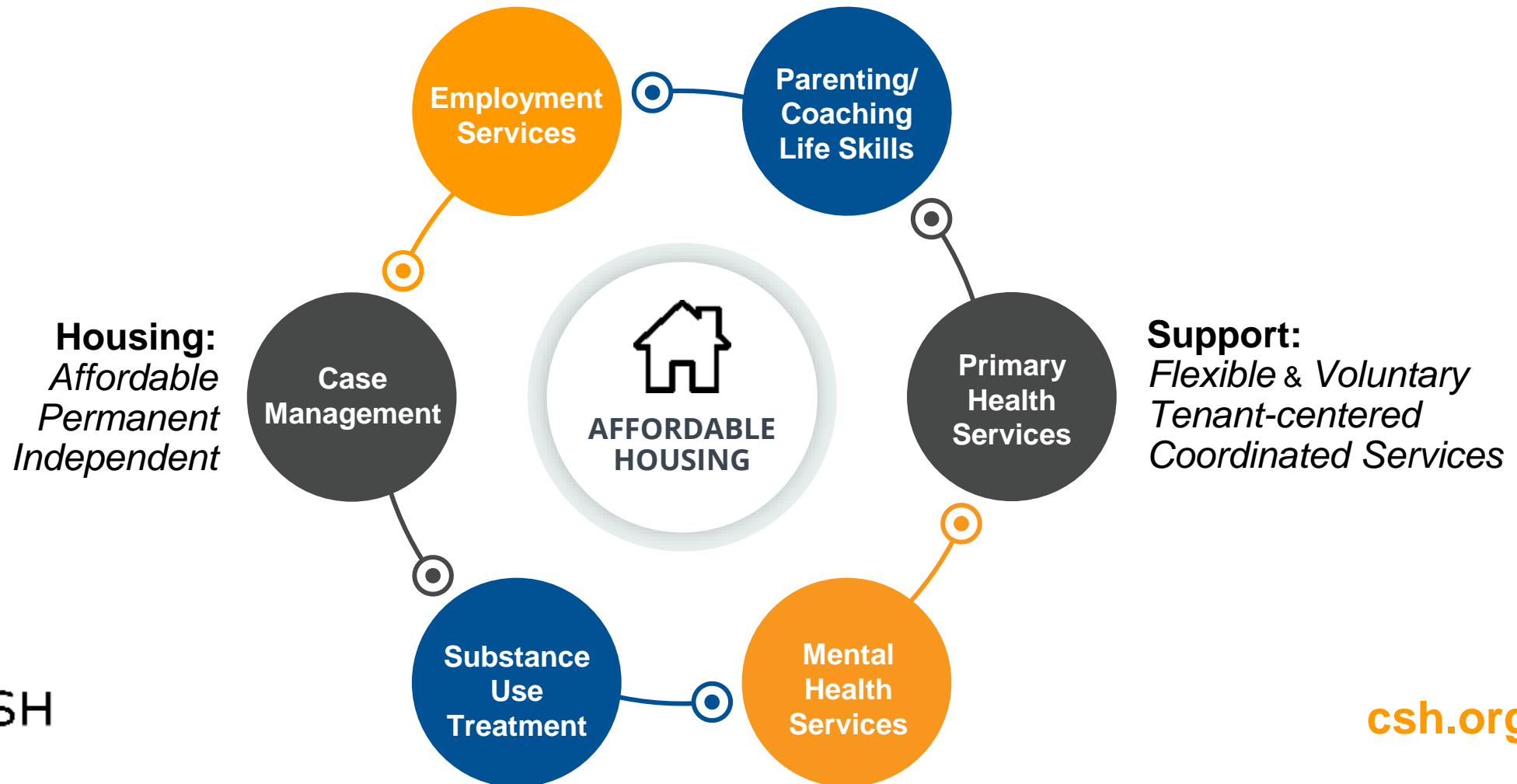
Are being discharged from institutions and systems of care.

Without housing, cannot access and make effective use of treatment and supportive services.



Supportive Housing

Supportive housing combines affordable housing with services that help people who face the most complex challenges to live with stability, autonomy and dignity.



Key Components Of Supportive Housing

1 Engages households with multiple barriers

2 Housing is affordable

3 Provides unit with lease

4 Engages tenants in flexible, voluntary services

5 Coordinates among key partners

6 Supports connecting with community

Supportive Housing **Standards**

Tenant Centered

- *Every aspect of housing and services focuses on meeting tenant needs*

Accessible

- *Tenants of all backgrounds, identities and abilities enter housing quickly and easily, through an equitable and transparent process*

Coordinated

- *All supportive housing partners work to achieve shared goals*

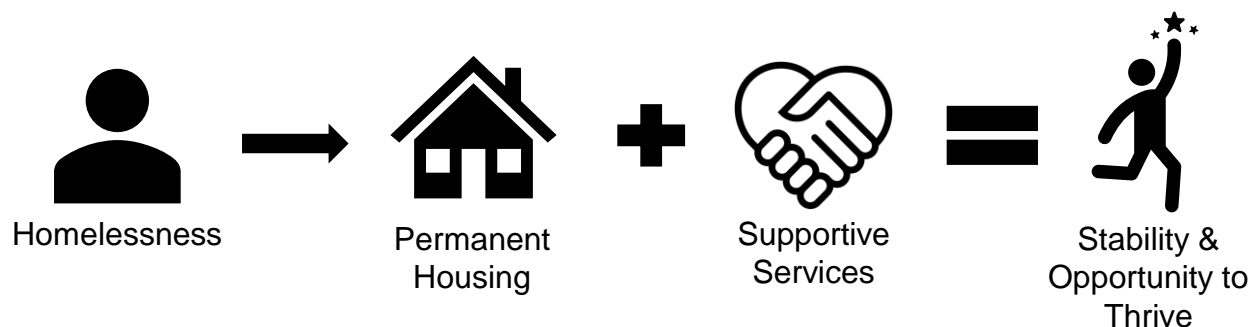
Integrated

- *Housing provides tenants with choices, honors their identities and background, promotes belong and facilitates community connections*

Sustainable

- *Housing and services operates successfully and have funding for the long term*

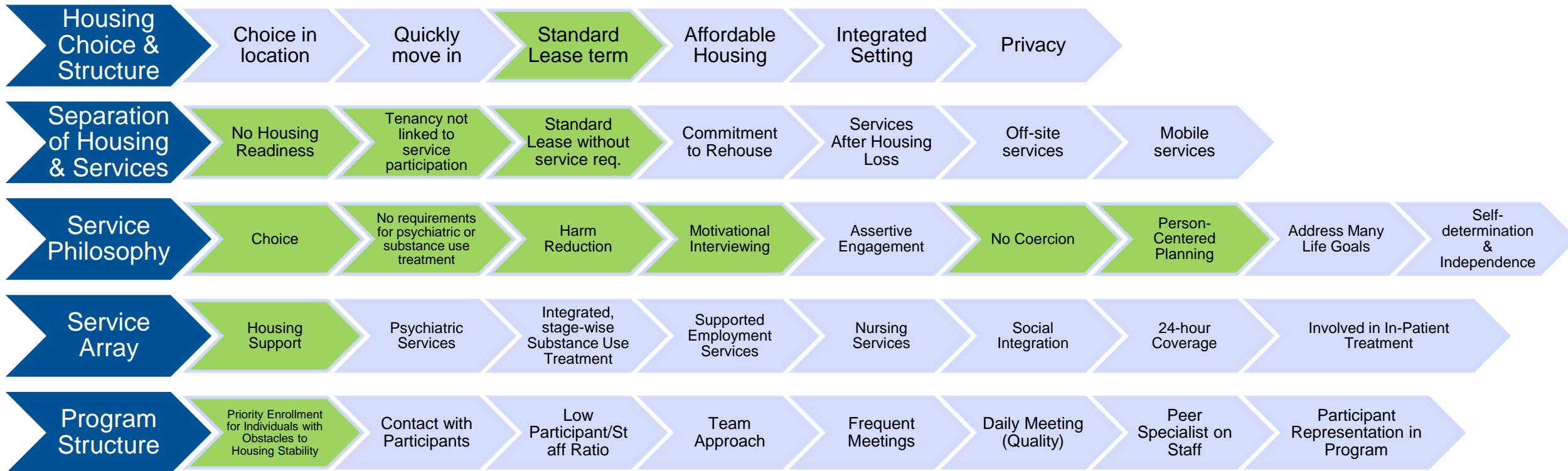
What is Housing First?



5 Key Principles of Housing First

1. Immediate access to permanent housing with no housing readiness requirements
2. Participant choice and self-determination
3. Multiple pathways of recovery orientation
4. Individualized and participant-driven supports
5. Social and community inclusion

Housing First Programs (38 fidelity measures) vs. CA State Policy (11 components)



https://www.housingfirsttoolkit.ca/wp-content/uploads/Pathways_Housing_First_Fidelity_Scale_ACT_2013.pdf

https://www.housingfirsttoolkit.ca/wp-content/uploads/Pathways_Housing_First_ICM_Fidelity_Scale_2013.pdf



Principles of Housing First

Provide Consumer Choice, Self-Determination, & Autonomy

- ☐ Where to live
- ☐ Whether to receive services
- ☐ Ask, “how can I help you?”
Decision is consumer’s

Removing Barriers to Housing

- ☐ Despite eviction history, criminal record, poor credit
- ☐ Despite use of drugs/alcohol

Match Tenant Needs w/Services that Are Voluntary for Tenants

- ☐ Flexible services
- ☐ Providers must offer services & engage tenants (1:10 to 1:15-1:20 caseload ratios) (*not voluntary for providers*)

Keep People Housed

- ☐ Evictions should be rare
- ☐ Engagement on tenant’s terms

Separation of Housing & Services

- ☐ Recovery is more likely if housed than homeless
- ☐ People shouldn’t lose housing if they choose not to participate in services that may not be right for them
- ☐ Tenant-centered: what does tenant want: services plan is the tenant’s plan, not provider’s

What Housing First **is NOT** . . .

Housing First is not a one-size-fits all approach: it is a highly individualized approach that seeks to determine the right kinds and intensity of supports that each person wants & needs to achieve success.

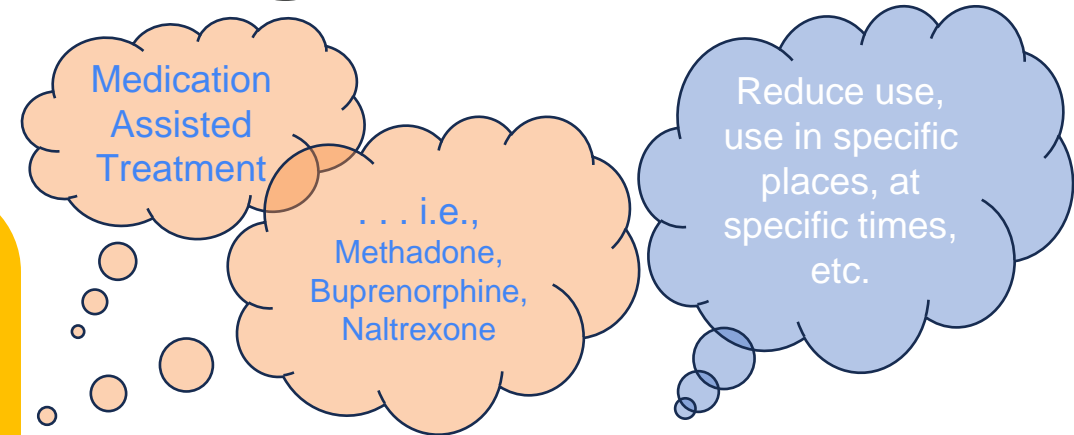
Housing First is NOT housing only:

People are offered or connected to services that are tailored to the needs of their household, but are not coerced into accepting them. Services are more effective when people choose to engage (*many more people participate in services when voluntary than mandated*).

Harm Reduction As Core to Housing First Is Grounded in . . .

Evidence that those who participate in high-risk behaviors do better when they choose recovery path & receive education on ways to reduce risk

Requirements for service providers to engage tenants who are not contemplating abstinence



Services Models Consistent with Housing First

Examples of Service Models:

Assertive Community Treatment: multidisciplinary team (including psychiatrist), case load ratios of 1:10, offers services directly, services provided in home, offsite/on-call services available 24/7.

Intensive Case Management Services: case management team provides supports and brokers services from treatment/ providers in the community, with case load ratios of 1:15 to 1:20 (max ideal).



***Key-** Lower case manager to participant ratios allow for better care/service coordination



Trauma-informed care is part of services approach:

Recognizes the strong impact that trauma has on people's lives, as well as the potential for recovery.

SAMHSA's Six Key Principles of a Trauma-Informed Approach:

Safety

Trustworthiness
and
Transparency

Peer Support

Collaboration
and Mutuality

Empowerment,
Voice and
Choice

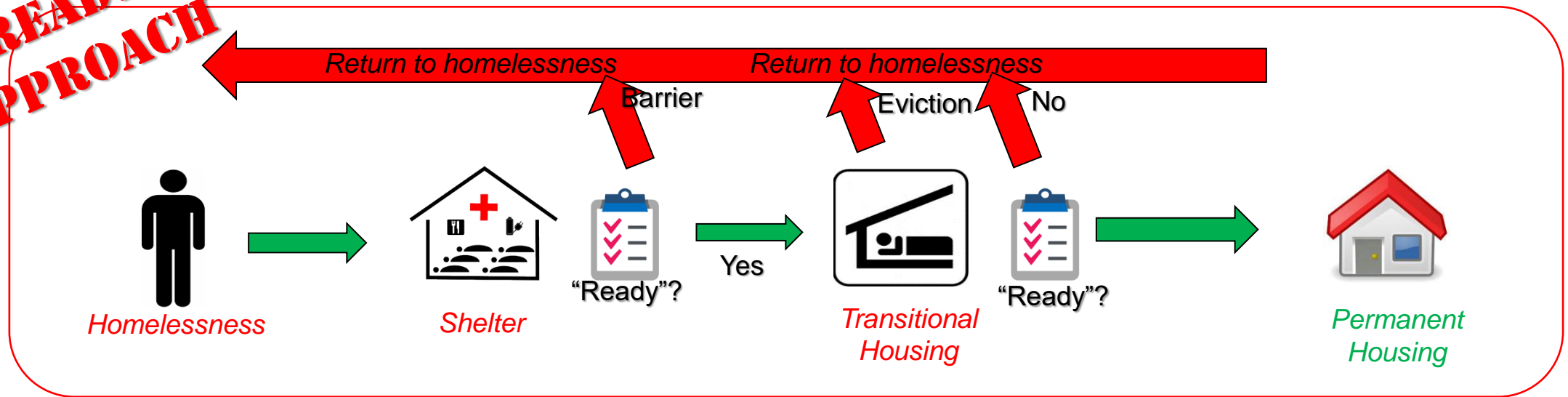
Cultural,
Historical and
Gender Issues

**How do people
experiencing
homelessness
get connected to
housing?**

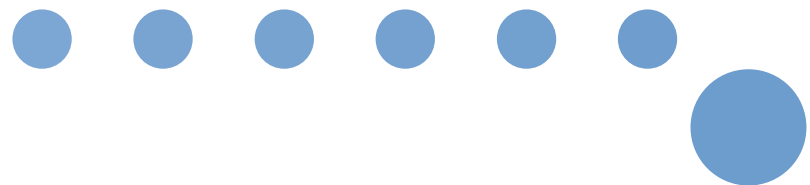


Response to Homelessness from 1980's Through **Early 2000's**

**HOUSING
READY
APPROACH**



Families



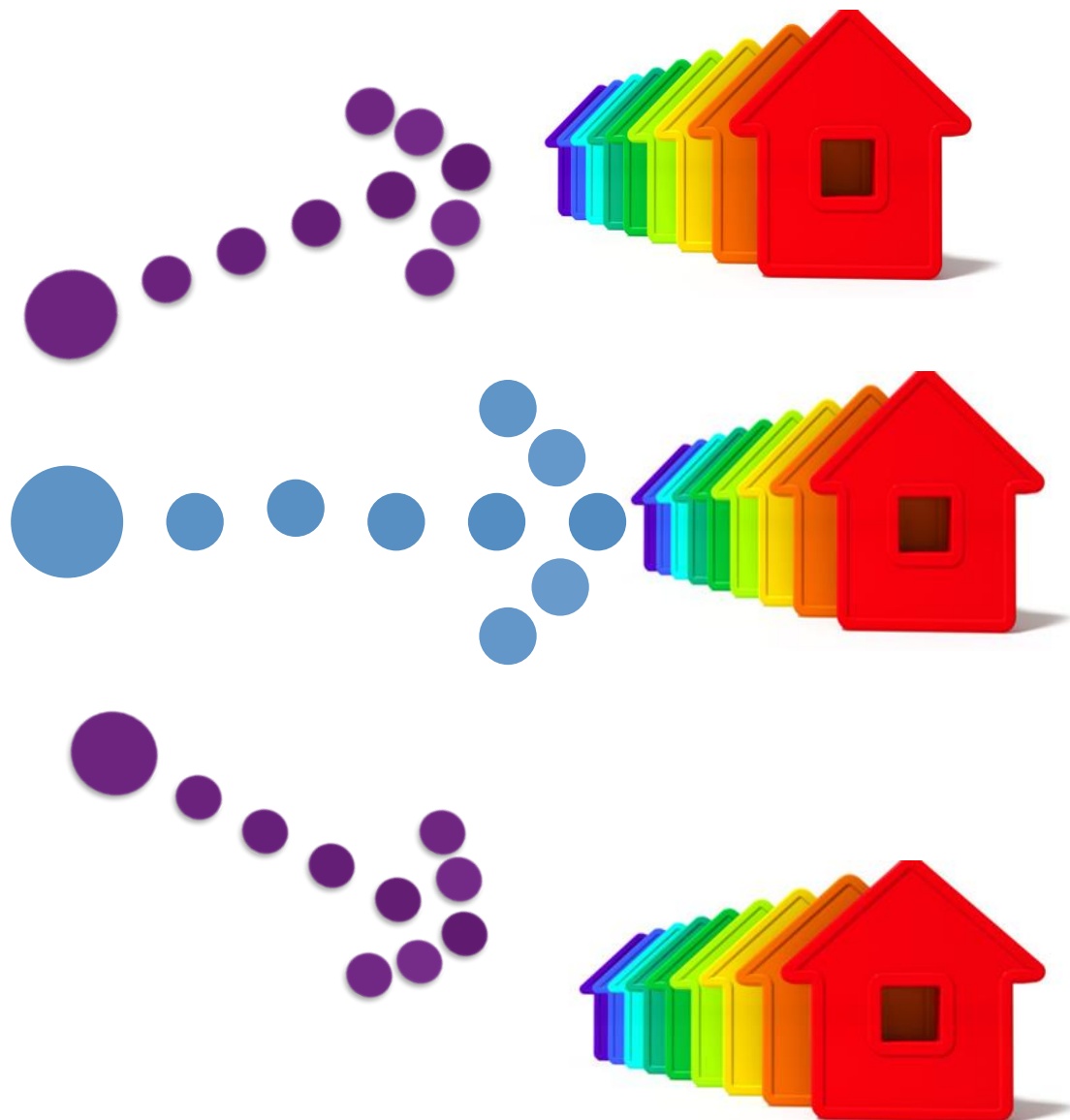
Single Adults



Youth



CES



What is CES?

- CES = Coordinated Entry System
 - In LA CES managed by LAHSA (LA county CoC)
 - Cities with their own CoC w/in LA county: Glendale, Pasadena, Long Beach
 - All CoC's mandated by HUD to have coordinated entry
 - Flow and coordination determined and dictated by jurisdictions

CES 4 Core Elements

Access

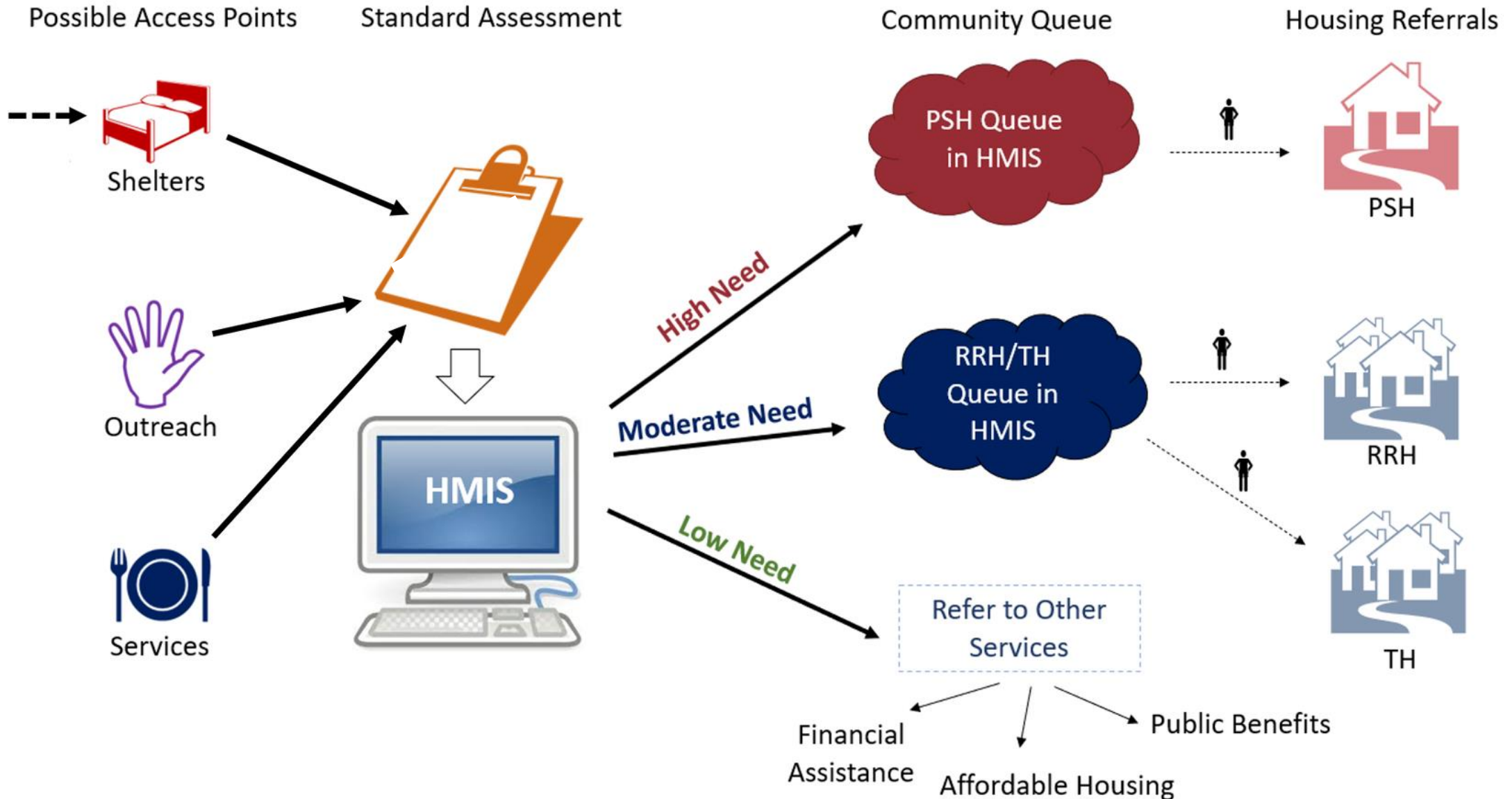
Assessment

Prioritization

Referral



Coordinated Entry System Flow







Supportive Housing TRAINING CENTER

www.csh.org/training



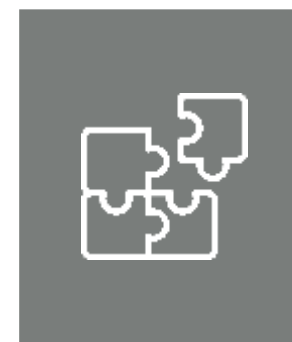
Live Webinars



Self-Paced
On-Demand Training



Workshops



Custom Training
And Learning



csh.org

Thank you!

Sabrina F. Alesana

Sabrina.Alesana@csh.org

Jo Dominguez

Joseph.Dominguez@csh.org

