Substance Use, Recovery, and Housing:

*Working together to provide support and choice*
Thank you for what you do!
Hill Day
June 7, 2016
30%
Housing First!!

No, Recovery Support!!
Common Language

- Treatment
- Supportive housing
- Person-centered care
- Housing Choice
- Recovery Housing
- Harm reduction
- Recovery
Inadequate
Competitive
Fee for Service
Data Systems
Regulations
Inadequate
Recognizing Housing as a platform for recovery is not simply about putting a roof over someone’s head to meet basic needs and achieving long-term wellness and recovery goals.
Housing Options

affordable, mainstream housing where people can be safely housed and motivated toward recovery at their own pace

+ recovery-focused housing where people who are actively seeking sobriety can find safety in an alcohol- and drug-free setting
Congress to allocate $2m to the NIH to fund 3 to 5 research projects on recovery housing

1. randomized trials
2. long-term outcome studies
3. cost-effectiveness studies
4. studies that isolate the most potent ingredients of the recovery housing model of recovery support.
Clear guidance

Defined: housing in an abstinence-focused and peer-supported community for people recovering from substance use issues

“Recovery Housing” means housing for individuals recovering from drug addiction that provides an alcohol and drug-free living environment, peer support, assistance with obtaining drug addiction services, and other drug addiction recovery assistance.
Communities should ensure that all projects serving people with SUDs support a life in recovery to include these dimensions:
Operations for People with SUDs

1. Low barrier, evidence–based
2. Emphasize housing stability and recovery goals
3. Rights of privacy, dignity, respect, freedom from coercion and restraint
4. Optimize autonomy and independence
5. Highest levels of national, State, and/or local accreditation/licensure
6. Move to permanent housing as they exit
Operations of RH for homelessness

1. Transitional, but if time-limited/resident-determined, not program-determined
2. Generally single-site
3. Personal privacy and 24/7 access
4. Recovery goals include housing stability, employment
5. Relapse is not automatic cause for eviction
6. Upon leaving offer assistance in accessing other housing
7. Different from Residential treatment programs
<table>
<thead>
<tr>
<th>How do they differ?</th>
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<tbody>
<tr>
<td>Transitional Housing</td>
<td>Permanent Supportive Housing</td>
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<tr>
<td>outcomes emphasize exits to permanent housing</td>
<td>outcomes emphasize housing retention and income progression</td>
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<tr>
<td>high level of services and peer/staff supports</td>
<td>services and peer support because SUD impedes independent living; participation not a condition of tenancy</td>
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<tr>
<td>generally time-limited</td>
<td>not time limited</td>
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<td>participants have a lease and must operate in compliance with local landlord-tenant laws</td>
<td>may serve people with other disabling conditions</td>
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<td>in cases of a lapse, the program may hold the unit of the program participant for up to 90 days</td>
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How can they work together?

**HUD strongly encourages** CoC’s to adopt a system-wide Housing First orientation. When operated in a manner consistent with this guidance, **Recovery Housing** might not be in conflict. The key is **CHOICE**.
Community CoCs can develop local measures that are appropriate to the model.

Outcomes

- Housing Stability
- Income
- Sobriety
1978 to 1983: HUD budget authority shrank from $83 billion to little more than $18 billion (in 2004 constant dollars) and shelters opened throughout the United States.
House Passes FY 2015 HUD Bill with Significant Cuts to HOME and Other Housing Programs

JUNE 11, 2014

On June 10, the House passed by a vote of 229 to 192 its FY 2015 Transportation, Housing and Urban Development, and Related Agencies (T-HUD) appropriations bill, H.R. 4745.

The House adopted several housing-related amendments during consideration of the bill. The House accepted by voice vote an amendment offered by Representative Sean Duffy (R-WI) to increase by $10 million the funding available within the homeless assistance grants program for the Rural Housing Stability Assistance Program. It also accepted an amendment offered by Representative John Conyers (D-MI) to increase by $2 million the funding available within the homeless assistance grants program for the national homeless data analysis project.
Congress to restore funding to 1978 levels and provide $100m annual allocation to HUD for recovery housing subsidies for people who are experiencing homelessness or need affordable housing assistance.
Using Medicaid to Finance and Deliver Services in Supportive Housing: Challenges and Opportunities for Community Behavioral Health Organizations and Behavioral Health Authorities

Authored by: Technical Assistance Collaborative
Currently...

Public behavioral health authorities and community behavioral health organizations are recognizing the critical role of permanent affordable housing in supporting individuals' recovery from MI and/or SUDs.
Yet...

access to an array of community-based services matched with permanent affordable housing for people with MI and/or SUD remains a major challenge.
Olmstead vs L.C. 1999

2011 DOJ guidance defining integrated settings

SAMHSA PSH EBP Kit

ADA/Olmstead violation suits

2013 HUD guidance with methods for scattered-sites
Section 811 Project Rental Assistance (PRA) requires partnering with Medicaid.

HUD’s move to CoC funding for housing-specific costs and prioritization of chronic homeless.

Culminating in need to better leverage Medicaid funding.
Housing-related services have historically been financially supported with program-based funding through contracts.

Providers will need to adapt to reimbursement for services based on individual needs in a Medicaid environment.
Direct support to assist individuals prepare for and transition to housing, as well as successfully maintain housing after move-in.
broad categories of services which may be included in an individual's person-centered care plan
1. Housing as integral, but non-essential community-based services that are typically long-term in nature and designed to assist people with serious and long-term disabilities live successfully in the community.
1. Housing as integral, but non-essential

Housing-related interventions may be embedded into existing and routinely covered services

1. Intensive outpatient programs (IOP)
2. Assertive Community Treatment (ACT) community support
3. Psychiatric rehabilitation
4. Direct services case management
2. Pre-existing or Emerging Condition

Existing targeted support/treatment that enable people to move into/live in own home.

1. personal care
2. home health
3. specialized care for chronic conditions
4. supported employment
5. Critical Time Intervention (CTI)
6. respite/crisis prevention
7. stabilization
Current and ongoing supports received from:

1. Community or housing support staff
2. Peers
3. Recovery support groups (AA/NA)
4. Wellness
5. Community-based organizations
as their own agents of change
pursuing self-defined goals
building on their own personal assets and capital
Prevention Promotion

Intervention Treatment

Recovery Support

Primary Care

Housing
Becky Vaughn, VP of Addictions
beckyv@thenationalcouncil.org

April 3-5, 2017
Seattle, WA
Knowledge is knowing that a tomato is a fruit, Wisdom is not putting it in a fruit salad.

Miles Kington