Permanent Supportive Housing

An Evidence-Based Practice
What are Evidence-Based Practices?

Services that have consistently demonstrated their *effectiveness* in helping people with mental illnesses achieve their desired goals.

Effectiveness was established by different people who conducted rigorous studies and obtained similar outcomes.
What are Promising Practices?

Services that have demonstrated some results and show promise of an evolving evidence base.

Implementing promising practices in a standardized way can help build the evidence base.
Examples of Evidence-Based Practices

- Supported Employment
- Permanent Supportive Housing
- Assertive Community Treatment
- Family Psychoeducation
- Illness Management and Recovery
- Integrated Treatment for Co-Occurring Disorders
- Medication Treatment, Evaluation, and Management
- The Treatment of Depression in Older Adults
According to the New Freedom Commission on Mental Health:

If effective treatments were more efficiently delivered through our mental health services system ... millions of Americans would be more successful in school, at work, and in their communities.

— Michael Hogan, Chairman
What is Permanent Supportive Housing?

Decent, safe, and affordable community-based housing that provides tenants with the rights of tenancy under state and local landlord tenant laws and is linked to voluntary and flexible support and services designed to meet tenants’ needs and preferences.
What is Permanent Supportive Housing?

Permanent Supportive Housing makes housing affordable to someone on SSI, (either through rental assistance or housing development).

It provides sufficient wraparound supports to allow people with significant support needs to remain in the housing they have chosen.
Permanent Supportive Housing

The Bottom Line:
Consumers’ need for housing is no different from your need for housing.
The Evidence Supports Permanent Supportive Housing

- Evidence of impact overall on resident stability: “the most potent intervention”
- Evidence of greater impact over alternatives
- Evidence of cost benefits
- Evidence on the core principles (fidelity)
Dimensions of Permanent Supportive Housing Fidelity Scale

- Choice in housing and living arrangements
- Functional separation of housing and services
- Decent, safe, and affordable housing
- Community integration and rights of tenancy
- Access to housing and privacy
- Flexible, voluntary, and recovery-focused services
Consumer choice is a core element of Permanent Supportive Housing.

If consumers are “placed” in a setting that does not meet their needs and preferences, they are not likely to succeed.

Basic choices include:
- Who else lives there?
- What kind of housing is it?
- Where is the housing?
Making Choice Real: Key Questions

- Alone or with family or friends
- Location and neighborhood type
- Size of unit
- Maintenance requirements
- Proximity to specific services, public transportation
- Maximum monthly rent and utilities
Making Choice Real: Key Questions

- Housing search, acquisition, and setup
- Landlord negotiations
- Credit, references, deposits
- Arrange utilities, phone, insurance
- Furnishings
- Housekeeping
- Food shopping and preparation
- Financial management
- Medication management
- Accessing natural supports
- Transportation
- Medical care
Housing and Services Separation

- Participation in specific support services is NOT required to get or keep housing.
- Various approaches to implementation:
  - Legal separation between housing management and service delivery
  - Functional separation—distinct housing and service staff roles
  - Operational—service providers are based off site
Housing and Services Separation

Permanent Supportive Housing is most successful when a functional separation exists between housing matters (rent collection, physical maintenance of the property) and services and supports (case management, for example).
Housing should be decent, safe, affordable

- HUD’s standard of quality is its Housing Quality Standards (HQS).
- All Permanent Supportive Housing should meet HQS.
Housing Affordability

- Tenants pay a reasonable amount of their income toward rent and utilities.

- HUD affordability guidelines are 30% of adjusted income for housing expenses. The reality is that people on SSI often pay 60% to 80% of their income toward their housing, which is substandard.
Integration

- Housing is in regular residential areas.
- Mixing populations in buildings or neighborhoods avoids creating mental health ghettos.
- Tenants participate in community activities and receive community services.
- Natural supports are encouraged.
Rights of Tenancy

- Residents have full legal rights in a tenant-landlord relationship.

- Tenants must abide by normal standards of behavior and conduct outlined in a lease.

- Distinct from “program” rules.

- The agreement between the tenant and landlord determines length of stay.
Access to Housing

- Eliminate barriers and redefine readiness.

- Research does not show that people with mental illnesses do better in housing if they pass a readiness screen. So, access to housing should be restricted to those elements required of any tenant, for example, ability to pay rent.

- Achieving and sustaining tenancy is the primary goal and focus.
Flexible, voluntary, recovery-focused services

- People can accept or refuse treatment or other services, but staff must continue to offer support and use flexible engagement strategies.

- Type, location, intensity, and frequency of services adjust to meet tenants’ changing needs.

- Risk management and crisis planning are part of the plan of support and developed in partnership.
Flexible, voluntary, recovery-focused services

- Tenants must have a flexible array of supports and services that is readily available to them.

- Service providers must have the “whatever-it-takes” attitude toward helping people stay in the housing of their choice.

- Recovery-oriented, consumer-driven, and evidence-based services work best.
Recovery is at the Core

Recovery is...

- A process by which people are able to live, work, learn, and participate fully in their communities.

- The ability to live a fulfilling and productive life despite a disability.

- Reduction or complete remission of disability or distressing symptoms.

New Freedom Commission on Mental Health

*Achieving the Promise: Transforming Mental Health Care in America*
Fundamental Elements of Recovery

- Self-direction
- Individualized and person-centered
- Empowerment
- Holistic
- Non-linear

December 2004 Consensus Conference on Mental Health Recovery, sponsored by the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration
Fundamental Elements of Recovery

- Strengths-based
- Peer support
- Respect
- Responsibility
- Hope

December 2004 Consensus Conference on Mental Health Recovery, sponsored by the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration
Permanent Supportive Housing Models

Scattered-site:

- Individual units dispersed throughout an area
- Apartments, condos, single-family houses
- Owned or leased
- Conform with local zoning
Permanent Supportive Housing Models

Single-site, mixed population:

- Large building or complex with multiple units
- Serves more than one type of tenant, for example:
  - Low-income families
  - People with mental disorders
  - Seniors
  - Students
  - Homeless adults
  - Often includes “set-asides” for specific target groups
  - Can be owned or “master leased” by housing agency
Permanent Supportive Housing Models: Housing First

This approach is particularly useful for people with co-occurring disorders and others who have not been well served by traditional housing or residential programs.

It makes a return to permanent housing immediate.
Permanent Supportive Housing Models: Housing First

- People move directly into affordable rental housing in residential areas from shelters, streets, or institutions.

- Home-based services are provided as long as needed.
Summary

- Six core principles and various approaches to Permanent Supportive Housing.

- **Core value:** People with mental health problems have the right to live in the most integrated setting possible with accessible, individualized supports.
Additional Resources

For more information about Permanent Supportive Housing and evidence-based and promising practices, visit

http://www.samhsa.gov