

# Social determinants of health-housing

## Background

The research is clear. Homelessness, and unstable housing contribute to poor health. Homelessness is traumatic and cyclical; it puts people at risk for physical and mental health conditions and substance use disorders. Nearly 1 in 5 adults in Washington State has a behavioral health diagnosis, and 1 in 25 has a serious mental health condition. About 1 in 11 adults has a substance use disorder, and, on any given day, more than 50,000 people in the state are receiving treatment.

### Supportive housing services

These services identify people in need, help them obtain safe and affordable housing, and provide support so they can maintain housing. They do not replace services that are currently available, and they do not pay for room and board. The goal is to match people to independent housing that meets their needs and provide them with any services wanted to keep that housing long-term. These innovative services are demonstrating the positive health effects safe, secure housing can provide to people in need.

### SAMHSA's evidence based

The goal of the supportive housing is to help people live healthier lives by addressing their housing needs. Using evidence-based programs increases the likelihood of success – for people and for the many available programs.

The DBHR housing models are evidence-based programs that use quality improvement tools called fidelity scales to track performance against model standards. The goal is to improve services and achieve better housing.

Quality improvement efforts include incentivizing fidelity reviews and asking partners to participate in our cross site learning collaborative. The standards ensure consistent, updated, quality expectations for permanent supportive housing services while providing guidance and pathways for improvement.

SAMHSA's Permanent Supportive Housing (PSH) toolkit outlines the essential components for

supportive housing services and programs for people living with behavioral health obstacles. The toolkit discusses how to develop and integrate evidence-based programs in mental health systems. SAMHSA's EBP is based on seven (7) dimensions of permanent supportive housing:

- Choice of housing
- Separation of housing and services
- Decent, safe, and affordable
- Housing integration
- Rights of tenancy
- Access to housing
- Flexible, voluntary, services

### Housing first, what is it and why is it important?

Housing first is an approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life. Housing First does not mandate participation in services either before obtaining housing or in order to retain housing.

The Housing First approach views housing as the foundation for life improvement and enables access to permanent housing without prerequisites or conditions beyond those of a typical renter. Supportive services are offered to support people with housing stability and individual well-being, but participation is not required as services have been found to be more effective when a person chooses to engage.

Supportive housing programs serve people with specific needs, including those who have been staying in residential care facilities and those who have experienced homelessness.



### **Why we choose evidence based practices**

In 2013, SB 5732 and HB 1519 were passed which directed the state to use evidence-based, research-based, and promising practices. This led DBHR to participate in two nationally recognized policy academies which guided many of our activities to implement evidence based practices.

### **DBHR training opportunities.**

The DBHR training team is available for trainings and technical assistance for supportive housing. These trainings include one on one agency focused trainings, regional events and monthly webinars that focus on skill-building and resource topics. These resources help providers learn more about evidence-based practices, the importance of implementing continuous quality improvement strategies, and how to prepare for fidelity reviews.

To receive regular updates and announcements for upcoming housing training events please email [Kimberly.castle@hca.wa.gov](mailto:Kimberly.castle@hca.wa.gov)

Receive information about Foundational Community supports through our [newsletter](#).

Continuing education and resources for Supportive Housing Providers can be found at:  
<http://www.pathwaystohousing.wa.gov/>

### **DBHR Supportive housing programs**

**PATH** (Projects for Assistance in Transition from Homelessness)-homeless outreach

**Lisa Bennett-Perry**, [Lisa.Bennett-Perry@hca.wa.gov](mailto:Lisa.Bennett-Perry@hca.wa.gov)

**Peer Pathfinder**-homeless outreach (opioid use target)

**Lisa Bennett-Perry**, [Lisa.Bennet-Perry@hca.wa.gov](mailto:Lisa.Bennet-Perry@hca.wa.gov)

**Forensic PAT**-Trueblood settlement-homeless outreach

**Craig Jacobson**, [Craig.Jacobson@hca.wa.gov](mailto:Craig.Jacobson@hca.wa.gov)

**Forensic HARPS**-Trueblood settlement-long term supportive housing

**Nicole Mims**, [Nicole.Mims@hca.wa.gov](mailto:Nicole.Mims@hca.wa.gov)

**HARPS** – (Housing and Recovery through Peer Services) – long-term permanent supportive housing

**Wanda Johns**, [Wanda.Johns@hca.wa.gov](mailto:Wanda.Johns@hca.wa.gov)

**FCS** (Foundational Community Supports) –long term permanent supportive housing

**Kimberly Castle**, [Kimberly.Castle@hca.wa.gov](mailto:Kimberly.Castle@hca.wa.gov)

**Amanda Polley**, [Amanda.Polley@hca.wa.gov](mailto:Amanda.Polley@hca.wa.gov)