



# Summary of the 2008 THP-Plus Institute:

## From Start-up to Full Implementation

The THP-Plus Statewide Implementation Project is a partnership between the John Burton Foundation, the Corporation for Supportive Housing and the California Department of Social Services. The goal of the Project is to reduce homelessness among California's former foster care and probation youth by expanding access to the Transitional Housing Placement-Plus (THP-Plus) program, California's only housing program targeting this growing population. THP-Plus provides affordable housing and comprehensive supportive services to help former foster care and probation youth ages 18 to 24 make a successful transition from out-of home placements to independent living.

*Sponsored by the John Burton Foundation,  
the California Department of Social  
Services, Corporation for Supportive  
Housing and the County Welfare Directors  
Association of California (CWDA)*

# Thursday, July 17, 2008

Center for Healthy Communities  
The California Endowment  
Los Angeles, California

# Table of Contents

<b>I. THP-Plus Institute Overview</b> .....	2
<b>A. Purpose of the Institute</b> .....	2
<b>B. Acknowledgements</b> .....	2
<b>C. Purpose of the Summary Document</b> .....	3
<b>II. Workshop Summaries</b> .....	4
<b>Workshop 1A. High Quality Case Management: Building Your THP-Plus Program to Meet the Diverse Needs of Youth in THP-Plus</b> .....	4
<b>Workshop 1B. Fee-For-Service vs. Reimbursement of Actual Expenses: The Pros and Cons of Different THP-Plus Invoicing Methods</b> .....	8
<b>Workshop 1C. Housing First: What THP-Plus Can Learn from the Supportive Housing Movement</b> .....	12
<b>Workshop 1D. Making the Case with Data: The THP-Plus Participant Tracking System</b> .....	20
<b>Workshop 2A. Getting Real with Youth about Substance Use: Adopting a Harm Reduction Approach in THP-Plus</b> .....	28
<b>Workshop 2B. Property Management: The Secret to an Effective THP-Plus Program</b> .....	34
<b>Workshop 2C. THP-Plus and Fair Housing</b> .....	37
<b>Workshop 2D. THP-Plus: What’s the Deal?</b> .....	39
<b>Workshop 3A. It Takes a Village: The Host Family Model in THP-Plus</b> .....	41
<b>Workshop 3C. Mental Health Service Act and THP-Plus: How Important Funding Sources Can Work Together</b> .....	45
<b>Workshop 3D. County Oversight in THP-Plus: Steps To Insure High Quality Programs</b> .....	52
<b>III. Faculty Biographies</b> .....	56

## **I. THP-Plus Institute Overview**

### **A. Purpose of the Institute**

The 2008 THP-Plus Institute was sponsored by the THP-Plus Statewide Implementation Project. The Project is a partnership of the John Burton Foundation, the California Department of Social Services, the Corporation for Supportive Housing, and the County Welfare Director's Association. The purpose of the Institute was to share effective practices in providing housing and supportive services through the Transitional Housing Placement Plus (THP-Plus) program. THP-Plus is California's only housing program for former foster and probation youth, and plays a critical role in ensuring that youth have safe, affordable housing, and the supportive services they need to make a successful transition to adulthood.

On July 17, 2008 the THP-Plus Statewide Implementation Project sponsored the second annual *THP-Plus Institute: From Start-Up to Full Implementation*. The day-long training was held at the California Endowment's Center for Healthy Communities in downtown Los Angeles.

### **B. Acknowledgements**

The Institute was based on the collective vision and expertise of the group of dedicated individuals who participated in the THP-Plus Institute Planning Committee, and was supported by a team of volunteers on the day of the event.

#### **THP-Plus Institute Advisory Committee**

Josh Adams, *AspiraNet THP-Plus*

Michele Byrnes, *John Burton Foundation for Children Without Homes*

Sam Cobbs, *First Place for Youth*

Anne Cory, *Corporation for Supportive Housing*

Bedrae Davis, *Los Angeles County Department of Social Services*

Nicole Fish, *John Burton Foundation for Children Without Homes*

Cynthia Guilford, *California Department of Social Services*

Graham Knaus, *County Welfare Directors Association of California (CWDA)*

Amy Lemley, *John Burton Foundation for Children Without Homes*

Bob Malmberg, *Orange County Social Services Agency*

Mitch Mason, *Los Angeles County Department of Social Services*

Frank Motta, *Santa Clara County Social Service Agency*

Ginger Pierce, *Monterey County Department of Social and Employment Services*

Jill Savaatasi, *California Department of Social Services*

Sonya St. Mary, *California Department of Social Services*

Lynn Stueve *California Department of Social Services*

Anissa Williams, *Edgewood*

## **THP-Plus Institute Volunteers**

Yvette Aguayo, *Orange County Social Services Agency*

Rose Draft, *Orange County Social Services Agency*

Adela Estrada, *Los Angeles County Department of Children and Family Services*

Wendy Jones, *Los Angeles County Department of Children and Family Services*

Sara Kimberlin, *The John Burton Foundation for Children Without Homes*

Jessica LePak, *John Burton Foundation for Children Without Homes*

Brenda Lorentzen, *The John Burton Foundation for Children Without Homes*

Denise Lytle, *Los Angeles County Department of Children and Family Services*

Diane Matsuda, *John Burton Foundation for Children Without Homes*

Mitch Mason, *Los Angeles County Department of Children and Family Services*

Jenny Rivera, *Orange County Social Services Agency*

Toni Joshua, *Los Angeles County Department of Children and Family Services*

## **C. Purpose of the Summary Document**

The purpose of the summary document is to more broadly disseminate the information provided during the THP-Plus Institute workshops and trainings. Each session summary includes an overview of the presentation to enable participants and non-participants alike to share in the learning that took place during the Institute. Copies of the PowerPoint presentations are available on the THP-Plus website ([www.thpplus.org](http://www.thpplus.org)) whenever possible. For additional information or questions about any of the material, please contact Michele Byrnes at [michele@johnburtonfoundation.org](mailto:michele@johnburtonfoundation.org).

## II. Workshop Summaries

### Workshop 1A. High Quality Case Management: Building Your THP-Plus Program to Meet the Diverse Needs of Youth in THP-Plus

**Presenters:** Connie Handlin, First Place for Youth

Shawn Johnson, First Place for Youth

Jennifer Duncanson, First Place for Youth

**Recorder:** Jessica LePak, The John Burton Foundation

---

#### **Introduction:**

To begin the workshop, the presenters stressed the importance of trust in effecting high quality case management. Letting youth know that even one person believes in them greatly improves self-esteem. At the same time, presenters emphasized that THP-Plus is a program for young adults and that participants should be expected to act accordingly. It is detrimental to their development to shield the young person from “real life” situations. Presenters emphasized the idea that you cannot do everything for the youth. They ask: if you do everything for the young person, how will they be prepared to do it independently?

#### **High Quality Case Management:**

A good way to gain the trust of the young person you work with is to “meet them where they are at” in their lives and help them set and pursue realistic goals. Do not be dismissive of the idea that a youth can become a rap or basketball star, but work with them to develop alternative goals as well. Again the presenters articulated the idea that one does a disservice to the young person to sugar coat things that will inevitably have to deal with. Let them know that while certain things they do as adults may be hard and take longer than expected, they have the capacity and the support to succeed.

Shawn Johnson described one 20 year old woman he worked with. She is enrolled at Western Career College and works part time at a clothing store and as an exotic dancer. Recently, she was promoted to assistant manager at both jobs. For most of her life she bounced between her biological mother and godmother and she has a sister with whom she is very close. Her father, on the other hand, was not around and is rarely discussed. She and her boyfriend are very close and like many young people they are dealing with issues around safer sex and unplanned pregnancies.

As a seasoned case manager, Mr. Johnson has learned that it is OK if your clients fall down sometimes. It can be important in learning to move forward. This particular client had the long-term goal of being a parole officer, but she is currently juggling two jobs and rarely sleeps.

In situations such as these, a case plan becomes increasingly important as a tool to help keep a young person on track with their goals. Mr. Johnson recommends being as sincere as possible in engaging with the young person, as they will know if you are being insincere. If it feels appropriate it can be helpful to incorporate “goofing around.” Don’t be afraid to put some of yourself into the case. Half the struggle is successful engagement, which can take time. He also recommended using judgment, without being judgmental. If you do not know they answer to some questions that is OK, the most important thing is to be honest to be honest with the youth on your caseload.

Every follow up meeting with your client is another little step in the right direction. Always treat youth as individuals and remember what they share in conversation. Help them come up with realistic steps toward self sufficiency so that they feel like they can handle their situation and reach their goals. One of the big goals that should never be overlooked is consistently taking responsibility when it comes to paying bills and working. Keep in mind that THP-Plus is a 2 year program. If you are careful to properly engage and to provide sufficient follow up, Mr. Johnson said he guaranteed that something positive will happen.

Next, Jennifer Duncanson presented a different case example. Jennifer described a 21 year old who has attended 8 months of Community College for nursing. She was the victim of sexual abuse at the hands of her mother’s brother and various boyfriends. Jennifer said that the young woman was in an unhealthy relationship with her baby’s father for 3 years. He abused her both physically and verbally. At this point she was not involved in any sort of housing program. With tough cases like this you may ask yourself, “How will I engage?” But Jennifer had no problems communicating with her client and was pleasantly surprised by how she immediately opened up without any prodding. Jennifer and her client were worried about the young woman’s daughter being exposed to all the abuse. One difficulty Jennifer came across was getting her client to subscribe to a therapy plan. Her client was very concerned about her daughter and certainly did not want what had happened to herself happen to her young girl, but at the same time she was resistant to counseling. Jennifer maintained close contact with her client, speaking on the phone with her almost every day. One day, the young woman called her and said that she was ready to start therapy. Jennifer was so excited by the prospect of this young person receiving the counseling she needed that she offered to provide transportation and child care during the counseling sessions.

Another big breakthrough came when Jennifer’s client realized that she didn’t need to stay in her abusive relationship any longer. But she was still afraid to leave. Jennifer helped her client file for full custody of her child. Finally, Jennifer stresses that, as a case manager, it is important not to be late to appointments, because being late could be interpreted as not caring enough. Jennifer mentioned that she understood the depth of the trust between herself and her client when she would walk into a scheduled meeting and the young woman would hand Jennifer her baby to hold.

Question and Answer:

Q: How many youth are on a caseload at First Place?

A: 15

Q Is there a waiting list at First Place for Youth?

A: All the youth are self-referred. Many of the participants find out about the program through word of mouth. We do a lot of work with counties and make sure we're available. There is an application process which is a good way for potential participants to know to expect from the program and case managers.

Q. During the two week entry period, where do youth reside?

A. During this period, they are not housed at First Place. It is up to them to stay in contact and work with our housing director and employment worker. They then make an appointment after school for their first "interview" During this time they meet with coordinator and look at the various housing options. While it is a 2 year program, it takes about 1-3 months to actually get into housing. (Those months do not count against the two year clock)

Q: Do you find that youth stay in contact through the entry period?

A: In past the case management team tried working with youth for periods from one to three weeks. They had difficulties maintaining contact, which ultimately resulted in a model change. We didn't want to chase them, so we let them have the responsibility of staying in contact with the First Place Team.

Q: Does First Place offer services for substance abuse?

A. Our services are really centered on housing. We can help them connect with other community programs if they need help with substance abuse. And there are providers that specialize in this sort of problem.

Q: Comment: money management seems to be the most difficult aspect of the program. We have found that when we require youth to save 50%, they pull the money right back out. How do you deal with it?

A. Money they give us goes toward their housing.

Q: Can you talk about wrap around services?

A. What we provide is case management and housing, besides that it is what is available in the community.

Q: When looking for units, what is best way to find acceptable apartments to lease?

A. The scattered site model is most sustainable when we work with landlords. We provide support to clients and are ultimately responsible for what happens in the units, which is why

we retain the master lease. It is essential to build a relationship and maintain that communication with landlords.

Q: What are some of the indicators of how a youth will fare in the program? What are some red flags?

A: At First Place, youth have to sign a contract that says they will not use drugs and that they will participate in a class if they are dependent. We recommend using community resources as much as possible. In general, though, never stop doing assessment. Your relationship with the client is the most important thing. Work to establish rapport – youth need to feel safe and need to be ready for the program, and to make changes. You will get cues as to how to proceed from the youth themselves.

## **Workshop 1B. Fee-For-Service vs. Reimbursement of Actual Expenses: The Pros and Cons of Different THP-Plus Invoicing Methods**

### **Presenter:**

Mr. John Murray, Senior Planning Analyst, San Francisco Human Service Agency

### **Recorder:**

Toni Joshua, Los Angeles County, Department of Children & Family Services

---

### **Introduction:**

The workshop session began with Mr. John Murray's introduction. Mr. Murray is a Senior Planning Analyst with San Francisco Human Services Agency (HSA). He serves as HSA's THP-Plus liaison to the State and its' community providers. In addition, he coordinates the planning, development and expansion of San Francisco's THP-Plus program. The presenter then asked all workshop attendees to introduce themselves as an ice breaker for the workshop.

Mr. Murray outlined the three main goals of the workshop: first, to gain a basic understanding of the fee-for-service and actual reimbursement methods; second, to make one new potential contact from the workshop group, who can sought out in the future for further information and collaboration; and, third, to stimulate the attendees' thinking around which rate structure would be best for their county and provider.

### Overview of Workshop

There are three possible rate methods for counties to use in paying providers. The first is the Fee-for- Service Method, the second is the Actual Expenses Reimbursement Method and the third is the Hybrid /Allocation Method.

### Fee-for-Service Method

The Fee-for-Service Method uses a per unit cost. This means that providers are paid a flat rate for services. This flat rate can be county-wide or specific rate to an individual provider. The county may use specific criteria in determining individualized flat rates for its providers. Thus,

depending on your county's guidelines, within the Fee-for-Service Method, there may be varying flat rates within the county and among service providers. Please check with you County's THP-Plus administrators for details.

The presenter explains that much of the research and analysis needed to determine rates must be done at the beginning of the implementation process of the THP-Plus program. When determining these flat rates, it is important for both the counties and providers to know what the costs are. A correct understanding of the costs involved in providing services is necessary in order to accurately determine flat rates, which must cover all provider costs. All money allocated must be spent by the providers; no money should be left unspent. In the Fee-for-Service Method, using flat rates provides for easier accounting and may be a more flexible from a financial perspective.

The Fee-for-Service Method is best suited for general housing services. If providers offer specialized services to accommodate special needs, a flat rate for services may not cover all of the provider's actual cost.

#### Actual Expenses Reimbursement

The Actual Expense Reimbursement Method requires specific accounting of all expenditures. Providers are required to itemize staffing costs, youth allowances, rent, stipends, program materials, providers' administrative overhead costs, and any other cost for services incurred by the provider. This method requires much more extensive expense reports. However, this method ultimately provides much more information, and an actual account of provider costs. From an audit standpoint, the Actual Expense Reimbursement Method may also be a better form of accounting.

#### The Hybrid/Allocation Method

The Hybrid /Allocation Method is a combination of both the Fee-for-Service Method and the Actual Expense Reimbursement Method. The program budget is used to determine an estimated average per unit cost. (I.e. flat cost per bed). The provider's contract is then determined based upon the average unit cost and number of units. Both the program budget and contract are developed through a process similar to that used in the Fee-for-Service Method.

The difference in the Hybrid/Allocation Method is that providers are still required to provide an itemized accounting of costs. Therefore, provider payments are ultimately based on the actual expenses reported rather than by the estimated average costs of service.

## Practical Question/Issues

*You may not have a choice!*

When thinking about which kind of rate method works best for your county or providers, please consider that the choices may have already been made for you. The agencies in your area may already have an operating procedure implemented for the THP-Plus program. Local procurement laws, current infrastructure of the agency, and program flexibility may all be factors that together may not allow for a choice in rate methods.

*What kind of resources do counties have?*

When determining how to set-up your program, Counties will need to consider the financial resources available; how many staff (program and administrative) they currently have available or will need; and how much technical assistance will be need to support the THP-Plus payment/reimbursement. Counties also need to consider and decide how often to claim allocated money from the State.

*What kind of resources do providers have?*

Providers need to ask the following question in determining the best way to run their program: What types of endowments are available? What is my funding stream? What staffing and infrastructure are currently in place or need to be implemented to support the program? What type of accounting and fiscal support will be necessary to support the program? How often should you plan to bill for services? The answers to all of these questions are key elements in determining how to run your program.

*Is it a new or existing program?*

Whether provider programs are new or were previously established will affect outcomes. Considerations of the following issues is important: program start-up costs, ramp-up considerations, economies of scale, the providers' track records and outcomes, and the ability of providers to leverage staff.

*What is the program method?*

Program providers need to consider the following question to determine their program method: How will economy of scale affect my program? What target population is my program serving? Is my program providing service to youth with special needs? What are the hard costs of providing program services?

*What is the county's relationship with its provider like?*

Counties need to consider the relationship they have with their providers. A good relationship with providers may allow room for flexibility if there is a need to renegotiate terms or a change in costs. Helping your provider understand the methods and options available to them will be to your advantage. With good ongoing communication with providers, counties may be able to reevaluate the budgeting style, if, after implementation, changes need to be made.

Fee-for-Service Summary:

The Fee-for-Service method uses a flat rate. This rate method requires more work upfront, as counties must research provider services, evaluate costs, and set rates. The Fee-for-Service Method works best for established programs. Total program costs in this method are distributed across units per year. The Fee-for-Service Rate Method works best when providing service to the general population.

Actual Reimbursement Summary:

The Actual Reimbursement Rate Method requires providers to itemize all of their expenses. Using this rate method, most of the research and analysis workload is on the back-end of the billing process. Actual Reimbursement works best for newer programs. This rate method allows expenses to be paid as you go. The Actual Reimbursement Method is more accommodating for smaller programs and is useful for special need populations.

Question and Answer:

*Which method has the easiest accounting?*

The Fee-for Service method is generally easier in terms of accounting practices. However, more up front work is required to ensure that flat rates are set to cover provider costs.

*Can allocated funds be used to cover Counties Administrative Costs?*

No, counties may not use THP-Plus allocated funds to cover Administrative Costs.

## **Workshop 1C. Housing First: What THP-Plus Can Learn from the Supportive Housing Movement**

**Presenters:** Patrick Loose, The San Diego LGBT Community Center (Sunburst Apartments)

**Recorder:** Brenda Lorentzen, John Burton Foundation

---

### Introduction:

The workshop began with Mr. Loose asking several questions of the audience, including what they wanted from the presentation, how as an agency they came to the decision to provide supportive housing, the steps taken to develop their programs, the particular flavor of the programs, and how they take theory and translate it to practice. Attendees asked to discuss the planning process, translating theory to practice, what works and what doesn't, and what services are available through this particular organization.

### Background:

San Diego LGBT Community Center has operated Sunburst Apartments for two-and-a-half years. They serve homeless youth age 18-24 with a qualifying disability under Social Security standards. That is, the disability must be long term and must substantially impede their ability to live independently, without being so severe as to render the young person unable to live independently with support. Applicants must prove their age, homelessness, disability, and low income. They focus on serving chronically homeless youth, defined as one year of continuous homelessness or four episodes with a three-year period. Youth are not counted as homeless under HUD until age 18. They do not provide THP-Plus and do not exclusively serve former foster youth, although 70% of their clients have been in the foster care system, all of whom left the system before emancipating. Applicants are accepted on a first come, first qualified basis.

### Transition from Drop-In Center to Housing Program

San Diego LGBT's initial project began in July 2000 as a drop-in center for youth, aged 18-20. They assembled a group of youth and asked what they wanted the building to look like and what kinds of activities and services they wanted. It was important to the group that they feel secure, wherever they are. They found a Victorian house situated in the LGBT community. Originally they thought they were being ambitious in expecting to see 180 kids in the first year – but they had 400 in the first three months. In the end they served 1,800 youth in the first year, ten times what had been expected. Youth would take buses 2-1/2 hours each way from the far

ends of the county to get services. They found that 10-25% of youth each night were homeless. The best they could do at the time was to get donations of sleeping bags and hygiene kits. They tried to refer youth to other programs, only to be told over and over again by the youth that the programs weren't safe, that they had been beaten up in programs, and that it was safer on the streets. The program staff, though, found it difficult to just hand out sleeping bags at 10pm.

SDLGBT engaged in an extensive four-year planning process to establish its housing program. They organized a consortium of service providers throughout the community, including Metropolitan Community Church and Children's Hospital to talk about the prospect of securing housing for this particular subset of homeless youth. They wanted to do a needs assessment in order to understand more specifically the nature of the problem. In order to provide the best possible care they first had to understand whether this was really a systemic problem, or if they were seeing an intact cohort of youth who were the only ones with this problem. During the needs assessment, they talked to 450 youth in San Diego, plus 50 stakeholders in foster family agencies, the child welfare system, and the adult system of care. The results of the assessment again articulated the concerns that the people at SDLGBT had heard all along: that there was a lack of confidence in the existing housing community regarding addressing LGBT issues appropriately, and a lack of understanding about the life circumstances of an 18-year-old. The assessment answered many questions and helped the parties involved to envision the triage of needs for these youth.

### Assessing the Needs of the Community

SDLGBT asked youth a number of key questions: Did they need an emergency shelter? At the time there was only one emergency shelter for unaccompanied minors in the entire county. Did they need transitional housing? Matthew Doherty with Supportive Housing began attending meetings to give information on permanent supportive housing, a new service for youth though it was already established for adults. Before opening a housing facility it had to be made clear that all youth had to have a lease, and they had to face the eventuality that they would have to evict formerly homeless youth from the project. They had conversations with major stakeholders to discuss all the available options so that everyone was operating within the same general understanding of youth housing in order to make a convincing case to the board of directors.

SDLGBT learned many important lessons. Potential providers must be prepared to ask difficult questions of the youth they serve. They must talk to youth about services, house rules, etc. It is very important to involve youth in collective decision making about their living situations. Oftentimes providers feel that youth are good at identifying activities they want, but they don't want to talk about house rules. Also, providers don't want rules that create conflict among

youth, between youth and landlords, or between youth and staff. SDLGBT feels that providers should remove all rules that aren't absolutely necessary, for example regarding overnight guests. Providers are not the sex police. 19-year-olds don't want to be told what to do. SDLGBT had groups in the evening, from 7 or 8pm until 10. They wanted to make sure the committee was accessible for youth and to make sure they could participate on their own terms, not only on the agency's.

They then began the process of developing actual housing. Initially, the price tag was prohibitively high as it was the height of the real estate boom. They would find great buildings, only to be overbid by developers. They began looking at "scrapers", where the building isn't worth anything and only land has value, so that the building must be demolished and a new building constructed from scratch. Many of the buildings they could afford were not appropriate for transitional kids. Finally a realtor found the perfect building. This site was a 100-year-old four-story building whose owner had spent two years refurbishing, planning to convert it to condos. Due to City of San Diego building codes the developer could not go through with the plan to convert the building into condos. SDLGBT explained their intentions for the space and asked for a 90-day escrow to assemble all the funding to buy the building. All forces had aligned in their favor, and they secured the contract for the building. After what felt like an enormously long time of preparation everyone was thrilled with the end result.

When doing special needs housing, it costs about as much to build new as to rehab, but there is money available for both. They spent \$250,000 rehabbing. They needed to make some units handicapped accessible. You should never open a wall in an old building! You don't want to know what's there. It took seven months to rehab because of unexpected code requirements. In the end, they did not need a conditional use permit. The CC&Rs state that the building can only be used for homeless youth.

#### What leads to and perpetuates homelessness?

1. Lack of cultural proficiency in working with LGBT young adults. The deeper issue is that existing providers didn't know how to make the milieu safe for LGBT youth – safe from both physical and verbal abuse. Youth were punished in group homes for defending themselves.
2. Lack of services specifically for young adults. While it's understood the youth are legally adults, they can't be (aren't) really treated as adult.
3. Lack of permanent housing specifically for young adults.
4. Lack of an emotional development framework in design and delivery of services.

5. Youth's lack of insight and experience to make good decisions, although they are independent. If you have lots of rules, or zero tolerance policies around substance use, it will lead to lots of conflict. You must concentrate on what's most important. HUD requires no tolerance policies, but these can be enforced by only ejecting youth if they are actually caught with drugs. They do "quarterly pest inspections" to see what's going on.
6. Mandatory services: Many youth exited out of transitional living because they couldn't comply with mandatory services; many are not interested in and resistant to mandatory services.

The difference between providing housing and providing social services:

The only services provided are for residents, so SDLGBT was able to skirt the need for a special permit. As the goal of the project is to provide affordable housing with low barriers to access, residents must pay 30% of their income toward rent. People with no income pay nothing. There is no time limit to find a job. They have surprisingly few on SSI. SSI is very difficult to secure, and 70% get turned down the first time they apply. Typically, 18-year-olds take no, and they don't have the resources to go up against huge bureaucracy. The agency works with attorneys to get SSI established. Only five youth came in with jobs. Right now, they have 23 youth, and 18 are employed.

SDLGBT provides services and programs that promote independence. They don't dictate what services youth must receive and there is no established agenda of services. Counter intuitively, many youth that come into independent housing situations have ongoing feelings of isolation. While homeless, many felt like they had a community, a routine of when to get up, where to panhandle, where to sleep, etc. The sudden change in lifestyle is, understandably, jarring and difficult for many people to deal with. Many of the youth who were raised in chaotic and unstable environments recreate the patterns they understand. On an inter-personal level, there are also considerable trust issues among young adults who have never experienced healthy, trusting relationships, particularly with adults. But SDLGBT found that despite these deeply entrenched issues, there are effective ways to reach our participants.

The agency's goal is housing retention so that youth will never be homeless again. This means different things for different youth. They have case managers who are called "life coaches," a job developer, a psychologist, and program staff. The program team has absolutely nothing to do with tenancy, which is handled by an outside property manager. The life coaches are always advocates for the residents, to provide general help, but not to deal with consequences. To be self-sufficient, they must either get a permanent subsidy such as Section 8 (it takes 7-10 months to get Section 8 in San Diego), or full time employment at \$12 or more per hour, which is the

living wage in San Diego, and sustain that wage for six months. This puts them at 50% of area mean income, when they stop being eligible for subsidized housing. Once they leave, there should be no return to homelessness. The agency tries to track this, tries to call once a month and see what youth are doing, what's going on in their life. They want to make sure that for three years after the program, youth are not homeless or at risk of homelessness. That's the goal. Youth can come back as long as they haven't turned 25 and there is space. 18 of their youth are HUD, the other 5 are subsidized. There are 5 units that are not subsidized by anybody. There is no time limit; youth may stay until they are 25. They must be 24 or younger when they enter. There is one youth per unit, which are small studios of 350 square feet with a private bath and kitchen. There is one one-bedroom apartment, which goes to whatever youth is "rocking out." They have many more males than females and lots of male-to-female transgender youth.

Here's a thought experiment: What happens to the best and brightest of our youth? They go to college. Colleges give lots and lots of support. There is independence, but with lots of support – resident advisors, counseling, meals, an academic adviser, social groups. When they finish school, many go home. We see this is as an investment we make in our children and have confidence that they will turn out fine. That's the support we give our best and brightest. What about ex-foster kids? They get nothing, or they get 18 months. Most of these kids have had a decade or more of major life dysfunction. In epidemiology this has been tracked over time, and we can see behaviors that are healthy. Healthy people are healthy across all dimensions. In comparison, dysfunction creeps, spreads over everything. Eighteen months is often not enough time to undo it, to reorient youth to a new way of living, to pro-social living.

SDLGBT based their program on the realities of social and emotional development. Case managers can't make residents do anything. Program participation is close to 95%, because nothing is mandatory and there is no feeling of coercion. Only one resident has consistently not participated in services. The staff is fun, they are great to hang out with, and sometimes pay residents to come to services. They are rewarded for attending therapy, for example. Youth can choose their reward, such as a gift card to Target or Albertsons, which typically costs about \$70 per resident per month. Other incentives include that if residents pay the rent on the 1<sup>st</sup>, as opposed to later in the 5-day grace period, they get \$50 back immediately. Pro-social behavior is rewarded, orienting them toward the kind of behaviors they need to stay housed. Of these, the most important is to pay the rent on time, always.

A harm reduction approach is used in dealing with substance abuse issues. They have taken on active heroin and meth users who were still using and have a 60% success rate with them. Homeless youth with a disability are much more than their diagnoses. They don't want to have

a diagnosis and aren't interested in it. They wonder why they always have to talk about this. We call them transition age youth and focus there.

### Important Strategies:

#### *Role stratification*

Property management staff manages all tenant matters. The program staff is there to be advocates and mentors. They don't issue violations, use the "good cop, bad cop" strategy and actively seek feedback about the program from the youth they work with. For example, good headphones solve the problem of loud music after 10pm. They create trusting relationships with residents, as they want residents to go to program staff whenever they have a problem. Staff know when residents get a violation notice, but they don't have anything to do with it. But program staff work very closely with property staff behind the scenes. For the program to work, staff must be willing to deliver consequences if the consequences are to have any meaning. We tell residents we can talk to the property people, but the resident will need to do something to convince the property manager that it is worthwhile to take a risk on them. They have successfully resolved the problem and stopped the process of eviction within two days of actual lock-out. Case managers have had pretend telephone "conversations" with the property manager in front of the resident where the case manager is the "good cop" and paints the property managers as the "bad cop".

The property manager's role is to protect the asset. They don't provide social services and aren't the residents' friends – that is program staff's role. They have evicted kids, but it's very difficult. Program staff will still work with them to help them find other housing arrangements, as the goal is still to prevent them from becoming homeless. They have had ten youth who left, but only one has had a term of homelessness. Threats of violence to staff or other resident is one reason. Also non-payment of rent. If for non-payment, the resident must show why things will be different in the future – for example they have paid rent somewhere else for three months or they graduated from another transitional program. Some criminal offenses mean you can't be in public housing, for example those convicted of manufacturing a drug or who are convicted sex offenders. They do a massive intake to make sure they can support the resident once in the programs. They don't have the resources to handle youth with Axis 2 disorders. Providers must accept that they can't work with everybody.

#### *Programs on site*

Process groups' onsite are a very, very bad idea. There are trust issues among residents, they don't want to be vulnerable, and there are confidentiality issues. They do a lot of expressive arts; the youth really enjoy that. They do a lot with food. Once a week they have a community dinner. The youth make the food themselves, just hang out and eat and have fun. Then the hour afterward is some structured activity, for example roller skating or ice skating – some kind of physical activity. They do offer psychiatric/psychological services onsite, or case managers will drive them to appointments. If just told to go, when the appointment is, and handed a bus schedule, youth won't go at least in beginning. So staff members drive them and wait for them, while they meet with counselors and professionals.

#### *Lease violations*

The only violations that lead to loss of housing are clearly illegal activities, such as the manufacture/possession of drugs, onsite sex work, acts of violence.

#### *"Dream sheet"*

They create a "dream sheet" with each new resident. It covers what their hopes and aspirations were, before all this dysfunction happened. They bring someone in from that field to help the youth decide if that's what they truly want and if so, to formulate a plan to achieve it. The youth creates an action plan and chooses what rewards they want. Some don't want incentives, they have a job, and they just want other supports.

#### Question and Answer:

*Question:* What is the process for getting into the program from foster care?

*Answer:* The youth sets up an appointment with a case manager. They like to get youth from foster care, because then they have a complete case file. They get about one phone call a day from foster youth, and there are one or two a week that are follow through. They are referred to other programs for the interim and waitlisted for an opening. Turnover is five youth a year, who are accepted on a first-come, first-qualified basis.

*Question:* Are youth required to work?

*Answer:* No, but after three or four months of just sitting, youth get tired of it and want to do something. In the end, do they want to live in a studio apartment with a bunch of 22-year-olds when they are 30? No.

*Question:* Are you considering expanding?

*Answer:* We would love to but it's a lot of work. We don't have capacity right now.

*Question:* How strong is funding?

*Answer:* We get Shelter Plus Care, which is part of the McKinney-Vento Act funding. It renews for five years. Renewal is not competitive in San Diego; if you are complying, you get renewed. There is a rental subsidy up to 100% of rent, but the agency must match that in services. It is the market value of services, not what you spend to provide the services. It includes MediCal services.

*Question:* Can you identify one or two factors that contribute the most to success?

*Answer:* I wish I could. Lots and lots of studies try to predict this, but it seems to be a combination of internal readiness factors, readiness for change, and the ability to connect with a care and service provider. You have to believe in kids even when they can't believe in themselves. We track the service match; after 6 months the service match will drop by 50%. Youth access a lot of services themselves once they are housed – such as medical care. Dental care sucks! We work with private dentists. Each dentist takes two youth per year. We must pay for the supplies, but the dentist does the work for free. We track youth once they leave and try to stay in touch. Youth can still receive services from staff after they leave.

*Question:* Your process has taken four years and you've been open for less. What is the culture between stakeholders and what have they thought about this idea of providing support and having it available? What was it like in the beginning? What were the barriers? Was it just about not understanding who they were and the risks?

*Answer:* The LGBT community is different. The staff has all been there. It is not a hard sell for them at all. Hard sells to the community were having only voluntary services, no time limit, and using a harm reduction model. You must have an up-to-date emergency communications plan – you will need it! We've had one stabbing and one drug bust. Another youth was dealing Ecstasy. The last was not so bad. It was a great lesson for the others. We sent the bill to the youth to replace the door the police knocked down!

## **Workshop 1D. Making the Case with Data: The THP-Plus Participant Tracking System**

### **Presenters:**

Sara Kimberlin, Research Fellow, John Burton Foundation

Tara Lain, ETO Self-Evaluation Lead, UC Berkeley Center for Social Services Research

**Recorder:** Sara Kimberlin, John Burton Foundation

---

### Introductions

The workshop began with introductions of the speakers: Sara Kimberlin is with the John Burton Foundation, where she has worked on development of the THP-Plus Participant Tracking System, and Tara Lain is the ETO Self-Evaluation Lead based out of the Center for Social Services Research (CSSR) at UC Berkeley, where she conducts training and supports users of the Efforts to Outcomes (ETO) software used by counties participating in the Family to Family initiative of the Annie E. Casey Foundation. Next all workshop attendees stated which agencies and counties they represented.

### Background on THP-Plus Data Tracking

Sara Kimberlin then gave an outline of the presentation, and proceeded to discuss the background of program data tracking for THP-Plus. The John Burton Foundation is part of the THP-Plus Statewide Implementation Project in collaboration with the Corporation for Supportive Housing and the California Department of Social Services, which provides technical assistance and other support to expand the effective implementation of THP-Plus throughout California. One of the goals of the project is to develop a framework for evaluating and measuring the impact of THP-Plus on a statewide basis. Because data collected about THP-Plus was not consistent, and few counties and providers had comprehensive computerized systems to track THP-Plus data, insufficient program data was available to demonstrate the program's statewide impact and to conduct self-evaluation. The John Burton Foundation consulted with counties and nonprofit service providers who had implemented THP-Plus to identify what data was needed to measure the impact of the program, and also considered program requirements and other data tracked for emancipated foster youth. The result was the design for a data system to collection information about THP-Plus participants.

Information that counties and providers identified as important for assessing program impact included: participant demographics, type of THP-Plus model (scattered site, single site, or host family), housing status, employment and income status, education and training status, and other information such as financial assets, health insurance, special needs, criminal justice involvement, and permanent connections to caring adults. Additional factors considered in deciding what data should be included were: facilitating comparison of outcomes of THP-Plus participants to outcomes from research on former foster youth; including data that would parallel other widespread data collection efforts at state and federal levels; and developing a plan to collect consistent data statewide, in order to be able to demonstrate statewide impact and to compare “apples to apples” when examining THP-Plus programs implemented by different service providers or in different parts of the state.

In terms of how data collection should be structured and implemented, stakeholders identified a need for a computerized data tracking system with a web-based interface. Confidentiality protections were important, including secure access with password-protected logins, access firewalls, collection of limited personal information, and anonymous aggregated reports. Queries and reports would allow counties and providers to conduct self-evaluation and contract reporting.

As to the ongoing data collection schedule, data about THP-Plus participants would be collected at program and exit (to assess progress during the program), at follow-up (to assess long-term program impact), and at the end of each quarter (to assess interim progress, and to provide a snapshot of all program participants each quarter). A sample data collection timeline for a hypothetical THP-Plus participant is included at the end of this document.

#### Available THP-Plus Data Collection Systems

Currently, two web-based data collection systems are available or in development that are designed to collect THP-Plus following the statewide data collection framework described above. The John Burton Foundation is developing the THP-Plus Participant Tracking System, a free web-based tool available to all THP-Plus counties and providers. In addition, for counties that are part of the Annie E. Casey Foundation’s Family to Family initiative, comparable information can be tracked through the Family to Family Efforts to Outcomes (ETO software), using assessments developed for the California Connected by 25 Initiative (CC25I). The two

systems track parallel data about THP-Plus, but are not directly linked; instead information from both systems will be exported and combined externally for analysis.

Use of either system to collect THP-Plus data is voluntary, but counties and providers are strongly encouraged to use one of the two systems to participate in the coordinated statewide data collection effort. Having consistent statewide data about the scope and impact of THP-Plus is *critical* for effective state-level budget advocacy, providing the information needed to show legislators, community members, and other key stakeholders that the program is important and is having a measurable positive effect on former foster youth throughout California. Some counties are requiring that contracted THP-Plus providers utilize one of the systems for tracking THP-Plus participant data.

#### THP-Plus Participant Tracking System

Next, Sara showed a demo of the THP-Plus Participant Tracking System developed by the John Burton Foundation. Data about housing, employment/income, education/training, and other information (assets, criminal justice, etc.) is entered for each THP-Plus participant through online forms at program entrance, the end of each quarter, at program exit, at 6-month follow-up, and at 12-month follow-up. Queries and reports will allow system users to examine an individual participant's progress over time, snapshots of program participants at a point in time, and entrance and exit cohorts of participants. Data will also be exportable so that it can be analyzed in spreadsheet or statistical software programs. Providers will be able to enter, view, and edit information only about participants in their own THP-Plus programs; county staff will be able to view information about participants entered by THP-Plus providers contracted with their county.

In terms of requirements to use the THP-Plus Participant Tracking System, no fees are charged to counties or providers. Each organization using the system must sign a use agreement to demonstrate shared commitment to confidentiality protections and system uses. Counties can choose whether contracted providers will enter data into the system directly, or if county staff will enter the data. Service providers in non-participating counties may also use the system. All organizations using the system will designate specific individual users to receive password-protected logins.

#### Family to Family Efforts to Outcomes (ETO) Software

The alternative online system for collecting THP-Plus data is the Efforts to Outcomes (ETO) software developed by the Annie E. Casey Foundation for counties that are part of their Family

to Family initiative. Tara Lain next conducted a demo of the ETO system and how it is used to track THP-Plus data.

The Family to Family ETO software is designed as a data collection and case management system for counties to use to track many different aspects of child welfare services, including Team Decision Making (TDMs), Independent Living Program (ILP) services, and other services and information that are not tracked in the official state CWS/CMS child welfare database used by counties to track information about child welfare minors.

About two years ago, a module was added to the ETO system to collect information about transition-aged foster youth and former foster youth for the California Connected by 25 Initiative (CC25I), an project that includes a variety of activities related to tracking information about and enhancing support for young people transitioning from the foster care system to young adulthood, through age 25. The CC25I components of ETO were first implemented in April 2007 with five counties; there are now nine counties using or committed to using the CC25I components of ETO.

All Family to Family counties have access to the ETO system. Using the system is free for Family to Family counties for up to five logins (user IDs); additional user IDs can be purchased for \$120 per year. The CC25I module in ETO was developed for counties that are part of the CC25I initiative, and counties participating in the CC25I initiative have priority for software support as well as the opportunity (and responsibility) to participate in other aspects of the initiative. However, any Family to Family county can request to have the CC25I module in ETO – counties do not have to be part of CC25I to use the CC25I component of ETO. Counties can also request that access to the system be set up for their contracted service providers (including THP-Plus providers, ILP contractors, etc.) to allow contracted providers to directly enter and view data.

The CC25I module is designed to collect a wide variety of information about transition-aged youth from the child welfare system – much more information than the THP-Plus Participant Tracking System. System set-up is customized for each county. A broad range of demographic and contact information for youth is tracked in the system, as well as detailed information about the type and quantity of services provided, outcomes in a variety of domains (housing, employment, education, health, asset development, etc.), and youth satisfaction data. Other information tracked in ETO through the CC25I module includes assessments of all emancipating foster youth, assessments of and services provided to all ILP participants (including minors), and other aftercare services. The ETO system is also mapped to state and federal reporting requirements, and can be used to generate state and federal reports (such as annual ILP reports).

Family to Family counties that choose to use the CC25I modules in ETO are required to complete and enter data from assessments of all emancipating youth in the county, and also need to complete and enter data at least annually (preferably every six months) from aftercare assessments for all youth participating in ILP, THP-Plus, and other aftercare services, as well as for youth not participating in aftercare services.

The CC25I ETO system collects information about THP-Plus through both the demographics page and the aftercare assessment form (Assessment D). THP-Plus questions are integrated into these two forms, which also include many other questions and data fields that are not related to THP-Plus.

In order to collect THP-Plus data in a format that is compatible with the statewide THP-Plus data collection process, counties using ETO need to update demographic information and complete the aftercare assessment (Assessment D) for all THP-Plus participants at program entrance, the end of each quarter, at program exit, 6 months after exit, and 12 months after exit. Queries are currently being developed in order to export and analyze THP-Plus data from the ETO system.

#### Summary of the Two Data Collection Systems

Next, Sara presented a summary of the differences between the THP-Plus Participant Tracking System and the CC25I ETO software. The differences are outlined in the following table:

Requirements to use the system:

THP-Plus Participant Tracking System	CC25I ETO system
<ul style="list-style-type: none"> <li>• All THP-Plus counties and providers may use</li> <li>• Counties can choose to have contracted THP-Plus providers enter data or to have county staff enter data; providers in non-participating counties can also use the system</li> <li>• No fees</li> </ul>	<ul style="list-style-type: none"> <li>• Family to Family counties only; Data collection module developed for California Connected by 25 Initiative and CC25I counties have priority for software support, but any Family to Family county can request access to the CC25I module in ETO</li> <li>• County-based system; County can request that direct online access be set up for all, some, or no contracted service providers</li> <li>• Small fees apply for additional user IDs</li> <li>• In addition to THP-Plus data tracking, counties using the system are also expected to complete and enter data from assessments for all emancipating youth in the county, as well as annual aftercare assessments for all youth in ILP, THP-Plus, and other aftercare services and for youth not receiving services</li> </ul>

What data is collected through the system:

THP-Plus Participant Tracking System	CC25I ETO system
<ul style="list-style-type: none"> <li>• Tracks data only about participants in THP-Plus programs</li> <li>• Designed as basic data collection and reporting system</li> <li>• Tracks demographics and outcomes</li> <li>• Basic data queries</li> <li>• Standardized system</li> </ul>	<ul style="list-style-type: none"> <li>• Tracks data about minors and former foster youth participating in ILP, THP-Plus, other aftercare services, and those not receiving services</li> <li>• Designed as full case management system as well as data collection and reporting system</li> <li>• Tracks demographics and outcomes as well as type and quantity of services provided</li> <li>• More complex queries</li> <li>• More customized system</li> </ul>

## Conclusion

To conclude, Sara thanked the workshop attendees for their interest in data collection and self-evaluation for THP-Plus. All THP-Plus counties and providers were encouraged to participate in the statewide data collection process through one of the two available data collection systems for THP-Plus, so that consistent data would be available about program impact statewide. It doesn't matter which system counties and providers use, since both collect directly comparable data about THP-Plus.

For more information about THP-Plus data tracking and the THP-Plus Participant Tracking System, workshop attendees were directed to contact Sara:

Sara Kimberlin, John Burton Foundation

(415) 693-1326

[sarak@johnburtonfoundation.org](mailto:sarak@johnburtonfoundation.org)

And questions about CC25I and ETO can be directed to Tara:

Tara Lain, ETO Self-Evaluation Lead, UC Berkeley Center for Social Services Research

(510) 642-6623

[tlain@berkeley.edu](mailto:tlain@berkeley.edu)

## **QUESTIONS & ANSWERS:**

*Q: Are there any informational handouts or paper forms available for the ETO system? What about an online tutorial?*

A: There are no handouts or paper forms, but Tara is happy to answer questions and follow up with more information for people who are interested. There isn't an online tutorial, but counties that are using the system can participate in online trainings/demos that Tara leads using WebEx.

*Q: Who can access the ETO system for THP-Plus?*

A: Any Family to Family county can request to have the CC25I module built out and added to their county's ETO system. Family to Family counties don't have to be part of CC25I to use the

software, but the benefit of participating in CC25I is that those counties receive more training and support.

If a nonprofit THP-Plus provider wants to use the ETO system, they would first need to be providing THP-Plus under a contract with a county that is part of Family to Family and uses or is interested in using the CC25I module in ETO at the county level. The nonprofit would talk to the county, and the county could then ask Tara to build the online access to the system for that service provider. The first step for the nonprofit, then, would be to talk to the county that provides their THP-Plus contract.

*Q: Can a county or THP-Plus provider use both data tracking systems for THP-Plus?*

A: Since the THP-Plus Participant Tracking System and the ETO system have been coordinated to collect comparable data about THP-Plus, there is no need for any county or provider to use both systems. It's recommended that counties and providers use only one of the systems. The two systems have been coordinated in order to streamline the process of data collection and minimize the need for counties or service providers to enter the same information into multiple data collection systems.

---

## **Workshop 2A. Getting Real with Youth about Substance Use: Adopting a Harm Reduction Approach in THP-Plus**

### **Presenter:**

Tom Calvanese, Harm Reduction Training Institute

### **Recorder:**

Denise M. Lytle, Los Angeles County Department of Children and Family Services-Governmental Relations

---

### *Introduction:*

The presentation began with an introduction of Mr. Calvanese by Amy Lemley of the John Burton Foundation. Ms. Lemley shared information about Mr. Calvanese's background which included five years working with HIV/AIDS issues as the founding director of the Maui AIDS Foundation. He returned to the mainland and worked as a property manager for seven years for the Ambassador Hotel, a 150-room supportive housing hotel located in San Francisco's Tenderloin district where he tried to integrate the service needs of the occupants who had histories of homelessness, mental illness, drug abuse, alcoholism, and HIV/AIDS.

Since young people typically experiment with drugs and former foster children may have had parents who were substance users, substance use issues amongst this population can be very complex. Mr. Calvanese stated that from his point of view and from his experiences with Harm Reduction Training, the key issue is how to weave substance use and housing needs. He has worked in many programs for at risk youth and adults in his twenty years of experience working with substance use. He feels strongly that in the context of supportive housing, substance use has strong implications for achieving housing permanence and stability. His work as a property manager at the Ambassador Hotel led him to see the need for addressing drug usage among hotel residents, many of who had long histories of homelessness, AIDS and poverty.

### *Harm Reduction Overview:*

#### Goal

This presentation is a condensed version of an all-day training at the Harm Reduction Training Institute and includes strategies for addressing drug-related harm. Those in attendance were informed that questions could be posed at anytime during Mr. Calvanese's talk. The primary goal when using a Harm Reduction approach is to examine drug-related harm and how harm reduction

principles, policy and practice work together to address that harm. This particular approach to harm reduction focuses not merely on abstinence from drugs, but rather a more realistic view of reducing the harm caused by certain patterns of behavior and minimizing the negative impacts of drug or substance use.

### Definition

David Purchase's 1997 definition of this strategy for assisting people struggling with substance use posits, "Harm reduction is against harm, neutral on the use of drugs per se, and in favor of any positive change, as defined by the person making the change. That's ANY positive change. On an individual level, all people set their own unique rates of change. We change at a pace that is reasonable for each of us." Other definitions from participants included: "Trying to reduce the intensity of problems resulting from the behavior" and "...taking baby steps in reducing the problem."

One begins to address the issue of drug use by starting from where that person is; the pace of behavior change is controlled by the person making the changes. Behavior changes are challenging and difficult to achieve - and common examples of that difficulty are seen in dieting and smoking cessation.

### Psychoactive Drugs

One aspect of drug use that adds to the complexity of the issue stems from scientific evidence that shows how psychoactive drugs affect mood, perception and/or thought and produces changes in the mind and the body. Typically, our society thinks about drugs as the driver of the problem. However, Calvanese suggests a broader view and attitude about drugs. To begin to understand drugs or substance use, the first essential step is education. To work through these issues or to work successfully with substance users from a harm reduction perspective, you have to learn as much as possible about the relevant drugs. Calvanese suggested that everyone access the Linde Smith Center ([lindesmithcenter.org](http://lindesmithcenter.org)) and Harm Reduction Coalition ([harmreductioncoalition.org](http://harmreductioncoalition.org)) websites. And for a general briefing on drug use he recommended the Drug Enforcement Administration ([usdoj.gov/dea](http://usdoj.gov/dea)) website which illustrates a wide variety of drugs.

### Drug, Set and Setting

In any discussion about drugs you have to consider the "terms" of the drug, also known as the pharmacology, the "set," or the mindset of the individual user - what he/she brings to the experience of drug usage, and the "setting" which is the context or culture, including socioeconomics. Taken together, these three factors describe the where, when, how, why and with whom the user experiences drugs. An example of the various vantage points from which to look at drug use might

be a person who is depressed as a result turns to drugs compared to a person who uses alcohol to celebrate with a group of friends or who drinks alone. Every user's circumstances are unique, and you cannot assume your knowledge or experience with a drug or alcohol is the same as another user's. Each individual has a different mindset or unique context of drug usage.

Set and setting are the domains of harm reduction strategy. Actors operating in the set would include the individual, psychologist, social worker or drug counselor. The setting includes elements such as culture, educational background, public health, environment and policy.

### Continuum of Drug Use

Drug use can be said to occur on a continuum, however this does not mean that drug use is not fundamentally individually experienced. The spectrum of individual experience runs the gamut from: No use, Experimental, Occasional, Regular, Heavy, and Chaotic; First stage of recovery, Second stage of recovery, and Relapse/Recycling. The speaker asked those who use drugs to raise their hands and no one did. He then asked who smoked cigarettes or used alcohol or drank coffee and all hands went up and he stated that we are all drug users to some extent. Most people who use drugs/alcohol are at the Regular stage which is 2-3 drinks/hits per day and this is where there is high risk of psychological dependence. With Heavy usage, the drug can take the place of an individual's coping mechanisms. At the Chaotic stage, the user organizes the day around drug use and it begins to interfere with work, family relationships and other activities. At the First stage of recovery, there is a high risk of relapse. The Relapse/Recycling phase is a normal part of recovery.

Mr. Calvanese asked a question of the group: "How do you deal with young people and their very common binge drinking?" Mr. Calvanese's response was that he would want to know more about the individual's mindset and the setting and explore what the person was trying to accomplish by drinking to excess and asking if it was successful. For example, if the goal is to numb yourself from pain, then that would be focus of work or treatment.

### Continuum of Risk

Low risk, (as opposed to high risk), drug use is deceiving as you can't just judge more socially accepted drugs, such as alcohol and marijuana, and claim they are less dangerous than heroin without understanding the depth and motives behind the drug abuse. Knowing the effects that drugs have on the body and the toll they take is important in evaluating the risks. Actually, heroin is high risk only in regard to the risk of overdose and many heroin addicts function quite well with minimal physical harm if they are methodical about usage and minimize overdose risks.

It is important to focus on mindset and setting, the why and how of drug usage when evaluating risk. Drugs seemingly as harmless as alcohol can be fairly unpredictable and result in fatalities or other severe consequences such as arrest when driving under the influence. This type of result can occur with first time experimental use of alcohol or drugs or occur as the result of heavy or chaotic drug usage.

### Structural Factors, Levels and Types of Harm

Factors that contribute to or mitigate harmful results include: race, class, gender and sexuality. In terms of race, there are sentencing disparities and other structural racial and class inequalities built into the criminal justice system. A homeless user is more likely to be out in the open and therefore more susceptible to arrest where as a person using in the comfort of their home is less likely to be detected. Whether a person uses cocaine or crack, whether a woman is pregnant when using drugs, or simply held to a different standard due to gender are just some of the factors that might influence how an individual's drug usage is viewed, prosecuted, punished or ignored.

Harm from drug usage can be physical, psychological, social, economic, legal and political. Physical harm can include injuries, overdoses and HIV infections. Psychological harm can include feelings of shame, guilt and isolation. Social harm includes the criminalization of drug users and ostracizing the user. Economic harms include the monetary cost of drugs, loss of employment. Legal and political harms in the context of the War on Drugs include jail time, mandatory sentencing, and the loss of voting rights for persons convicted of drug related offenses.

It is important to look at drug use and its resultant harm in terms of the impact on the individual, the family and the community. If a wage earner is arrested, this will inevitably devastate an entire family and in the case of drug activities and an illicit drug economy, there are negative impacts that will affect a neighboring community. Sometimes you have to weigh the harm caused by an individual against the harm's result on the community. In working with the challenges of a 150 room residential hotel for those with drug and alcohol issues, the conflict between individual and community well-being was common. Many of his decisions were weighed against the individual and in favor of the larger community because decisions with less harm to the individual often resulted in more harm to the community so in residential housing, you have to learn when to let go.

### U.S. Context

The lack of universal health care, welfare reform or "cutbacks," a punitive approach to treatment and institutionalized racism further complicate the problems of drug use and treatment in the United States.

At this point, there was a shift in the focus of the presentation from drug use information to the application of harm reduction strategies. An audience member posed the question: "Does this pertain

to working with a client in transitional housing who is high?" Mr. Calvanese's response was that being high should not be a barrier to receiving services, benefits, housing or treatment. Even if the youth is so high you feel that you can not work with them, by staying and listening you accomplish many things. (1) You know and experience knowing them when they're high; (2) you build a rapport; (3) you have gained some information about your client which you can build upon.

Another question from the audience: "How do you deal with youth who are using after being taken away from substance abusing parents and then go on to use themselves only to end up back with those birth parents that are still using?" Calvanese suggested that you the youth ask why they are using and what they are trying to get out of using. Is the person using out of pain, anger, hopelessness, or simply trying to feel good? You can assist them with self-reflection or you can construct a decisional balance sheet, which simply asks the user to list the pros and cons of the behavior. This is a good tool for helping clients begin to work on what they fear most about abandoning drugs. It is important not to demonize. It is equally important not to remove coping mechanisms without replacing them. Mr. Calvanese stressed the need for constant effort to be as non-judgmental as possible.

Many attendees asked questions about working with youth who are using, bingeing, or at risk of losing housing because of the drugs. Mr. Calvanese's response was to ask if youth deserved to lose housing because they smoked marijuana or were intoxicated and if the drugs caused unacceptable behavior. If the behavior was to damage the house or wake everybody up or impact the neighborhood negatively, then perhaps the better option would be to minimize the negative behavior (cut back on alcohol or drugs) and take the focus off of the drug usage. If you can work with youth to decrease the amount of alcohol or pot so it does not result in negative outcomes, then that is a more realistic goal than complete abstinence.

### Impact of Drug Convictions/Effects of "War on Drugs"

When a person uses illicit drugs there are many consequences such as loss of housing, loss of voting rights and the inability to obtain welfare benefits, housing and educational loans and grants.

One of the effects of the "War on Drugs" has been a lack of accurate information about drug usage. There is a tendency to "scare" people with exaggerations and inaccurate depictions of drug users based on falsehoods. Since the War on Drugs began, there have been higher opportunity costs of drug use and increases in drug-related harm. As a result, the prison-industrial complex has grown dramatically. The number of incarcerated drug offenders increased 37% and persons convicted of drug related crimes represented the largest segment of jail population growth from 1996 until 2002.

## Harm Reduction – Principles

A central belief of this treatment approach is that the user's decision to use is accepted without judgment. The user is treated with dignity and has the right to make personal decisions including the decision to use. The user is expected to take responsibility for his/her own behavior, which inherently implies that as a user, one has the power to make a different choice.

Reducing harm is the focus - not necessarily reducing consumption. There are no pre-defined outcomes or agendas - abstinence is not the only answer! The focus needs to be on what users do when high. In problem situations, the focus is not on the activity of getting high but the disruption caused to the community or housing setting.

## Essential Practices - Program Staff/Administration

The presenter talked about core practices for program staff who engage clients "where they are at;" using non-judgmental approaches when working with substance usage; working to help them achieve *their* goals; promoting and supporting any positive change; offering a continuum of options such as comparing riskier/less healthy and safer/more healthy behaviors and providing a range of choices; and employing pragmatic tactics as opposed to absolute solutions.

In order to succeed with the application of Harm Reduction, it is important that the policy of the agency be supportive of this approach and that clients are involved in program design, implementation and evaluation of outcomes. Collaboration with other providers and clearly defined policies must be communicated proactively and applied consistently.

## Harm Reduction Practice Step by Step

The first step is to initiate contact and reach out to meet the client "where they're at." Next, meet the immediate survival needs and stay engaged, build trust and cultivate a relationship. When there is resistance, be able to roll with it-start again from a place where there was agreement. As part of a holistic needs assessment, focus on the client's own needs, and their goals as they identify them. As opposed to concentrating on pathologies, emphasize strengths and abilities. Develop strategies to reduce identified harm and maximize an individual's health and potential.

The self-fulfilling prophecy is a theory that applies when working with harm reduction. If you believe that the client can make a change, they will. If you don't think that they will succeed, then they will fail.

## **Workshop 2B. Property Management: The Secret to an Effective THP-Plus Program**

**Presenters:** Elizabeth Wright, First Place

Esteban Allard-Valdivieso, First Place for Youth

Ed Melendez, Larkin Street Youth Services

**Recorder:** Wendy Jones, Los Angeles County Department of Children and Family Services

---

### **First Place for Youth**

The goal of First Place is to support youth in their transition from foster care to successful adulthood by promoting positive choices and strengthening individual community resources. First Place serves youth ages 16-24 throughout the Bay Area including San Francisco, Alameda, Contra Costa and Solano Counties. Their scattered site housing model leases units directly from property managers and owners throughout Alameda, Contra Costa and Solano Counties to emancipated foster and probation youth from ages 18-24. First Place currently maintains 107 units and 158 beds and housed 218 youth in fiscal year 2008.

First Place ensures youth receive access to a safe, permanent and affordable apartment in close proximity to public transportation, and access to goods and services. Move-in assistance, including truck rental and physical labor, are provided along with a \$200 stipend to purchase basic necessities. Maximum rents are not to exceed \$850 (one bedroom) and \$1200 (two bedrooms). Youth also receive weekly case management in their homes and other supportive services centered around education, employment, health and well-being.

The First Place rent structure is based on a 24 month graduated rental subsidy. At the 24-month mark, youth are paying 100% of the rent and are then able to assume the lease at the end of the program if they so choose. Youth are responsible for paying utilities and phone service.

First Place youth advocates educate youth about tenant responsibilities, proper maintenance of their units and serve as intermediaries between youth and the landlords. As the program concludes, an 18 month exit meeting is held to discuss with youth their plans for either exiting or staying in the units. If there are issues with nonpayment of rent or lease/program violations, advocates work with youth to ameliorate the problems. Legal eviction is always the last resort.

First Place provides hope and opportunity to transition age former foster youth. To learn more about program details, visit their website at [www.firstplaceforyouth.org](http://www.firstplaceforyouth.org).

## **Larkin Street Youth Services – LEASE Program**

The Larkin Extended Aftercare for Supportive Emancipation (LEASE) program provides housing and supportive services to emancipating and former foster youth living in San Francisco. The goal of the program is to help emancipating youth stabilize their housing situation, increase their employability, complete their GED and/or enroll in higher education, develop more independent living skills and access health and nutrition services so that they can be self-sufficient and self-reliant.

To be eligible for the LEASE Program, youth must have been in the foster care or probation system, in out-of-home placement, and be currently emancipated but not yet 24 years old. This also includes youth who are 18 and are about to emancipate and foster care youth who are 17 and preparing for emancipation.

LEASE provides eligible youth with rental assistance in a furnished apartment in the city of San Francisco for up to 24 months or until they reach 24 years of age, whichever comes first. Monthly food vouchers are provided along with assistance for utilities that include gas, electricity and water. Youth receive weekly one-on-one case management services to develop their independent living plan and monitor the progress in achieving the living plan goals. Other weekly meetings are held with education and employment specialists to help plan education and employment goals, as well as to assist with skills training and employment opportunities. There are also opportunities to participate in group recreational activities.

LEASE currently serves 50 former foster youth. It provides youth with a balance of real life along with the assistance needed to eventually become totally independent. Wraparound programs ensure that youth, who cannot meet the requirements of LEASE, can find other options rather than returning to homelessness again.

For details of Larkin Street Youth Services, visit their website at: [www.larkinstreet.org](http://www.larkinstreet.org)

### QUESTIONS & ANSWERS:

*Q: Are pets allowed in the units?*

A: Landlord rules take precedent. Most of our youth do not have pets.

*Q: Are service or companion animals permitted?*

A: Again, youth must follow the rules of the landlord; however, exceptions can be made for those with disabilities that would require a pet.

*Q: Are boyfriends/girlfriends permitted to stay overnight?*

A: Only the person who is on the rental agreement may reside in the unit. These policy issues are discussed with youth prior to move in and during their participation in the programs.

*Q: Would it be feasible to lease a 4 bedroom house for youth?*

A: There would be many challenges to this type of living arrangement. It would be essential to screen youth to determine who would be best suited to live in a community environment.

## **Workshop 2C. THP-Plus and Fair Housing**

**Presenters:** Jerry Cullinen, Equal Opportunity specialist, HUD

Sharon Rapport, Senior Program Manager, Policy and Planning, CSH

**Recorder:** Yvette Aguayo, Orange County Social Services

---

### Introductions

The session began with Mr. Cullinen speaking about section 504, a civil rights law that prohibits discrimination against people with disabilities, designed to protect recipients of federal financial assistance. He continued by giving the definition of reasonable accommodations request and accessible requirements.

### How to Implement Fair Housing

The presenter reiterated that everyone wants equality and to enjoy their home. An individual with a disability, who needs special accommodation, makes a reasonable accommodation request. Each request is evaluated on a case-by-case basis. An example was given of a resident who requested a closer parking space due to her disability, a request the landlord later denied. One night she parked, and getting out of her car, she fell and hurt her back. She contacted HUD and received \$95,000.00 in a lawsuit because her appropriate and reasonable request had not been accommodated.

Property management has the right to provide accommodation by alternative means (than those requested) so long as the result is the same. The example given was of a request for the property manager to install an automatic gate opener. The property manager instead used a rope to hold the gate open providing the same result. He stated in some cases the property owner would be responsible for completing the request but the tenant could be responsible for the cost.

Accessible requirements were described as a physical construction requirement such as a curb cut, special entry or ramp. A landlord has the right to request medical documentation when a request is made. If the tenant does not provide proper documentation the property management is not required to make the accommodation.

## Fair Housing Acts and THP-Plus

The session continued with Sharon Rapport. She spoke about the Fair Employment and Housing Act. She stated that this act prohibits both intentional and unintentional discrimination. There are exceptions to the Fair Employment and Housing Act. For example, if a practice is necessary to the operation of a legitimate business, and effectively carries out that business need. Another exemption provided in the act regards cases in which a practice is necessary to achieve a purpose sufficiently compelling to outweigh any discriminatory effect, so long as the practice is narrowly tailored to effectively carry out that purpose.

Next Ms. Rapport spoke about the Unruh Act. This applies to all business establishments. It prohibits any arbitrary discrimination against a group of people without a legitimate reason. It does, however allow discrimination based on age for senior housing.

The last housing act mentioned in the session was the Government Code Section 11139.3 (Transition Age Youth) which allows age discrimination for housing targeted to homeless transition age youth. To fall within this section, one must qualify as homeless youth defined as a person who is 18-24 years of age and either is homeless or at risk of homelessness. The age limitations ensure that the individual is no longer eligible for foster care on the basis of age or has run away from home. Also, youth fall under the definition of homeless if they have legally emancipated from foster care and are homeless or at risk of homelessness.

## Question and Answer

Q: How does someone file a complaint to HUD?

A: The victim of discrimination would call the HUD intake office, they would mail out a complaint which would need to be signed by the victim and returned in 10 days. HUD would then send it on to one of their offices (Santa Ana or San Francisco) and they would continue with the investigation. The complaint needs to be filed by the victim of violation.

Q: Are there other questions that are permissible during a tenant selection?

A: If the state is funding the program additional questions are permissible. County employees can ask questions that a landlord can't.

## Workshop 2D. THP-Plus: What's the Deal?

### Presenters:

Lynette Stueve, California Department of Social Services  
Cynthia Guilford, California Department of Social Services

**Recorder:** Jessica LePak, The John Burton Foundation

---

### Rules and Regulations for THP-Plus

Welfare and Institutions code 11403.2 and 16522 et. al

Statutes: AB 427, AB 1119, Statutes of 2001

Manual of Policies and Procedures: Part 30, Sections 913-920

### Questions and Answers

Q: Who is eligible for the THP-Plus Program?

A: Emancipated foster or probation youth who also qualify for the Independent Living Program, and have emancipated from a county that chooses to participate in THP-Plus.

Q: If a tenant is abusive to an apartment mate or damages an apartment, is there recourse?

A: Yes! Notice and Eviction – (MPP 30-920 (P))

Q: The tenant's monthly rate may not exceed \_\_\_\_\_?

A: 70% of the actual group home rate for a county effective in 2001. (MPP 30-914.1)

Q: Certification and county plans: Approved THP-Plus counties shall insure that their providers shall collaborate with \_\_\_\_\_.

A: Counties/social workers, probation officers, ILP Coordinators, the Student Aid Commission, EDD One Stop Centers, etc. (MPP 30-916.2)

Q: What is included in an applicable THP-Plus living unit?

A: Condominiums, college dorms, host family models. (MPP 30-916.1)

Q: County and provider plans: criminal \_\_\_\_\_ shall be required from all agency employees.

A: Background checks – (MPP 30-920(i))

Q: May a THP-Plus youth live with a non-participant?

A: No. (MPP 30-920.1(a)) (There is an incorrect reference in (a), referring back to MPP 30-900.13. It should refer to 30-913.1).

- Q: The program shall not discriminate on the basis of \_\_\_\_\_
- A: Race, national origin, gender, sexual orientation, disabilities, etc... (MPP 30-920, section B)
- Q: Prior to implementing a THP-Plus, the county shall provide the CDSS with
- A: Information required to set the rate; Develop and submit a plan. (MPP 30-915.1)
- Q: What are the tenant's responsibilities?
- A: Actively pursue the goals of their Transitional Independent Living Plan. (MPP 30-917)
- Q: THP-Plus programs must allow participants \_\_\_\_\_?
- A: The greatest amount of freedom possible. (MPP 30-920 (f))
- Q: How many youth to a bedroom?
- A: Advised no more than 2. (MPP 30-920 (k))
- Q: Can a group home be a THP-Plus accommodation?
- A: No. (MPP 30-916.14)
- Q: County plans must include at least \_\_\_\_\_?
- A: Procedures for oversight, evaluation, and monitoring, etc... (MPP 30-915.125.)
- Q: How long may tenants remain in the program?
- A: A total of 24 cumulative months. (MPP 30-913.2)

## **Workshop 3A. It Takes a Village: The Host Family Model in THP-Plus**

### **Presenters:**

Frank Motta, Santa Clara County Social Services, Nenita Dean, MSW, Stanislaus County Community Services Agency

Vanessa Payne, Santa Clara County Social Services Agency

Anissa Williams, Edgewood

**Recorders:** Yvette Aguayo, Orange County

---

### Introductions:

The Host Family Model in THP-Plus presents great opportunity for continuity of care and permanency. This workshop focused on many of the basics of the THP-Plus host-family model, including program requirements, approval processes, responsibilities of families and participants, social services, effective ways to provide services to youth and the families with which they live, and how the county child welfare agency can play an important role in the outreach and referral process.

The Host Family Model of THP-Plus is a housing model where in the young adult resides with a supportive adult with whom they have an existing relationship. This could be previous care provider, or a member of the child's family. At San Jose State University, Santa Clara County provides host family sites in dormitories. Santa Clara County organized a series of housing work groups to help define the programs perspective and service philosophy.

### The Planning Process

The involvement of participating youth, host families, services providers and county staff are very important. In the initial planning stage, programs hoping to establish a Host Family Model should consider these basic foundational practices:

- Define your program perspective, service philosophy
- Clarify roles and agreement on program expectations
- Set goals for the model
- Plan how you will integrate new and existing staff

### Examples from panelists:

Santa Clara County is relying on existing providers in the community for ancillary services, i.e. counseling, coaching, and mentoring.

Stanislaus County had collaborated with the community, including youth participants, to determine how the host family plan would be structured. The youth panelists came up with the name “My Home” for their host family program. The program must be introduced to youth before emancipation—via a TDM (Team Decision Making meeting). This way the youth have the opportunity to evaluate the costs and benefits of participation in a THP-Plus program before they emancipate.

### Variations of Rent Payment Structures

The panelists had different solutions to rent payment and roles. In one, youth contribute to rent incrementally and at some point, youth will pay a maximum of \$500 each month. Santa Clara County has a savings accounts set up for each youth. Other Counties contract with a community agency to provide these services. In general, the case manager has a significant role, helping youth solve problems, and providing crisis intervention. ILP services and classes are integrated with THP-Plus placements.

Santa Clara County adopted a payment structure where youth are required to pay rent to the county after their third month in the program. The host family receives \$891 per month and youth gets \$395 per month for personal expenses. This practice helps to enforce an understanding of the appropriate roles in landlord- tenancy relationships, a skill that is important for all young adults. Youth pay the county rent which is then transferred into a savings account after three months. At the four month mark the youth is responsible for an incremental rent payment to the county. This teaches them importance of paying bills and saving.

Along with a structured rent payment schedule, participants receive referrals from social workers, former foster care providers and other community representatives. The certification process begins with the youth identifying a person with whom they feel they have cultivated a “life long connection.” The next step is an intake and orientation session (using the STEP Transitional Independent Living Plan). Afterwards the host family completes the required host family application and provides references, as well gets fingerprinted through live scan to identify possible prior convictions. As part of the screening process, a home visit is scheduled and a designated social worker assesses the relationship between the family and the youth. Before a young adult can enter into a host family the home itself must be certified for safety issues and red flags. Once all of prerequisites have been met, stakeholders in the case will decide whether or not the host is certified. Youth must be fingerprinted also. After the live scan process both the youth and potential host family are invited back to discuss logistics such as contract, laws, duties, etc.

San Francisco County contracts with Edgewood to provide THP-Plus services. Edgewood’s philosophy is to provide services that empower young adult and help them find their voice. Staff at Edgewood encourage youth to pursue their goals and assist them in this process by providing needed services to the host family. They may have family meetings to discuss these issues as they arise. Edgewood works with the family to promote their connections with youth as life long. They utilize many community-based organizations to provide services for both

youth and host families. They have recommended mediation to resolve problems and help teach families to deliver consequences.

In Stanislaus County youth can apply for Host Family housing prior to emancipation. A young person first has to identify a life long connection. The county certifies the provider so that when emancipation takes place the home is ready. Stanislaus holds a TDM before and after emancipation. In these meetings, they make sure that the provider understands difference between the Host Family Model and foster care. They work to reinforce the philosophy of Life Long Connection.

What if the adult identifies by a youth as a life long connection is out of county or out of state? Santa Clara will only place youth in their county, but other counties have different philosophies. San Francisco serves families out of county.

**If you are thinking about implementation of Host Family, get to know the county workers associated with Independent Living Services.**

**What do you want to measure? Decide this in your planning stage.**

**What do you need to cover in your orientation?**

1. Rent payments/structure
2. Savings plans
3. Stipends
4. House Rules
5. Shared Housing Agreements

**The Host Family Certification Process**

1. Background Check
2. Home Visit
3. Local Licensing process when family is also a foster family
4. Orientation
5. Make the experience different from foster care

**Remember:** *Interested Host Families may not always be the best matches.*

**Outcomes and Evaluation**

1. Defining clear and measurable outcomes for the model's goals and objectives

2. Data collection
3. Youth and family participation in evaluation process

### **Key Lessons Learned and Program Aspects in Development**

1. Young adults interested in this model may be parenting
2. Interested Host Families may not always be the best match.
3. Support the model as one of young adult transition (not foster care)
4. Build flexibility and mobility within the model
5. Help youth develop plans for after the 24 months of the program are up
6. Participants seek support from staff; high quality case management is essential
7. Employment must be an on-going discussion item

## **Workshop 3C. Mental Health Service Act and THP-Plus: How Important Funding Sources Can Work Together**

**Workshop Presenters:** Jane Laciste, California Department of Mental Health  
Lynette Stueve, California Department of Social Services  
Cynthia Guilford, California Department of Social Services

**Recorder:** Rose Draft, Orange County Social Services Agency

---

### Introduction:

**Workshop Description:** “The Mental Health Services Act (MHSA) is an important new source of funds for housing development, including housing for transition-age youth with serious mental illness. How can MHSA and THP-Plus work together to meet the needs of this vulnerable population? Joining us to discuss the complexities of combining these funding sources will be a panel of experts. Special topics to be addressed include how MHSA housing is funded, who is eligible to develop and live in MHSA housing, and how providers can access it.”

**Workshop Information:** The following information was presented by Ms. Laciste in a PowerPoint presentation. Ms. Laciste also provided the participants with the attached handout listing the various housing coordinators by their respective counties.

### Mental Health Service Act Housing Program

#### **Prop 63: Mental Health Services Act (MHSA):**

- ⊙ Passed by the voters in November 2004
- ⊙ Requires a 1% tax on personal incomes above \$1 million
- ⊙ Provides significant increased funding, personnel and other resources to support mental health programs

#### **Five Components of MHSA:**

MHSA requires funding to be used to expand community-based public mental health services in 5 areas, called components:

- ⊙ Prevention and Early Intervention
- ⊙ Community Service and Support
- ⊙ Capital Facilities & Technological Needs
- ⊙ Education and Training
- ⊙ Innovation

**MHSA Distribution of Funding:**

FY 05/06—07/08	
55%	CSS (Including 5% for Innovation)
20%	Prevention and Early Intervention (5% for Innovation)
10%	Education and Training
10%	Capital Facilities & Technology
5%	State Admin

**MHSA Housing Program Funds:**

- ⦿ The initial funding for the Housing Program is \$400M.
- ⦿ \$133M of the \$400M is for subsidies.
- ⦿ Each County will have its own planning estimate of MHSA Housing Program funds

**MHSA Housing Program Description:**

- Provides funding for the capital costs and operating subsidies to develop permanent supportive housing for persons with serious mental illness who are homeless, or at risk of homelessness, and who meet the MHSA Housing Program target population criteria.
- Is a unique partnership between DMH, California Housing and Finance Agency and the county mental health departments.

**Permanent Supportive Housing:**

- ⦿ Supportive housing means housing with no limit on length of stay and that is linked to on-site or off-site services.
- ⦿ Services must:
  - help the tenant retain the housing,
  - support recovery and resiliency, and

- Maximize the ability to live and work in the community.

### **Target Population:**

The target population is defined as adults, older adults, transition-age youth with serious mental illness, children with severe emotional disorders and their families, who at the time of assessment for housing services, are eligible for MHSA services and are homeless or at risk of homelessness.

*Homeless* is defined as:

- ⊙ living on the streets, or
- ⊙ Lacking a fixed, regular, and adequate night time residence. This includes shelters, motels and other temporary living situations in which the individual has no tenant rights.

*At risk of homelessness* includes the following:

- ⊙ **Transition-age youth exiting child welfare or juvenile justice systems;**
- ⊙ Individuals discharged from:
  - Hospital, including acute psychiatric hospitals, psychiatric health facilities;
  - Skilled nursing facilities with a certified special treatment program for the mentally disordered;
  - Mental health rehabilitation centers;
  - Crisis and transitional residential settings, and
  - City and county jails (*Not on Parole*)
- ⊙ Individuals who have been assessed and are receiving services at the County Mental Health Department, and who have been deemed to be at imminent risk of homelessness, as certified by the County Mental Health Director.

### **Housing Models:**

The MHSA Housing Program provides funding for both Shared Housing Developments and Rental Housing.

#### **Shared Housing Developments**

Shared Housing Developments are rented to and shared by two or more unrelated adults, each of whom is a member of the MHSA Housing Program target population.

A Shared Housing Development must:

- ⦿ provide a separate lockable bedroom for each adult, and
- ⦿ Ensure each adult tenant has a lease and is responsible for paying rent.

### **Rental Housing Developments**

Rental Housing Developments are apartment buildings with 5 or more units.

A Rental Housing Development includes:

- ⦿ both mixed population buildings and single population buildings, and
- ⦿ All units, including SRO units, shall include at a minimum, a sleeping area, a kitchen area and a bathroom.

### **Income Limits:**

There are no income limits for MHSA Housing Units (*approximately 90% are SSI recipients*), just rental limits provided that:

- ⦿ The MHSA tenant is a member of the target population.
- ⦿ The unit qualifies for the California Welfare Tax exemption.

The unit can be income restricted by other funding sources. (*Similar to the THP+ programs, participation is voluntary; however, unlike the THP+ programs, participation is not a condition of tenancy or receipt of subsidies.*)

### Challenges:

- ⦿ Participation in services is not a condition of tenancy nor receipt of subsidies, which means that participation must be voluntary
- ⦿ How to become a partner in future housing being developed in the MHSA housing program

At this point, Ms. Laciste provided the participants with a list of housing coordinators by county, noting a change in the contact information for Los Angeles County to: *Terri Boykins*. There were no questions regarding the list provided.

Ms. Laciste concluded her PowerPoint presentation and then turned the discussion over to Ms. Lynette Stueve and Ms. Cynthia Guilford who provided clarification regarding the TILP (Transitional Independent Living Plan) and THP+ programs.

They explained that the TILP is a mandatory document for youth in foster care from 15½ years of age to emancipation. The goals developed in the TILP are utilized to form the goals of participation in the transitional housing program. Eligible youth are those who were foster care at the age of 18. Although some youth might be eligible for Independent Living Program services, those leaving dependency prior to their 18<sup>th</sup> birthday are not eligible for the THP+ programs.

The young adults participating in THP+ programs are expected to work towards the goals they have developed. THP+ program eligibility lasts for a cumulative total of 24 months. These do not need to be consecutive months, so some participants might leave and return at a later time. Ms. Stueve noted, though, that while that is an option, participants take a chance that there could be a waitlist when they return to program and they might not be able to access the housing immediately.

#### Question and Answer:

Question: *How are MHSA and THP-Plus used together?*

It would be similar to how WRAP is used with other programs. If Mental Health developed a case plan which was compatible with and supported by a THP+ housing element, then the marriage of both programs would be beneficial to the young adult. Since various counties have different THP+ programs available, for some youth, the single site or host family models might be more appropriate. Youth can then work towards living independently in scattered site apartments.

Coordination and collaboration between the various agencies is essential to ensure that services to youth are not negatively impacted. A good example would be that if you have youth eligible for both THP+ and MHSA, THP+ funding could be used for the 24 months and then funding would switch to mental health. The more partners involved, the more resources will be available to the young adult after the 24 months of the THP+ program are up.

Question: *How is WRAPAROUND used with these programs?*

The use of WRAPAROUND was merely an example of how various agencies can come together to meet the needs of the client. Similarly, MHSA and THP+ can work together to meet certain clients needs if the client meet the guidelines of both programs.

Question: *What if more than one county is involved?*

That scenario would have to be reviewed on a case-by-case basis. It was suggested that those specific questions be referred to Ms. Laciste at the number provided.

Question: *Case scenario – Appropriateness of referral to THP+ for specific case.*

Participant explained that he was from San Francisco County. His caseload consists of both dependent and non-dependent cases. He explained that he is looking at adoptions as the most appropriate option for one the young adults. The group was reminded that if a youth is adopted prior to their 18<sup>th</sup> birthday or if dependency is closed prior to their 18<sup>th</sup> birthday then the young adults are NOT eligible to the THP+ programs.

Question: *What about securing housing?*

Fair Housing Regulations state that housing cannot be targeted towards a certain population with the exception of seniors and Transition Aged Youth (TAY). If housing is used for transition aged youth then there needs to be a plan for when the TAY age out.

*Participant Sara Kimberlin commented that she knows that some leases are open-ended which would lend to these types of cases where the funding might shift. She referred to the Guide to THP-Plus Implementation that was made available at the conference.*

Question: *Are any counties currently doing this successful partnership?*

Yes there are some successful collaborations. Funding always remains an issue with the current budget constraints. We need to continue to recognize that these programs will not handle all of the needs of the youth; however, they can provide the young adults with safe, stable, affordable places to sleep.

Ms. Laciste commended San Francisco County for their success with their programs, specifically complimenting Mr. Newsom's efforts to secure funding sources for various programs, noting that San Francisco County has a multitude of programs taking kids off the street. She also commended Los Angeles County for their various programs, noting that along with San Francisco County, Los Angeles County has increased their efforts to provide a multitude of services to our emancipated youth.

*Alameda County and Contra Costa County participants noted that they have good working relationships in their collaboration between MHSA and THP+ explaining that Alameda County has the STAY program and Contra Costa has the TAY program.*

Conclusion:

Ms. Laciste summed up the presentation by equating MHSA to a 3-legged stool where all parties need to work together – Property Management, Developer/ Owner, Service Provider – or the whole stool (program) would fall. She reminded the participants that they all recognize that it takes a lot of hard work to have a successful collaboration. The need continues to grow and the benefits are worthwhile.

For more information on the MHSA and THP-Plus please contact:

**Jane Laciste, M.A.**

**Chief, Local Program Development**

**(916) 654-3529**

**[jane.laciste@dmh.ca.gov](mailto:jane.laciste@dmh.ca.gov)**

## **Workshop 3D. County Oversight in THP-Plus: Steps To Insure High Quality Programs**

### **Presenters:**

Bedrae Davis, Los Angeles County Department of Children and Family Services,

Lynnette Harrison, Santa Clara County Social Services Agency

### **Recorder:**

Bob Malmberg, Orange County Social Services Agency

---

### Introduction:

The session began with an introduction of the presenters, and a show of hands designating the number of County representatives and Provider representatives in the audience.

County obligations include the assurance of compliance with State regulations, as well as facilitation of the achievement of participant youth outcomes in each of the specified service domains. The Counties must provide CDSS with an accounting of the use of the State THP-Plus funding allocation.

The presenters suggested that County administrators and projected Providers meet early on in the planning process and submit a proposed plan to CDSS with the goal of receiving an approval letter from CDSS THP-Plus Analysts.

### Certifying a Provider:

Santa Clara County submitted a "Request for Plans"(RFP) document, wherein all the desired elements of their County's THP-Plus 80 bed services were specified. Providers were selected based on the proposal submitted in response to this RFP.

Los Angeles County submitted a "Request for Statement of Qualifications", the evaluation for which was not extensive, but rather a "pass / fail" process, which produced a list of 21 potential THP-Plus providers from which LADCFS could choose. There is no guarantee that any of the 21 providers would receive placements. The contracts are set up for one year, with a renewable clause.

The county certifies the Provider Plan, which includes training to the youth by the Provider, clear young adult expectations that are distinct from expectations of youth in foster care, budget information specifying how funds will be expended, and a Contract or Memorandum of

Understanding (MOU) that authorizes the payment. The presenters stated that a contract can encumber funds and be restrictive, and that an MOU can allow for more flexibility.

County oversight is enhanced by a Coordination Team, comprised of ILP staff, Participants, and Providers. The County provides semi-annual site visits to the Provider, and requires quarterly update reports regarding each participant and aggregated reports which is forwarded by the County to CDSS, annual STEP TILP compliance for each participant, proximity to public transportation for housing locations, fire and safety assessment. Any deficiencies require a 60-90 day turnaround of compliance. There is an annual fiscal review of the Providers, and a semi-annual expenditure report. The County must review its THP-Plus Plan annually, and re-certify providers annually submitting changes and updates. LADCFS will use the John Burton Foundation THP-Plus Tracking System, and Santa Clara is using the Efforts To Outcomes database. Counties will also ensure compliance by way of at least annual site visits, focus groups with participants, and client satisfaction surveys. This data is also incorporated into the annual report to CDSS.

The Presenters suggested that Counties should prepare their own County-specific THP-Plus Plan. It was also suggested that there be dedicated County staff, whose focus is entirely THP-Plus. The more flexibility the Counties have with their funds, the easier to achieve the County THP-Plus goals. There is a need to develop housing agreements, forms, and Emancipation Fund Accounts. Santa Clara County has been able to obtain access to the Account system set up originally by their Public Guardian-Public Administrator's office in behalf of their consumers, so that funds from youth participants in THP-Plus can be deposited, allowing no access to the funds until the youth exit the HP-Plus program.

Challenges and Issues that have been encountered:

The County administration of the Host Family THP-Plus component in Santa Clara County requires staff to take on all the same service domain responsibilities that their Providers have for the other THP-Plus components. Santa Clara allocates \$1,800/youth participant for the process, and sets aside \$500.00 per youth for Case Management Provider services, with \$1,300.00 for housing, meals, and youth stipend elements.

Program policies are often restrictive in nature, and issues for this young adult population regarding curfew, and consequences for violations of expectations must be addressed differently from approaches used with foster youth. The County must assure that Providers adhere to the CDSS regulations and the recommendations on the John Burton Foundation Internet site.

There will likely be issues of equity when there are multiple qualified Providers, in the division of THP-Plus applicant referrals. It is important to maximize the fiscal allocations. There will be empty slots from time to time

Fair Housing standards must be applied in each of the THP-Plus components. It was suggested that requests to CDSS for the provision of this training be made. It also must be made very clear to the participants that the maximum duration of the housing portion of this project is 24 months.

#### Payments to Providers and Stipends to Youth Participants:

Orange County and Santa Clara County both use CalWIN 9X Sub-Payee Type as a vehicle for distributing and accounting for these payments. This retains history for accounting and prospective planning purposes. LADCFS provides monthly invoices based on days in the program. The provider is paid one month in arrears in all three presenter counties.

#### Separation of Duties:

Presenters suggest a separation of duties, not only as it relates to Services and Landlord requirement as mentioned in the John Burton Foundation materials, but also as it relates to Contract, Fiscal Services, and Program services.

#### Question and Answer:

*Q: When will LADCFS reopen its bidding process?*

A: Bidding reopens May 2009.

*Q: Is there a plan to allow for County Administrative Costs in the CDSS allocation to Counties?*

A: A recommendation to CWDA is pending, which would include a 10% apportionment to the County of the total CDSS allocation to that county, whereby at least some of the County costs for administering the process might be reimbursed.

*Q: How do you extend slots?*

A: Counties can use vacancy factor information to maximize the use of slots, if your County Administrators will allow you take risks on committing to serve more youth during a specific period than there are THP-Plus Plan bed allocations to the County. An example is that Santa Clara has 80 planned beds, but has had as many as 98 youth serviced at a time. Consultation with CDSS is essential in these cases.

*Q: What is the turn-over rate?*

A: Some youth stay as briefly as 3 days only, whereas most stay much longer. There is some transience, as well as some movement among the Host Family, Scattered-Site Apartment, and Single-Site Dormitory THP-Plus components. The presenters suggest allowing as much flexibility of movement as possible to enhance youth participant satisfaction with the process.

*Q: Will there be participant youth from other California County jurisdictions?*

A: The presenters and Orange County stated that there have been participant youth from other county jurisdictions, but that the majority of the youth participants have been from their own respective Counties. The Jurisdiction County must certify the eligibility of the youth participants, so communication with the County of jurisdiction is essential, both for certification and for outcome data collection.

*Q: What is the THP-Plus Technical Review form left at the back table?*

A: This is a form used by LADCFS Contracts team.

*Q: How do the Presenter Counties go about the Provider Certifying Process?*

A: LADCFS uses the check list found on the John Burton Foundation Internet site, and the 2-page CDSS document. Santa Clara County's Request for Plans document contained all expectations, and selection as a Provider in that process certified the Provider. Orange County's Request for Proposals vetting process leading to an Orange County THP-Plus Provider Contract constitutes the certification process.

*Q: What is the role of the ILP Provider; what do they sign?*

A: Santa Clara County receives an invoice from the providers. The invoice is then approved by the ILP Supervisor, who also certifies program data updates; ILP is the gatekeeper for Santa Clara County's THP-Plus services.

## 2008 THP-Plus Institute

### III. Faculty Biographies

**MR. ESTEBEN ALLARD-VALDIVIESO** is a Housing Specialist for First Place for Youth. Esteban is responsible for the day-to-day and long-term management of youth rent collection, maintenance and repairs, youth moves, leasing processes, and landlord/tenant issues. Esteban previously worked in Berkeley for Housing Rights, Inc. as an Intake & Referral Specialist, providing renter's rights counseling and referral. His experience in mediation and tenant law provided an invaluable lesson for working in Property Management at First Place for Youth. Esteban graduated from University of California, Berkeley in 2004 with a Bachelor's degree in Philosophy and Psychology.

**MS. DEBORAH BRESNICK, LCSW**, has been working for Santa Cruz County Family and Children's Services since 2000. After five years as a social worker, working primarily with youth aging out of care, Ms. Bresnick became an analyst and is now responsible for developing and providing oversight to youth programs, such as the Independent Living Program and THP-Plus. In addition to her work on these programs, Ms. Bresnick is involved in several system improvement projects for Santa Cruz County

**MR. JERRY CULLINEN** works in the Civil Rights Enforcement Branch of the US Department of Housing and Urban Development out of Santa Ana, California. He has been with the US Government for over 25 years. After graduating from USC in Los Angeles, he enlisted in the Army and was stationed in Ansbach, Germany. Mr. Cullinen worked as an investigator at EEOC in Los Angeles for five years, then went to HUD in 1990 as an Equal Opportunity Specialist, a position he has held up to the present.

**MS. BEDRAE DAVIS** is a Children's Services Administrator with the Los Angeles County Department of Children and Family Services. She presently serves as the THP-Plus Program Manager and was instrumental in developing and implementing the program in Los Angeles County. Additionally she manages DCFS' HUD contracts and the rental assistance program for Emancipated Foster Youth. Previously, Ms. Davis held positions as a Family Preservation Program Analyst, Group Home and Foster Family Agency Program Auditor, and also served as an Emergency Response Children's Social Worker and a Dependency Investigator. Bedrae's educational background includes a B.A. degree from USC in Psychology and a Master's Degree in Sociology from California State University Dominguez Hills.

**MS. NENITA DEAN, M.S.W.** has years of experience both in the field of eligibility and social work. She has worked for Stanislaus County Community Services Agency for 21 years as an eligibility worker, social worker, manager in CalWORKs and supervisor and manager in CWS. She is currently the Manager III overseeing the Permanency Unit, Adoptions, Foster Care eligibility, Foster Parent recruitment, training and licensing, ILP, and Connected by 25I and Transitional Housing Plus (THP-Plus). She has worked in partnership with the ILP/THP team, community partners, CDSS and John Burton Foundation in the full implementation of the Host Family Model of THP-Plus program for Stanislaus County and has provided several presentations about this county program.

**MS. JENNIFER DUNCANSON** has been working with at risk youth for 13 years. She began her work at Rubicon Children Center in Fremont in 1994 as a support staff. In 1998 she became a House Manager for the girls' house where she remained at Rubicon for six years. In 2000 she transitioned over to Unity Care as a House Manager for the girls' house. Jennifer then relocated to Benicia in 2001 in Solano County and began working with EDD kids at Harvest Valley School as an EA (Educational Asst) for two years. She continued her work with at risk youth and began working for UHS-School in Vacaville in 2003 as an EA and transferred over to the Vallejo site which opened in 2005 where she was promoted to Transportation Supervisor and worked for UHS until January 2008. She is currently working for First Place for Youth in Fairfield as a Youth Advocate with a case load of 15. Jennifer has an AA in Administration of Justice and Bachelors in Business Mgt. She will be working on her MSW in the coming year.

**MS. CYNTHIA M. GUILFORD** is a Policy Analyst with the Department of Social Services. As a statewide Transitional Housing Coordinator, Cynthia provides program policy oversight, direction, and interpretation to counties and the public on Transitional Housing (THPP/THP-Plus) programs. Previously Ms. Guilford held positions with the State Department of Developmental Services, Sacramento Foster Youth Services, and Sacramento County DHHS. Cynthia's: earned her B. A. in American Multicultural Studies/Psychology from Sonoma State University and she is in the final year of the Master of Social Work (M.S.W.) program at CSU Sacramento. In addition, Cynthia is a foster/adoptive parent of special needs children.

**MS. CONNIE HANDLIN** is the Regional My First Place Manager for Alameda and San Francisco Counties. Before coming to First Place for Youth, Connie worked at Larkin Street Youth Services in San Francisco for 5 ½ years. During her tenure at Larkin, Connie had the experience of working directly with 4 different programs providing housing to homeless and runaway youth between the ages of 18 – 24. Prior to Larkin, Connie had worked at Rubicon Children's Center in Fremont, California for about a year. In that time, she went from being a Case Manager to the 30 foster care youth in the 5 group homes ages 6 – 18, to being a Group Home Administrator/House Manager for the adolescent boys group home. This was

immediately following a year spent as a Youth Outreach Counselor at Barnard White Middle School in Union City, California, where she worked with low income youth in the school that were experiencing difficulty with behavior at school. Connie has a master's degree in Marriage and Family Therapy and bachelors degrees in Communications and Linguistics.

**MS. LYNETTE HARRISON** is the Senior Management Analyst at the County of Santa Clara, Social Services Agency, where she has worked since 1989. During her employment with Agency she has worked in Governmental Relations and Planning, the Department of Family and Children's Services, School-Linked Services, Financial Management Services and most recently the Office of Contracts Management. Her experience includes legislation tracking, program development, financial planning and contract management. Lynette received a B.A degree in Sociology from Hayward State University and holds a Master's degree in Public Administration.

**MS. SARA KIMBERLIN**, MSW, is a Research Fellow at the John Burton Foundation, where she has played a lead role in the design and implementation of the THP-Plus Participant Tracking System. She has nearly 10 years of professional experience in administration and evaluation at human service agencies. Currently a doctoral student in Social Welfare at UC Berkeley, Sara's research interests include housing, family poverty, and child welfare issues.

**MS. TARA LAIN MA**, ETO Self-Evaluation Lead, UC Berkeley Center for Social Services Research. Ms. Lain has previously worked as a protective services social worker in California, working in case management, program evaluation, and outcomes development.

**MS. AMY LEMLEY** is the policy director of the John Burton Foundation, founded by former California State Senator John Burton. The Foundation is dedicated to improving the quality of life for California's homeless children and developing policy solutions to prevent homelessness. In her role as policy director, Ms. Lemley develops and implements the legislative, regulatory and administrative strategies to achieve the goals of the Foundation. Prior to joining the John Burton Foundation, Ms. Lemley was the executive director and co-founder of The First Place Fund for Youth, a nationally recognized program providing affordable housing and supportive services to former foster youth.

**MR. JOHN MURRAY** is a Senior Planning Analyst with San Francisco Human Services Agency (HSA). He serves as HSA's THP+ liaison to the State and its community providers. In addition he coordinates the planning, development and expansion of San Francisco's THP+ program. Prior to becoming a Planning Analyst, he worked with the Agency's Workforce Development

Division/CalWORKs program as a Vocational Assessor. John holds a Masters Degree in Rehabilitation Counseling from the Illinois Institute of Technology.

**MS. SUSAN PARADISE**, MFT, is a Program Manager for Santa Cruz Community Counseling Center. Ms. Paradise manages the Independent Living Program and THP Plus in Santa Cruz, providing community-based housing services, case management, and mental health services to current and former foster and probation youth aged 15-24. She has been working with youth and victims of violence in roles of advocacy, therapy, and program development for the last 12 years.

**MS. VANESSA PAYNE** is a former foster youth and has dedicated the last five years to advocating on behalf of current and former foster youth. She has served as the President of Youth Advisory Board for the past two years and looks forward to becoming an adult supporter when she ages out of the Connected by 25 initiative in November. She is a senior at San Jose State University double majoring in Behavioral Science and Psychology and looks forward to receiving her Bachelor of Arts in Fall 2008. She is currently a Youth Education Scholar (YES), Connect Motivate and Educate Scholar (CME), Kumin Scholar, and Robert N. Chang Scholar. Vanessa has worked at the Santa Clara County Department of Family and Children's Services since 2007 as the Transitional Housing Liaison for the THP Plus program. In the future, Vanessa plans to raise her children and pursue her Master's in Social Work.

**MS. SHARON RAPPORT**, MFA joined the Corporation for Supportive Housing as November 2006. She advances and coordinates efforts to implement a statewide California policy agenda across a range of issues and participates in the state's planning process to end long-term homelessness. Prior to joining CSH, Ms. Rapport served as a Congressional Fellow for U.S. Senator Jack Reed (D-RI), acting as the lead on housing and judiciary issues. She previously spent 11 years working for the Office of Hearings and Appeals, Social Security Administration, Los Angeles and San Diego, most recently as Hearing Office Director. During her tenure as Staff Attorney for Inland Counties Legal Services, Indio, CA, Ms. Rapport employed innovative advocacy strategies to litigate on behalf of indigent clients. She earned an MFA from Antioch University, a JD from George Washington University, and a BA from the University of California, Los Angeles

**MS. WHITNEY RHODES** is 21 years old and a survivor of the child welfare system. Born with a passion for advocacy and service work, she began volunteering at a summer camp for disabled children at the young age of eight. Her resiliency, insightfulness, and experience have prepared her for her current job as one of Sacramento County Independent Living Program's Youth Leaders. With the Independent Living Program, Whitney enjoys advocating for her

fellow brothers and sisters in the system and speaking up for the youth who have not yet found their voice.

**MS. LYN STEUVE** has worked in the Independent Living Program Policy Unit as a Transitional Housing Coordinator since 2007. Her previous assignment was working on CDSS children's programs around fiscal and eligibility issues (2000-2007). Lyn became a Transitional Housing Program Coordinator at a time when the THP-Plus program expanded from 17 counties in Fiscal Year (FY) 2006/2007 to 46 counties (projected) in FY 2008/2009 and has seen program activity grow exponentially. Lyn believes in helping the customer, and she is looking forward to meeting you and talking about the exciting changes happening in THP-Plus.

**MR. JOHN WAGNER** was appointed Director of the California Department of Social Services by Governor Arnold Schwarzenegger in April 2007. He is responsible for the operation of programs with an annual budget in excess of \$19 billion and more than 4,000 employees. The Department administers critical services to aid and protect California's most vulnerable populations including children, adults, elderly, and the disabled. Prior to his appointment, Wagner concurrently served in the Massachusetts Executive Office of Health and Human Services as Assistant Secretary for Children, Youth and Families and as Commissioner for the Department of Transitional Assistance. With nearly two decades of experience in human services, he has served as senior policymaker and advisor to six gubernatorial administrations in Wisconsin and Massachusetts. Mr. Wagner holds a master's degree in public administration from the John F. Kennedy School of Government at Harvard University, a master's degree in public policy from Georgetown University and a bachelor's degree in political science and French from Marquette University.

**MS. ELIZABETH WRIGHT** is the Housing Manager for First Place for Youth, Elizabeth Wright is responsible for overseeing the process of identifying, securing, and managing quality affordable rental properties throughout Alameda, Contra Costa and Solano Counties for youth participants. Before coming to First Place for Youth Elizabeth Wright worked as a Housing Policy Advocate & Community Organizer for the Los Angeles Coalition to End Hunger and Homelessness and as a Policy Advocate for the Southern California Association for Non Profit Housing. Ms. Wright graduated from California Polytechnic University, Pomona with a Bachelors of Science in Urban and Regional Planning and a minor in Regenerative Studies