

Gateway Housing Principles and Program Components

Target Populations

Gateway Housing is primarily intended for homeless New Yorkers with disabilities and other significant barriers to housing stability. Approximately 50% of homeless single adults and a smaller percentage of homeless families face homelessness and barriers to housing stability caused or exacerbated by:

- Mental illness (including severe personality disorders)
- Substance abuse
- Domestic violence
- Physical disability (including conditions related to old age and chronic illness)
- Recent incarceration

Homeless New Yorkers with these conditions and experiences can often be identified by a higher incidence of:

- Extended periods of homelessness;
- Multiple returns to shelter; and
- Involvement with the child welfare and/or criminal justice systems.

Gateway Housing programs are typically structured to provide specific program services to residents facing similar challenges. But Gateway Housing can effectively serve a mix of residents who have varied service needs. These mixed population programs work best when residents share some unifying characteristic (i.e., older adults, or young mothers with infants), even as they may require different levels of service intensity.

Gateway Housing Principles

The Gateway Housing program model is effective because it offers:

1. Community integration
2. A person-centered approach using evidence-based practices
3. Robust staffing, credentialed supervisors & ongoing professional development
4. Continuity of care and after-placement supports
5. Capital financing based on well-established real estate principles
6. Measurements that track nuanced, long-term outcomes.

1. Community Integration

A homeless shelter is often viewed as a burden on the surrounding community, with shelter residents typically isolated from community life and resources, usually for months or years at a time. Gateway Housing seeks to integrate its programs with the community, by linking residents to nearby services and supports, and by offering outward-facing amenities (like early childhood education, clinics or cultural institutions) available to both community and transitional housing residents. In doing so, the Gateway model reduces the isolation, stigma and trauma of homeless episodes, while improving quality of life of all community residents.

2. A person-centered approach using evidence-based practices

The Gateway Housing program model employs a person-centered approach in which a service plan is developed in conjunction with the resident individual or family. This plan maps out the steps the resident(s) will take to address challenges and achieve independence. Staff will assist the resident(s) to identify and achieve these personal goals using evidence-based and promising best practices as *key program components*:

- Motivational Interviewing
- Critical Time Intervention
- Wellness Self-Management
- Medication Management
- Money Management, including Representative Payee
- Services that address children's needs, not just those of the head of household
- DHS assessment shelter status that allows the program to identify and accept suitable residents from other shelters in the system.

3. Robust staffing, credentialed supervisors & ongoing professional development

The Gateway Housing program model relies on robust staffing to provide the intensive services required by homeless families and individuals with special needs. Along with experienced, credentialed supervisors and ongoing training, this additional staff can provide a more comprehensive level of care to better help households address the challenges they face during & after homeless episodes. *Key program components:*

- **Lower staff to resident ratios** that allow a minimum number of interventions per week with each resident; importantly, children are included in ratio calculations
- **Experienced and credentialed supervisors and professional staff** – Masters-level licensed supervisory staff signs off on social service plans
- **Continued professional development**, with consistent staff training requirements and performance metrics
- **Regular cost-of-living adjustments** to staff salaries to account for inflation
- **One-stop shopping for services**, with medical, psychiatric, early childhood/after-school programs and other ancillary professional services coordinated and delivered on-site.

4. Continuity of care and after-placement supports

The most successful transitional programs for single adults offer follow-up support to residents who have recently moved into permanent housing. By maintaining relationships with staff they trust during the critical transition to life in the community, residents are less likely to return to shelter, and in better position to achieve other long-term positive life outcomes. Similar after-placement care offered in the Home to Stay pilot has likewise been proven to achieve reductions in returns and shelter length of stay.

Key program component: The Gateway Housing model requires sufficient staffing and resources to offer these after-placement supports to follow up on residents making the transition to permanent housing. For example, former residents may continue to require rep payee or medication management to remain stably housed. Gateway programs must have the capacity and flexibility to provide such support, whether it's providing a community to which former residents can return to socialize, or the option to allow a former resident to come back to stay a short while with staff she knows and trusts until a more appropriate permanent placement can be found.

5. Capital financing based on well-established real estate principles

The Gateway Housing model adapts modern financing and asset management strategies used in affordable housing development that will ensure that transitional housing buildings are livable and remain in good repair, not just on the first day of operation, but for decades to come. *Key program components include:*

- spatial design of private and public spaces that supports and encourages resident success
- 20-year service contracts that can leverage private financing
- 30-year underwriting that ensures building income will continue to cover operating costs
- Capital and replacement reserves controlled by the provider for necessary periodic renovations and repairs.

6. Measurements that track multiple nuanced, long-term outcomes

While the Gateway Housing model can be expected to reduce the duration of homeless episodes, it will attempt to achieve and measure other meaningful outcomes, including:

- Fewer returns to shelter (the primary goal and metric)
- Decreased violence in transitional settings
- Improved school attendance and educational achievement for children
- Expanded opportunity for adults, including GED, ESL proficiency, job training and when possible, employment
- Less involvement with child welfare and criminal justice systems.

A Better Way to Measure Success

Gateway Housing goes beyond the simple metric of "left shelter" in order to help residents achieve the more meaningful outcomes of long term housing stability, employment and community integration. This approach will result in a shorter average length of stay in shelter, even as providers' expertise may determine that a particular individual or family requires a longer length of stay in order to achieve the most appropriate placement and the best chance for extended stability. By considering and measuring the outcomes of homeless individuals and families in this comprehensive manner, Gateway Housing positions them for a more meaningful kind of success.