Applicable Best and Emerging Practices for Homeless Crisis Response System Programs

**Best and Emerging Practices** are generally considered to be practices, approaches or processes to rendering housing and/or supportive services to individuals experiencing homelessness that are proven to work in producing greater than average results. There are several ways that Best Practices may come to gain notoriety and their labels suggest the method; "time-tested" meaning the strategy has not necessarily been studied academically, rather a long history of success is the indicator; "emerging" meaning that all indications look promising, yet the results are not in; and the strongest form, "evidence-based" meaning backed up by peer-reviewed academic studies clearly indicating statistical significant results.

a) **Consumer Involvement/Peer Support and/or Mentorship**

Integrating people with experiences of homelessness, mental health issues, substance use, and trauma into mentorship, staff and leadership roles in homeless service agencies. ([SAMHSA Homelessness Resource Center (HRC)](https://www.samhsa.gov/hhs/homelessness-resource-center-hrc))

b) **Trauma Informed Care**

Research has shown that individuals who are homeless are likely to have experienced some form of previous trauma; homelessness itself can be viewed as a traumatic experience, and that being homeless increases the risk of further victimization and re-traumatization. “Trauma Informed Care is a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma…that emphasizes physical, psychological, and emotional safety for both providers and survivors…and, that creates opportunities for survivors to rebuild a sense of control and empowerment.” (Hopper, Bassuk & Olivet, 2010, pg. 82)

Trauma Recovery and Empowerment Model (TREM) is one of many trauma informed care models. ([SAMHSA HRC Resources](https://www.samhsa.gov/hhs/homelessness-resource-center-hrc))

c) **Positive Youth Development**

Developmental model that provides ongoing and intentional opportunities for young people to participate in meaningful activities. ([RHYIssues](https://www.rhyissues.org)), 2012)

d) **Motivational Interviewing**

Motivational Interviewing is a collaborative, person-centered approach to elicit and strengthen motivation to change. It offers providers a useful framework for being with and interacting with people who are experiencing homelessness or struggling with substance use, mental illness, and traumatic experiences. Motivational Interviewing is rooted in an understanding of how hard it is to change learned behaviors, many of which have been essential to survival on the streets. This practice is recommended for broad application across programs. ([SAMHSA HRC Resources](https://www.samhsa.gov/hhs/homelessness-resource-center-hrc))

e) **SOAR (SSI/SSDI, Outreach, Access, Recovery)**

An evidence based practice model designed to increase access to disability income programs for eligible adults who are experiencing or at risk of homelessness and have a mental health and/or co-occurring substance use disorder. ([SOAR Works](https://www.soorworks.org))
f) **Service Integration (Wrap Around Services)**

Formally collaborating with medical care, oral care, behavioral care, employment support, and/or other resources in a household’s life to provide wraparound client-centered services and meet the needs of each individual in the household wherever they may be in their life.

g) **Housing First**

An evidence-based practice that centers on providing permanent housing first and then providing services as needed and requested. The goal of "housing first" is to immediately house people who are homeless. Housing comes first no matter what is going on in one's life, and the housing is flexible and independent so that people get housed easily and stay housed. ([USICH](https://usich.org/))

h) **Supported Employment**

An approach to helping people with disabilities find and keep competitive employment within their communities. Supported employment occurs within the most integrated and competitive setting that enables individuals with disabilities to interact with non-disabled persons to the fullest extent possible. ([SAMHSA](https://www.samhsa.gov/))

i) **Harm Reduction Approach**

Harm reduction is a set of practical strategies that reduce the negative consequences associated with drug use, including safer use, managed use, and non-punitive abstinence. ([SAMHSA HRC](https://www.samhsa.gov/))

j) **Progressive Engagement Approach to Client Services**

Services start with the least intensive service and amount of subsidy and progress to additional services only if necessary. To the extent feasible, client choice should drive the housing options and services offered. Participation in services is voluntary. ([USICH](https://usich.org/))