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FOR HEALTHY LIVING  
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# MEETING THE BEHAVIORAL HEALTH NEEDS OF FAMILIES EXPERIENCING HOMELESSNESS

SHAMEIKIA I. SMITH, MSW, LSW  
EXECUTIVE DIRECTOR OF SHELTER SERVICES  
YMCA OF CENTRAL OHIO

COHHIO WEBINAR  
June 10, 2020

**"The time is always right to do what  
is right."** (Oberlin College Commencement Speech, 1965)

**Reverend Dr. Martin Luther King, Jr.**

# THE STATE OF HOMELESSNESS:2020

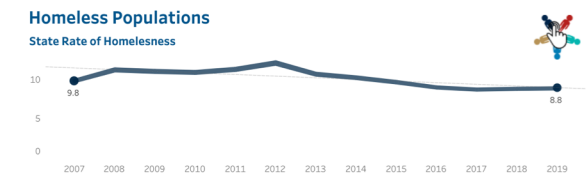
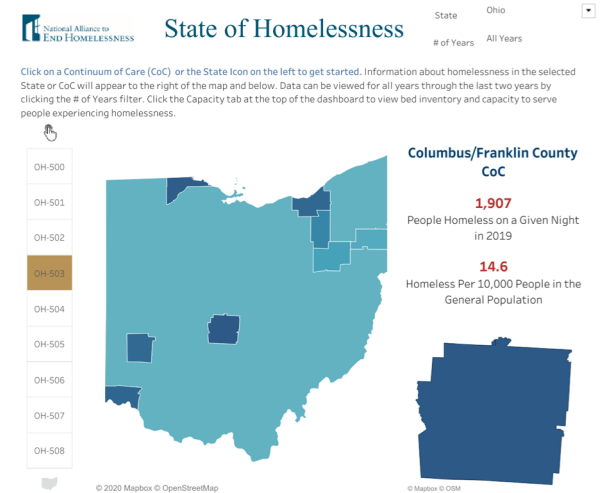
According to the U.S. Department of Housing and Urban Development, US Census Bureau

In 2007, there were **432** people in families

In 2019, there were **557** people in families

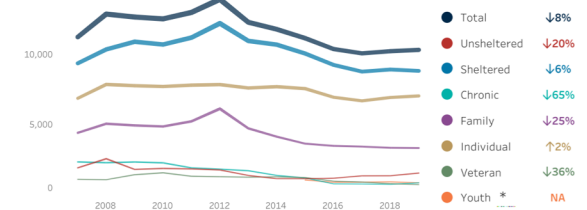
(Increase of **29%** for Columbus COC/Franklin County; decrease in **32%** for State of Ohio)

<https://endhomelessness.org/homelessness-in-america/homelessness-statistics/state-of-homelessness-2020/>



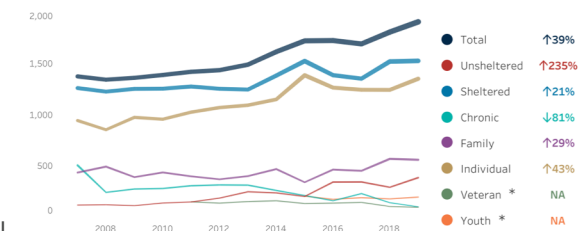
**State Homelessness by Population**

Between 2007 and 2019, Ohio's **Total** homeless population changed by **↓8%**, the **Sheltered** population changed by **↓6%**, and the **Unsheltered** population changed by **↓20%**. See list for statistics on other populations.



**CoC Homelessness by Population (select a CoC above)**

Between 2007 and 2019, Columbus/Franklin County CoC's **Total** homeless population changed by **↑39%**, the **Sheltered** population changed by **↑21%**, and the **Unsheltered** population changed by **↑235%**. See list for statistics on other populations.



# WHAT HAS “CHANGED” FOR FAMILIES IN THE LAST 10 YEARS?

1. ACCESS TO ADEQUATE EMPLOYMENT
2. ACCESS TO AVAILABLE AND ADEQUATE HOUSING
3. SHELTER CAPACITY IN 2019, WAS AT **95%** UTILIZATION WITH NO EMPTY/AVAILABLE BEDS AND 14 FAMILIES SLEEPING OUTSIDE
  - In 2014, our system expanded Family Shelter capacity by building another Family Shelter
    - In 2007, capacity was 141%
    - In 2014, capacity was 46%
    - In 2015, capacity was 63%
    - In 2016, capacity was 97%
    - In 2017, capacity was 112%
    - In 2018, capacity was 85%

Source: US Department of Housing and Urban Development, 2019 Annual Homeless Assessment Report to Congress (2020).

# HOW DO WE CONTINUE TO SERVE & MEET THE NEEDS OF FAMILIES IN SHELTER

- ✓ Stick to the **mission**:
  - ✓ Assisting families rapidly exiting Shelter
  - ✓ Shelter is a temporary intervention it is not a permanent fix
  
- ✓ Stick to the **core principles of service**:
  - ✓ Focus on the clients - understand and focus on your clients' needs and expectation
  - ✓ Manage the work - let the people organize around it
  - ✓ Evolve policies to improve client and program outcomes - policies determine the characteristics of your service delivery system; evolve policies so that client experiences (satisfaction) and program outcomes are improved continuously

# ASSISTING FAMILY RESOLVE THEIR HOUSING CRISIS

## Empower families

- Empower families to use their voice; Ask them what they need to resolve their housing crisis (stop making assumptions)
- Match families with case management staff
- Empower families with choices; Shelter is not a one size fits all model and the supports offered should be flexible
- Families are the experts of their lives (***not you!***)

# ...CONTINUING TO ASSIST FAMILIES

## **Educate staff**

- This is not a one-time thing at hire
- Training is ongoing because we are dealing with people (not products - people change)
- There are core and foundational trainings that Shelter staff need; Then there are specific trainings related to specific topics
- Be trauma competent, not just trauma-informed
- Provide opportunities for staff to use their time out
  - Self-Care is important

## ***Evaluate staff continuously***

# ...CONTINUING TO ASSIST FAMILIES

## Engage additional resources & partnerships

- Educational partnerships
- Employment partnerships
- Health partnerships
- Daycare partnerships
- Volunteer partnerships (Volunteers = donors)
- Donors/Philanthropic relationships
- Transportation partnership
- Social Clubs/Religious Organizations as partners

# THIS IS A MARATHON, NOT A SPRINT!

## **Remember this is a marathon and not a sprint**

- Progressive Engagement is an important approach to support families
  - Voluntary and flexible participation by families
  - Critical thinking and problem solving shared between the family and provider
  - Starts with a little bit of support, based on what families identify they need
  - Connections made to community resources
  - Builds on family resiliency and strengths
  - Focused goal: to quickly resolve the immediate crisis of homelessness



# THIS IS A MARATHON, NOT A SPRINT!

- Keep in mind that we are all experiencing this crisis (in addition to others) together
  - We are going to make mistakes
  - We are going to feel like we are not doing enough
  - We are going to feel like we are doing too much (going overboard)
  - We have to expect that clients will not be enthused about changes
  - We have to expect that our intentions as positive as they might be, may be overshadowed by one horrible interaction and one really bad day

**Right now we are all experiencing a global pandemic**

# MEETING THE NEEDS OF FAMILIES IN SHELTER

## **BC (Before COVID-19), what did Shelter look like?**

More face-to-face and “involvement” with families

- Transporting families directly
- Meeting in offices, common spaces (pretty much anywhere when stopped)

More interactions with families

- Checking in with families at the front desks/entrances/lobbies
- Checking in with families at dinner time

Programming onsite daily

Volunteers interacting with families and staff

# DC (DURING COVID-19), WHAT HAS SHELTER LOOKED LIKE?

## ***Shelter is a bit more prescriptive:***

- Every family is asked a set of questions before Shelter entry and at the point of intake and each day they enter and exit
- Facility has a more rigid feel in terms of places/spaces where folks can go
- Volunteers, Groups & Workshops have been cancelled
- Clients are meeting with staff (case management) via telephone/video
- Clients are assisted through a “plexiglass” window
- For now it seems really sterile

## ***Clients are staff are more isolated:***

- There is no person-to-person contact, unless absolutely necessary
- Staff are learning how to navigate this new normal
- Clients are learning to navigate this new normal

# WHAT WILL HAPPEN AC (AFTER COVID-19)

***Some things we will keep/maintain, because we have learned through this process and it actually makes better sense for our entire operation***

- Facility Operations
- Food Service Operations
- Support Services
- Direct-Client Services

***There are some things that we will eventually stop doing***

***We have to constantly remind ourselves that we are providing an essential service, thus we have to prepare ourselves and our clients for what this essential service will look like moving forward***

- We seek to serve with dignity, compassion and respect

“KEEP THE FOCUS ON HOUSING. WE’RE WORKING WITH FAMILIES ON AN INDIVIDUAL BASIS, PROVIDING SERVICES ONLY AS NEEDED. IF THINGS ARE GOING SMOOTHLY, THERE IS NO NEED TO BURDEN FAMILIES WITH EXTRA HOOPS TO GO THROUGH.”

DANA PETERSON, RAPID RE-HOUSING COLLABORATIVE COORDINATOR, CCS/FAMILY HOUSING NETWORK





# THANK YOU

**Shameikia I. Smith, MSW, LSW**  
**Executive Director of Shelter Services**  
**YMCA OF CENTRAL OHIO**  
**614 689 2020 ext. 8310**  
**[shameikia.smith@ymcacolumbus.org](mailto:shameikia.smith@ymcacolumbus.org)**  
**[www.ymcacolumbus.org/vanburen](http://www.ymcacolumbus.org/vanburen)**