

PROVIDER ALLIANCE TO END HOMELESSNESS

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Councilmember Mitch O'Farrell, Chair
Los Angeles City Council, Homelessness & Poverty Committee
200 N. Spring Street, Room 480
Los Angeles, CA 90012

Date: August 2, 2019
Submitted in HSP Committee
Council File No: 19-0720
Item No.: 3
Deputy: PUBLIC

Dear Councilmember O'Farrell:

We, the undersigned, are members of the Domestic Violence Caucus of the Provider Alliance to End Homelessness. We have collectively agreed on these recommendations for Los Angeles County and City Homeless Housing, Assistance, Prevention Program Funding to Address Survivors of DV and Women's Homelessness.

OVERVIEW

Based on our collective experience in providing services for women and survivors of domestic violence who are experiencing homelessness, we know that the vulnerabilities of this population are unique; they require specific attention and services. However, the majority of services currently offered in the City and County of Los Angeles fail to address a woman's higher likelihood of having survived gender-based violence, her unique health care or job-training needs, or the ways in which her goals for her future may vary from those of a homeless man.

- There was a 13 percent increase in women experiencing homelessness than the previous year.
- Across the county 18,000 women are experiencing homelessness.
- On any given night in Los Angeles City, there are enough shelter beds to accommodate one in 12 single women experiencing homelessness.
- Survivors who are actively fleeing violence makes up 7 percent (3,940 adults) of the homeless population overall (by way of comparison, veterans make up 7 percent of the overall homeless population).
- There are only 1,000 beds available for people fleeing DV in LA City and County.
- Across the LA Continuum of Care, the percentage of homeless adults reporting having experienced DV at some point in their lives jumps to 40 percent (40%).

As such, we recommend an expansion of Los Angeles City and County strategies to serve this specific population. We recommend an expansion of the existing LA City's 3.4 *Vulnerable Population's Policy* to this more robust City strategy to address ending women's homelessness. As for the County of Los Angeles, we continue to advocate for this specific strategy to acknowledge the needs of women, especially since of the eight listening sessions that were held throughout the

County prior to the passage of the 19-20 Measure H budget, five sessions listed DV and women as priority populations in need of more focused interventions.

This recommended strategy follows analysis and recommendations made by the 2019 LA City Women's Housing Gap Analysis, Downtown Women's Needs Assessment, Domestic Violence Homeless Services Coalition 2018 Focus Group Report, and LAHSA's Ad Hoc Committee on Women's Homelessness.

STRATEGIES

Data Collection and Tracking

- Deepen analysis of women and homelessness from LAHSA in the annual demographic survey by disaggregating by gender data from the demographic surveys conducted alongside the PIT Count and reporting on gender parity of housing placements using HMIS data.
- Conduct a City and County housing gap analysis from annual LAHSA PIT count for homeless women annually.
- In addition to quantitative data, ensure that the qualitative voice of women with lived experience of homelessness is integrated into decision making via committee positions, focus groups, surveys, and other community-based opportunities.

Training and Technical Assistance

- Require trauma-informed services in all contracts and establish monitoring mechanisms to determine that trauma-informed care is actually implemented in funded agencies.
- Require annual trauma-informed care training for service providers and first responders.

Basic Needs

- Dedicate funding for Access Centers for women and survivors of DV to ensure that their basic needs are met in a trauma-informed atmosphere.
- Increase access to 24-hour safe hygiene services, especially in the Skid Row community, including showers, bathrooms, clean drinking water, cooling centers, and laundry. Ensure programs have funding to provide hygiene products to women.
- Ensure health clinics dedicated to homeless populations provide women's specific healthcare, including mental health treatment, family planning, breast health services, and cervical cancer screening.

Coordinated Entry System and Housing Navigation

- Support the creation of a workable Coordinated Entry System for domestic violence survivors, either parallel or part of the mainstream homeless system.
- Acknowledging the unique vulnerabilities faced by women (e.g. lack of safety, higher likelihood of having survived violence/sexual assault) in vulnerability scoring of individuals entered into CES system. For example:
 - Gender alone could be factored into vulnerability scoring.
 - Gender paired with a past experience of trauma/violence could be factored into vulnerability scoring.

- Add co-located Domestic Violence Advocates to CES for Individuals. LAHSA has established co-located Domestic Violence Regional Coordinators in every Family CES. Replicate the model in CES lead agencies for Individuals (or subcontract out to a homeless service best situated for this collaborative work in each SPA).
- Provide additional funding for co-located specialty trauma services within homeless and domestic violence services. Domestic violence service staff are uniquely trained in empowerment models and trauma services. Homeless services staff are uniquely trained in Housing First and accessing permanent housing. Additional funding to co-locate these specialties would improve quality of care and access to needed services within each sector.
- Funding for field-based supportive services, including mobile case management supports (beyond housing navigation), mental health treatment, and nursing/occupational therapy support.

Bridge Housing

- Increase funding for additional LAHSA Trauma Shelter Beds to replicate the model designed by Supervisor Sheila Kuehl's office. Funding at \$60 or higher per night is needed to meet the mental health and trauma needs of women in particular.
- Increase safety measures for winter shelter pick-up sites, including security staff around pick-up sites, adequate lighting, places to sit, and protection from weather elements.
- If all unsheltered individual women experiencing homelessness were to actively seek shelter, only one in twelve would be able to receive a bed assignment.
 - Ensure a proportionate amount of A Bridge Home beds are dedicated to women.
 - Increase funding for additional trauma informed, crisis bed shelter, bridge housing, and transitional beds to serve individual women and families and individuals fleeing Domestic Violence (DV).

Safe Parking

- Dedicate a percentage of safe parking programs for women only, dispersed in proximity to where women are living in their vehicles.

Permanent Supportive Housing

- Increase County D7 funding and create parallel City funding for existing Permanent Supportive Housing services; County D7 funding is not stretching far enough, leaving providers that want to add specialty care (e.g., Occupational Therapy and nursing supports) to support an aging population without enough funds. D7 only funds 1:40 case management ratio, but does not factor in additional support needed outside of the scope of case management.
- Increase the LA City proposed \$9 million towards permanent housing.

Rapid Rehousing

- Loosen requirements for individuals vs families to qualify for this program. Some women regain custody of children after experiencing homelessness and no longer qualify for Rapid Rehousing dedicated to individuals. Conversely, some female-headed families are turned away from agencies that only provide Rapid Rehousing for families.

- Replicate the Domestic Violence Housing First (Rapid Rehousing) Program by setting aside Rapid Rehousing funding for this population to ensure that people experiencing homelessness and domestic violence have increased pipelines to permanent housing and mobile supportive services.
- Pilot a program to provide immediate use rental subsidies as administered through public housing agencies to help survivors of DV/IPV with acute economic housing needs (model after Federal VAWA program that was not implemented at the end of the Obama Administration).

Workforce Development

- Fund Workforce Development to pair with LAHSA funded Rapid Rehousing programs in order to help clients sustain their housing when the subsidy decreases or ends. Women in IPV or DV relationships tend to stay due to financial constraints, so pairing Rapid Rehousing with Workforce Development is crucial.
- Increase City and County support for the LA:RISE program

We are available to you and your staff to provide support and information regarding these proposed strategies.

Sincerely,

Center for the Pacific Asian Family (CPAF)
Downtown Women's Center
Haven Hills
Jenesse Center
Jewish Family Services of Los Angeles
Valley Oasis

Little Tokyo Service Center
Rainbow Services
Sojourn
Su Casa
The People Concern
W.O.R.K.S.

CC: Councilmember Bonin
Councilmember Harris-Dawson
Councilmember Rodriguez
Councilmember Ryu