

# **Housing Needs of Single Homeless Women with Multiple Issues in Regina**

**A report prepared for the Regina YWCA**

**by**

**Rebecca Schiff, Ph.D.**

**University of Regina**

# Table of Contents

<i>Executive Summary</i> _____	3
<i>I. Need for transitional women’s housing in Regina</i> _____	5
<i>II. Methodology</i> _____	6
<i>III. Characteristics of the Population</i> _____	8
<i>IV. Women’s Housing &amp; Services Needs &amp; Barriers</i> _____	10
Barriers to accessing housing and treatment services _____	10
Housing needs and preferences _____	13
<i>V. Housing Models</i> _____	14
General principles of transitional housing design _____	15
Support services, rules, and regulations for transitional housing _____	17
Planning principles for transitional housing _____	20
<i>VI. Examples of transitional housing models</i> _____	22
Kikinaw Residence – Regina YWCA (Regina, Saskatchewan) _____	22
Columbia House and JF Norwood House– Elizabeth Fry Society (Vancouver, British Columbia and Ottawa, On) _____	25
Jean’s Place – Transition Project’s Inc. (Portland, Oregon) _____	28
<i>VII. Recommendations for women’s transitional housing program in Regina</i> _____	30
Architecture _____	31
Tenancy _____	32
Support _____	32
Management & Evaluation _____	33
<i>Bibliography</i> _____	34
<i>Appendix 1: Example of Rules for High-Demand Housing</i> _____	37

## Executive Summary

In urban and rural areas across Canada, it is becoming increasingly acknowledged and recognized that single women and women with children make up a significant and concerning proportion of the homeless population. In Regina, homelessness among women is becoming an increasingly pressing issue. There are a few emergency and transitional housing options for women who are victims of domestic violence. However, there are limited options for women who do not fit the criteria for violence against women (VAW) housing. The need for more housing options is evidenced by the growing number of women turned away from service providers due to a lack of available rooms, spaces, or services to match their needs.

Many women become or remain homeless due to experience with one or multiple issues related to: domestic violence; abuse (physical, sexual, or psychological); mental illness; substance abuse; pregnancy and; involvement with the criminal justice system. Research in this area suggests that women have gender-specific needs and preferences in terms of approaches to treatment, recovery, and housing stabilization. Similarly, women experience unique barriers to accessing housing and support services. Certain services provided by transitional housing programs are considered “critical” to women’s housing success. These services include help with: negotiating with landlords and neighbours; handling relapses; making sure rent is paid; making sure cleaning is done and; making sure that goods such as food, furniture, and transportation are provided when needed. Certainly, there is a need for staff to help women find permanent housing.

The multiple housing barriers, needs, and preferences of homeless women indicate a need to design housing & service models that minimize difficulty in accessing services and help women to maintain housing stability. Communities need to provide a range of housing options and services to meet the needs of a diverse population and individual needs that change over time. Housing approaches range from “housing first” to “housing ready”. These approaches embody different sets of underlying principles that guide housing models for persons with multiple issues. Housing first models have been shown

to positively affect tenure for long-term shelter dwellers, the hardest-to-house and for persons with serious and persistent mental illness. However, the literature suggests that housing ready models are recommended for persons with a history of conflict with the law and substance abuse problems.

Building on the literature and case studies, a potential transitional housing model is suggested for women with multiple issues in Regina. This model is intended solely to act as a starting point for discussion on what would work best in Regina. It is critical to remember the housing needs, preferences, and barriers to housing for women with multiple issues. Potential housing providers should consider consulting with potential residents to aid in the design of a housing model that can best meet their needs. As discussed in sections III and IV of this report, housing design should be considerate of needs for gender and culturally sensitive programming, normalised and respectful living environments, and women's need for a sense of "home".

## **I. Need for transitional women's housing in Regina**

In urban and rural areas across Canada, it is becoming increasingly acknowledged and recognized that single women and women with children make up a significant and concerning proportion of the homeless population. Many women become or remain homeless due to experience with one or multiple issues related to: domestic violence; abuse (physical, sexual, or psychological); mental illness; substance abuse; pregnancy and; involvement with the criminal justice system. Research in this area suggests that women have gender-specific needs in terms of approaches to treatment, recovery, and housing stabilization. The literature also indicates that safe, secure, affordable, and adequate housing, along with appropriate support services, is crucial to women's recovery and ability to exit homelessness.

In Regina, homelessness among women is becoming an increasingly pressing issue. There are a few emergency and transitional housing options for women who are victims of domestic violence. However, there are limited options for women who do not fit the criteria for violence against women (VAW) housing. The need for more housing options is evidenced by the growing number of women turned away from service providers due to a lack of available rooms, spaces, or services to match their needs.

The experience of the Regina YWCA attests to the growth in housing distress and lack of housing options for women in the city. The YWCA provides the largest number of transitional and emergency beds for single, adult women in the city. The population served at the YWCA includes women who demonstrate the following characteristics: mental health issues; addictions issues; histories of abuse; conflict with the law or are on parole; street workers and; teenagers referred from Social Services through an independent living program. In 2004, the YWCA was turning away an average of 8 women *per week*. They completed renovations to expand the transitional residence from a 35-bed to a 53-bed facility. Despite the significantly increased number of beds, the residence is now turning away an average of 5 women *per day*. Anecdotal evidence from

other housing providers in the city indicates that they are also witnessing an increase in the number of homeless and marginally housed women.

The Regina Drug Treatment Court (DTC) has also identified a need for more transitional housing, particularly for women with substance abuse problems. Similar to other homeless women in the city, women participants in the DTC often have multiple issues related to mental health, addictions, physical health, and histories of abuse. While the DTC offers numerous services to aid in participants' rehabilitation, it has been recognized that there is a significant lack of appropriate housing options for participants. Many of those who wish to participate in the DTC are homeless or in marginal housing conditions that are not conducive to program completion. Both the Regina and Toronto DTCs have particularly noted that participants with safe and appropriate housing have a higher success rate and reduced chance of re-offence [1, 2]. While there are some appropriate housing options for male participants in Regina, there are currently limited facilities in Regina that provide secure, safe, and supportive housing that can specifically meet the needs of women with addictions and multiple issues.

## **II. Methodology**

Recognizing the significant rise in turnaways at women's shelters, and the need for more housing options for women in Regina, the Regina YWCA along with the Drug Treatment Court and several other partners requested research to be conducted into housing models for single homeless women with multiple issues (addictions, mental illness, histories of abuse, conflict with law). The consultant was directed to:

- Gain insight into the housing needs of women and identify barriers for stable housing
- Identify gaps in housing and services for women with multiple issues
- Review the literature on evidence based (high-demand) models and approaches for housing women with multiple issues, including structural environment as well as program models

- Identify successes and challenges of the YWCA Kikinaw residence
- Gain detailed program information from service providers in other locations who deliver evidence based models and approaches to housing women with multiple issues

The consultant conducted a systematic search of the following electronic databases:

Academic Search Premier,  
 Canadian Reference Centre,  
 CINAHL Plus with Full Text,  
 Family & Society Studies Worldwide,  
 Humanities International Complete,  
 Psychology and Behavioral Sciences Collection,  
 PsychInfo,  
 SocINDEX with Full Text  
 Journals@Ovid (ovft)

This search was supplemented with a search of Google and Google Scholar for any additional information and access to government and NGO reports dealing with housing issues for women with multiple issues. This search used the following key words, either alone or in combination: women, housing, transitional housing, substance use/abuse, addictions, mental illness, mentally ill, corrections, conflict with law, correctional, community supports, services, housing needs, and barriers. Since numerous literature reviews on transitional housing for women already exist in the literature, the consultant focused on summarizing the findings of these reviews. To gain detailed information on specific housing models and programs, the consultant made direct contact with managers or directors of evidence based transitional housing programs for women in Canada and the U.S.

This report is designed to address each of the directives supplied to the consultant. The first two sections describe the population and identify the housing barriers, needs, and preferences of women with multiple issues. The subsequent section provides: a review of

literature on evidence-based models; describes the YWCA Kikinaw residence program and; describes the housing and service model information provided by several service providers in North America who deliver evidence based models.

### **III. Characteristics of the Population**

Women account for a significant and growing proportion of the population of homeless persons in Canada. While research on homelessness traditionally focused on men, gender-specific literature has begun to emerge, focusing on women's unique housing issues, concerns, and needs [3-11]. For many homeless women "housing is the problem, to which homelessness is the solution" and not the other way around as suggested by traditional perceptions. Many women "escape" to homelessness to avoid domestic conflict, abuse, and poor social housing conditions [11].

Novac et al [11] conducted a comprehensive literature review on homeless women. They indicate that women experience homelessness differently than other persons. One of the first and foremost experiences is women's understanding of the concept of "home".

"Women attach a variety of meanings to the concept "home," which include decent material conditions and standards, emotional and physical well-being, loving and caring social relations, control and privacy, and simply living/sleeping space. Consequently, homelessness is defined by the absence or inadequacy of these same qualities." [11, p. 8]

The review identifies several other unique characteristics of homeless women, especially as compared to homeless men. Homeless women are more likely than homeless men to be the guardians of children. Women with children are more likely than men:

- to be younger than homeless men
- to be members of a minority group
- to be homeless for a shorter period of time

- to spend less time in unsheltered conditions

Single homeless women without children are more likely than homeless men:

- to have been hospitalized for mental health issues
- to be white
- to be homeless longer than those with children
- to have a history of schizophrenia and/or alcoholism

As compared to other women and homeless men, women living on street are more likely to have a history of abuse and mental illness. Many women exiting correctional facilities also experience problems with housing stabilization and homelessness [4, 12, 13].

Aboriginal women are also reported to be overrepresented in the population of homeless women [11, 13-15].

In addition to problems related to mental illness, substance abuse, and histories of abuse, there are numerous issues related to physical health among homeless women that can aggravate and complicate their housing situations. Women may become homeless *due*, in part, to a health problem. Health problems such as HIV/AIDS can cause women to be shunned by family, friends, and employers, thereby placing them on the streets or in marginal housing conditions. Due to challenging outdoor climates, stress, sleep deprivation, and “high density environments” (e.g. shelters), homelessness can also *cause* health problems such as cold or flu, cardiovascular diseases, respiratory infections, nutritional deficiencies, and skin diseases [11]. A lack of access to adequate health care leads to further complications and difficulties with these health problems.

Homeless women in Regina appear to embody many of the same characteristics cited in the literature. Service providers such as Souls Harbour Rescue Mission, Gabriel Housing, Phoenix Residential Society, Regina YWCA, and Red Ribbon Place house women with histories of abuse, mental illness, substance abuse, conflict with the law,

HIV/AIDS, and other health conditions. Five residences also house at-risk and pregnant teenage girls.

## **IV. Women's Housing & Services Needs & Barriers**

### ***Barriers to accessing housing and treatment services***

In Regina, as elsewhere, marginally housed women are likely to experience problems with mental illness, cognitive disorders (e.g. FASD), substance abuse/addictions, serious health problems, being single parents, and physical, sexual, or psychological abuse. These problems lead to distinctive housing needs and service barriers. Aboriginal women and women from minority groups have added needs related to culturally-appropriate programming. Financial issues and the meanings that women attach to the concept of “home” also play a significant role in defining their housing needs.

Whether substance abuse, mental illness, physical illness, conflict with law, or family responsibilities, the specific issues of homeless and marginally housed women create distinct barriers to accessing services. Women with addictions often have difficulty maintaining housing stability *because they need treatment* and rehabilitation services. Conversely, women often can't access these services *because they need housing*. The provision of safe, secure, affordable housing with supports has begun to be recognized as a key component in addictions recovery [16]. Research on a transitional housing program for pregnant addicted women in Richmond, VA showed significantly higher treatment retention rates for women in transitional housing compared with those not receiving housing services [17]. In a study of the Baltimore Drug Treatment Court, clients indicated that more help with vocational and housing placements would improve their treatment outcomes [18].

A Canadian study on harm reduction approaches for homeless addicted women found that the need for housing stability creates barriers to access [14]. Stigma and program inflexibility are also identified as obstacles. The study reconfirms that women often have difficulty accessing services because they need support for childcare and other family

responsibilities. These women also experience fears of losing their children (to child protection services) and feelings of shame and guilt. They may be confused about how to access services or are overwhelmed by the service system. Service providers are sometimes perceived as “judgmental and inflexible” [14, p. 15]. Women fear being labeled as a drug or alcohol abusers due to negative stereotypes. A serious and significant barrier is that services are not always gender-sensitive and do not address the unique needs of women.

Need for a “home”, as opposed to just a house, indicates women’s preference for safety, security, privacy, and control over their living conditions. Frequently, housing providers impose rules to ensure this security and a rehabilitative living environment. Some programs have limited rules, taking a harm reduction, high tolerance approach, while others are more stringent. Rules may include limitations on visitors, curfews, and zero-tolerance for substance abuse. For some women, these rules may help to fill needs for privacy and safety. These high-demand environments have proven effective for some women, particularly those who have been in conflict with the law or have substance abuse/addictions issues [9, 13, 16].

Rules also create barriers for other women who oppose restrictions and surveillance [9]. Opposition to rules is especially prevalent among women with severe and persistent mental illness or dual diagnosis [11, 14, 19] and women who have been absolutely homeless for long periods of time [3]. As compared to emergency shelters, higher rules and expectations in transitional housing may alienate these women [10]. For those with dual diagnosis, prescribed medication can cause conflict with the illicit drugs used by addicted women. In these cases, a harm reduction, low-demand, or housing first approach may be more successful in increasing women’s housing stability [3, 19].

Economic or financial problems create significant barriers to accessing and maintaining tenure in housing and treatment programs. A study on retention issues for substance-abusing women [9] identifies numerous economic issues which contribute to women’s housing instability and inability to remain in treatment:

- unaffordable cost of treatment programs
- long waiting lists

- need for child care
- need for transportation
- low paying, part-time jobs with no flextime, job security and minimal health benefits
- need for assistance in caring for elderly parents or disabled partners

An extensive study conducted by Health Canada [16] indicated similar barriers to accessing services for women with substance abuse problems. They identify experiences of violence, stigmatization, shame and guilt, lack of social support, fear of repercussions (losing children, job), and hopelessness as barriers for these women. Housing and treatment programs should take these issues into consideration; provide affordable rents<sup>1</sup> and matching services to help women to maintain tenure.

Women who have been conflict with the law and are exiting correctional facilities experience similar housing & service barriers. A longitudinal study of adult women conducted in New York City between 1997 and 2001 found that upon intake into correctional facilities women felt the primary problems they expected after release would be: housing (71%) followed by; substance abuse (69%'); inadequate income (65 %); unemployment (40%); education (27%) and; family problems with their children (22%) [12].

The Canada Mortgage and Housing Corporation conducted a longitudinal study of transitional housing for women upon their exit from correctional facilities [4]. They found several significant barriers to community re-entry for these women. These barriers included: history of physical and sexual abuse; health, mental health, and addiction problems; single parent responsibilities; limited education; lack of employment skills; isolation and; low level of support from family and friends.

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<sup>1</sup> E.g. rent geared-to-income/sliding scale fees

## ***Housing needs and preferences***

In addition to the service barriers encountered by homeless women, a few studies have identified distinct housing needs and preferences for this population. In terms of architecture, many women prefer self-contained units in a women-only building [11]. However, this type of arrangement may not be a suitable transitional housing arrangement for all women (e.g. substance abusers, ex-offenders). Women also favour communal living areas (kitchen, common room). This is supported by studies such as that by Novac et al [11], whose literature review indicates that, aside from personal conflicts, women tend to form groups for social support.

Certain services provided by transitional housing programs are considered “critical” to women’s housing success. These services include help with: negotiating with landlords and neighbours; handling relapses; making sure rent is paid; making sure cleaning is done and; making sure that goods such as food, furniture, and transportation are provided when needed [14]. Certainly, there is a need for staff to help women find permanent housing. Lewis et al [9] reviewed the evaluations of a transitional housing program for women with addictions where staff focused heavily on helping women to find safe, acceptable permanent housing and developed partnerships with local housing authorities to help make safe housing available. This effort led to increased success in housing stability and maintaining tenure in an addictions treatment program.

Senior women often have special needs for housing and services. Housing programs need to be aware of problems stemming from the complications of age-related health problems, prescribed medications, ageism, and the hastening of physiological ageing processes for substance abusers [16]. Waegemakers Schiff et al [19] suggest separate, specialized housing facilities for homeless persons who are seniors with severe mental health issues.

Culturally-appropriate services and living environments need to be provided, especially for Aboriginal women and those representing minority groups. Dinning [14, p. 47] cites a need for staff who are “sensitive to racial & cultural oppression and can provide

culturally-appropriate support.” Service providers should consider the inclusion of programs that pay attention to spiritual values and traditional ceremonies.

According to a study on the housing needs of those exiting a correctional facility in British Columbia, women cite numerous housing preferences and needs to aid in community re-integration and stabilization:

“Prisoners and ex-prisoners said they would like release housing to provide: peer support; a "clean and sober" environment; shared decision making among residents on household chores and rules; pro-active help to access educational upgrading and job skills training; transportation to medical services; basic life skills, including money management; and voluntary participation in counseling and healing circles.” [8, p. 5]

Overall, these women felt that they would need a violence and drug-free living environment, shared with others who could understand their issues and struggles to re-integrate [8, 14].

## **V. Housing Models**

The multiple housing barriers, needs, and preferences of homeless women indicate a need to design housing & service models that minimize difficulty in accessing services and help women to maintain housing stability. The literature demonstrates a need to provide a range of housing options and services to meet the needs of a diverse population and individual needs that change over time. Kraus [20, p. ii] indicates that communities (cities; towns) need to provide a “comprehensive package” of housing and treatment related services that should include: community service patrols; outreach; 24-hour crisis/drop-in centres; sobering-up stations/diagnostic screening centres; entry level shelters; detoxification centres; post-detoxification stabilization services; residential recovery facilities; transitional housing; permanent supported and supportive housing and; permanent housing.

Transitional housing can play a critical role in stabilizing the lives of many homeless women. This type of housing is different from emergency shelters or permanent *supportive* housing in that it is intended to act as an intermediary stage between crisis and permanent *independent* housing. Emergency shelters provide basic needs for a short period of time. Transitional housing extends beyond these basic requirements for survival and offers housing for periods ranging from 3 months to 2 years [21].

Transitional housing moves beyond basic survival needs, often through the inclusion of services aimed at treatment and training for vocational and life skills. The congregate settings of many transitional housing models allow “individuals to learn or hone skills for independent living while participating regularly in treatment and rehabilitation services on- or off-site” [21, p. 10-8]. Research shows that those who gain permanent housing after transitional housing are likely to remain stably housed [21, 22].

The following aims to provide an overview of the essential characteristics of transitional housing and to provide examples of transitional housing models for women. Since every community differs in the characteristics of its population and service providers, housing models will naturally vary from place to place. The intent of this description is to provide a range of examples from which components can be drawn to create a model that is appropriate to Regina.

### ***General principles of transitional housing design***

Transitional housing is defined to some extent by comparison to emergency shelters and supportive housing. However, there exist different configurations and models for transitional housing and services. Housing approaches range from “housing first”<sup>2</sup> to “housing ready”. These approaches embody different sets of underlying principles that

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<sup>2</sup> “Housing First” models are becoming an increasingly popular method for housing homeless people across the United States and Canada. For a detailed description of the “housing first” model and philosophy, see 23. Tsemberis, S., L. Gulcur, and M. Nakae, *Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals With a Dual Diagnosis*. American Journal of Public Health, 2004. **94**(4): p. 651-656.

guide housing models for persons with multiple issues. Gouvas Roman [24, para. 6] delineates these two approaches:

“The *housing first* [emphasis in original] approach offers the direct placement from the street (or an institution) to housing with support services available, but not required. Often, the only requirements are that individuals not use substances on the premises and abide by the traditional lease obligations of paying rent and refraining from violence and destruction of property. In contrast, *housing ready* [emphasis in original] starts with treatment and progresses through a series of increasingly less service-intensive options with the goal of permanent supportive housing as people are “ready.”

Housing first models have been shown to positively affect tenure for long-term shelter dwellers, the hardest-to-house and for persons with serious and persistent mental illness [23, 25-29]. However, the literature suggests that housing ready models are recommended for persons with a history of conflict with the law and substance abuse problems [4, 13, 20, 24]. Housing ready models are defined by Gouvas Roman [24] as transitional. In these models, service components are shown to significantly impact outcomes. Transitional housing models are usually described in the literature as taking either a “high-demand” or “low-demand” approach.

Low-demand housing often takes a harm-reduction approach, providing “wet” housing to engage those who are not interested in substance abuse treatment. Housing environments usually have very few rules and expectations. There is usually no requirement for residents to participate in treatment and programs to maintain tenure. This type of transitional housing is sometimes referred to as “Safe Havens”, or “Transitional Living Communities”. A review of transitional housing and services [21] describes some of the advantages and disadvantages of these models. The review indicates that low-demand housing is an advantageous approach for outreach to those who have been distrustful of or hardest to engage in the service system. The literature indicates that a low-demand

approach should also be taken for women with serious mental health disorders (and do not have serious substance abuse problems) [19]. There are a few identified disadvantages to low-demand housing. Residents often do not want to leave when their term is over. Staff also face difficulties with enforcing rules in ways that agree with low-demand or harm reduction philosophies [21].

High-demand housing usually focuses on specialized rehabilitation and treatment for specific populations. It is often used for those who need or desire a structured living environment with a range of integrated supports. As opposed to “wet” housing, high-demand environments are “dry” and do not permit drug (or alcohol) use. This type of transitional housing was originally created for those with special needs related to problems such as serious mental illness, substance abuse, domestic violence, or HIV/AIDS [21]. The housing is often coordinated by case managers and residents are usually expected to participate in programs and comply with rules to maintain tenure. The most significant problems with high-demand housing are related to attrition and drop-out rates from these programs. Due to the lengthy period of tenure in many high-demand programs, residents may fear that they will lose children, miss out on permanent housing opportunities, or exceed limits for social assistance. The lack of control, due to the structured environment, rules, and expectations, leads to high early-discharge rates in many high-demand housing programs [21]. These problems could be ameliorated by designing programs and services to meet women’s concerns regarding permanent housing, social assistance, and their families.

### ***Support services, rules, and regulations for transitional housing***

Low-demand and high-demand housing are distinguished by their rules, expectations, and methods of service delivery. Low-demand housing models typically have few rules outside of normal tenant and lease arrangements. On the other hand, high-demand housing is typified by an extended set of rules, regulations, and expectations. These programs usually expect residents to participate in certain activities, treatment, and therapy to remain in the program. They may also expect that residents demonstrate

commitment to recovery, including a certain level of treatment or sobriety, prior to being admitted to the program. Other rules are often enforced which pertain directly to the building where persons are housed. These rules can include: zero (or limited) tolerance for alcohol or drug use; limitations on visitors; curfews; sign-in/sign out logs (must report to staff when entering/leaving building); chores; cleanliness (room inspections); participation in house meetings; participation in counselling and case management; no violence; no smoking; no socialising in bedrooms and; requirement to take prescribed medication (administered by staff). Examples of “house rules” agreements for transitional housing programs are provided in Appendix 1.

High-demand and low-demand housing both provide an array of support services that help clients to move towards housing stabilisation. “Service sequencing” is a technique employed by many transitional housing programs [21]. In low-demand environments, service sequencing implies that clients start off with fewer, more easily accomplished service goals with the possibility of moving on to more intensive treatment. Residents are initially provided with basic necessities such as a telephone and mailing address. Over time, staff engage residents in “goal oriented” activities that will address their problems and barriers to housing stability (e.g. mental illness, addictions). High-demand housing often begins with pre-requisites to housing and moves clients through stages of services. Sullivan [30] refers to a related evidence-based approach, “consumer-centered services”, where the types of services provided and method of delivery is determined for each client on an individual, case-managed basis.

Barrow and Zimmer [21] provide a comprehensive summary of the types of services that are usually offered in transitional housing programs. Case workers and case management services are provided in many transitional housing programs. The function of case workers is to coordinate services for a client while also providing some aid through advocacy services, counseling, and skill development [21].

Child care, transportation, and vocational services, such as job training and placement, are frequently provided through housing programs. Life skills courses, or independent

living instruction, can include education in areas such as parenting, budgeting, home repair, nutrition & cooking. Many transitional housing programs also include a “residents’ council” to create community, manage conflict, and coordinate the overall living environment.

Special services for mental health and substance abuse treatment are often integrated with transitional housing. Dinning [14] suggests following an integrated treatment model for these services, given the strong linkages between mental illness and addictions

“Current research indicates that integrating mental health and substance abuse treatments is more effective than offering services in parallel systems. Integrated treatments, generally delivered by multidisciplinary teams, emphasize outreach, comprehensiveness, and a stage-wise approach to treatment and recovery.”

[14, p. 18]

Housing and relocation assistance are indispensable services for transitional housing residents. Without permanent housing upon discharge, residents risk continued housing instability, mental health, and substance abuse problems. According to Barrow and Zimmer [21], permanent housing services should include: identifying housing options; preparing for landlord/tenant group interviews/applications; transportation; childcare; understanding financing or lease arrangements; budgeting; furniture; deposits and moving expenses and; helping transition to a new community.

A model primarily based on high-demand housing principles is suggested for the Regina area since the women to be housed are of the “special needs” population and do not fall into the extremely hard-to-house population. However, since the literature suggests that women with serious and persistent mental illness should not be housed in high-demand environments [19, 23, 25-29, 31], the proposed housing in Regina should consider not including this population in a high-demand housing program. A separate low-demand housing model could be created for these women. The model should also take into account some of the planning principles and premises of low-demand housing, especially

harm reduction approaches, that are applicable to homeless and marginally housed women in general.

### ***Planning principles for transitional housing***

Goering et al [6] provide planning principles and a model for transitional housing. Although the model is based on a low-demand philosophy, many of the principles of this model can be applied to and are useful for developing a more high-demand transitional housing program. Based on their consumer preference study and review of the literature on housing homeless women, they set out four “planning principles” upon which the housing model is based [6, para. 17]

1. “Normal community living in long-term or permanent housing is the desired goal for homeless people.
2. Permanent housing with flexible supports rather than residential treatment programming is the preferred model.
3. Consumer involvement in planning and governing the residence is essential.
4. A commitment to ongoing review of both the quality of housing and the adequacy of services provided is necessary.”

While these principles suggest more of a “housing first” design, they remain applicable to transitional housing. When considering the development of transitional housing, it is critical to remember that, for many homeless people, the desired outcome is for stable, safe, permanent housing, a “home” rather than temporary shelter. Although immediate placement into permanent housing may not be the optimum choice for every person, housing providers need to be aware of consumers’ desire to be involved in the design and operation of the residence and services. Continuous, systematic, and professional review is vital to the on-going success of housing programs and should be taken into consideration when designing transitional housing models.

The housing model suggested by Goering et al [6] is composed of four aspects: architecture; tenancy; support and; management and evaluation. The architecture component of the model suggests a typical apartment building composed of self-

contained units with some space potentially allotted for collective activities and service-staff visits. They suggest providing a majority of apartments designated for one person with a few 2 or 3 bed apartments for women who want to reunite with children. This structural design may not be applicable for a high-demand program due to the need to secure a drug-free living environment and resident participation in numerous collective activities. Structural designs which may be more applicable to the population that the Regina YWCA, DTC, and partners intend to serve are provided in section VII of this report.

Several of the design components in the tenancy aspect of the model are applicable to high-demand transitional housing programs. A fairly common approach among transitional housing programs is to provide subsidized units with rent geared to income. It is also suggested that residents should be able to apply directly to the project with no intermediary agency.

The support aspect of the model suggests that residents should have input into the types and range of supports and how these supports are delivered. This is a crucial consideration in the development and pre-development stages, where organizations may need to consult directly with potential residents to guide the design of the program. On-going consultation with residents can ensure that program and service design continue to meet their needs. This coincides with the management and evaluation aspect of the model where it is suggested that organizations conduct on-going program evaluation to ensure that they continue to meet the needs of these “special needs” clients.<sup>3</sup> The authors also suggest that site management and support services should be delivered by separate entities to avoid conflict among residents and staff.

<sup>3</sup> Goering et al. provide some additional, specific advice about designing and administering program evaluations. 6. Goering, P., J. Durbin, J. Trainor, and D. Paduchak, *Developing housing for the homeless*. Psychosocial Rehabilitation Journal, 1990. 13(4): p. 33-42.

## **VI. Examples of transitional housing models**

As previously described, a high-demand transitional housing model is recommended for women in Regina who have: serious substance abuse problems; have been released from correctional facilities; or have other serious issues preventing them from maintaining housing stability.<sup>4</sup> A few evidence-based, transitional housing models were uncovered during the course of this research that may provide direction in creating a transitional housing model for homeless women with multiple issues in Regina. These examples are intended to provide a basis from which components can be drawn to create a model that is appropriate to Regina.

### ***Kikinaw Residence – Regina YWCA (Regina, Saskatchewan)***

It has been suggested that the YWCA Kikinaw Residence can provide an example of what is successful and what difficulties are faced in housing women with multiple issues in Regina. For this reason, the review of housing models begins with the residence. This example provides a starting point to consider the strengths and gaps in service for women with multiple issues in this community.

The Kikinaw Residence has a 53-bed capacity. The residence is located on 3 upper-level floors of the Regina YWCA building. Each floor is comprised of several single-bed rooms, shared washroom facilities, shared kitchens, and common rooms. There is also one room containing 3 emergency beds. Each room has a bed, linens, closet space, a refrigerator, a sink, and intercom connected to the front desk. A residence manager is located on the main floor of the YWCA building. They are available from 9am to 9pm on weekdays and for three to four hours on weekends. When residence staff are not available, other staff are available on a 24 hour basis to help manage any problems, concerns, or crises. There is no minimum or maximum length of stay in the residence.

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<sup>4</sup> This does not include women who have serious and persistent mental health issues. As previously described, the literature recommends a low-demand, housing first approach for these women.

Some women stay for only a few days while others stay for several months or several years.

Kikinaw has four different categories of single women who m they house. Men and children are not accepted. The residence accepts women from three different government programs as well as women “in the general population” who are in need of housing. Each of these populations is described below along with a description of the rules, expectations, and services delivered for these women by the YWCA.

The “general population” includes women who have addictions, mental health issues, are street workers, or have other problems that are preventing them from remaining stably housed. Women come in on their own or are sometimes referred there from the hospital, health region, and other service providers. Some of the women in this population who become stabilized during their stay decide to stay at the residence on a long-term basis. Although these women are not required to participate in any services, they may seek help from residence staff who will aid them in accessing appropriate services. The only expectations of these women are that they abide by rules such as: no drug use; no male visitors; be respectful of other residents including noise levels and privacy; keep room clean and; clean up after yourself in kitchen and washrooms. The residence and emergency shelter staff are available on a 24-hour basis to speak with women who are experiencing troubles, stress, or other difficulties. If staff are unable to respond to women in crisis, they will contact Mobile Crisis Services or the Crisis Response Services at the Mental Health Clinic (Regina Qu’appelle Health Region).

The Day Parole program of Corrections Services Canada is delivered in Regina through partnership with the YWCA Kikinaw Residence. The residence reserves 5 bedrooms at all times for women in this program. These women come directly from federal correctional facilities in Saskatchewan. They serve the remainder of their sentence at the YWCA where they can transition back into the community and regain independent living skills. For these women there is an initial meeting in which a goal-setting plan is developed. There are weekly follow-up meetings with the resident, her parole officer,

and the residence manager. Staff conduct weekly room checks and women are required to sign in and out every time they enter or leave the YWCA building. Women are also required to attend two support group meetings every week. One group is chosen by the YWCA and the other group is chosen by the resident. Residence staff keep and administer prescribed medications only for women in the Day Parole program. All other women are responsible for their own medications.

In partnership with the Saskatchewan Ministry of Social Services, the residence helps to deliver the Independent Living Program for Teen Girls. Four beds are permanently reserved by the Ministry for these girls. This program serves a variety of teenage girls such as those for whom foster care is “not working” or 16 year old girls who feel they are ready to be on their own. The Ministry provides a transitional residence for these girls to help them gain independent living skills. Upon intake, girls are required to sign an acceptance of residence rules and expectations. As with women in the Day Parole program, girls must sign in/out and have weekly room checks. Residence staff work with each girl’s case worker to supervise their progress. They also provide help with developing independent living skills.

The Supportive Justice Program for Women is delivered in collaboration with the Saskatchewan Ministry of Justice. Through this program, women serve their provincial sentence intermittently at the YWCA. These women are able to remain in the community (instead of serving their sentence at a correctional facility) and avoid becoming disconnected from their children and employment. Women in this program serve approximately 3 weekends in the Kikinaw Residence from 7pm on Friday nights to 7am on Monday mornings. They are provided with a room and food. They are not allowed visitors and must attend a meeting on Saturday morning.

Because there are no follow-up evaluations or tracking mechanisms for the residence, it is difficult to know if, and how many women remain in stable, permanent housing after their discharge. When interviewed, the residence staff identified a few difficulties that they have encountered with residents.

Conflicts occur among residents over issues such as noise, cleanliness, and what program to watch on the common television. Occasionally, women are rumored to be or found to be engaging in more concerning activities (e.g. drug use). Staff generally take a harm reduction approach to managing these issues. If a resident presented a danger to others, she would be evicted immediately. If she presented a danger to herself, staff would contact the hospital or appropriate support service. In all other cases (e.g. no risk of violence or consistently repetitive problems), staff would work out a plan with the resident that might include a treatment contract and daily check-ins. This approach has been successful in numerous cases in helping women to stabilize. Despite some of the difficulties in the residence, the residence staff are often very effective in managing conflicts, helping women to access treatment services and aiding them in stabilizing their lives.

### ***Columbia House and JF Norwood House – Elizabeth Fry Society (Vancouver, British Columbia and Ottawa, On)***

Columbia House is a transitional housing program run by the Elizabeth Fry Society of Vancouver. The program can house up to 10 women who have been in conflict with the law or who are in need of transitional housing. The program is primarily funded by Corrections Services Canada and B.C. Ministry of Human Resources. The Elizabeth Fry Society of Vancouver describes Columbia House as:

“An around-the-clock residential program is home to 10 women at any one time who have been in conflict with the law or who are in a state of transition. The philosophy is one of self direction and independence, with individual counseling and goal planning focusing on self reliance, coping skills and independent living.”

[32, para. 4]

The physical structure is an old office building which has been converted into two different levels of housing. One floor is dedicated to the transitional residence or

“halfway house” while the other floor is used as second-stage housing. Second stage housing is primarily used for women who have served lengthy sentences (i.e. 20 years) to allow for a more gradual transition.

The program offers numerous on and off-site services, including: counsellors and case workers; addictions support; various support groups (e.g. shoplifters anonymous); Grade 12 education; life skills courses and; a community relapse prevention program. There are stringent rules for the program, including zero tolerance for drug possession/use which gradually become more flexible over the length of a woman’s stay. The Columbia House rules are provided in Appendix 1.

A study of Columbia House measured the effect of this “program supported” transitional housing model on re-entry outcomes for women released from correctional facilities [4]. There were only two negative outcomes uncovered in the evaluation: decrease in income (possibly due to less reliance on illegal sources of income) and; participants still felt they had trouble with life skills and with making decisions. The positive outcomes identified in the evaluation significantly outweighed the negative. Positive outcomes included:

- lack of subsequent criminal charges
- increased housing stability
- increased health, nutrition, ability to prepare food
- fewer mental health disorders
- reduced levels of self-described drug use/abuse
- slightly higher involvement in job training
- improvement in number and frequency of personal & family contacts
- more feelings of self-worth and hopefulness

JF Norwood House is a transitional residence operated by the Elizabeth Fry Society of Ottawa. The program houses 8 women including: women released or on parole from federal and provincial correctional facilities; women in the community that are in conflict with the law including women in the Ottawa DTC; women from the community in

general who are at risk and; women referred by the Mobile Crisis Services team (the Mobile Crisis Services reserves a few beds at the house for their clients). Women are primarily single although the program does have room to accept children for two women at a time.

There are eight private rooms in the house. Two of these rooms can house a mother and 1-2 of her children. The house has continuously had a long waiting list for several years. There is communal living space, including a communal kitchen. There are no separate rooms for counseling sessions and support groups; although the program director indicated that space for private meeting rooms would be ideal.

JF Norwood delivers some programming on-site. The residence is attached to the Elizabeth Fry Society offices and offices for other community-based organizations where additional support services are available. All women have personal support workers who work with them to develop personal support plans. The workers are all professionals, trained in social work or a related field. A total of six workers are employed on a part-time basis for this purpose. The workers provide information and referrals for education, employment, housing support and advocacy. Life skills and self-esteem workshops are offered on site. Individual and group counseling are available at the Elizabeth Fry Society offices. The offices also provide anger management classes, theft support groups, housing support, and addictions counseling. The house has developed a partnership with a local lodge to offer support for aboriginal women. Elders provide cultural and spiritual support for these women. When an aboriginal woman is coming to live in the house, staff immediately arrange for culturally-specific supports and invite an elder smudge their bedroom.

The house is a secure facility with staff on the premises 24 hours, seven days a week. All residents are required to use the sign in/out logs. A resident handbook for the house delineates all rules and regulations.<sup>5</sup>

### ***Jean's Place – Transition Project's Inc. (Portland, Oregon)***

Jean's Place is a transitional housing program for women located in Portland, Oregon. The program houses women with a variety of issues that have prevented them from securing a safe and stable housing situation. Multnomah County Department of Corrections contracts four beds with the program for recently released female offenders. Children and men are not accepted.

Jean's Place houses a total of 55 women in a dedicated building. The 3<sup>rd</sup> level of the building contains 17 single room occupancy (SRO) apartments. The rest of the building is divided East/West into two different types of rooms. The West side of the building contains 8 rooms, each with two beds. The entire area can house 16 women. The East side of the building is the dorm. In the dorm there are 3 semi-private areas separated from each other by 3-sided walls. These areas contain 3 sets of bunk beds each. The dorm can house 18 women. The program reserves 4 emergency "floater" beds for unexpected arrivals from the correctional facility or elsewhere.

Each dorm area and bedroom has dressers with a few drawers for each woman to store her belongings. Since there are no lockers, staff recommend that women keep valuable items with them at all times (including bus passes, wallets). The lack of secure storage places sometimes causes conflict and difficulty for woman who have items stolen from them. Staff find the dorm problematic, and more often the center of conflicts, due to women's interactions where there is limited private space.

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<sup>5</sup> The handbook was in the process of being updated at the time of interview with the program director on September 19, 2008. The most recent version at that date is available on request.

There are common rooms between the East and West side of the building, including a kitchen. Women are responsible for their own meals, although some support groups do communal cooking. There are several refrigerators with a spot for each woman. There is one washroom (several toilets and showers) shared by the women from the East and West side. The program director commented that surprisingly, there is little to no conflict in relation to the limited bathroom space.

Jean's Place supplies linens and orders food boxes for residents. Women can even take the linens with them when they leave Jean's Place. The program also supplies food boxes for recent graduates and other women in need. The office contains a shelf of donated random household items for residents containing items such as cookware and cleaning supplies. For women who have graduated or those in SRO apartments, case managers can provide a reference to the Oregon Community Warehouse which supplies furniture and household items for people in need.

The program and building (dorm, bedrooms, SRO) are a classic example of a housing ready philosophy and design. Women proceed through a continuum of housing levels until they are "ready" for independent living. When women first come to Jean's Place they are required to stay in the dorm for four weeks. After four to six weeks, women can move into a shared bedroom on the West side of the building. In three to four months, women can move into one of the SRO apartments.

The program provides a range of services to address the diverse issues and needs of their residents. Jean's Place is staffed on a 24 hour basis with usually at least 2 people on duty at all time. Jean's Place takes a consumer-centered approach, providing every woman with a personal case manager:

"Every Transition Projects resident works with a Case Manager to develop an individualized plan to obtain housing, employment, and any necessary services, such as alcohol and other drug treatment. Case Managers also connect residents to the resources they need to live productive and stable lives-such as job training, voice mail boxes, bus tickets, and work

clothing. Residents meet with their Case Managers weekly to track progress, make case plan adjustments, and receive support” [33, para. 1]

Jean’s Place also offers an employment center, mental health counselors, housing case managers, life skills classes, nutrition education, access to nurses, and assistance in employment and permanent housing. Case managers continue to work with program “graduates” for one to two years following their discharge from Jean’s Place. Women often have no support network when entering Jean’s Place. To help maintain the support network built during their residency, staff often hold outreach dinners for ex-residents.

Jean’s Place follows a zero-tolerance policy for drug and alcohol. Urine and blood analysis are conducted regularly. Residents are allowed to “remedy” a first violation. A second violation results in eviction. Women are required to abide by curfews and use the sign in/out logs. Violence and theft are not tolerated. A complete list of rules and example of a lease for an SRO apartment are provided in Appendix 1.

Despite some of the problems experienced in the dorm, evaluations of the program indicate that 70% of women who complete the full program remain stably housed at one-year follow-up. Numerous anecdotal reports from prior residents demonstrate the program’s success in helping women to stabilise their lives.

## **VII. Recommendations for women’s transitional housing program in Regina**

Building on the literature and case studies reviewed in this report, this section describes a potential transitional housing model for women with multiple issues in Regina. The model is comprised of aspects from each of the case studies and described according to the four aspects of housing defined by Goering et al [6].

This model is intended solely to act as a starting point for discussion on what would work best in Regina. In addition to considering the architecture, tenancy, support and management, this discussion should address the values of partnering organisations (e.g.

around issues such as harm reduction) to ensure that the model is appropriate to the principles and standards of everyone involved. It is critical to remember the housing needs, preferences, and barriers to housing for women with multiple issues. Potential housing providers should consider consulting with potential residents to aid in the design of a housing model that can best meet their needs. As discussed in sections III and IV of this report, housing design should be considerate of needs for gender sensitive and culturally sensitive programming, normalised and respectful living environments, and women's need for a sense of "home".

## ***Architecture***

The recommended housing would be located in a single, large, designated facility (although it would be possible to have several smaller houses with the same room and service configuration). Each woman would have a private room supplied with linens and, if necessary, toiletries and cookware. Ideally, there should be enough room for a bed, chair, desk or table, and closet space. Washroom facilities could be shared facilities. The building should contain a common room (e.g. with couches, television), laundry room, and common kitchen/eating area which can also be used for classes on nutrition and cooking. Program directors for other transitional housing programs recommend having designated meeting rooms for support group meetings and for service providers to deliver services on-site. An office should be provided for case managers and other staff. The staff office can serve as a sign-in/out point and central location for women to seek help if they are experiencing a crisis. The building should incorporate a security system for the safety of residents and staff.

Alternatively, the architecture could follow the continuum concept, such as that employed by Jean's Place. This would incorporate emergency, high-demand transitional, and supported, low-demand, SRO housing. Each "level" of housing in the continuum could be located either in the same building or clustered into several different dedicated buildings.

## ***Tenancy***

Residents should be able to apply directly to the housing program with no intermediary agency. Applications should go through a screening process. The screening process can help to identify women who are suited to this transitional housing program, including a commitment to change and interest in moving on to stable, permanent housing.<sup>6</sup> Rent should be individually assessed and geared-to-income. Rules can be applied to tenancy agreements that relate to issues such as attendance at counseling or treatment, drug and alcohol use, visitors, and cleanliness. However, the experience of staff at the YWCA along with a strong backing in the literature, suggests that a harm reduction approach would be most effective in serving this population. If possible, there should be staff-person on-site 24-hours to monitor resident's safety and respond to crises. All staff persons should be experienced with, aware, and considerate of issues pertaining to minority groups and aboriginal women.

## ***Support***

The evidence discussed in this report suggests that support services should follow the evidence-based, consumer-centered approach. It is recommended that each resident is assigned to a personal case-manager. The case manager(s) should be experienced and knowledgeable in working with women who have mental health, addictions, abuse, and life skills issues. Upon intake, the case manager could work with the resident to develop an individualised plan for housing, employment, and treatment services. Case managers and staff can work together to help residents access resources and services to help them meet their goals. This can include helping residents with grocery shopping, transportation, clothing, medication, and other needs. The case manager ideally would conduct regular (weekly/bi-weekly) follow-up sessions with the client.

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<sup>6</sup> There need to be a range of housing options in Regina for other women who are “the hardest to house” and would have more difficulty transitioning to permanent, independent housing. Some women may never be able to live independently and would need permanent supportive housing.

Programs, support groups, and services can be delivered by the housing program and by other service providers. Residents should have input into the types and range of supports and how these supports are delivered. An array of programs could occur on-site while some programs such as support groups and vocational training would occur off-site. There are numerous service providers in Regina who can work with the housing program to deliver a full array of services to residents. Several Regina-based service providers who can work with the housing program are described in Appendix 2. Programs should be sensitive to aboriginal culture, beliefs, and traditions. There should be a focus on providing programs aimed at:

- Vocational training & placement
- Life skills such as parenting, budgeting, nutrition & cooking
- Permanent housing placement and relocation (searches, help with deposits, moving expenses)
- Counseling and support groups targeted to specific issues (e.g. mental health, addictions, physical health problems)

### ***Management & Evaluation***

If possible, support services and site management (e.g. rent collection, maintenance) should be delivered by separate entities. A resident's council could be created to facilitate the resolution of conflicts, discuss needed changes to programs and services, and potentially organise recreational activities. It is recommended that the housing program conduct on-going program evaluation to ensure that they continue to meet the needs of their clients and to evaluate women's success in maintaining housing stability following discharge.

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# Appendix 1: Example of Rules for High-Demand Housing

## ***Example 1: Supplied by Elizabeth Fry Society of Vancouver Columbia House***

### **Rules**

Stringent at first when women are released and become more flexible as women stabilize

1. zero tolerance
  - a. if drug use is suspected, there is a possibility of developing a recovery plan and staying at Columbia House if resident is committed to recovery
  - b. staff may conduct searches if there is suspected contraband, i.e. drugs, weapons
2. room checks weekly for cleanliness and to assess health or safety concerns
3. prescription and non-prescription medication is kept and administered by staff medication
4. no violence or weapons
5. no sexual activity on the premises
6. first 48 hours are spent at the house with exception of approved mandatory appointments
7. Curfews are gradually increased over the first few weeks to the normal curfew which is 23:30 Sunday through Thursday and 00:30 Friday, Saturday, and holidays. Staff may reduce curfews for missed chores, late arrivals, and non-compliance with house rules
8. Staff will hold up to \$100 for clients
9. Sign in/out book. Residents must indicate specific addresses, store names/locations
10. Weekend passes are available as follows:
  - Second month of residency – 1 weekend pass
  - Third month of residency – 2 weekend passes
  - Fourth month of residency – 3 weekend passes
  - Five or more months – unlimited weekend passesSpot checks will be conducted during the weekends by telephone at assigned curfew time  
Passes must be approved by resident's PO
11. Must attend Tuesday night house meeting every week and dinner Monday – Thursday. Approved absences may be requested.
12. Residents are expected to have a constructive day plan. Staff will work with struggling residents to implement structured schedules.
13. Wake up times are individualized to each woman's needs.
14. Residents are expected not to leave the house any earlier than 7:30 am, 7 days a week. Early departure and late returns may be requested  
Residents are required to be in the program for 7 consecutive hours within each 24-hour period.  
POs can request this time to be increased at their discretion.

## **Example 2: Supplied by Jean's Place**

Transition Projects, Inc  
Jean's Place Rules and Regulations

**TPI Mission:** The mission of Transition Projects is to assist and advocate for people in Multnomah County to meet their basic need for shelter, food, clothing, physical and emotional health. Transition Projects provides emergency and transition services in an atmosphere that nurtures life with dignity and serves as a catalyst for choice, change and return to self-sufficiency. The agency works towards the resolution of homelessness and poverty by providing housing and a continuum of services, education and advocacy.

**Jean's Place Objective:** We will provide a safe and respectful environment, which is free from alcohol and drugs, violence and fear of others. Single adult women will move from homelessness and poverty by working through a multi-level comprehensive case management program. Each woman, working cooperatively with their case manager in developing goals and objectives will establish a comprehensive case plan. The length of stay for each individual is solely based on the success of the case plan and the individual's ability to work towards independence but will not exceed 11 months.

### **Basic Requirements:**

- All residents are single adult women over the age of 18 who are able to care for themselves
- All residents have a current TB card-TB cards can be obtained at the Salvation Army, 131 SW Ankeny on Mon, Wed, Fri between 1:15pm-3:15pm
- All residents are clean and sober throughout their stay
- Jean's Place is a communal living situation so therefore all residents must be respectful of each other. Residents will work together to keep the common areas and bathrooms clean. Residents must maintain appropriate hygiene for communal living.

### **Services Provided**

- TPI may be used as a mailing address: 475 NW Glisan, Portland, OR, 97209. Mail hours are posted near the RA desk.
- Bus tickets are available for verifiable medical appointments from the daytime RA from 8:30am-3:30pm Mon-Fri. All other requests must go through your case manager.
- Laundry facilities are available between 7am-10pm. The cost is \$.50 to wash and \$.50 to dry. If you do not have an income, you are eligible for one load a week through recycling bottles and cans-see the RA on duty.
- There is a phone available from 7:30am-10pm for free outgoing phone calls. Calls must be limited to 10minutes. You may use the Jean's Place phone number (503-823-4926) for messages. A pay phone is available for card/collect calls.
- Food boxes are available once every 30 days-you must have a cabinet to receive a food box and a \$5 key deposit is required to get a cabinet and have use of the cabinet.
- There are dinners donated throughout the week and there is a calendar in the kitchen listing when these are.

### **House Rules**

- Shoes or slippers must be worn at all times. No pajamas before 8:30pm. No sunglasses in the building.
- There are mandatory house meetings every 2<sup>nd</sup> and 4<sup>th</sup> Wednesday of the month.
- TV hours are Mon-Fri 6am-7:30am, Mon-Thurs 5pm-11:00pm, Fri 5pm-1am, Sat 9am-1am, Sun 9am-10:30pm. Residents may sign up at the RA desk for one hour of TV a week for a specific program. No X rated movies are allowed at Jean's Place. Please try to post notices when you want to watch a movie!
- To have access to a cabinet a \$5 key deposit is required and you can then receive food boxes once every 30 days. Each person who occupies the cabinet needs to have their own key. There is a house food cabinet that is available for everyone to access.
- Refrigerator storage is limited to one clear container that we will provide plus 3 individual items. There is also a house refrigerator that everyone has access to. Freezer storage is limited to 3 individual items. All items must have a name and date on them. Staff cleans the refrigerators once a week and unlabeled and rotten food will be disposed of. Food is allowed in the kitchen and dining area **only**. Closed water bottles are allowed in sleeping areas.
- Residents are expected to participate in recycling. This includes breaking down and rinsing of containers.
- Visitors are not permitted in the building and residents must meet their party at least 3 blocks away from Jean's Place. This is our Neighborhood Policy.
- Residents may not enter a dorm/room area unless they reside in that area.
- Cell phones may be used in the phone area if no one is on the house phone and outside and must be turned off/silenced while in the building. No cell phone use during quiet hours
- Monthly fire drills occur for the safety of all residents. Residents with physical disabilities should arrange a "buddy" who will be able to assist them in this or in the event of a true emergency.
- All medications and refills of medications must be logged into the shelter computer. You need to inform staff if you stop taking a medication
- 911 calls will go through shelter staff. The 911 system is not to be abused.
- Quiet hours are 10:30pm-7am and lights in bedroom areas are off at this time.
- Wake up is at 7am on weekdays and 9am on weekends. You need to be dressed and beds made at the ½ hour check.
- Please try to keep your property in its designated area.
- Room inspections occur every Thursday after morning chores. Guidelines are posted in the building.
- **Violations of the above rules will result in verbal warnings. Continued violations of these rules will be addressed with your case manager or shelter supervisor and could lead to a contract and/or potential end of shelter stay.**
- You must respect and honor the confidentiality of your housemates while in shelter and following your shelter stay.
- No abusive language or behavior towards residents/staff/volunteers.
- Gossiping and hurtful comments will not be tolerated at all!
- **You will be excluded for smoking/lighting candles/incense in the building.**
- **Disrespectful and/or inappropriate behavior towards another resident/staff/volunteer will initially result in a written warning, then a one day exclusion and continued infractions of this nature may result in a termination of your shelter stay.**

### Curfew Policy

- Mandatory check-in is every night in person from 5-10:30pm at the RA desk. Curfew is 10:30pm. If you need to be excused for the night or return after curfew, this has to be approved by your case manager.
- If you need to leave before 5am, this also needs to be approved by your case manager.
- **If you get back later than 10:30 or do not return at all for the night, you will receive an unexcused absence. If you receive 2 unexcused absences in a 30 day period, you will receive**

**a 30 day non- use exclusion and will need to re-access the wait list after 30 days to reenter the program.**

### **Personal Property Policy**

- Residents are allowed 2 bags/suitcases of belongings. Residents who bring in more than this will be given an opportunity to address the situation by removing the excess property from Jean's Place. If it is not addressed, warnings will be issued. It will begin with a verbal warning, then a written warning and then a 3 day exclusion. Every warning after the initial 3 day exclusion will be subsequent 3 day exclusion.

### **Community Chores**

- Each resident is responsible for 4 cleaning chores (which equals approximately 2 hours) a week. Sign up is Thursdays at 9am. All areas must be vacated during chore times. Bathroom and kitchen will be checked by staff before re-opening after chores. Chores start at 8am, 3pm and 8pm Mon-Fri and Sat-Sun at 10am, 3pm, 8pm.
- If you cannot make a chore, we ask that you try to work with another resident to switch chores. Both residents need to notify RA staff of a switch. If you are unable to do that, please talk with RA staff to find an alternate time.
- First violation for missing chores is a verbal warning, second is a written warning and a third missed chore is a 3 day exclusion. Every subsequent chore violation is a 3 day exclusion.

### **Alcohol/Drug Policy**

Jean's Place is a clean and sober facility. Residents may not be under the influence of alcohol or drugs. This includes the abuse of prescription medications, over the counter medications and taking other people's medications. Exhibiting drug abuse or triggering behaviors such as nodding out will not be tolerated. Random and requested observed breathalyzer and urinalysis testings are done daily. Cough medicines, mouthwash, over the counter medications with pseudoephedrine without a doctor prescription and food with poppy seeds are not allowed as they can cross react with the BA/UAs that are performed. A refusal to be tested or failure to produce a sample within 2 hours will be considered a positive test.

1st violation=3 day exclusion

3<sup>rd</sup> violation=5 day exclusion

2<sup>nd</sup> violation=4 day exclusion

4<sup>th</sup> violation=Termination of shelter stay and needs to re-access wait list after 30 days.

\*Any violation beyond the 4<sup>th</sup> violation in 1 year will result in a 30 day exclusion.

### **The following will not be tolerated at all and will result in 6 month Exclusion.**

- Any form of racism, sexism, homophobia, anti-Semitism or discrimination
- Abusive, violent or threatening behavior towards another resident, staff or visitor
- Use or possession of alcohol (this includes empty alcohol bottles), drugs, drug paraphernalia in the building or possession of someone else's prescription medication
- Some situations resulting in a police call
- Destruction/theft of TPI or another resident's property
- Possession of weapons or item intended for use as a weapon
- Any repeated behavior that is unacceptable and against the rules

### **Storage policy**

If you receive an exclusion, your belongings may be bagged up and placed in storage until you return to Jean's Place. If you receive an exclusion for 30 days or more or if you move out, your belongings will be

bagged up and placed in storage and we will hold your belongings for **3 days** after which they will be recycled.

**Jean's Place is not responsible for any items placed in storage. Only non-perishable food items will be stored.**

**Jean's Place is not responsible for the theft of any valuables or medications.**

**Please remember that staff is available if you have any questions!!**

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**Rental Agreement for Jean's Place- Transition Projects, Inc.**

The parties listed below have agreed that the landlord will supply decent, safe and sanitary dwelling to

RESIDENT: \_\_\_\_\_ at 18 NE 11<sup>th</sup>, Portland, Oregon 97232, at Jean's Place.

**TERMS AND CONDITIONS**

**1. Terms of Agreement-** This rental agreement is to begin on \_\_\_\_\_. The resident may occupy the dwelling from month-to-month thereafter provided she performs strictly in accordance with this agreement.

**2. Rent-** Of the total rent, \$\_\_\_\_\_ shall be payable by the resident. This amount shall be subject to change based on changes in the resident's income. Rents are due and payable on the first of the month and must be paid on time. If rent is not paid by the end of the 5<sup>th</sup> day of the month, a late fee of \$10.00 per day will be imposed starting on the 6<sup>th</sup> day of the month. Partial payment will not be accepted without prior management approval. Rent shall be paid in the form of a money order made payable to Transition Projects, Inc. and shall be dropped off at the landlord's message box. If this rental agreement is executed on a day other than the first day of the month, the resident shall pay the amount of their prorated portion to the end of the month in which this rental agreement commences, and thereafter shall pay each full month's rent in advance as provided.

**3. Deposits-** A cleaning and security deposit of \$25.00 shall be used to offset any damage, unusual wear and tear or unpaid accounts (including rent) at the time of move-out. A key deposit of \$10.00 shall be used to replace lost room and/or cupboard keys. These deposits shall be paid in the form of a check or in cash and may be held by the landlord during tenancy and any excesses will be refunded to the resident. Not more than thirty days after the return of the dwelling, the landlord shall deliver to the resident:

- (a) a written statement itemizing all deductions, if any
- (b) any balance of the deposit owed to the resident.

**4. Financial Terms -**

Monthly Stated Rent	\$
Security Deposit (refundable)	\$25.00
Key Deposit (refundable)	\$10.00
Late Charge per day after 5 <sup>th</sup> of the month	\$10.00

5. **Utilities** - Utilities shall be the responsibility of the landlord. Utilities include electricity, heat, water, sewer and garbage collection.

**6. Resident's Responsibilities-**

- (a) The resident agrees that the use and occupancy of the premises is restricted to the individual listed above as resident.
- (b) The resident agrees to use the premises, its appliances, fixtures and facilities in reasonable manner and for purposes for which they are intended. The resident shall not deliberately or negligently destroy or remove any part of the premises.
- (c) The resident agrees to conduct herself and require others on the premises with her consent to conduct themselves lawfully and in a manner that will not disturb her neighbors' peaceful enjoyment, or cause or be a nuisance. Between 10:00pm and 7:00am, no noise may be emitted from the unit that can be heard outside the unit. This includes stereos, radios, televisions, etc.
- (d) The resident agrees to use the dwelling as her residence and not pursue any business on the premises. She will not assign or transfer this rental agreement, and will not sublet the dwelling or allow any third parties to use or occupy the premises.
- (e) The resident agrees to keep all areas under her control clean, sanitary and free from the accumulations of debris, filth and garbage, and to dispose of all waste in a clean and safe manner. Residents are responsible for all damages to furnishings or premises caused by their negligence.
- (f) The resident agrees not to unreasonably withhold consent to the landlord to enter the dwelling unit in order to inspect the premises, make necessary or agreed repairs, decorations, alterations or improvements or to show the unit to prospective residents. The landlord may enter the unit without consent in an emergency or at any reasonable time with 24 hours actual notice.

**7. Landlord's Responsibilities-**

- (a) The landlord will supply a decent, safe and sanitary dwelling and shall maintain the premises and all equipment provided therein, as well as common areas, facilities and equipment provided for the use and benefit of the resident.
- (b) The landlord shall provide maintenance services with respect to common areas, facilities and equipment.
- (c) The landlord shall respond in a reasonable time to notification by the resident of problems regarding the facilities and the equipment therein.
- (d) Extermination services shall be provided by the landlord as conditions may require.
- (e) Repainting shall be provided by the landlord as conditions may require.
- (f) The landlord shall not discriminate against the resident in the provision of services or in any other manner on the grounds of race, color, creed, religion, national origin, sexual preference, age, marital status, physical or mental handicap.

**8. Reasons for Termination-** The landlord may terminate the tenancy during the term of the rental agreement upon the following grounds:

- (a) violation of any provision of this rental agreement, including failure to pay rent;
- (b) violation of any condition or provision set forth in the Addendum and Rules and Regulations attached to the rental agreement;
- (c) inability to maintain the premises in a safe and habitable condition;
- (d) unauthorized visitors on the premises;
- (e) violation of applicable Federal, State or local law; or
- (f) other just cause.

**9. Termination of Tenancy**

- (a) The landlord must serve written notice of termination of tenancy on the resident. The notice shall be posted on the resident's door and another copy of it shall be mailed. The notice will be effective the day it is posted and must state the reason for such termination and the date the tenancy shall terminate. Such date must be in accordance with the following:
  - 1. When termination is based on failure to pay rent, the notice cannot be given until the rent has been late for seven days. The notice must give the resident 72 hours to pay the rent.
  - 2. When termination is based on personal injury or threat of injury to the landlord, other tenants or staff, theft or major damage to the property, or other just cause, the resident shall be given a 24-hour notice to vacate the premises.
  - 3. When termination is based on violation of the terms and conditions of the rental agreement or on violation of applicable Federal, State or local law, the date of termination must be in accordance with the State and local law.
- (b) Immediately upon termination becoming effective, the resident shall remove herself and her property from the premises and surrender possession thereof and the furnishings therein, in a clean and good condition, reasonable wear and tear excepted, and shall return the keys to the landlord.
- (c) In the event the premises shall become vacant or shall be abandoned or deserted by the resident, the landlord may presume that the resident has terminated this rental agreement and may immediately take possession of the premises. Abandonment or desertion shall be defined as apparent removal of substantially all of the resident's belongings from the premises.
- (d) Notice of Termination may be given by either party to this rental agreement on any day of the month.

**10. Abandonment-** Any goods, vehicles or other property left on the premises after termination of the tenancy by any means shall be considered abandoned. It will be stored for three days and then recycled.

**11. Pets/waterbeds/musical instruments-** No pets, waterbeds or loud musical instruments allowed. Exceptions will be made for support animals needed for medical purposes.

**12. Oregon Residential Landlord/Tenant Act-** Both the landlord and the tenant agree to abide by the Oregon Residential Landlord/ Tenant Act of the State of Oregon and any other local laws or ordinances that apply.

**13. Resident Losses -**

- (a) Doors of resident's dwelling should be kept locked. Resident shall notify landlord in writing if locks fail to operate. The landlord will not be liable or responsible in any way for loss or damage to articles or property belonging to residents.
- (b) Residents should maintain renter's insurance to cover fire and theft of their own personal property. The landlord's insurance policy does not reimburse losses to the resident's personal property in the event of damage to the dwelling.
- (c) The landlord shall not be responsible for damages of any kind caused by the lack of heat, refrigeration, or other services to the premises arising out of any accident, act of God, or occurrences beyond the control of the landlord. The residents shall be limited to the rights and remedies specified in the Oregon Residential Landlord Tenant Act.

14. **Termination for False Information** - If any information supplied in conjunction with this rental agreement is later found to be false, this is grounds for termination of tenancy.

15. **Complete Agreement**- This rental agreement and addendum are intended to be a complete record of the rental agreement and supersede, cancel and replace all promises and agreements made before signing.

16. **Optional Provision**- The resident certifies that she has received a copy of this rental agreement and the following attachments to this agreement and understands that these attachments are part of this agreement:

- (a) Attachment 1- Addendum to Jean's Place Rental Agreement
- (b) Attachment 2- Jean's Place Rules & Regulations- Level III

Landlord	Date	Resident	Date
		Emergency Contact	

**Attachment 1: Addendum to Jean's Place Rental Agreement**

**This Addendum to the Jean's Place Rental Agreement is hereby attached to and made part of the Jean's Place Rental Agreement. In the event any provision in this Addendum is inconsistent with any provision or provisions contained in the Jean's Place Rental Agreement, the provision of the Addendum shall control. The parties hereby amend and supplement the Jean's Place Rental Agreement as follows:**

1. Jean's Place is a drug and alcohol free environment and it is expected that all residents maintain their sobriety, and actively work towards resolving issues that prevent self-sufficiency.
  - (a) Alcohol and drug use are not permitted in the facility or its premises. Residents, who are intoxicated through the confirmation of a UA/BA, will be given a 48-hour eviction notice with a 24-hour right to remedy for a first violation, and terminated from the program for a second violation.
  - (b) After the initial violation, the resident will be required to enter an A/D treatment program in order to stay at the Jean's Place. If the resident enters an A/D treatment program within 24 hours after delivery of this notice, the rental agreement will not terminate. The resident's case manager will verify this before the resident is permitted to continue staying at the facility..

- (c) If a second violation occurs within six months, the resident will be given a 24hr eviction notice with no right to remedy and their rental agreement will be terminated.
- (d) Possession of alcohol or an illegal substance will result in a permanent exclusion from Jean's Place.

2. Residents are expected to actively work towards self-sufficiency while residing at Jean's Place. This means:

- (a) Residents are required to meet with their case manager on a weekly basis. A resident's stay at Jean's Place will be extended as long as the resident follows the facility rules and regulations, and meets with their case manager to fulfill the goals and objectives of their case plan.
- (b) A resident's failure to comply with their case plan or meet with their case manager can lead to the termination of their stay at Jean's Place.

3. Jean's Place shall provide safe and secure housing for its residents. Residents agree to comply with the following:

- (a) Violence of any form will not be tolerated. Harassment, discriminatory, homophobic or racist language and/or violent or threatening behavior toward staff or other residents will lead to termination of the resident's stay at Jean's Place.
- (b) Residents who are leaving an abusive situation and/or who have filed a restraining order are required to keep their location confidential. This policy is maintained to ensure the safety of all residents at Jean's Place, and violations of the policy will result in termination of the resident's stay at Jean's Place.

4. The resident acknowledges that she has read the Jean's Place Addendum and understands that her right under the Jean's Place Rental Agreement are conditioned upon strict compliance with the terms of this addendum at all times. Any violation of the terms, conditions or rules described above may result in termination of the rental agreement as provided by section 8(b) of the rental agreement.

Landlord	Date	Resident
Date	Resident	Date

**Attachment 2: Jean's Place Rules and Regulations- Level III**

**The following rules and regulations have been established for the protection of residents, staff and volunteers. If you have any questions about the rules, please ask. All staff members have the responsibility and authority to enforce these rules. It is expected that all residents abide by these rules and regulations. Failure to do so will result in a written warning. A high number of written warnings will reflect poorly on the resident's rental reference.**

1. Residents must have a current TB card (less than six months old) in order to stay at Jean's Place.
2. Residents must check in on a daily basis by curfew (12:00am) in person at the RA desk on the second floor.
3. Notify the RA on duty when you will be taking an excused night out so they can note this on your card.

4. Curfew on weekday nights is 12:00am curfew, and 2:00am on Friday and Saturday nights. Get on the late list if you need to stay out beyond curfew.
5. TV hours are at any time of the day and night. Please be respectful of quiet time hours. Residents are permitted to have TV's and radios in their rooms. Please keep them at low volume so as not to disturb your neighbors. Quiet time is between 10:30pm and 7:00am.
6. Residents must keep their living areas neat and tidy. Staff will do weekly rounds to ensure that all bedrooms are kept clean.
7. In addition to keeping individual living spaces clean, all residents must perform two hours of community chores each week. This includes cleaning the common areas. The chore list will be posted on the bulletin board on the third floor.
8. Smoking is not permitted inside the building. The two designated smoking areas are the second floor courtyard and the third floor.
9. There will be no weapons or items intended for use as weapons at Jean's Place.
10. Transition Projects is not responsible for the theft of any items.
11. Use of the community phone on Level III is at any time during the day and night. Please be respectful of quiet hours when using the phone. Limit calls to 10 minutes if someone else is waiting to use the phone. You may use the number to Jean's Place (823-4926) as a message phone. Please check your messages daily on the message bulletin board on the second floor by the RA desk.
12. Visitors are not permitted in the facility at any time unless authorized by your case manager or the building supervisor.
13. Loitering around the perimeter of the building is not permitted.
14. Theft of any kind will not be tolerated.
15. Defacement of the building or any of its contents will not be tolerated.
16. Residents must use TPI's Glisan St. address as their mailing address (475 NW Glisan St., Portland, OR 97209). Residents must have a picture ID and sign for this mail. Residents are not permitted to use the street address of Jean's Place due to confidentiality and safety issues.

17. It is required that residents dress appropriately when going onto the deck and when taking the garbage to the dumpster. Inappropriate dress includes: lingerie, sports bras, short nighties, etc.

18. Level I & II residents are not permitted upstairs to Level III unless accompanied by a staff person. Level III residents who have friends in Level I & II can visit with them on the second floor. After 10:30, Level III residents have access to library only.

19. Bedrooms will be inspected before a resident moves in and when a resident moves out of the facility. If the room has been damaged in any way, the cost of repairing the damage will be withheld from the resident's deposit.

20. Bedroom and kitchen cabinet keys must be signed out and a key deposit of \$5.00 each paid upon moving to level III. Keys must be returned before the resident moves from the facility. Residents will receive their key deposit back when they return their bedroom and cabinet key upon move out.

21 I have read and understand the rules and regulations and will comply with them to ensure my continued stays at Jean's Place.

\_\_\_\_\_  
Resident Name (Please Print)

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

### **Example 3: YWCA of Regina Residence Introduction**

## **Welcome to the YWCA of Regina**

The YWCA women's residence is a communal rental accommodation for independent living. Please show respect for other residents and staff at all times. We do not tolerate racism, homophobia or other prejudices. We do not condone the use of street drugs or the misuse of alcohol.

- The Front Door is locked during the evening. Ring the night buzzer for entry. Be prepared to give your name and room number and show your room key to the night person.
- There is a kitchenette and lounge area located on both the 4<sup>th</sup> floor (non-smoking) and the 5<sup>th</sup> floor (smoking). Third floor residents will receive a key card for one of the lounge floors depending on whether you smoke or not.
- Please leave the kitchen and lounges areas clean at all times.
- There is a coin operated washer and dryer on the 4<sup>th</sup> and 5<sup>th</sup> floor.
- Female visitors **only** are allowed on residence floors and they must leave by 11:00 PM.
- Quiet hours are observed between 11:00 PM and 7:00 AM - no phone calls, loud music or loud talking.
- You must get written permission from the resident worker for past residents to visit.
- Please notify the Front Desk or Residence Staff about any maintenance problems so they can be fixed as soon as possible.
- Street dress is required on all floors except on the Residence floors.
- There are phones on each residence floor. Should you require assistance due to an emergency, dial 911. No coin is needed. Please notify the front desk if an ambulance or other emergency vehicle has been called- 525-2141.
- Use the main entrance only. All other doors are fire doors, which are closed for your protection and will set off a security alarm when opened.
- Information about fire procedures are posted in each room.
- Please note that check out time is 11:00 AM
- Upon departure, you will receive a looney when you hand in your keys and key card with neck tie

## **HELPFUL INFORMATION FOR LONG TERM**

### **RESIDENTS...**

- RENT MUST BE PAID BY THE END OF THE PREVIOUS MONTH
- There is a freezer on the 5<sup>th</sup> floor for residence use. It is locked and will be opened by a resident worker during hours specified on the freezer.

- Monthly residents have access to the fitness area during non-peak operating hours. Talk to the resident worker to receive written permission from her before you use the area.
- The resident worker will do monthly room checks regarding the following;
  - All food is to be stored in containers, not left open on the counter;
  - Refrigerator is to be kept clean;
  - Bedding, towels, clothing must be washed regularly; and,
  - Room is to be swept weekly
  - You may not store large amounts of clothing or other items in your room.

**WHEN YOU MOVE:**

- We require two weeks written notice when you move out.
- Do not leave any items at the YWCA when you check out. We do not store goods so they will be disposed of upon your departure.
- Monthly departures are the last day of the month by 11 am.
- There is staff in the building at all times. If you need assistance, contact Front Desk.

**WE HOPE YOU ENJOY YOUR STAY AT THE YWCA**

**LEAVE PRIVILEGES**

**Grounded:** You are not allowed to leave the building or have visitors unless with or authorized by staff. You must stay on your own floor or the lounge floor assigned to you. Exception will be made to attend work and programming only or if you are with the Resident Worker.

**Level 1:** 3 meals per day - 2 hours each between the following hours:

Breakfast: 7:00 - 10:00 A.M.

Lunch: 11:00 - 3:00 P.M.

Supper: 4:00 - 8:00 P.M.

Upon arrival you are required to stay on Level 1 for 4 nights.

**Positive urine sample results in Level 1 or grounding for 1 week or until you can provide a clean urinalysis. The nature of the action taken will be determined by you Parole Officer.**

**NO VISITORS ALLOWED AT THE YWCA WHILE ON LEVEL 1.**

**Level 2:** 9:30 P.M. curfew Sunday to Thursday.

11:00 P.M. two times per week (3 on long weekends) normally

Friday and Saturday.

Noon check-in between 11:00 - 12:00 seven days per week

Supper check-in between 4:00 - 6:00 P.M., seven days per week.

When checking-in, you must remain in building, on your floor for one hour before you can check out again.(no visitors)

Exception will be made if you are employed, attending school or programs full time.

**You will not move to Level 3 until one month of successful adjustment from your arrival.**

You may apply for your first eligible weekend pass in Level 2.

**Level 3:**

11:00 P.M. curfew Sunday to Thursday.

12:00 midnight, two times per week (3 on long weekends) normally Friday and Saturday.

If unemployed - a noon phone-in between 11:00-12:00.

If employed, in school or programs fulltime during the day hours, no check-in required.

Supper check-in between 4:00-6:00 P.M. Monday – Friday (not on long weekend holiday day) You must remain on your floor for 1 hour with no visitors

Phone check-in on Saturday and Sunday and on long weekend holiday between 4:00 - 6:00 P.M.

You may apply for weekend passes in Level 3. If unemployed, you will remain on level 3 and not move to level 4.

**Level 4:**

11:00 P.M. Sunday to Thursday.

12:00 midnight -- two times per week (3 on long weekends) normally Friday and Saturday.

Supper check-in 4:00 - 6:00 P.M. Monday – Friday in person (exceptions may be made by your Parole officer)

No check-in on weekends or long weekend holiday day.

You may apply for weekend passes in Level 4.

***While on level 2 and 3, if unemployed and not involved in day time programming or volunteer work, you are required to be looking for work, volunteer work or educational programs between the hours of 9 am and 5 pm.***

*Monday through Friday. Otherwise you have to remain in the building.*

*YWCA staff will require proof that you are looking for work etc....*

**AFTER CURFEW, YOU MAY ONLY BE IN YOUR ROOM, THE T.V. LOUNGE,  
OR THE BATHROOM. AFTER 1 AM YOU MUST BE IN YOUR ROOM (OR  
BATHROOM ON YOUR FLOOR).**

**\*\*\*For Visitors please refer to Visitor section in this document.**

**Note:** Any request to be out of the building past midnight, regardless of the

reason must be in writing and approved by the Parole Officer.