

# Indiana Housing First Program

*Presentation to IHEDA Board of Directors on August 25, 2022*

# Program Background

- The Indiana Housing First Program (“the Program”) was created in 2017 by the state general assembly to provide rental assistance and supportive services to individuals and families with a serious, persistent mental illness, a chronic chemical addiction, or a serious and persistent mental illness with a co-occurring chronic chemical addiction, who are also facing a housing crisis.
- Program regulations may be found in Indiana Code [5-20-9](#)

# Program Model

## Housing First

- Person-centered approach, centered on the belief that all individuals are “ready for housing and can achieve stability in housing with the right supports”
- Services provided are *voluntarily selected* by participants and are predicated on a *harm reduction* approach to addiction
  - If a household elects to receive services, the services must be individually tailored to the needs and goals of the household
- Low-barrier entry criteria, with no additional barriers added by Program recipients.
- Participants must have typical lease, with all rights and responsibilities

# Program Strategy

## Critical Time Intervention

- The program follows a Critical Time Intervention (CTI) approach to providing assistance:
  - Goal of CTI is to build long-lasting stability by developing a community support network around the individual or household and providing support during the time of transition
  - The relationships built in the community are expected to outlast the financial assistance provided by the program
- Evidence-based practice that has been demonstrated to be effective at providing housing assistance to individuals with serious mental illness
- All Housing First Program Recipients are provided CTI training

# Program Activities

- Program funds can be used for:
  - Tenant-based rental assistance and other housing costs (min 60% of funds)
  - Supportive services (max 30% of funds)
  - Administrative costs (max 10% of funds)
- Participants do not have to be enrolled in supportive services to receive rental assistance and vice versa

# Participant Eligibility

- In addition to having at least one member with a qualifying diagnosis, the household must be experiencing a **housing crisis**, defined as:
  - “A situation in which an individual or a household does not have sufficient resources or support networks immediately available to maintain safe and affordable housing or to prevent the individual or household from requiring emergency housing.”
- Program Recipients may not establish a minimum income requirement and must accept households with little or no income.
- To receive more than 12 months of rental assistance, the household must have an annual income at or below 60% of the area median income (AMI) as published annually by HUD.

# Parameters of Assistance

Eligible households may be enrolled in the Program for a **maximum of 24 months** per Housing Crisis.

- Participants receiving rental assistance must execute a lease with the property owner; initial lease terms must be renewable and for no less and 12 months.
- The contract rent charged by the landlord, plus a utility allowance if utilities are not included in the rent, must be determined to be reasonable.
- The participant's rent contribution must be at least 30% of the household's monthly adjusted income, with the goal of decreasing the subsidy over the term of assistance.
- The unit selected by the tenant must pass the Housing Quality Standards (HQS) inspection.

# Program Successes

Since 2018, IHCDCA has made 20 awards totaling \$4,564,288.59 to nine unique organizations serving regions across the state of Indiana.

More than 611 individuals in 364 households have been served.

Living situation prior to entry:

- 47% of households were literally homeless (e.g., staying in emergency shelters or places not meant for human habitation)
- 20% of households entered the program from institutional settings (e.g., substance use treatment facilities, jail/prison, hospital, psychiatric facility)

Outcomes:

- 71% of participants exit to “permanent” destinations, most commonly rental by client with no subsidy
- 9% exit to “temporary” situations, most commonly living with family or friends