
INTRODUCTION

Safe Havens serve as refuge for people who are homeless and have a serious mental illness. Safe Havens provide more than shelter. They close the gap in housing and services available for those homeless individuals who, perhaps because of their illness, have refused help or have been denied or removed from other homeless programs.

In 1992, amendments to the Stewart B. McKinney Homeless Assistance Act included a provision for the creation of Safe Havens. According to Title IV, Subtitle D of the McKinney Act:

A safe haven is a form of supportive housing that serves hard-to-reach homeless persons with severe mental illness who are on the street and have been unable or unwilling to participate in supportive services.

The McKinney Act specified several characteristics of Safe Haven facilities:

- 24-hour residence for eligible persons who may reside for an unspecified duration;
- private or semiprivate accommodations;
- overnight occupancy limited to 25 persons;
- low-demand services and referrals; and
- supportive services to eligible persons who are not residents on a drop-in basis.

Safe Havens encourage residents to go beyond just finding shelter. This is done by creating a housing environment that is safe, sanitary, flexible and stable, and which places no treatment participation demands on residents, but has high expectations for residents. These expectations specifically include that the resident will transition from unsafe and unstable street life to a permanent housing situation and that re-engagement with treatment services will occur. Because these expectations are introduced non-intrusively and as the resident is ready, the phrase “low demand” is often used to characterize Safe Haven housing.

According to *Outcasts on Main Street*, the Report of the Federal Task Force on Homelessness and Severe Mental Illness, which was the impetus for creating the program, this transition period is necessary “to achieve relative stability and to permit professional staff to adequately assess clients’ long-term needs and prospects. The skills needed for survival on the streets (such as the need to mistrust strangers and use hostility as a defense) differ greatly from those needed for accommodation indoors. Before they are ready and able to adhere to rules and program requirements, many people with severe mental illnesses need not only shelter from the harshness of street living, but time to reflect and learn to trust helpers.”

The McKinney Act lays the groundwork for Safe Havens but does not offer specific guidance on issues ranging from staffing and site design to rules and outreach. This Tool Kit has been developed to guide communities and project sponsors to create effective Safe Havens. It is written by people who have developed and/or operated Safe Havens and mental health consumers have critiqued their ideas. The Kit includes eight chapters covering the key issues surrounding the creation of Safe Havens, as follows:

Continuum of Care. Chapter 1 discusses how Safe Havens can fit into a local Continuum of Care approach to alleviate homelessness, an approach that focuses on a local community creating a network of housing and services that lead to permanent housing. Safe Havens figure prominently in this continuum.

Planning, Designing, Siting and Financing Safe Haven Housing. Chapter 2 focuses on establishing the physical aspects of a Safe Haven project with an emphasis on good planning and design. The chapter also covers cost preparations and choosing the best housing situation and location.

The Challenge and Opportunity of NIMBY. Chapter 3 discusses overcoming the effects of the NIMBY (Not In My Back Yard) syndrome and offers suggestions to help new programs to address this issue.

Program Issues: Outreach, Engagement and Service Delivery. Chapter 4 uses examples and recommendations for exemplary practices from three established Safe Havens to offer direction in these crucial program issues.

Crisis Management. Chapter 5 will help Safe Haven staff recognize, anticipate and prepare for crisis within their programs. It suggests five tenets of crisis management to guide a program’s response to emergency situations.

Program Rules and Expectations. Chapter 6 discusses making effective house rules, dealing with infractions, and protecting residents’ rights. It includes a special section on rules regarding sexual activity and drug use.

Staffing Issues. Chapter 7 reviews staffing patterns and makes suggestions for staff background, qualifications, and training. This chapter also addresses issues concerning outreach staff, consultants, volunteers, students, space and the facility.

Transitions from Safe Havens. Chapter 8 presents ideas to help residents prepare for their eventual departure from a Safe Haven to a more permanent living situation. It indicates that preparations begin at the earliest stage.

DEVELOPMENT OF THE SAFE HAVEN TOOL KIT

This Tool Kit is based on information gathered at a meeting, "Developing and Operating Safe Haven Programs," held in Washington D.C. in April 1997. The meeting was sponsored by the Center for Mental Health Services (CMHS) of the Substance Abuse and Mental Health Services Administration in the U.S. Department of Health and Human Services and the Office of Special Needs Assistance Programs, Office of Community Planning and Development within the U.S. Department of Housing and Urban Development.

The meeting convened experts in the fields of housing, homelessness and mental illness, and Safe Haven staff from across the United States. The format purposefully included participation by mental health consumers on each topic. Federal representatives from CMHS and HUD worked with the group members to begin to create a consensus on the issues and exemplary practices included in this Tool Kit.

Six papers were prepared for review at the CMHS/HUD meeting. Participants responded to the subject material and then the papers were developed to reflect the consensus of the group. These papers account for six of the Tool Kit's eight chapters. The remaining two chapters, on NIMBY and Crisis Management, were added in light of the participants' expressed need to address these important issues in this guidebook.

It is hoped that this collection of information will inspire communities to open Safe Havens for homeless people with serious mental illness who are unwilling or unable to leave the streets.