Program Name: The Healing Place

Your name and date: John Sedlander, August 8, 2002

Mission:

To provide shelter for homeless people and an innovative program of care and recovery for homeless chemically dependent people in the Louisville area.

Of interest to COTS are three program components:

- 1. Addiction Recovery this is the central focus of all Healing Place activities.
- 2. Peer Counseling The Healing Place uses clients in recovery to provide help and hope for addicts.
- 3. Strategy Transfer The Healing Place deliberately helps other cities to replicate its programs.

Principles: (expressed)

- The traditional model of assessment/referral/follow-up met with limited success.
- 80% of the homeless suffer from alcoholism or addiction.
- Everything the Healing Place does is based on recovery. The emergency shelter, the Soup Kitchen, and medical services are considered "outreach." The Recovery Program is central. Transitional Housing and Employment services are considered "aftercare."
- A mutual help recovery program using the Twelve-Step model is the most effective way to address a chronic disease.
- "Recovery Dynamics" is a program of how to use the Twelve Steps in a residential setting.
- Peer counselors inspire recovering addicts and motivate the counselors themselves.
- Alumni of the program become inspirational volunteers.

Program Structure:

A continuum of care links many services for homeless people. Once a trusting relationship has been established between client and staff, it can be maintained across several phases of the client's recovery. The Healing Place has found that this results in a far better success rate than referring clients to another agency, where they relapse more frequently.

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Outreach Emergency Shelter Soup Kitchen Clothes Closet Day Center Medical Services Non-medical Detox

Recovery Recovery Dynamics Classes Community Meetings AA and other 12-Step Meetings Life-on-Life's Terms Workshops Health Care & Self Care Personal Study Time

Follow-up Transitional Housing Employment Assistance

The Recovery Program is directly *across the hall* from the Emergency Shelter. This is a deliberate positioning, designed to demonstrate to using, drinking clients that they can choose the program that their friends have chosen. Conversely, it serves as a reminder to people in the program of where they have recently been themselves. Clients who have made good progress are assigned to act as mentors for clients who are new to the program. Alumni of the Healing Place are mentors for clients who are further along.

The residential Recovery Program typically spans four to eight months.

There are separate programs for men and women - at separate physical locations. The women's program also teaches parenting skills and has the goal of reuniting mothers with their children.

Strategy Transfer

The Healing Place was a winner of the 1998 Health & Human Services "Models that Work" award. They receive funding and encouragement to replicate their successful program in other cities. So far, new Healing Places have been established in Lexington, Kentucky; Raleigh, North Carolina; Athens, Georgia; and Richmond, Virginia. Several other cities have shown strong interest, including Tampa, Florida; Austin, Texas; St. Louis, Missouri; Grand Rapids, Michigan; Richmond, Indiana; and Phoenix and Mesa, Arizona. (and now Petaluma, California!) Here is the abstract from H&HS:

The Healing Place (THP) provides shelter, health services, recovery programs and housing alternatives for the homeless, addicted individuals in Louisville, Kentucky. THP's programs offer an innovative approach to addressing the medical, social and emotional needs of this population by making available the much needed safety for these individuals to begin to change their behavior, attitudes and lifestyle to become productive citizens. The Healing Place has taken programs of entitlement and turned them into programs of empowerment. Through the use of a diverse staff, community volunteers, and creative use of resources, THP has been able to deliver an effective program at a significantly lower cost than similar programs thus making the service available to more individuals in need. This model demonstrates the feasibility of a flexible, therapeutic, cost efficient model for dealing with difficult populations. There are at least two videos that promote interest in the program and help to solicit funding.

The Healing Place has put together a "Strategy Transfer Guide," a 28-page manual that explains its philosophy and how to establish a similar program in a new city. Included are eleven steps to replicate the program, as well as a guide to help secure funding and physical facilities.

How does the program define or measure success?

At the Healing Place, 62% of the men who complete the program and 64% of the women are still clean and sober after one year.

Describe a successful participant.

A successful participant is one who makes the decision to enter the Recovery Program.

At what level would a participant enter the program?

Homeless, drinking and/or using. It could be the first time, or it could be the n-th time. Relapsers are welcomed back.

Program	Method	Outcome (What would it look at COTS?)	Measurement
Approach (Application)	(How it's used?)	(what would it look at COTS?)	(How do we measure success?)
Human Growth & Transformation	The Twelve-Step approach is the central method for recovery. The Recovery Dynamics model is the specific tactic.	The Recovery model could be the best way to use the second-floor Transitional Housing at the Mary Isaak Center. Transitional housing that was unconnected with a	Clients who are clean and sober one year later.
		recovery program could be out in the community – like the Emmaus House is today.	

Staff Interaction with Clients	Staff's role is to invite and engage clients and to maintain their relationship through the client's recovery.	The interaction between staff and clients would look much the same as it does today. The difference is that we would add one more program element.	How many people sign up for the Recovery Program and how many stay with it. Fewer clients would be lost in the referral process.
Client-to-Client Interaction	Peer counselors are recovering alcoholics and addicts who share their experience, strength, and hope with other addicts and alcoholics in order to help them recover.	This program could work at the Opportunity Center as we expand the responsibilities of our "Level 3" clients. The length of stay at the Family Shelter may be too short to get it working there, and the Shared Housing program may be too dispersed geographically.	Clients movin' on up to Level 3! "I got a sliver of hope when I recognized J.M. working in THP's Sobering Up Center. He and I were drinking buddies from way back. His sobriety and serenity were so powerful that I started thinking I might be able to get it too."
Client Self-Help	The Twelve-Step approach puts responsibility on the participant.	Meetings, workshops, lots of community service hours. Serious structure characterizes the program.	Clients who are clean and sober one year later.

Does this promote a responsible and accountable lifestyle? How?

The Twelve-Step approach leads to recovery for self and reconciliation with others. Being clean and sober makes it much easier to find work and housing.

What are the client decision points in this program?

- 1) Clients come in for food, clothing, or shelter
- 2) Clients enter the Recovery Program
- 3) They become peer counselors
- 4) They become alumni volunteers

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What would you change to make the program or concept more useful in our setting?

COTS would need a year-round facility like the Mary Isaak Center to make this happen.

Additional Issues:

• Staffing

Located in the second floor of the Mary Isaak Center, we would need one or two additional professionally-trained counselors.

Aftercare

Inspired volunteers not only assist with the program, their service keeps them connected.

Costs

Salaries, benefits, and other personnel related costs would be the only additional costs.

Additional Comments

Alcoholism and addiction maintain a pervasive, destructive hold on many of our clients. Since it is so central to their situation, we can't serve them without somehow addressing their addiction.

Petaluma offers no residential treatment programs.

Some people love the Twelve-Step approach, and some people dislike it. Nevertheless it's a program that works for millions of people.

Sobriety may well be the greatest gift we could give to our clients. A residential recovery program may be the perfect use for the second floor of the Mary Isaak Center.

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<u>Sources</u>

Models that Work website: <u>http://bphc.hrsa.gov/databases/mtw/search.cfm</u>

Recovery Dynamics website: <u>http://www.kellyfdn.com/index.htm</u>

The Healing Place website: <u>http://www.thehealingplace.org</u>

"Miracles in Progress," brochure by the Healing Place, Louisville, Kentucky.

"A Lasting Solution," a short report by the Healing Place.

"Strategy Transfer Guide," a report by the Healing Place commissioned by *Models that Work,* a program of the U.S. Department of Health and Human Services.

"The Story" and "The Healing Place," two videos used to describe the Louisville program and build support for a replicated agency in Raleigh, North Carolina.