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Speaker Introduction

- Clinical Case Manager of Recovery Housing at the Guest House of Milwaukee
- Been in the position for ~2.5 years
- Have my MA in Women's Studies and had completed my coursework for an Urban Studies PhD program when decided I needed FT employment
- Found this position by happenstance...kind of ironic, but I love it! ☺

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The population I serve

- Who do you think of when you hear 'homeless man?'

- Great diversity within 'the homeless'


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The Population

- Primarily homeless, although some sometimes have housing and use the program as a respite or to re-center themselves in their recovery
- Although most of my clients are homeless, it is less about homelessness than about having a MH/AODA diagnosis
- Enrollment in CCS case management program

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Barriers my clients face

- Lack of funding for treatment
 - Very few individuals can get into residential.
 - RH becomes a great alternative (even though it's non-clinical) and is often completed in combination with formal therapy services.
 - Have Medicaid so few places will take their insurance.
 - The focus on the opioid crisis means that people with other addictions are placed lower on the priority list.

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More Barriers...☹

- Few resources in terms of stability
 - Long-term housing (evictions, no housing history)
 - Positive role models
 - Finances
- Lack of informal supports because of burned bridges so greater reliance on formal supports
- These factors impact this group of men that traditional AODA and/or MH treatment often does not encompass

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Who? What? Where? When? Class categories and examples. Shelter and program rules. Monthly Graduation.

RECOVERY HOUSING

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The Program

- What is it?
 - Recovery Housing utilizes strengths-based treatment principles and was specifically designed to address the barriers (from previous slide)
- Who is it for?
 - Recovery Housing (RH) is open to men in a distinctive case management program-- Comprehensive Community Services (CCS)
 - The men are expected to be in and working on their recovery from drugs/alcohol and/or mental health diagnoses.

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The program, cont.

- Where does it take place?
 - RH is situated in a homeless shelter close to downtown Milwaukee
 - Individuals in RH live in a shared dorm separate from the rest of the general population/emergency shelter
- When?
 - An average stay is one year, though the range is days to 2 years
 - The classes take place M-F during regular business hours

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Recovery Housing

- The main component of the program is that men attend two out of three classes a day covering three broad topics: psychoeducation, wellness management and individual skill development.
- In the time outside of the classes (which consist of one hour each), the men are expected to work on their individualized goals that the clinical case manager (workshop facilitator) and the men come up with collaboratively

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3 Main Categories of Classes

1. Psychoeducation
2. Wellness Management
3. Individual Skill Development

- Everything in the classes boils down to medical necessity (since that is how CCS is funded) – so as long as I can tie things back to MH/AODA recovery (even if it isn't a direct link) then I can incorporate it into RH



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Psychoeducation Class Examples

- Relapse Prevention, AODA, MH, Stress/Anger Management, Emotions



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Wellness Class Examples

- Religion/Spirituality, Meditation, Art, Gardening, Walking Club, Outings (free days at museums)



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Individual Skill Devt. Class Examples

- Resume Development, Job Skills, Physical Health, Independent Living, Credit Report, Finances



Item	Check	Score
Antibiotic Use	<input checked="" type="checkbox"/>	100
Handwashing	<input checked="" type="checkbox"/>	100
Prophylaxis	<input checked="" type="checkbox"/>	100
Eye Drops	<input checked="" type="checkbox"/>	100
Antibiotics	<input checked="" type="checkbox"/>	100
Hand Hygiene	<input checked="" type="checkbox"/>	100
Antibiotics	<input checked="" type="checkbox"/>	100

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RH Class Rules

- Be on time: if you are later than 10 minutes, you will NOT get credit for attending
- No phones: no playing on or noises from them-silence/turn off or do not bring.
- No sleeping!
- Approach class/group/topic with an open mind
- Try to stick to the topic presented. Be wary of how much class time are you taking up



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RH Class Rules, cont.

- Be mindful of other people talking-no side conversations; be aware of cross talking and interrupting
- Only leave class if it is an emergency
- Be mindful of language used; treat this as a professional setting
- Be respectful
- As much as poss., what's discussed here, stays here

RESPECT.

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Shelter Rules

- Return to shelter by curfew of 6 PM
- Use or possession of drugs or alcohol on premises
- No fighting, threatening or intimidation of staff, volunteers or guests
- Gambling or exchanging goods, money services or meds
- Theft or destruction of shelter property
- Possession of weapons



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Shelter Rules, cont.

- No smoking/vaping inside building
- Keep belongings inside one foot locker
- Be fully clothed at all times
- Deposit all meds (including OTC and vitamins) in med. Locker in main office
- Check mailbox daily
- Consent to TB test
- Sleep only on assigned bunk



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Monthly Graduation

- 1/month there is a graduation to celebrate people's progress or birthdays!
- I use 6 stages and a G.R.O.W.T.H. acronym for each of the 6 stages.
- As men progress to each of the stages, they are honored at the graduation.
- Progression is determined by meeting with me 1:1 bi-monthly after filling out goal worksheet



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What's expected of RH Clients?

- Follow shelter and program rules (including class rules)
- Attend 10 classes/week
- Participate in daily/weekly chores
- Make progress on individual goals
- Attend monthly graduation even if not graduating
- Maintain continued effort in recovery (doesn't necessarily mean 100% sobriety)



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In RH, we believe Recovery...

- Is an *achievable* goal for anyone who makes the *courageous choice* to make *changes* in their life.
- Starts with *YOU*, but is supported and encouraged by friends, family and treatment team.
- Is defined and driven by *YOU*.
- Is best achieved when cultural, spiritual and personal goals guide the process.
- Is a *journey* of self-discovery, hope and healing.
- Acknowledges and expands your personal strength, resilience and gifts.
- Must address the whole person.
- Is *process* of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

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From the client's perspectives and as a program

STRENGTHS AND WEAKNESSES OF RH

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Pros and Cons of RH for the Men



- Weaknesses
 - Relationship tension/frustration from living in close proximity
 - Close proximity of general population shelter guests, many of whom are NOT in recovery
 - Cannot address all of the barriers the men face (i.e. housing)
 - Stigma of homelessness
 - In an urban, drug and crime-heavy neighborhood

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Pros and Cons of RH for the Men

- Strengths
 - Shared goals of sobriety/recovery, community of recovery → protection against triggers
 - Safe place to practice the learned coping skills in a structured environment
 - Close 1:1 relationship with myself
 - Clients provide feedback that directly impacts programming
 - Many credit the program with saving their lives or getting their lives back



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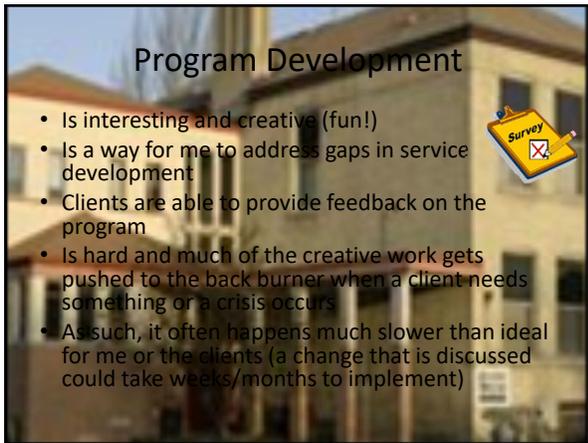
Pros and Cons of RH as a program

- Weaknesses
 - Due to Medicaid billing requirements, the noting is overwhelming!
 - If a crisis arises, other tasks/clients neglected
- Strengths
 - My position has a great variety of tasks and responsibilities (i.e. case management, program development, administrative)
 - Fills the gap where traditional treatment cannot

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