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INQUIRIES

This document is a toolkit for policymakers and contains recommendations presented during the policy briefing: From Thriving to Surviving held on April 6, 2021. The recommendations herein were agreed upon by the members of the Compact for Thriving Communities Steering Committee. This toolkit was produced by a team from the Corporation for Supportive Housing (CSH). For questions or additional resources, please contact Ryan Moser at CSH at 347-834-2593 or ryan.moser@csh.org.
OVERVIEW

The Compact for Thriving Communities (CTC) is a collective call to action to policymakers, advocates and practitioners supporting health, choice, and equity instead of institutionalization. Convened by CSH in 2020, the CTC has brought together a diverse group of leaders of national organizations across various disciplines and sectors to champion the voices of individuals with lived and learned expertise. The CTC seeks to confront the health risks and economic costs of more than a million people consigned to institutional settings and who historically have lacked choices to alternative options in their communities.

These individuals and families face intersectional barriers of poverty, disability, systemic racism, and other forms of bias and discrimination, including those with multiple marginalized identities such as gender identity, sexual preference, immigration and refugee status, religion and more.

The CTC members joined together as the nation reckoned with systemic racism made tragically visible by the disproportionate impact of the COVID-19 pandemic on Black, Indigenous, and People of Color (BIPOC). This impact was especially felt by those residing in congregate institutional settings like mental health and addiction treatment facilities, nursing homes, group homes, shelters, jails, and prisons.

CSH developed the Racial Disparities and Disproportionality Index (RDDI) to better understand the racial disparities embedded in institutional systems. In nearly every system analyzed, BIPOC is over-represented.

Addressing these disparities requires that we recalibrate expectations for system performance. When we prioritize health, choice, and equity, we prioritize the opportunity to live in a thriving community; a place people choose to call home that offers the healthcare, food, jobs, schools, childcare, and recreation necessary for life-long success and well-being.

The cornerstone to thriving communities is safe, accessible, affordable housing with the supports people need to move from just surviving to thriving.
Equity

Racial equity is at the center of the CTC work and a litmus test for success. Achieving equity starts with eliminating disparities in institutional systems based on race and other marginalized identities. It requires that we dismantle the collateral consequences and stigma that system involvement can create, especially for formerly incarcerated people. Ultimately, it ensures that people who have been marginalized by systemic racism and discrimination - past and current - can live and thrive in a community of their choice.

Equity demands that people with lived experience –individuals who have cycled in and through emergency and institutional settings– play a leading role in shaping and implementing the policies that affect them. We seek to identify and advocate specific actions to this end, including increasing appointments and career-path employment for people with lived experience in policy-making and implementation roles. We hold ourselves accountable to this commitment by ensuring that the CTC Steering Committee includes members with lived experience in a variety of systems.

Choice

The lack of community-based resources too often leads to default institutionalization and exposure to unsafe living conditions. System transformation resulting in people facing intersectional barriers of poverty, disability, racism, and more can thrive in a home and community of their choice, instead of an institutional setting or being relegated to the streets. Real choice means removing barriers to social and economic mobility and building inclusive communities with accessible, affordable housing and the supports people need to live as independently as possible.

Health

Health is central to thriving. Health in this context refers to physical and behavioral health and well-being. It encompasses access to quality care and treatment and preventive measures that address social determinants of health across multiple domains. Accessible, affordable housing with integrated, holistic person-directed support services is foundational to improving health outcomes and thriving.

Transformative Policy

The nation’s long-simmering housing crisis, rooted in racist policies and business practices, is a public health emergency. Policymakers are grappling with critical needs, including emergency assistance to renters, sustaining public housing, and stabilizing affordable housing. New reinvestment opportunities are emerging to move away from triage, crisis and institutionalization, and toward health, choice, equity, and community. Federal, state, and local policy responses to the pandemic can be shaped to lay the foundation for transformation. The CTC advocates for public policy built on the following four principles:
Policy Principles and Priorities

Each of these four Principles (Equity, Home, Support, and Mobility) is followed by key policy Priorities from CTC Spring 2021 Policy Agenda.

**Equity**: Individuals and families facing the intersectional barriers of income, disability, racism, and discrimination* are over-represented in institutional systems. Centering equity is a core principle for the Compact.

To ensure that equity is an embedded goal in all policy priorities, people with lived experience in various institutional systems must be full partners in developing and implementing policy and programs that affect their lives. If resource allocations are not sufficient to meet all needs, historical and current inequities must be prioritized. These objectives can be further advanced by expanding opportunities for workforce development and support initiatives to create career path employment opportunities in policy development and implementation for people with lived experience.

The implementation of the “Equitable Data Working Group” called for in the President’s January 20, 2021, Executive Order on “Advancing Racial Equity and Support for Underserved Communities Through the Federal Government” should result in a permanent standard practice of collecting, disaggregating, and analyzing data on need and outcomes by race and other marginalized identities in all federally supported programs.

To address additional mandates of the January 20 Executive Order, specifically to advance fairness in the allocation of federal resources, and promote equitable delivery of government benefits, a federal task force should be convened. This task force would collect data across all systems that receive federal funding to comprehensively identify the individuals and families whose choices of where to live are unnecessarily limited due to lack of affordable housing aligned with the support services they want and need. Such an effort should result in the identification and remediation of data collection gaps to ensure analysis through an equity lens and support state and local strategy and implementation decisions.

We call on policymakers to go beyond the Executive Order mandate to prioritize the appointment and hiring of people with lived experience in all areas that affect those who are marginalized by income, disability and health status, racism, and discrimination. This includes people with disabilities who currently live or have lived in institutional settings, experienced homelessness and housing insecurity, reentering communities following incarceration, young people exiting foster care, and other relevant experiences that would equip them to advise on these issues. (The Youth Homeless Demonstration Program (YHDP) offers guidance on how to ensure the selection of people with relevant lived experience.)

*The CTC’s commitment to equity is inclusive of people further marginalized based on health status not currently protected on existing law (e.g., substance use), immigration and refugee status, gender identity, sexual orientation, religion, and other identities that result in being adversely affected by discrimination and inequality.
Home: Everyone living in our country has the right to a safe, accessible, affordable home in a community they choose. Achieving this vision requires large-scale action across many domains and must be grounded in planning for inclusive communities that address present and future population needs, especially for those marginalized by poverty, disability, racism, and discrimination.

This means expanding access to housing subsidies for low-income people; significant expansion of initiatives to produce and preserve existing affordable rental housing and removing barriers to mobility and inclusion. Housing policy that advances equity should aim to increase the voice and agency of residents.

Ensure that resources to expand housing access, preserve stable tenancy, and address inequities for individuals and families marginalized by income, disability and health status, racism, and discrimination are addressed in the American Jobs Plan and other proposed infrastructure legislation and initiatives.

Provide universal access to housing assistance by making Housing Choice Vouchers an entitlement for eligible households. Begin with making new vouchers authorized in the American Rescue Plan Act permanent and taking further executive and legislative actions to expand the Small Area Fair Market Rent program and eliminate barriers to portability through regional coordination.

Support: Ensuring seamless and universal access to holistic person-directed support services is critical to increasing choice, improving health, and advancing equity for the most marginalized people in our communities. Services must be accessible, voluntary, and directed by the beneficiaries.

Service design and delivery must be shaped, guided and evaluated by people with lived experience as equal partners. Services initiatives in all domains should be designed with linkages to accessible, affordable housing as an alternative to facility-based care, especially for elderly and disabled people eligible for Medicaid and Medicare.

Revise and expand Home and Community Based Services (HCBS) under Medicaid to make it available to all who want it including immigrant and refugee communities and formerly incarcerated people; move forward to make HCBS a mandatory Medicaid benefit.

Establish a new services funding program to coordinate resources, fill gaps left by existing programs and support the development of the infrastructure necessary to establish seamless access to person-directed support services in housing and communities of choice.
Mobility: Life expectancy and life chances in the U.S. are largely determined by where you are born and where you grow up. Eliminating barriers and increasing social and economic mobility is an urgent priority.

Individuals and families marginalized by income, disability and health status and racism and discrimination face a myriad of costly barriers and indignities to accessing and using resources intended to increase their social and economic mobility. Benefit cliffs remain a feature of many support programs and are barriers to economic advancement.

We call for a comprehensive effort to rework program rules to increase incentives and remove disincentives to earning income, increasing savings and building wealth. Childcare policies must be aligned to support work and earning, and federal tax policies should support upward mobility for the most marginalized people. This also means streamlining and simplifying eligibility determination for federal benefit programs, such as ideas like a “one-stop” income certification and eligibility review for all means-tested federal programs.

1. Act immediately on the Administration’s January 26, 2021, Memorandum on “Redressing Our Nation’s and the Federal Government’s History of Discriminatory Housing Practices and Policies” to restore and expand Fair Housing law implementation and enforcement, to restore HUD’s 2015 Affirmatively Furthering Fair Housing rule and HUD’s 2016 rule to provide Equal Access in Accordance with an Individual’s Gender Identity in CPD programs, and reverse HUD’s Mixed Status proposal.

2. Remove barriers to accessing housing, employment and federal benefits for formerly incarcerated people. Revise federal fair housing laws to limit the use of arrest records in tenant screening. The Cook County, IL Just Housing Amendment offers a promising precedent; start with revamping HUD guidance on the use of criminal background checks in tenant screening.

3. Legislate a federal prohibition against the source of income discrimination as proposed in the Fair Housing Improvement Act of 2019.

4. Expand and elevate the focus of the recently created federal interagency Council on Economic Mobility to engage people with lived experience in all aspects of its work. Direct all federal agencies to immediately undertake a comprehensive review of their programs and implement plans to improve access, reduce burdensome eligibility processes, and eliminate benefit cliffs and other barriers.
SPEAKER BIOS

Linda Couch
Vice President of Housing Policy, LeadingAge

Linda is the Vice President, Housing Policy for LeadingAge, an organization of more than 5,300 nonprofits representing the entire field of aging services. Linda oversees LeadingAge’s affordable housing policy work, which is focused on expanding and preserving affordable housing options for very low-income seniors, connecting senior housing to health services, and ensuring affordable senior housing communities have the resources and tools necessary to respond to COVID-19. After 12 years with the National Low Income Housing Coalition, Linda rejoined LeadingAge in 2016 to identify and advocate for solutions to the unprecedented affordable housing challenges faced by older adults. Linda has a special interest in the federal budget and appropriations processes and has testified before House and Senate committees. Linda received her undergraduate degree in philosophy from the George Washington University and a Master of Public Affairs from the University of Connecticut.

Deborah DeSantis
President and CEO, CSH

Deb De Santis is President and Chief Executive Officer of the Corporation for Supportive Housing (CSH), the country’s largest Community Development Financial Institution devoted to housing solutions for those at risk of homelessness. Ms. De Santis has led CSH since 2007, tripling its lending and support toward the creation of over 300,000 permanent stable homes for individuals and families struggling through multiple challenges, including the trauma of homelessness, lack of healthcare, and intergenerational poverty. Ms. De Santis has spearheaded the reorganization of CSH to deepen its focus on data-driven results, innovative funding models such as Pay-For-Success, and expansion into high-need communities. In 2019, Deb was recognized as one of the top 10 leading women in the affordable housing industry by Affordable Housing Finance Magazine.

DeAnna Hoskins
President and CEO, JustLeadershipUSA

DeAnna Hoskins has been at the helm of JLUSA as the President and CEO since 2018. A nationally recognized leader and dynamic public speaker, Ms. Hoskins has been committed to the movement for racial and social justice, working alongside those most impacted by marginalization for over two decades. Her own life experience has been this driving force, having been directly impacted by the system of incarceration and the war on drugs, and with her professional experience, from working on grassroots campaigns to state and federal government. Prior to taking the helm at JLUSA, Ms. Hoskins was at the Department of Justice as a Senior Policy Advisor (Corrections/ Reentry) under the Obama Administration. Throughout her career, she has been committed to reducing stigma and harm in communities impacted by mass criminalization. Ms. Hoskins is originally from Cincinnati, Ohio and holds a Master’s Degree in Criminal Justice from the University of Cincinnati and a Bachelors of Social Work from the College of Mount St. Joseph. She is a Licensed Clinical Addictions Counselor, a certified Workforce Development Specialist trainer for formerly incarcerated people, a Peer Recovery Coach, and is trained as a Community Health Worker.
Christine James-Brown
President and CEO, Child Welfare League of America

Christine James-Brown became President and Chief Executive Officer of the Child Welfare League of America (CWLA) in April 2007, assuming the leadership of the nation’s oldest and largest membership-based child welfare organization that works to improve the quality and availability of child welfare and related services through standard-setting and advocacy. Prior to her leadership role with CWLA, Ms. James-Brown served as President and CEO of the United Way International (UWI) for five years and served for ten years as President and CEO of United Way of Southeastern Pennsylvania (UWSEPA). Throughout her career, Ms. James-Brown has worked to help nonprofit health and human service organizations grow and expand their ability to serve children and families through foundation and corporate philanthropy.

Zondre Johnson
CSH Speak Up! Advocate
Member, Board of Directors, Social Impact
Member, Board of Directors, People Assisting the Homeless (PATH)

I am a 63-year-old Afro-American woman who has dealt with two decades of homelessness, and 28 years in an out of an unjust criminal system. I never realized that my personal life experiences would be the help that saves so many lives. As a SpeakUp! Advocate for the Corporation for Supportive Housing, I have discussed my lived experiences with senators and congresspeople to bring understanding in regards to the disenfranchised and what help is needed in our community to end homelessness. This conversation has taken me to Sacramento, Denver, Minnesota, San Diego, Washington DC, and the list continues to grow.

Gabriel Schuster
Senior Program Manager, Strategy and External Affairs, CSH

Gabriel Schuster is a researcher and analyst with experience at the intersection of development policy and community planning, alongside capacities in geographic information systems and spatial analytics. As Senior Program Manager for Strategy and External Affairs at CSH, Mr. Schuster oversees community needs assessment work, and his portfolio includes multi-systems data integration, supporting strategic planning, and developing data processes for assessing and addressing issues related to equity. Before CSH, Gabriel worked as a researcher on the NSF-funded Mapping the Solidarity Economy Project, an academic collaborative that studies organizations in the solidarity economy such as Credit Unions, Worker-Owned Cooperatives, and Community Land Trusts. He has also served as a researcher at the CUNY Institute for Sustainable Cities, and as a faculty member in the Design for Social Innovation Program at the School for Visual Arts. Mr. Schuster holds a master’s degree in geography and a certificate in geographic information science from Hunter College, CUNY, and a bachelor’s degree from Vassar College.
ABOUT THE COMPACT FOR THRIVING COMMUNITIES

The Compact for Thriving Communities is a collective call to action to policymakers, advocates, and practitioners supporting health, choice, and equity, instead of institutionalization to realign priorities and funding for people who our systems have failed.

The Compact for Thriving Communities Steering Committee

CONTACT THE COMPACT FOR THRIVING COMMUNITIES

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