

## Case Study of a Program Serving Families Experiencing Homelessness

# Solutions for Change

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**Lead entity:**

Solutions for Change

**Service area:**

Northern San Diego County, California

**Setting:**

Suburban

**Focus population:**

Families experiencing homelessness

**Number of participants:**

About 200 families at point in time

**Initial year of operation:**

1999

## Introduction

Founded in 1999, Solutions for Change (Solutions) is a nonprofit organization that seeks to transform the lives of San Diego County families experiencing homelessness. Solutions provides housing, work readiness training, and support services for resident-participants (henceforth, participants), the majority of whom enter the program in recovery from substance use disorders.

Participants progress through Solutions' three-phase, 1,000-day program, known as Solutions University.<sup>1</sup> This sequence includes dedicated case management, on-site mental health services, 12-step support groups, unpaid work experience, and a series of life skills, parenting, and employment readiness training (ERT) classes. The highly structured program supplies participants with daily schedules that map out the steps they must complete to progress through program phases.

**This case study includes the following sections:**

[Where Solutions Operates](#); [Solutions' Background and Approach](#), [Who Solutions Serves](#); [What Services Solutions Provides](#); [How Solutions is Organized, Staffed, and Funded](#); [How Solutions Measures Participant Progress](#); [Solutions' Accomplishments and Challenges](#).

**About this report**

This case study (OPRE Report # 2021-67) is part of a series of nine comprehensive case studies that showcase innovative approaches for supporting the employment of low-income individuals and families, including Temporary Assistance for Needy Families recipients. Each case study highlights key components of implementation, including their linkages to wraparound supports, to expand the knowledge base of these programs. The programs featured in the series represent a diverse range of service strategies, geographies and community contexts, focus populations, and service environments. The case studies are sponsored by the Office of Planning, Research, and Evaluation in collaboration with the Office of Family Assistance, both within the Administration for Children and Families in the U.S. Department of Health and Human Services.

<sup>1</sup> Solutions has renamed this "Solutions Academy" and made changes to its services since the information for this case study was gathered in January 2020. See the organization's website for more details:

<https://solutionsforchange.org/our-work/>.

## Where Solutions operates

Solutions primarily serves residents of San Diego County, mostly in the northern part of the county referred to as North County. This area includes predominantly suburban coastal and inland communities as well as more rural areas, remote desert communities, and Native American reservations. It contains some of the most affluent communities in the county, though there are pockets of poverty in Vista, Escondido, and Oceanside.

Solutions' headquarters is in Vista, along with its intake shelter and a transitional housing facility. Solutions also owns and operates permanent housing properties in Vista, Escondido, and Oceanside. In total, Solutions' housing can accommodate roughly 200 families with room for 15 more in its intake shelter.

San Diego County is the second most populous county in California. Roughly one-third of San Diego County residents live in the North County (Community Health Statistics Unit 2019). San Diego is a geographically large, ethnically diverse county adjacent to the border with Mexico (ibid). In 2018, 12.5 percent of the population had income below the poverty level, which was closely aligned with the national rate (11.8 percent) (U.S. Census Bureau 2019b).

Despite relatively low unemployment in San Diego County at the time of the case study site visit (3.3 percent in January 2020, compared to 3.6 percent nationally), high housing costs and an increasing cost of living could strain budgets for low- and medium-income households in the region (U.S. Bureau of Labor Statistics 2020b; 2020c).<sup>2</sup> San Diego County ranked as the second most rent-burdened metropolitan area in the nation, defined by the percentage of renters spending 30 percent or more of their income on housing costs (Freddie Mac 2019).

Homelessness is a major issue throughout the county. According to the U.S. Department of Housing and Urban Development (HUD), in 2019, the county ranked fifth in the nation for the total number of people experiencing homelessness, using a point-in-time count (Office of Community Planning and Development 2020). Of these people, 55 percent were unsheltered, that is, they were living on the streets, in vehicles, or in uninhabited outdoor areas throughout the county (Regional Task Force on the Homeless 2019).



### Economic snapshot of San Diego County, California

**Total population (2018):<sup>a</sup>**  
3,302,833

**Median household income (2018):<sup>b</sup>** \$74,855

**Percentage of people below poverty level (2018):<sup>b</sup>** 12.5%

**Unemployment rate (2019):<sup>c</sup>**  
3.2%

Sources: <sup>a</sup> U.S. Census Bureau (2019a); <sup>b</sup> U.S. Census Bureau (2019b); <sup>c</sup> U.S. Bureau of Labor Statistics

<sup>2</sup> Unemployment data presented here do not reflect shifts in the local economy that have occurred since the onset of the COVID-19 pandemic. See box on page 16 for information about how Solutions responded to the pandemic.



### Housing and homelessness in San Diego County, California

Percentage of renters spending 30 percent or more of their income on housing costs (2018):<sup>a</sup>  
56%

Number experiencing homelessness (2019):<sup>b</sup>  
8,102 residents

Sources: <sup>a</sup>U.S. Census Bureau (2019c);  
<sup>b</sup> Regional Task Force on the Homeless (2019).

People experiencing homelessness often face other barriers, including substance abuse or involvement with the criminal justice system. As in many locales, drug use and homelessness are interconnected in San Diego County. According to a 2018 survey of all adult arrestees in the county, the most common reasons people became homeless were money issues and drug use (Burke 2019). In addition, more than three-quarters (77 percent) of arrestees who reported having ever been homeless said they had first become homeless in San Diego County, as opposed to somewhere else (Burke 2019).

According to the California Healthcare Foundation, the San Diego region has a relatively robust treatment environment, including the greatest number of residential recovery slots per capita in the state and a higher-than-average number of licensed narcotic treatment program slots per capita (Holt 2018). Recent investments by the county reflect a desire to prevent and treat substance use disorders, particularly among

low-income populations. For example, the San Diego County Behavioral Health Services launched the Drug Medi-Cal Organized Delivery System in 2018 to increase access to a range of high quality, evidence-based care options for Medi-Cal enrollees with substance use disorders (San Diego Behavioral Health Services n.d.).

## Solutions' background and approach

Solutions' co-founders started the organization in response to their prior experiences working with men experiencing homelessness. The Solutions' co-founders believed that existing homelessness services increased dependency on social service systems rather than addressing the root causes of homelessness. Thus, they developed Solutions to address what they saw as a need for comprehensive personal transformation among homeless populations that these individuals cannot achieve through subsidized housing and optional treatment services alone. The organization's mission is "to solve family homelessness – one family, one community at a time." Program leadership, including one of the co-founders and other senior staff, emphasized that this involves empowering families to rise out of and end their dependency on external supports.

### Solutions' core values

1. Integrity of purpose
2. Self-reliance
3. Positive attitude
4. Spiritual call to action
5. Accountability
6. Commitment to affect change
7. Meaningful involvement

Solutions' approach is guided by key philosophies. First, leadership discussed the centrality of the organization's seven core values in all of the work that it does. For example, Solutions emphasizes participant accountability through its application process, program

rules, frequent contact between participants and case managers, and a zero-tolerance substance use policy. Second, Solutions strongly emphasizes servant leadership, which envisions a leader's role as serving others. Solutions orients its programming and approach with clients around core servant leadership principles, such as building trust and living your values. Finally, the co-founders started the organization as a form of ministry. Although the co-founders have a faith-driven perspective, the organization does not identify as faith-based, and participants are not required to take part in any faith-based activities aside from non-denominational 12-step programs. However, the program does offer optional weekly bible study for staff and participants.

## Who Solutions serves

To be admitted into the program, participants must be experiencing homelessness and be a parent or guardian (either individuals or couples) who have children younger than 18 in their custody, who are pregnant, or who are actively seeking reunification with their children through the state's child protective services agency.<sup>3</sup> According to program staff, about 85 percent of participants are single mothers, with an average of two children each.

Other requirements for participation include the following:

- At enrollment, participants with substance use disorders must be in recovery, not currently using substances, and able to pass a drug test.
- At enrollment, participants sign a program contract that outlines Solutions' rules and expectations. As part of the contract, participants must affirm their willingness to work and to submit to weekly and random drug tests.
- Solutions requires that participants are legally authorized to work in the United States and runs a criminal background check on all applicants, though a criminal record does not automatically disqualify people from program eligibility. Applicants cannot be actively fleeing domestic violence or have a criminal conviction involving serious personal or property damage.<sup>4</sup>
- At enrollment, Solutions asks participants who are currently employed in temporary or low-wage positions to stop working or take a leave of absence from their job in order to fully participate in Phase 1 of the program, which ranges from one to three months. Participants with a job meeting all of



### Admission requirements for Solutions

- Parents or guardians experiencing homelessness (individuals or couples)
- Must have custody of child(ren) younger than 18 or be actively seeking reunification
- Able to pass a drug test and willing to submit to subsequent weekly and random drug tests
- Willing to work and legally authorized to do so
- Not actively fleeing domestic violence
- No criminal conviction involving serious personal or property damage

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<sup>3</sup> Solutions uses HUD's definition of homeless, available at: <https://www.hudexchange.info/resource/1974/criteria-and-recordkeeping-requirements-for-definition-of-homeless/>

<sup>4</sup> If applicants are actively fleeing domestic violence, Solutions refers them to a domestic violence shelter first for their safety. Serious convictions include murder, attempted murder, felony child abuse, and sexual assault.

the following criteria may remain in their position: participant must have held the job continuously for one year or longer; pay must be \$15 per hour or higher; the position is not a temporary, seasonal, cash-only, or under-the-table job; and it is not through a temporary agency. Solutions also requires participants to put all non-Solutions educational classes on hold when they enroll in Solutions unless the classes are online and participants can complete them outside of required programming.

## What services Solutions provides

Solutions is structured around three pillars: Solutions University, Solutions Enterprises, and Solutions in the Community. Solutions University, the three-phase personal development academy that is the primary focus of this case study, provides the majority of services to program participants. Solutions Enterprises consists of Solutions Farm, an organic aquaponics farm staffed by Solutions participants. Solutions in the Community includes volunteer work by participants. In addition, Solutions has real estate enterprises that include a series of limited liability companies and limited partnerships associated with Solutions' nonprofit arm. These real estate ventures are housed within Solutions in the Community.

## Program intake and enrollment

Solutions receives referrals from community partners such as probation officers, drug courts, rehabilitation centers, churches, domestic violence shelters, the state child welfare agency, and word of mouth. According to staff, Solutions is known to referring organizations as a positive place for families seeking stability. In some cases, participation in Solutions' programming helps people meet participation requirements for partner programs. For example, drug courts might require parenting classes, which Solutions offers. Leadership indicated that participation in Solutions' work readiness programming is also an approved activity that satisfies the work participation requirements of California's Temporary Assistance for Needy Families (TANF) program. Solutions' leadership estimated that about 50 percent of participants receive TANF. Staff indicated that participants who are not receiving TANF are typically seeking reunification with their children, have exhausted their time-limited TANF benefits, or are earning enough income that they are not eligible for TANF.<sup>5</sup>

**Participant accountability is introduced in the application and intake process.** People can apply to Solutions directly or can be referred by a partner agency. The application includes questions about applicants' and their household members' past drug and alcohol use, ability to work, willingness to quit



### Key program practices

- Housing provided in conjunction with required participation in personal development, case management, and employment services.
- Structured program phases with progressively less strict rules and increasingly independent housing
- Participant accountability promoted through program rules and daily schedules, frequent contact with case managers, and a zero-tolerance substance use policy

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<sup>5</sup> California has a 48-month time limit on TANF receipt for adults, including parents, stepparents, and caretaker relatives, taking care of children.



### Solutions' connection to TANF

About 50 percent of Solutions' participants receive TANF, according to program leadership. Those who are not receiving TANF are typically either seeking reunification with their children or have exhausted their time-limited TANF benefits. Participation in Solutions' work readiness programming is an approved activity that satisfies the work participation requirements of California's TANF

their job to participate in the program (if applicable), children's schooling, diagnosed mental health disorders, and history of self-harm. After people apply, Solutions places them on an interest list. The intake and outreach coordinator reviews the interest list applications and uses this information to assess their physical and mental health needs, their criminal background, and the extent to which they may pose a risk to themselves or others. For example, Solutions does not accept applicants who are experiencing hallucinations or who have a history of physical violence because participants will be living in shared housing. If the applicant meets the eligibility criteria, Solutions adds him or her to the program's wait list. Program staff notify applicants by telephone once they are added to the wait list, after which applicants must call the Solutions' office daily to see if there is an intake appointment available.

Solutions' leadership believes this daily requirement helps introduce accountability into the process. Staff reported that, although some applicants drop off during this process, applicants are often diligent about calling in daily. However, given the length of time, some might find other housing arrangements or simply stop calling; the average wait time is about three months from application to intake appointment, though it can last up to nine months. At the time of the site visit, Solutions had a wait list of 30 to 40 families. Program enrollment is limited by the number of families Solutions can house—about 200 families in its transitional housing facility and 15 families in its intake shelter.

Intake appointments include a brief in-person screening. Intake staff describe the Solutions' program model and assess applicants' level of motivation to change their life. Intake staff discuss how Solutions is more than simply an affordable housing program and that it necessitates applicants' buy-in to the broader set of employment and recovery support services. Applicants must also pass a drug test at this time. If they fail the test, Solutions refers them to treatment programs and might accept them on the condition that they complete treatment, but the applicant must re-enter the wait list.

**During their initial stay at the intake shelter, participants receive assessments, referrals to outside providers, and mental health supports.** Program enrollment occurs at the intake shelter, the temporary emergency shelter where participants arrive and stay for the first few weeks. In the first week, case managers help participants obtain any needed legal documentation and identification, such as a driver's license or other form of identification; apply for public benefits at the local human services agency (including cash, food, medical, and child care); and arrange child care using the state child care subsidy.

Solutions requires that all participants with children in their custody have child care or enroll school-age children in school in order to participate in the ERT activities during the weekdays, which are described further below. After participants have arranged child care, typically in the second or third week, they begin ERT.

After entering the program, participants begin work with a therapist and a case manager, both of whom assess new participants:



- **Therapists** conduct a trauma assessment and mental health evaluation during their first of six required appointments with each participant.
- **Case managers** conduct an initial assessment, which informs the plan they develop with each participant. Each time they meet with a participant, they review health and mental health factors assessed in the initial assessment, as well as other goals participants are focusing on. In addition, they work with participants to begin writing an autobiography, which they complete during the first phase of the program.

## Solutions University services

Solutions delivers its core program services through Solutions University, which program leadership described as a highly structured, three-phase personal development academy. Participants progress through Solutions University by completing key milestones in multiple phases. Each phase includes a combined focus on employment, housing, and personal development. Figure 1 illustrates an overview of the program phases and their approximate length. Solutions describes Solutions University as a 1,000-day program, but phase and total length vary by participant.

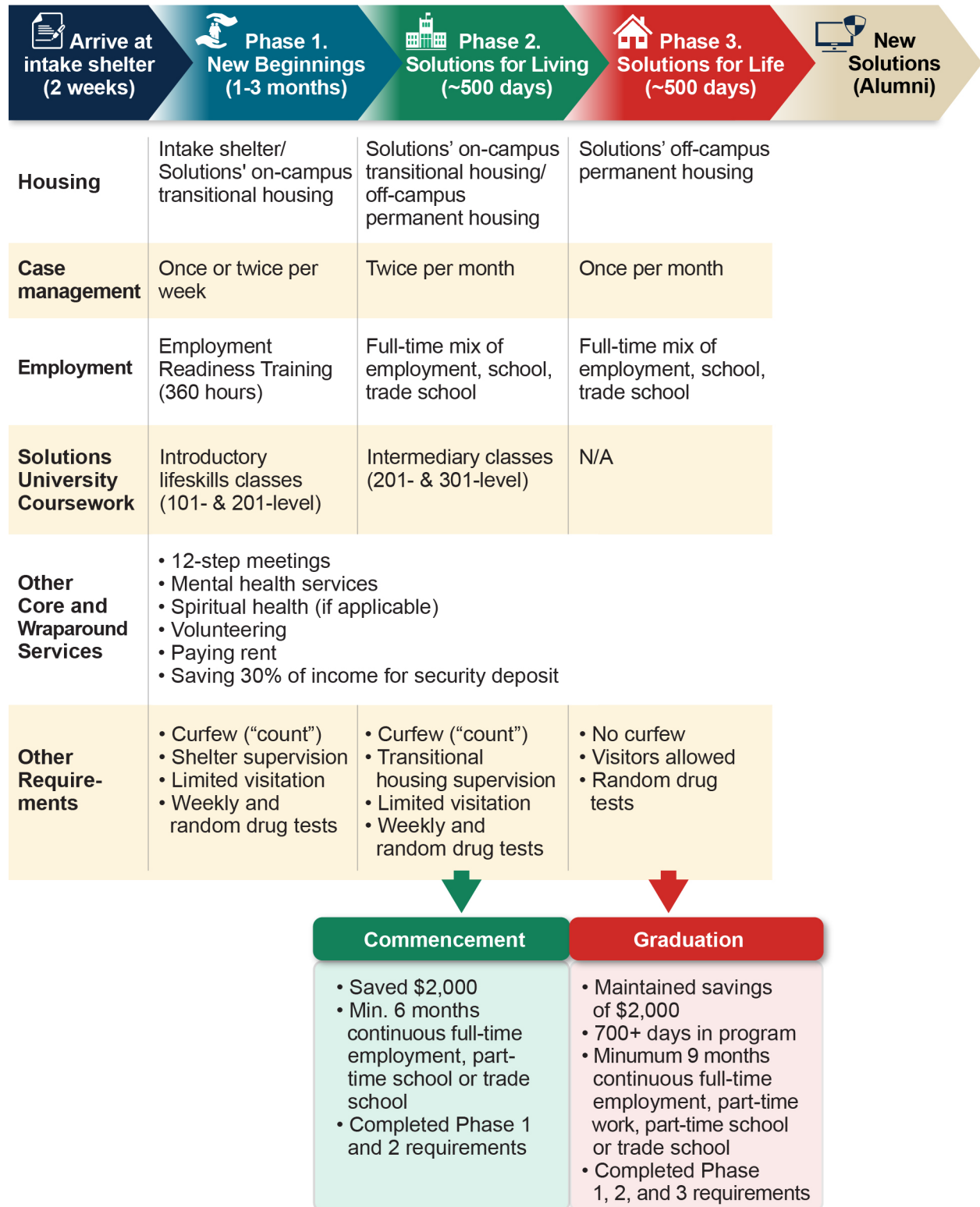
### **Phase 1. New Beginnings (1–3 months)**

During the first phase, participants live on-site in Solutions' intake shelter and transitional housing, participate in ERT classes and 12-step meetings, and attend introductory-level courses in topics such as leadership, parenting, and financial education. Participants meet with their case managers at least once per week at the beginning of this phase.

**Participants adhere to a daily schedule and strict program rules.** Solutions imposes a strict schedule for participants during this phase. As part of work readiness routine training during ERT, Solutions enforces a strict wake-up time and requires seven hours per workday of participation in ERT and other meetings or classes per weekday, from 8:30 a.m. to 4:00 p.m. Participants must report to a 20-minute morning meeting each day. The morning meeting, which the director of workforce development facilitates, takes place in the Solutions' headquarters. At these meetings, participants gather in a circle and discuss one aspect of servant leadership and how it applies to their daily lives. The director of workforce development then reads out each participant's schedule for the day, including any off-site appointments or meetings they might have. After the meeting, participants begin working on their ERT assignments.

During the first phase, participants must adhere to a strict set of rules associated with their behavior and living arrangement. This includes a nightly "count" where they must be present in their living space at a fixed time so Solutions' staff can account for them, as well as submitting to weekly and random drug screenings. Solutions also does not allow participants to work or seek outside employment in the first phase of the program while they are focusing on stabilizing their families and attending case management meetings, 12-step meetings, personal development classes, and ERT. Solutions' leadership believes participants must first focus on their overall wellness, including housing stability and physical and mental health, to improve their employment readiness.

**Figure 1. Phases of Solutions University program**



Source: Solutions for Change program materials and interviews with program staff



**Participants receive case management to support goal development and advancement through program phases.** Case managers serve as participants' primary point of contact at Solutions and manage participants' progress through the Solutions' program model. They discuss participants' attendance at ERT and required meetings, help participants secure on-site housing units, support participants' decisions about employment and schooling, and help participants budget to achieve key savings milestones required to progress through the program. Solutions requires participants to meet with their case managers twice per week initially when they are staying at the intake shelter and once per week when they move into transitional housing

**Participant perspective**

"It's a program that has a lot of requirements, but at the end of the day, it's for my benefit and the benefit of my family."

Case managers develop and regularly check in with participants on their individualized empowerment road map plans. These plans focus on personal and professional goals and the issues that case managers will work on during required case management sessions. For example, participants might choose to focus on addressing their children's physical or mental health issues, improving their relationships with their children, or finding a career field. Case managers shared that this individualized approach to goal development helps participants practice setting their own goals and "unlearn habits or expectations that they will just be told what to do."

Staff shared that frequent visits with dedicated case managers and close coordination among the case management and other teams promote strong accountability for participants. In addition, Solutions maintains a list of actions participants must take if they violate rules in order to clearly outline the consequences of participants' actions. For example, case managers regularly monitor the behavior of participants on their caseload such as requiring signed slips indicating their attendance at 12-step meetings, pay stubs as proof of work and income for participants whose jobs meet the requirements to remain employed during the program, and reports from random and regular drug tests.

In addition, case managers coordinate with staff from other teams about their participants' needs and behavior. This includes the employment team, Solutions University instructors, and on-site mental health providers. For example, if a participant receives a verbal warning about a behavior during ERT hours, the employment team will notify the case manager. Later, if the verbal warning progresses to a written warning and remains unaddressed, the case manager, workforce development director, and any other relevant staff will meet with the participant to talk through the issue and discuss whether there is a need for corrective action.

**Participants receive employment readiness training through work experience at Solutions' facilities.** Employment services focus on work readiness routines and building work experiences for participants, some of whom have a limited work history. Staff emphasize what they call a "get up, suit up, show up" mantra espoused by leadership in describing their approach to building a work readiness routine and mindset among participants.

ERT is a key component of this first phase. It consists of 360 hours of unpaid work experience for the organization. ERT options include janitorial, landscaping, and clerical work on-site at the Solutions' offices; fundraising for Solutions; or working on the Solutions Farm. As a first step, the director of workforce development conducts a group orientation for all new participants. Staff review ERT expectations, including punctuality, hygiene, and behavior expectations. After the orientation, the director of workforce development conducts a brief (about 10 minutes) assessment with each participant to determine his or her ERT placement based on the participant's interests and skill set, such as whether the participant prefers to work outdoors or answer a phone. The director then places participants based on their interests and position availability. Each job site has a Solutions-employed supervisor who oversees the participants directly. The director of workforce development meets with the supervisors every other week to understand what behaviors and competencies participants are exhibiting or gaining and discuss any disciplinary issues that arise.

### Graduate perspective: What made Solutions effective for you?

"The most important thing was having someone make me feel that I was trustworthy. The investment of somebody else who has nothing to gain helping you out and who gives you incremental increases in responsibility was empowering."

**An introductory personal development coursework builds participants' life skills.** The Solutions University curriculum has a mix of required courses designed to build life skills and employment readiness. Introductory (101-level) classes at Solutions University cover parenting, relapse prevention, personal finance, and communication skills.

Most participants begin Solutions University classes about six weeks into the program after initially focusing on ERT, case management, and 12-step classes. Classes typically occur in the afternoon, while ERT hours occur in the morning.

### Phase 2. Solutions for Living (about 500 days)

After participants have completed 360 hours of ERT and completed all other New Beginnings program requirements (for example, attending all required meetings and passing all classes), they move to Phase 2, Solutions for Living. During this phase, participants transition to permanent housing (which can be off-site) and must be employed, in school, or both. They continue participating in case management, which is reduced to two visits per month, and 12-step meetings and take the next level of classes, which Solutions refers to as 201- and 301-level classes.

**Participants must search for and find employment.** As participants progress to Solutions for Living, Solutions requires them to obtain full-time employment or some combination of work and school. Case managers discuss this decision with participants as they near the end of the New Beginning phase and help participants complete an empowerment road map plan, which outlines what combination of work and school (for example, certificate and degree programs, GED or other high school equivalency) they will pursue. Participants may begin searching for a job with case manager approval after they have completed 360 hours of ERT, attended their Solutions University classes, and have shown that they are complying with program rules. According to staff, typical careers participants pursue include alcohol and drug counseling, cosmetology, and work within health and human services agencies.

After they begin searching for a job, participants have 30 days to find employment that aligns with the approved plan. Case managers discuss job search activities regularly with participants and might direct them to jobs that seem better aligned with their career goals than the first job they are offered. Solutions' workforce development staff reach out to some local employers who provide jobs for people with limited work history, though formal job placement services are limited.

Participants must submit documentation of their job search activities, including verification of attendance if they are job searching anywhere other than at Solutions. If participants have not obtained employment after 30 days, case management and program staff hold a review meeting to ask about participants' challenges and offer guidance and suggestions. At that time, Solutions also places participants on a plan of action contract outlining requirements set at the review meeting, and participants have two additional weeks to find employment. If participants do not have a job after 45 days of job searching, Solutions schedules another job search review. At that time, participants return to ERT on either a part-time or full-time basis for 30 days, or until they have fully addressed their barriers to employment or resistance to job search. At the end of the 30-day period, the case manager determines if participants are ready to return to job search.

**Solutions' case managers support participants' transition to employment and more permanent housing.** Case managers continue to check in on the empowerment road map plan after participants are employed. In doing so, case managers help participants think through how their public benefits will change with different work and school combinations once they graduate from the program, or they may help them apply for financial aid to attend school. They also begin working with participants in this phase to plan for life after graduation. Case managers shared that they place a heavy emphasis on budgeting to help participants plan for real-life expenses such as paying rent, purchasing gas, and paying for child care without state subsidies. Case managers also encourage families who are unlikely to afford market-rate rent to apply for the Section 8 program and other low-income housing programs with wait lists.

**Participants progress to intermediary personal development coursework.** Intermediary (201- and 301-level) classes cover servant leadership (which envisions a leader's role as serving others), empowerment, parenting, finance, co-dependency, emotional intelligence, nutrition, job preparation, and career goals. For example, the curriculum for the job preparation class helps prepare participants to search for and keep a job. Participants learn how to create resumes and cover letters, complete applications, and navigate online job search resources, as well as learn interviewing skills.

### **Phase 3. Solutions for Life (about 500 days)**

Participants progress to Phase 3 after they have saved \$2,000; maintained full-time employment, part-time work/part-time school, or trade school for six months; and completed all other Solutions for Living program requirements. After commencement from Phase 2, participants are no longer required to be present for nightly count, and they are no longer required to submit to weekly drug screenings (although random drug screenings continue into Phase 3).

**Case managers help participants maintain employment and secure permanent housing.** In Phase 3, participants continue to work or go to school and attend meetings, but they have less intensive interaction with program staff. Staff described this as the maintenance phase focused on self-monitoring. Participants may meet with their case managers only once per month. After participants are employed, case managers



### Graduation requirements for Solutions

- Have saved \$2,000
- Participated in the program for at least 700 days
- Maintained continuous: full-time employment; part-time work/part-time school; or part-time work/part-time trade school for at least nine months
- Completed all other program requirements in the Solutions for Life, Solutions for Living, and New Beginnings program phases

help them keep their jobs by discussing issues they might have with employers. With the case managers, participants practice conversations they might have with their employers and work on issues, such as asserting themselves or setting boundaries. As participants prepare to graduate from the program, case managers also help them develop plans to obtain permanent, independent housing. During this phase, case managers continue to monitor participant adherence to program rules. Along with monitoring attendance at 12-step meetings and results of random drug tests, case managers will receive reports from property managers about complete and prompt rent payment.

**Solutions provides minimal post-graduation supports.** Participants graduate when they have saved \$2,000 in Phase 2 and maintained that savings through Phase 3; been in the program for at least 700 days; maintained employment, part-time

work/part-time school, or trade school for at least nine months; and completed all other program requirements in the Solutions for Life, Solutions for Living, and New Beginnings program phases.

After graduation, participants typically pay market-rate rent in Solutions' permanent housing or find independent housing on their own. According to staff, roughly 95 percent move to independent housing, though a small number of participants (about 5 percent) remain in Solutions' housing if they are unable to pay market-rate rent and have exhausted other financial supports. For example, a grandmother caring for two children might remain in Solutions' housing if she is no longer eligible for TANF, cannot work full time, and cannot access a housing voucher. Post-graduation services are minimal. Former participants may check in with their case managers, but meetings are no longer required after participants move into independent housing. However, if participants continue to live in a Solutions-owned property, they must attend case management sessions and submit to random drug tests.

## Other core and wraparound services

Solutions' housing, case management, and on-site recovery support services are delivered in conjunction with all employment services outlined above. According to staff, all of these aspects are considered core programming and are equally important to promoting participants' wellness, independence, and program progress, although not all these services are mandatory for participants.

**Attendance in recovery support services is required.** Solutions' staff reported that approximately 70 percent of participants have substance use disorders and are in recovery when admitted to the program.

Solutions embraces a zero-tolerance substance use policy in order to maintain participant accountability and administers random and regular drug tests for all participants, though the frequency of these tests decreases as participants progress through the program.

In addition to drug testing, Solutions requires all participants to attend 12-step support groups such as Alcoholics Anonymous or Narcotics Anonymous. If participants do not have a history of substance use, case managers help them identify an alternate, relevant 12-step program in the community, such as Al-Anon, for people whose lives have been affected by someone else's drinking, or Co-Dependents Anonymous. Many of the 12-step classes are facilitated on-site, either by Solutions' staff or former participants.

Solutions requires participants to meet with a sponsor from the community for their 12-step program work. Case managers do not ask to discuss the details of these private relationships with participants. They ask that sponsors communicate with case managers initially to let them know who they are sponsoring, and they expect participants to report honestly during case management meetings about their attendance at meetings with sponsors.

**Optional spiritual health activities are offered.** Solutions offers several voluntary faith-based activities for participants. For example, Solutions hosts weekly bible study on-site, participants can attend other faith-based activities off-site, and the senior vice president also serves as the organization's chaplain. However, Solutions does not identify itself as a faith-based organization.

**Case managers make off-site referrals, as needed.** Case managers refer participants to services such as 12-step programs not offered on-site, health and dental providers, and mental health providers beyond the six in-house therapy sessions provided. Solutions also offers nightly meals served by volunteers at the intake shelter and therapy sessions with licensed staff or interns.



### Required recovery support services

Zero-tolerance substance use policy, regular drug testing, and required 12-step programming are designed to promote participant accountability.



### Gloria's\* story

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Gloria and her two school-age children were couch-surfing with friends and family members in the Vista area when a stranger at a transit station told her about Solutions and encouraged her to apply. She had never stayed in a homeless shelter and was hesitant to move her kids into that setting, but she felt she had no other options. She saw Solutions as a pathway to permanent housing given the high rental costs in the area and her low credit score.

While in the intake shelter, Gloria began completing her ERT hours by performing janitorial duties at Solutions' headquarters. Gloria receives TANF benefits, but due to her son's medical issues, she received an exemption from the TANF work requirements. Solutions required her to participate in part-time school to maintain program standing and housing. This requirement encouraged her to pursue a certificate in massage therapy. As a first-generation student, she was thrilled to receive her first certificate ever and is currently pursuing an associate's degree at the local community college.

Gloria appreciated the close, frequent contact with her case manager during her time at Solutions. In addition to checking in on her grades and progress in school, the sessions with her case manager included practicing parenting and anxiety management strategies. Gloria's case manager also helped her practice identifying her needs and helped hold her accountable to taking steps to address those needs.

In addition to coaching sessions, Gloria appreciated the Solutions University parenting classes and on-site therapy, which helped her understand that she has post-traumatic stress disorder and encouraged her to find, with assistance from her case manager, off-site counseling. She shared that the combination of stable housing and parenting classes teaching her about her own emotional intelligence have helped her become a better parent for her children. Although Gloria does not use drugs or alcohol, she attended required meetings as part of her Co-Dependents Anonymous 12-step program.

Although she graduated from the program, Gloria and her children continue to live in Solutions' housing. She plans to graduate with her associate's degree in 2021 and get a job that she "truly enjoys."

*\*Participant's name has been changed.*

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## How Solutions is organized, staffed, and funded

### Program organization

Solutions is a nonprofit organization administered by an executive team and a board of directors. The executive team is organized around the three pillars. Each pillar's vice president reports to the executive vice president. One of its co-founders serves as the president/chief executive officer and the other as vice president of operations. Solutions' services are delivered by Solutions' staff in Solutions' facilities, although leadership indicated that it occasionally makes use of other public and nonprofit services in the community.

As described above, Solutions' case managers and therapists provide workforce development services and clinical services. Solutions' staff typically teach Solutions University introductory and intermediary courses, though Solutions occasionally brings in outside instructors to facilitate classes. For example, staff from a local bank have developed and delivered a financial literacy curriculum for Solutions, and staff from a local children's hospital have facilitated parenting classes. On-site mental health services are provided by associate clinical social workers as well as marriage and family counselor interns. Executive staff also provide some services directly. For example, the senior vice president facilitates an optional weekly bible study.

Solutions' staff come from a variety of professional backgrounds, including behavioral and mental health services and social work. In describing their approach to hiring, leadership shared that it prioritizes hiring staff whose core values align with the organization's seven core values. According to leadership, these are often people who are skeptical of the efficacy of traditional human services agencies and want to use their skill sets in a new environment. Solutions also hires program participants who have completed their ERT hours. For example, the current and previous farm manager both began managing the farm while still actively participating in the program. Participants also serve as paid resident advisors of Solutions' intake shelter and temporary housing developments. Solutions' leadership did not describe a formal staff training program; staff typically learn on the job.

### Program funding

Solutions' direct operational funding primarily comes from individual, corporate, and foundation donations. In addition to outside funders, Solutions derives a small portion of its operating budget from Solutions Farm.

Solutions' leadership described a shift in funding sources in recent years. Specifically, the organization has reduced its reliance on HUD funding for program operations, as HUD requires that HUD-funded permanent supportive housing providers comply with Housing First principles. The core principles of Housing First include rapid and streamlined entry into housing; few programmatic prerequisites to housing entry, such as demonstration of sobriety or required completion of alcohol or drug screening; low-barrier admission policies; voluntary supportive services; and full rights, responsibilities, and legal protections for tenants (U.S. Department of Housing and Urban Development 2014). Solutions' model, which mandates participation in support services and has a zero-tolerance substance use policy, does not meet the HUD Housing First requirements.

Solutions' leadership decided that complying with the new regulations was not aligned with the organization's core values and mission, and Solutions experienced a major cut in federal funding for its housing programs as a result. However, HUD funds continue to indirectly support Solutions' operations; many of the program participants living in Solutions' properties receive HUD housing subsidies through programs such as the Housing Choice Voucher Program and project-based vouchers.

#### **How Solutions adapted during the COVID-19 pandemic**

At the end of June 2020, San Diego county had recorded 423 COVID-19 cases per 100,000 residents, which was lower than the statewide rate of 583 cases per 100,000 residents.<sup>a</sup> The unemployment rate spiked to 15.0 percent in April 2020 and began trending downward in the following months, dropping to 13.9 percent in June 2020.<sup>b</sup> To respond to participant needs, Solutions did the following:

- **Shifted from shelter-based to transitional housing for new participants.** Solutions moved families who were newer to the program from the communal intake shelter on its campus to individual transitional housing units. This reduced the points of contact between families in the program. However, in some cases, Solutions assigned two families to one unit.
- **Shifted from a time-based, sequential cohort model to a place-based cohort model.** Solutions' traditional programming model focused on delivering services to and convening participants as cohorts based on programmatic phase regardless of where they lived. Solutions switched to a geographic model with cohorts comprising individuals who were all living in the same housing facility or complex, regardless of their program phase. Case managers began working with participants by geographic cohort, and Solutions promoted participants who were near graduation to serve as empowerment coaches to help facilitate the place-based cohorts.
- **Transitioned to virtual service delivery.** Solutions provided case management and 12-step meetings via video conference after updating its Wi-Fi technology at the various residential facilities. Case managers followed up with participants via phone and text to make sure they were attending appointments and that children were completing required remote schoolwork. In-person Solutions University classes were put on hold.
- **Adopted temporary leniency in program requirements.** Many participants lost jobs or saw their income decrease as a result of the pandemic. In response, Solutions eliminated its requirement that participants obtain and maintain full-time employment once they enter the second phase. It also worked with participants on a case-by-case basis if they could not provide their portion of the rent as was previously required. In addition, state eviction bans meant that Solutions had less ability to enforce zero-tolerance policies within its housing units. However, staff indicated that, despite the lessened enforcement, participants continued to comply with program rules at a high rate.
- **Reviewed programmatic approaches and broadened organizational reflection.** The shift to virtual service delivery during the early months of the pandemic allowed Solutions' leadership the time to reflect on their activities and documentation and to look more broadly at long-term program improvements. This included formalizing leadership and mentoring roles for longer-tenured participants, reevaluating Solutions' curriculum, and exploring formalization of intake and assessment tools to align them with standards from the social service industry.

Sources: <sup>a</sup> USA Facts (2020); <sup>b</sup> U.S. Bureau of Labor Statistics (2020c).

## How Solutions measures participant progress

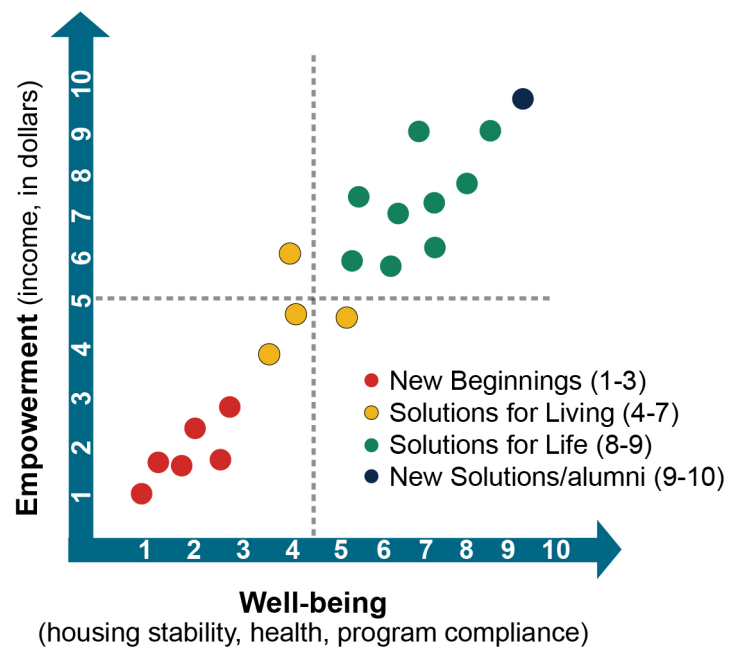
Solutions assesses its participants' success in terms of progression along an internally developed, four-quadrant grid. This grid ranks participants' income (referred to as "empowerment") on the Y-axis and their physical, mental, and financial well-being (referred to as "well-being") on the X-axis (see Figure 2). Agency leadership aims to see participants move from the bottom left (low levels of income and well-being) to the top right (high levels of both) of this quadrant.

Case managers regularly enter participant data into an internal management information system (MIS) Solutions has developed using Salesforce. Key data fields include income, public benefit receipt, employment status, housing status, and program performance (such as attendance at required meetings and ERT and prompt submission of forms). These data are used to calculate participants' Personal Transformation Score (PTS), which is the internally developed metric staff use to assess participants' progress in the program.

The PTS is a combination of a participant's empowerment and well-being index scores. The empowerment index is calculated using participants' income. If participants are receiving cash assistance, they receive an empowerment score of zero. If they are earning income, receiving disability, or receiving child support, the empowerment index increases incrementally up to a score of 10 for participants earning \$2,750 or more per month. The well-being index is calculated using an internal algorithm that aggregates participants' qualitatively assessed housing stability, health, employment status, and program performance data.

The MIS provides a snapshot of participants' PTS scores along the grid at any point in time, both for individuals and for the caseload as a whole (each dot representing one participant). Case managers use these rankings to determine participants' readiness to progress through program phases. For example, participants' well-being scores must be higher than 3 to progress from New Beginnings to Solutions for Living. Participants must achieve key outcomes and increased PTS scores to progress through program phases. Examples of key outcomes include obtaining employment, maintaining employment for six to nine months, and increasing their savings to support ongoing housing stability. Leadership uses these data to understand the number of participants who are in each phase and whether they are moving along the grid toward graduation as designed. However, in the absence of a rigorous evaluation comparing the outcomes of Solutions participants to an equivalent comparison group, we cannot estimate whether participants' improvements resulted from the program.

**Figure 2. Illustrative visual snapshot of a Personal Transformation Score**



Solutions' leadership reported that retention rates are high among program participants. According to leadership, 74 percent of participants complete their ERT hours. Of these, 94 percent later graduate from the program. Leadership indicated that the most common reason participants exit the program is because they failed a drug test. Solutions refers participants who fail their tests to inpatient services. Participants who complete inpatient treatment can reapply.

## Solutions' accomplishments and challenges

Solutions' staff and leadership interviewed touted the success of their model. They emphasized the mix of services they offer including comprehensive housing, employment, and support services. They also stressed the importance of the accountability mechanisms, including the zero-tolerance drug use policy and regular case management sessions with a dedicated case manager designed to keep participants accountable to their individually developed goals.

**Accomplishments.** Staff highlighted three accomplishments:

1. **Program completion rate.** Based on internal program data, 74 percent of participants reach commencement (completing the first two phases). Of these, 94 percent graduate from the program (completing all three phases).
2. **Job placement rate.** Staff shared that the program has a high job placement rate, and they believe this success is driven by helping participants set high expectations for themselves and encouraging them to take jobs that align with their interests rather than the first job offered to them.
3. **Alumni involvement.** Members of the Solutions' alumni network remain involved with the organization for months and years after their graduation. Alumni facilitate 12-step classes at Solutions, volunteer with other on-site activities, provide material goods requested by the organization to support new members, and participate in fundraising and advocacy on the organization's behalf.

**Challenges.** According to participants and staff, participants experience several challenges throughout the highly structured program model:

- **Restrictions on personal freedom.** Although participants interviewed shared that they appreciated the firm daily routine and program requirements in retrospect, participants and staff both noted that some of the restrictions can be especially challenging for participants. For example, Solutions requires all participants in the New Beginnings and Solutions for Living phases to report for count at their 10 p.m. curfew, which some participants described as frustrating.

### Staff perspective

"It's not always easy, and we don't always solve it for everybody. But I know exactly why I'm here, exactly what I'm doing, and I see the results."

- **Coping during incremental increases in responsibility.** Staff shared that participants often get used to the structure associated with the firm daily routine and degree of residential supervision at each program phase. Case managers shared that participants often experience challenges when their responsibility and independence increase as they advance to a new phase. For example, when participants move from the intake shelter to transitional housing and must begin managing meal preparation, homework, child care, and work on their own, it can be stressful and tempt some participants to use drugs or alcohol to cope with the transition.
- **Transportation.** Solutions requires participants to attend multiple off-site meetings and work to maintain program standing. Staff and participants noted that transportation is a major barrier for participants and people with low incomes in San Diego County more generally. Public transportation is available, but participants indicated that it is very time-consuming with appointments and work spread throughout the geographically dispersed county.

According to staff, the organization as a whole faces two key challenges:

- **Operating in a Housing First policy context.** The lack of direct federal funding due to Solutions' noncompliance with Housing First principles has created financial challenges for the organization. Solutions' leadership shared that it remains committed to maintaining its zero-tolerance substance use policy and mandated work readiness activities through a combination of funding sources, but it is concerned about the viability of its housing investments absent federal funding.
- **Scaling.** Solutions' leadership expressed interest in scaling the model through private consulting agreements with other organizations or localities interested in its training or consultation services. However, the scaling plan is dependent on securing investment capital to set up licensing and consulting agreements with providers in other cities across the country, and this has been challenging to attract.

## FOR MORE INFORMATION

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## Methodology

The State TANF Case Studies project seeks to expand the knowledge base of programs that help low-income individuals, including TANF recipients, prepare for and engage in work. The study is showcasing nine programs selected because of their different approaches to working with these individuals. Mathematica and its partner, MEF Associates, designed and conducted the study.

To select programs for case studies, the study team, in collaboration with ACF, first identified approaches that showed promise in providing low-income individuals with employment-related services and linking them to wraparound supports, such as child care and transportation. These approaches might increase self-sufficiency directly by helping participants find employment or indirectly by providing supports and alleviating barriers to employment. The study team identified four approaches, or domains:

1. Wraparound supports
2. Full-family transitional housing and supports
3. Employment-based interventions
4. Collective impact and collaborative community initiatives

Within each domain, the study team then identified potential programs by searching key websites, holding discussions with stakeholders, and reviewing findings and lessons from ACF and other studies. The next step was to narrow the list of programs based on initial discussions with program leaders to learn more about their programs and gauge their interest in participating. The final set of case study programs was selected for diversity, in terms of geography and focus population. Case studies of these programs illustrate the diverse practices operating around the country to assist TANF recipients and low-income individuals in finding and maintaining employment. Their selection does not connote ACF's endorsement of the practices or strategies described.

For each program selected, two or three members of the project team conducted a site visit to document its implementation. For eight programs, team members conducted two- to three-day visits to an average of two locations per program. The visit to the ninth program was conducted virtually via video conferencing due to COVID-19 pandemic travel restrictions. Each site visit consisted of semistructured interviews with administrators of the program, leaders of their partner agencies, and the staff providing direct services. The site visit teams interviewed, on average, 15 staff per program. During in-person visits, the teams also conducted in-depth interviews with an average of three participants per program and reviewed anonymized cases of an average of two participants per program. In addition, teams observed program activities, as appropriate.

For this case study, two members of the research team conducted a two-and-a-half-day visit in January 2020 to Solutions for Change's main campus and the Solutions Farm. The team conducted semistructured interviews with seven Solutions' staff, including the program founder, other program leadership, case managers, and other program staff. In addition, the team conducted in-depth interviews with two participants and observed a Solutions University class and two morning employment readiness training meetings. The team conducted a follow-up telephone call in July 2020 with a program leader to learn how Solutions responded to the COVID-19 public health emergency.



## References

- Burke, C. “2018 Adult Arrestee Drug Use in the San Diego Region.” San Diego, CA: Criminal Justice Clearinghouse, San Diego Association of Governments, September 2019. Available at [https://www.sandag.org/uploads/publicationid/publicationid\\_4622\\_26593.pdf](https://www.sandag.org/uploads/publicationid/publicationid_4622_26593.pdf).
- Community Health Statistics Unit. “2017 Demographic Profiles: San Diego County.” San Diego, CA: Community Health Statistics Unit, Public Health Services, Health & Human Services Agency, County of San Diego, November 2019. Available at <https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/CHS/demographics/2017%20Demographic%20Profiles.pdf>. Accessed February 5, 2020.
- Freddie Mac. “Rental Burden by Metro.” April 2019. Available at [https://mf.freddiemac.com/docs/rental\\_burden\\_by\\_metro.pdf](https://mf.freddiemac.com/docs/rental_burden_by_metro.pdf). Accessed May 1, 2020.
- Holt, W. “Substance Use in California: A Look at Addiction and Treatment.” Oakland, CA: California Health Care Foundation, October 2018. Available at <https://www.chcf.org/wp-content/uploads/2018/09/SubstanceUseDisorderAlmanac2018.pdf>. Accessed February 5, 2020.
- Live Well San Diego. “North County Regions.” Available at <https://www.livewellsd.org/content/livewell/home/community/community-leadership-teams/north-county-regions.html>. Accessed May 12, 2020.
- Office of Community Planning and Development. “The 2019 Annual Homeless Assessment Report (AHAR) to Congress.” Washington, DC: Office of Community Planning and Development, U.S. Department of Housing and Urban Development, January 2020. Available at <https://files.hudexchange.info/resources/documents/2019-AHAR-Part-1.pdf>. Accessed February 5, 2020.
- Regional Task Force on the Homeless. “2019 RTFH Annual Report on Homelessness in the San Diego Region.” San Diego, CA: San Diego Regional Task Force on the Homeless, 2019. Available at [https://www.rtfhsd.org/wp-content/uploads/2019/11/Annuallylayout11\\_27.pdf](https://www.rtfhsd.org/wp-content/uploads/2019/11/Annuallylayout11_27.pdf). Accessed February 5, 2020.
- San Diego Behavioral Health Services. “Drug Medi-Cal Organized Delivery System (DMC-ODS).” n.d. Available at [https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/dmc\\_ods/dmc\\_ods\\_provider.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/dmc_ods/dmc_ods_provider.html). Accessed May 1, 2020.
- U.S. Bureau of Labor Statistics. “Labor Force Data by County, 2019 Annual Averages.” 2020a. Available at <https://www.bls.gov/lau/laucnty19.xlsx>. Accessed June 24, 2020.
- U.S. Bureau of Labor Statistics. “Civilian unemployment rate, seasonally adjusted.” 2020b. Available at <https://www.bls.gov/charts/employment-situation/civilian-unemployment-rate.htm#>. Accessed August 14, 2020.
- U.S. Bureau of Labor Statistics. “Labor Force Data by County, not seasonally adjusted, latest 14 months.” 2020c. Available at <https://www.bls.gov/web/metro/laucntycur14.txt>. Accessed August 14, 2020.
- U.S. Bureau of Labor Statistics. “Economy at a Glance: San Diego-Carlsbad-San Marcos, CA.” January 31, 2020. Available at [https://www.bls.gov/eag/eag\\_ca\\_sandiego\\_msa.htm](https://www.bls.gov/eag/eag_ca_sandiego_msa.htm). Accessed February 5, 2020.

- U.S. Census Bureau. “Selected Social Characteristics in the United States: San Diego County, California. 2014–2018 American Community Survey 5-Year Estimates.” 2019a. Available at <https://data.census.gov/cedsci/table?g=05000000US06073&y=2018&d=ACS%205-Year%20Estimates%20Data%20Profiles&tid=ACSDP5Y2018.DP02&hidePreview=true>. Accessed June 24, 2020.
- U.S. Census Bureau. “Selected Economic Characteristics: San Diego County, California. 2014–2018 American Community Survey 5-Year Estimates.” 2019b. Available at <https://data.census.gov/cedsci/table?t=Families%20and%20Living%20Arrangements%3AFamily%20Size%20and%20Type&g=05000000US06073&y=2018&d=ACS%205-Year%20Estimates%20Data%20Profiles&tid=ACSDP5Y2018.DP03&hidePreview=true>. Accessed June 24, 2020.
- U.S. Census Bureau. “Selected Housing Characteristics: San Diego County, California. 2014–2018 American Community Survey 5-Year Estimates.” 2019c. Available at <https://data.census.gov/cedsci/table?q=Housing&g=05000000US06073&tid=ACSDP5Y2018.DP04&moe=false&hidePreview=true>. Accessed June 24, 2020.
- U.S. Department of Housing and Urban Development. “Housing First in Permanent Supportive Housing.” July 2014. Available at <https://files.hudexchange.info/resources/documents/Housing-First-Permanent-Supportive-Housing-Brief.pdf>. Accessed May 1, 2020.
- USAFacts. “US Coronavirus Cases and Deaths.” July 30, 2020. Available at <https://usafacts.org/visualizations/coronavirus-covid-19-spread-map/>. Accessed August 20, 2020.

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