

**AUGUST 2022**

**NEEDS  
ASSESSMENT  
REPORT:  
PROMISING  
PRACTICES AND  
INTERVENTIONS  
TO ADDRESS THE  
HOUSING NEEDS  
OF DOMESTIC  
VIOLENCE  
SURVIVORS**

**National Resource  
Center on Domestic  
Violence**



**National Resource Center**  
**on Domestic Violence**



**SAFE HOUSING  
PARTNERSHIPS**

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# INTRODUCTION

The intersection between domestic violence, housing instability, and homelessness continues to be a pressing issue for the field. While existing research has extensively documented the nature of the problem, there remains a gap in our knowledge and understanding of the unique needs of survivors who live at the intersection of marginalized identities. There is also a gap in our knowledge and understanding of the promising practices and creative solutions implemented by communities to address the housing needs of domestic violence survivors.

To this end, the National Resource Center on Domestic Violence (NRCDV) conducted a two-part needs assessment project. The first part of the assessment documented domestic violence survivors' current and emerging housing needs, centering on the perspectives of marginalized populations, particularly Black and Brown communities. The second part of the assessment documented the innovative practices, promising housing approaches, and interventions implemented in the field by grassroots organizations and community-based agencies to address the housing needs of survivors.

The needs assessment concludes with important recommendations for policymakers, funders, service providers, and advocates in both housing and domestic violence domains to inform initiatives to effectively respond to survivors' housing needs.

## ***The specific goals of this assessment were to:***

- Gather input from written materials, researchers, and community service providers on a variety of topics at the intersection of housing and domestic violence,
- Identify the needs and barriers to safe and stable housing for survivors including the impact of the COVID-19 pandemic on the housing needs of survivors, and
- Identify current survivor-centered innovative practices, housing approaches, and interventions and their relative success.

# METHODS

This needs assessment involved a three-step process of utilizing qualitative methods to gather relevant information to answer the guiding questions of the assessment. Data for this needs assessment was collected between January and June 2022.

**Desk Review.** The first step included a desk review to provide a foundation upon which to build the subsequent steps. Desk review activities included examining journal articles, reports, and other written materials developed by government agencies, academic institutions, for-profit, and non-profit sectors to identify relevant information (i.e., emerging themes, gaps, and solutions) related to the housing needs and challenges of domestic violence survivors.

**Listening Sessions.** NRCDV convened listening sessions with community service providers and survivors who are advocates representing diverse stakeholders to gather input on the housing needs of survivors and discuss creative and promising solutions implemented by DV/SA organizations in response to these needs.

**Key Informant Interviews.** Key informant interviews were completed with a small group of Black and Brown researchers who have expertise working with communities of color at the intersection of housing insecurity and domestic/sexual violence. The purpose of these interviews was to fill in any knowledge gaps regarding the housing needs of survivors and provide insight on emerging housing approaches and interventions being used with survivors as well as evidence of the effectiveness of these interventions. The data and information gathered from all data sources are summarized in the next section.

# HOUSING NEEDS AND BARRIERS

## SAFETY NEEDS

Survivors need extensive support to achieve safety. A survivor's safety needs are relative to their social identities and lived experiences. As such, it is important to trust that survivors are experts in their needs. Although there are many other dimensions of safety, DV service providers and survivors who are advocates often discuss survivors' safety needs in the context of physical safety, mental and emotional safety, and economic safety.

Physical safety involves being able to get away from the person causing harm or an abusive environment without jeopardizing their access to resources. Affordable housing is a component of physical safety that involves access to family housing for shelter, security, privacy, and stability. The meaning of safety for survivors also extends beyond their safety to the safety of their loved ones, especially their children. Survivors also define safety as their children having adequate living space in the home, feeling safe to go outside in the community where they live, and having access to resources to support overall well-being such as healthy food options, good schools, and recreational spaces.

Mental and emotional safety involves survivors being heard, understood, and believed. It involves validating the feelings and experiences of survivors, restoring agency/control, and providing opportunities for survivors to socialize and receive support from a community. Preliminary findings from an ongoing study by Dr. Gabriela Lopez-Zeron revealed an overlap between emotional and physical safety for many survivors. Survivors discussed safety from the perspective that physical safety cannot be derived without emotional safety and vice versa. Many existing housing efforts primarily focus on addressing the physical safety needs of survivors by providing resources such as short-term housing options. While these housing options provide some level of physical safety, emotional safety is equally important. Survivors need to be able to rely on having safe, stable, and accessible housing. When long-term housing options are not available and/or housing regulations are restrictive, survivors often have anxiety around losing their housing eligibility or not being able to sustain the housing and worry about their next steps when the housing support ends.

Economic/financial safety involves survivors gaining back control over their monetary resources, attaining economic self-sufficiency, and having the income, assets, and access to services needed to meet basic needs and build savings over the lifespan.

## **BARRIERS TO SAFE, STABLE, AND ACCESSIBLE HOUSING**

### **Lack of Affordable Housing Options**

Nationally, there is a severe **shortage of housing inventory and affordable housing** options. Over the years, housing prices for all types of homes have drastically increased and no state has an adequate supply of affordable rental housing for the lowest-income renters. Due to the **housing supply shortage**, there are limited housing units available to meet the housing needs of communities, and low-income survivors and their families often lose out to other renters with higher incomes and better credit. Even when survivors qualify for emergency section 8 HUD choice vouchers, the application process is extensive, difficult, and time-consuming due to the scarcity of low-income housing units. Furthermore, the housing shortage leads to fewer resources for survivors who are not in crisis but are seeking housing because the high demand requires housing systems and DV agencies to prioritize survivors who are in crisis.

### **Housing Discrimination**

Survivors face various forms of **discrimination** (based on their race/ethnicity, immigration status, national origin, criminal record, income, trans/queer identities, and domestic violence history to name a few) when attempting to secure appropriate housing. Survivors are considered undesirable tenants because of their previous involvement with the criminal legal system, previous evictions, negative credit reports, family structure, and limited finances. Landlords are reluctant/unwilling to take on section 8 housing vouchers. **Research** assessing the extent of housing denials and evictions against domestic violence survivors found that 11% of evictions and 28% of denials of domestic violence survivors were because of the violence against them. Findings from the needs assessment highlighted the negative impact of exclusive and regulated neighborhoods created by homeowners associations (HOAs). High HOA premiums and exclusionary regulations increase racial/ethnic disparities making it difficult for survivors of color to access housing in good neighborhoods. Additionally, HOAs often attempt to restrict or prohibit the development of low-income housing apartment communities.

### **Substandard Housing Options**

Due to the lack of adequate and affordable housing for survivors, in addition to the discrimination they may experience when looking for housing, survivors most often find themselves in substandard housing and/or undesirable neighborhoods. **Poor housing** is linked to a variety of health problems, including lead poisoning, injuries, respiratory infections, asthma, and poor mental health. Survivors living in substandard

housing also navigate safety concerns such as unprotected upper-story windows, exposed heating sources and fires, and poorly planned stairwells with poor lighting. Living in an unsafe environment further places a survivor at risk for revictimization and other forms of exploitation.

### **Inadequate Housing Options for Survivors with Children**

The individualized support services available to survivors are dependent on the size of the family. There is a lack of adequate housing support for survivors and their families, particularly survivors who have multiple children in the household and those who have teenage dependents. Survivors with multiple dependents often wait longer to access safe and stable housing. This is because of additional barriers to housing such as inadequate housing units for large families within the community. When survivors are unable to access housing within their local community, they are burdened with navigating the process of uprooting their families from a familiar location and engaging with various systems (such as finding new schools for their children) to restore a sense of stability. The lack of adequate housing resources to support the needs of survivors with children often leaves survivors and their families with no alternative but to stay with the harm-doer until they can access safe housing.

### **Inadequate Housing Services**

There is a significant gap in housing service provision for survivors. This is because there are fewer domestic violence community agencies designed to address the housing needs of survivors. Survivors' access to safe and stable housing is hindered by a lack of effective community-based housing assistance. Community-based DV organizations, especially culturally specific organizations frequently work in resource-constrained situations, with limited resources for assisting survivors with the financial and material resources necessary for obtaining and maintaining housing. There is also a lack of understanding among advocates about housing rights and availability. Navigating housing and homeless services is a new space for many advocates who have limited experience engaging across systems to provide housing advocacy to survivors. Many DV services continue to be siloed and advocates do not have the skills and resources to identify housing options and adequately engage with housing systems to meet survivors' needs. There is also a lack of adequate systems collaboration and sharing of expertise and resources across homeless and DV service systems. The lack of communication, coordination, and collaboration between systems creates barriers to meeting the housing needs of survivors.



## **Barriers to Accessing Homeownership**

While there are increasing efforts to ensure that survivors can access rental housing options, there are fewer efforts to support survivors' interests in homeownership. Findings from the needs assessment revealed that many survivors who are interested in homeownership do not have adequate resources or support to meet their goals. Many survivors experience damaging, traumatizing, and ongoing abuse from systems around housing, and seek to be independent of these systems. Additionally, many survivors want stability which goes beyond renting an apartment or a house that can be taken away from them at any time because it is owned by someone else. Survivors also seek to acquire assets that can be passed on to their children. Despite the expressed interest of survivors, there are several barriers to homeownership such as lack of access to capital for the down payment and closing costs, lack of access to credit, poor/low credit scores (often due to experiences of economic abuse), continued housing discrimination, the lack of information and understanding about the home buying process, and the lack of access to financial resources. Affordability is also a barrier because of the limited housing supply. Additionally, many housing corporations purchase homes in fast-growing communities only to exponentially increase prices for re-sale making such homes unaffordable for survivors.

## **Limitations of Transitional Housing (TH)**

Transitional housing support involves providing free or reduced-rent temporary housing (usually an apartment or rental unit for 12 – 24 months) to survivors and their families. Housing provision is usually accompanied by additional support services (such as counseling, education, and job training) to help survivors heal from trauma and address barriers to securing permanent housing. The structure of transitional housing includes a scattered site design (i.e., survivors live in independent apartments in the community and the program is not the landlord), clustered site design (i.e., survivors live in apartments or building with units owned and managed by the program), and communal living design (i.e., survivors live in a unit where they share common space with other residents but have separate/private bedrooms).

While transitional housing options have been instrumental in empowering survivors to rebuild their lives after abuse, these programs have also yielded unintended consequences for survivors from marginalized backgrounds, particularly Black and Brown survivors. Many transitional housing programs have eligibility requirements that survivors must meet and sustain to receive this support. Problems with transitional housing range from intrusive interviews (e.g., asking about the number of sexual

partners) and restrictive program requirements (e.g., requiring residents to meet with a case manager or enroll in substance abuse treatment, and restrictions on the number of guests that survivors can entertain/the time-of-day survivors are allowed to receive visitors, etc.) to advocates/program staff lacking adequate tools to navigate conflict with residents which can lead to negative outcomes such as the loss of housing for survivors. Findings from the needs assessment also revealed that immigrant survivors and survivors who are undocumented report feeling unsafe in transitional housing when there is a persistent police presence in the neighborhood for fear of arrest and deportation.

### **Limitations of section admission and occupancy policies/standards set by HUD**

Occupancy standards relate to the appropriate size and type of unit based on household composition. When household composition changes, public housing authorities (PHAs) are required to put the respective household on the transfer list and move them when a unit becomes available if they are not in an appropriately sized unit.

Findings from the needs assessment identified notable limitations in the execution of HUD occupancy policies by PHAs which results in housing instability for survivors with housing vouchers. When survivors are initially placed into an appropriate size project-based unit based on family composition, changes in their family composition results in changes to their voucher size making them ineligible to continue living in their current project-based unit. According to HUD policies, survivors should be given the option to be placed on a waiting list to receive a housing choice voucher when one becomes available or to transfer to another appropriate size-based unit outside of their current living situation. However, this waiting list is extensive, and vouchers are unavailable for long periods. When this happens, many survivors report being asked to leave their housing unit without adequate support provided to access alternative housing options. For example, advocates described instances where survivors who are in single-occupancy units risk losing their housing if they get pregnant, decide to live with a partner, or start a family. As single-occupancy vouchers do not allow for multiple individuals to live in the unit, survivors are not allowed to remain in the housing unit if their living situation changes. In instances where there is no availability to transfer into family-based housing, survivors risk losing their housing altogether. Similarly, in instances where survivors have a child living with them in family-based housing, the child becomes ineligible for housing under the voucher when they turn 18 years old. This restrictive policy forces survivors to decide between kicking their children out of the housing unit (which is a form of family separation and increases the incidence of youth homelessness) or risk losing the housing voucher altogether.

## **The Difficulty of Navigating Multiple Systems**

There is a lack of comprehensive and holistic service provision to meet the needs of survivors and their families. Many survivors are unable to access all the services they need at one location and often seek support from several agencies to address their multiple needs. For example, some DV agencies can provide emergency shelters but cannot provide additional support services to survivors. Other agencies can provide counseling and support group but are unable to provide permanent housing assistance. The absence of centralized services is burdensome and overwhelming for survivors. The complex process of navigating multiple systems can also be re-traumatizing for survivors, particularly those who are in crisis and those who have children. In addition to the lack of holistic support services, the paperwork required for survivors to get and maintain housing such as income verification and recertification is extensive and complex. For example, some policies that require housing program beneficiaries to report any additional income including gift cards over \$50. These requirements are particularly confusing and complex for young people and survivors who have experienced trauma to navigate without adequate support in place.

## **Lack of Culturally and Linguistically Appropriate Services**

Historically resilient groups are disproportionately impacted by housing barriers. **Survivors from communities of color, LGBTQ+ survivors, elders, immigrants, survivors with disabilities**, those living in poverty and geographic isolation, and formerly incarcerated survivors experience greater challenges related to securing safe and stable housing. These barriers are often exacerbated for survivors who hold multiple identities and live at the intersection of marginalized identities.

### Inadequate survivor-centered and trauma-informed services

Researchers, practitioners, and DV service providers recognize the importance of providing support services that are survivor-centered and trauma-informed. While the need for adequate funding and support for DV agencies is often centered in discourse, there is less emphasis on the need for advocates to engage in survivor-led advocacy, practice cultural sensitivity, and receive ongoing training, supervision, and technical assistance to assess and improve their practices. Findings from the needs assessment revealed that many DV agencies, especially mainstream agencies do not provide adequate survivor-led, survivor-centered, and survivor-defined care. While advocates tend to center safety planning when providing support, this may not be the priority of the survivor. The lack of alignment is particularly evident in contexts where the articulated needs of the survivor do not align with what the advocate/program staff thinks is best for

the survivor. The absence of ongoing training and support on implementing survivor-led and survivor-defined approaches to service provision impacts the ability of advocates and service providers to honor the voices of survivors. There is also a lack of centering survivors' voices within service delivery. While some agencies and programs center on the lived experiences of survivors, many programs are not adequately informed such that survivors do not always have a central role in service design and delivery.

#### Inadequate support for culturally specific services

Mainstream services are more likely to receive funding and less support is provided to culturally specific agencies serving communities of color. There is also a lack of visibility for culturally specific organizations which prevents such organizations from accessing public and private grant funds because the programs do not receive consistent and timely notifications of funding opportunities. The lack of adequate funding limits the capacity of organizations to effectively support survivors and negatively impacts the ability of survivors to receive services that are specifically framed to meet their unique needs.

#### Survivors from communities of color

Structural racism influenced by historical and present-day injustices have systematically disadvantaged people of color. Homelessness affects Black people, other people of color, and Indigenous people in very different ways than it affects white people. The consequence of structural racism creates more barriers to safe and adequate housing for survivors from communities of color. Systemic inequality (displacement, exclusion, and segregation), racist historical policies and institutional practices, cultural narratives that perpetuate racial disparity, and socio-economic inequalities lead to Black and Brown survivors having limited access to financial resources and fewer sources of credit to purchase homes. In addition, there is a shortage of adequate housing options and resources in Indian country.

#### LGBTQ+ survivors

LGBTQ+ survivors experience various forms of oppression including homophobia, biphobia, and transphobia. LGBTQ+ survivors also comprise a significant portion of the homeless population and experience high rates of poverty, housing insecurity, and discrimination. These forms of oppression create barriers that limit LGBTQ+ survivors' access to housing resources and options. Additionally, survivors often report experiencing anti-LGBTQ+ bias from service providers and a lack of LGBTQ+ competent resources to meet their housing needs. According to the findings of a research study conducted in 2015 by the National Coalition of Anti-Violence Programs (NCAVP), 44% of survivors who sought emergency shelter were denied. Barriers

related to gender identity were the most reported reason for survivors being denied shelter (71%).

### Immigrant survivors

Immigrant and refugee survivors face unique challenges when accessing and maintaining safe housing. These may include multi-faceted issues related to language access (barriers for survivors who speak, read or write a language other than English), no knowledge of credit score, poor or no credit history (particularly for survivors who are unfamiliar with the credit system in the United States, are new arrivals, etc.), housing history, economic challenges (such as insufficient income and financial insecurity), landlord discrimination, fear of removal and family separation for survivors who are undocumented or have undocumented family members, practical barriers (e.g., transportation), and qualification barriers to receiving federal and state aid. In addition, a survivor's immigration status may directly impact the types of housing assistance they are eligible for and can obtain. Survivors are often unaware of where to get resources, what resources are available, and how to effectively navigate systems. Where undocumented survivors are unable to access federal and state housing resources, they are left with market-rate housing options which are unaffordable. Even when undocumented survivors can find market-rate housing, they may have insufficient documentation to secure housing.

Many immigrant survivors who are undocumented and/or have financial difficulties have limited housing options available to them. The lack of access to affordable housing for survivors often results in survivors living in substandard housing units that are unregulated which presents several challenges. Preliminary evidence from an ongoing study conducted by Dr. Gaby Lopez-Zeron found that Latinx immigrant survivors often rent basement spaces from homeowners and this housing is unregulated. Many survivors report living in units with holes in the walls, mold, water leakages, broken locks, etc. These poor housing conditions also lead to negative outcomes for children e.g., developing asthma and other health problems.

There are also instances where there are no tenant leasing agreements or receipt/proof of payment, and survivors are unaware of their housing rights and constantly live in fear of losing their housing. Some property owners include specific terms in the leasing agreement that automatically renews the rental agreement if the survivor fails to give advance notice of their decision not to renew. This is particularly an issue when there is a lack of language justice and rental agreements are only available in English. Survivors who do not read or write English or are active learners of English are often unaware of these terms until it is too late. There are also instances where survivors are renting from a family and have difficulties identifying who to go to when

they have maintenance needs. In other instances, property owners threaten immigrant survivors with immigration proceedings. Property owners cause harm to survivors by threatening to call U.S. Immigration and Customs Enforcement (ICE) when survivors express dissatisfaction about poor living conditions or attempt to terminate their leasing agreements due to landlord violations. Many survivors are forced to tolerate these abuses because of the lack of housing alternatives that are safe and affordable, and their reluctance to engage with government systems or seek legal recourse for fear of prosecution or deportation. This contributes to survivors feeling afraid and isolated.

### Survivors with disabilities

Accessing and sustaining housing is difficult for survivors with disabilities. Poor rental, credit, or criminal history because of disability; a lack of units accessible to people with mobility and hearing-related disabilities; refusal to rent to a survivor with a service animal; stereotypes about people with disabilities; inability to find accessible and affordable housing in a safe neighborhood; and insufficient income to pay the rent are examples of the obstacles that survivors with disabilities/Deaf survivors encounter when attempting to access and maintain housing. Additionally, there are many challenges within the housing system for survivors with disabilities who strive to obtain supportive housing (such as verification from doctors, often obtained through numerous appointments; required documents, etc.). Furthermore, survivors with disabilities/Deaf survivors do not have the same access to workplace opportunities as those without disabilities. Agencies providing employment services to survivors with disabilities are more likely to offer placements in minimum wage jobs. These discriminations limit the ability of survivors with disabilities and Deaf survivors to earn a livable wage, become self-sufficient from government services and federal funding, and live independently within communities. Additionally, the income-based restrictions of public benefits programs limit survivors with disabilities to generate the income necessary to obtain safe and accessible housing.

Even when survivors with disabilities can secure accessible housing, the shortage of personal attendant care workers is a barrier to maintaining housing. Poverty wages undermine the availability of critical in-home services for survivors with disabilities. For example, in Texas, the base hourly wage for personal care attendants is \$8 and many attendants often rely on public benefits to take care of their family's basic needs. The inadequate wages and benefits for personal care attendants derail recruitment and retainment and have led to a crisis-level shortage as there are not enough attendants to meet the growing demand. Poverty wages for attendants also yield unintended consequences for survivors with disabilities. Survivors with disabilities sometimes lose their housing units and are placed under institutional care because they do not have the support necessary to live in communities.

### Formerly incarcerated survivors

Formerly incarcerated people who are survivors of domestic violence, particularly those who are women of color experience difficulties reentering society. Having a criminal record creates barriers to safe and stable housing for survivors such as limiting access to employment, public housing, and benefits. Having a criminal record also negatively impacts the ability of survivors to rent or purchase housing. In addition, survivors who are on probation, parole, or supervised release must navigate the complex process of rebuilding their lives while adhering to the constraints and obligations imposed by the conditions of their release. Furthermore, reentry services and victim services are often siloed and there are few trauma-informed service programs for formerly incarcerated survivors. Sometimes, DV advocates are uncomfortable dealing with women who have criminal histories, are unfamiliar with the components of community supervision, and/or are unclear of how domestic violence and domestic violence legal remedies connect with the reentry process. Additionally, many DV agencies do not understand the impact of a conviction on the life of survivors and its collateral impact on their families. The lack of awareness among DV service providers about the complex realities of formerly incarcerated survivors limits the ability of advocates to address the unique needs of these survivors.

### Language access, interpretation, and translation services

Many victim services across the country do not have appropriate and effective cultural and linguistic assistance services (i.e., language interpretation, translation services, culturally and linguistic affirming services) to meet the needs of culturally diverse survivors, survivors whose first language is not English, and survivors with disabilities and Deaf survivors, which negatively impacts their ability to access safety and housing services. The absence of language and interpretation services limits the ability of culturally diverse survivors to communicate their housing needs, complete documents, review service information, and receive appropriate housing services.

### Survivors with non-traditional family structures

There is a lack of adequate consideration for the nontraditional family structure that is normative in many collectivist cultures/communities. Survivors with alternative family structures such as same-sex couples, blended families, families headed by two unmarried partners, households that include one or more family members from a generation, and families where children are raised by their grandparents or other relatives experience increased barriers to affordable housing. Many shelters and housing programs do not provide support for survivors to be housed with their families in the same unit. For example, some Native survivors operate within a clan system. As

such, these survivors may have children within their care that are not biological or legally adopted children. Advocates working with Native survivors noted several instances where housing programs refused to provide housing for survivors to live in the same unit with their children because these survivors did not have any legal paperwork (e.g., birth certificate) indicating that the child within their care is a biological or legal relative. The lack of cultural responsiveness in the housing system often leads Native survivors to opt out of emergency shelters and other housing services that do not meet their family's needs.

## **THE IMPACT OF COVID-19 ON THE NEEDS OF SURVIVORS**

### **Heightened Risk for Domestic Violence**

The lockdown measures implemented to curtail the spread of COVID-19 led to an increased risk for domestic violence. The increased social isolation and individual stress during COVID-19 created an environment in which survivors and aggressors were in prolonged proximity, thus increasing the risk of violence. Findings across various research studies indicate that the pandemic significantly impacted survivors' access to essential resources such as employment, housing, healthcare, childcare, food, and transportation. The closure of key community services and the increased strain on existing domestic violence services also impacted the ability of survivors to access safety resources. Research findings from the [Harris County Health and Relationship Study \(HCHR\)](#) conducted by the Center for Violence Prevention in Texas also showed that survivors from racial/ethnic marginalized groups were disproportionately impacted by COVID-19. Specifically, participants identifying as Black and Hispanic experienced a heightened risk for domestic violence compared to participants from other racial/ethnic backgrounds.

### **High Economic Insecurity and Lack of Financial Resources**

The [economic effect of the pandemic](#) has significantly impacted the financial stability of domestic violence survivors. During the COVID-19 pandemic, many survivors experienced furloughs and job loss leaving them especially vulnerable to food, housing, and economic insecurity, with survivors of color being disproportionately impacted. Survivors, particularly those from communities of color, who have endured financial abuse are more likely to have their schooling interrupted due to their financial status during the COVID-19 epidemic and putting survivors in the greatest danger of being unable to pay their bills and meet their basic needs.



## **Increased Homelessness**

Findings from the HCHR study also revealed that 56% of survivors experienced homelessness since the COVID-19 pandemic began and 60% of survivors with minor children experienced homelessness during COVID-19. Despite the increased need for housing services because of the pandemic, survivors indicated that rental assistance (15.6%) and housing support (13.3%) were the most commonly unavailable services needed.

## **Increased Strain on Housing Services**

Major shutdowns and COVID-19 social distancing and isolation policies diminished access to housing resources. The economic and social impacts of COVID-19 also led to an increase in housing service needs among survivors. Findings from the HCHR study indicate that emergency shelter was one of the most used services by survivors. When assessing the needs of survivors during COVID-19, rental assistance and housing services were among the top 5 needs reported by participants. This increase in demand led to a decrease in service availability. Despite the magnitude of the need reported, rental assistance and housing services were identified by participants as the most inaccessible services. Additionally, many survivors who tried to access homeless shelters were unable to do so. Findings also revealed that housing programs had the longest wait with 92.8% of those using the services reporting a wait of a week or more, with 50% waiting more than a month.

# CURRENT HOUSING INTERVENTIONS

## SYSTEMS-CHANGE EFFORTS

### CENTERING RACIAL EQUITY IN PRACTICE

Racial equity is a central component of systems-change efforts to adequately address the needs of survivors. Centering racial equity is necessary to disrupt racial and other structural and institutional biases that pose barriers to safety, housing, and economic stability for survivors of domestic violence. Participants in this needs assessment project emphasized the importance of identifying and dismantling the white supremacist structural policies and institutional practices that impede non-traditional interventions developed by BIPOC communities to provide survivors with the information, resources, and support needed to attain long-term safety and housing stability. Considering that anti-racism work is intrinsically connected to anti-violence work, acknowledging that existing racially biased services and systems present tremendous barriers that are outside of survivors' control and frequently thwart their efforts to access safety is the first step to creating systems change. A commitment to dismantling white-centered ways of operating and shifting systemic and social ideologies to center racial equity requires policymakers, funders, and DV agencies to develop, implement, and continually evaluate policies, protocols, strategies, and remedies that respond to the individual, organizational, and structural inequities facing survivors. Prioritizing efforts to identify and respond to the impact of systemic racism on survivors, expanding our understanding of equity and taking corrective action to pursue racial equity, and efforts to dismantle racial oppression in all forms by centering the voices and leadership of BIPOC communities in the anti-violence movement are all part of using a racial equity lens to address the needs of survivors. Until individuals and groups in the anti-violence movement focus on identifying, amplifying, and strategizing to advance equity by engaging a racial equity lens, it is impossible to adequately address the short and long-term safety and housing needs of survivors.

### BRIDGING THE GAP BETWEEN DV AND HOMELESS/HOUSING SERVICE DELIVERY SYSTEMS

Efforts to increase survivors' access to safe housing include initiatives to bridge separate DV and housing/homeless service delivery systems. To better address the housing needs of survivors, some DV agencies have begun to hire regional coordinators to engage in systems change efforts by building relationships with community partners and networks that serve survivors. DV regional coordinators may sometimes provide case management support to survivors to remain connected with

survivors and better understand how survivors experience the various systems they interact with. However, their primary responsibilities are to provide strategic coordination, ongoing training on regulations and best practices, and consultation to enhance the connections between domestic violence service providers, housing and homelessness (H/H), and coordinated entry services (CES), including crisis and permanent housing providers to ensure survivors can safely access and utilize CES housing resources to quickly return to stable and permanent housing. Regional coordinators also maintain referral networks and manage relationships with domestic violence community partners to provide safe crisis housing options to families in need.

An example of the application of this initiative is the Los Angeles DV Regional Coordinator co-location pilot program implemented by the Los Angeles Domestic Violence & Homeless Services Coalition in 2016. Eight DV regional coordinators were assigned to different geographical locations to provide cross-sector training, consult with service providers and advocate for policies to improve systems within and between DV, H/H, and CES. Findings from a [study](#) assessing the potential impact of the pilot program revealed that the strategic coordination and relationship-building efforts of regional coordinators facilitated cross-sector collaborations to address the complex needs of survivors. The consultation and support provided by regional coordinators also led to improvements in the practices of H/H and CE service providers.

## **SURVIVOR-CENTERED HOUSING FIRST APPROACHES**

### **DOMESTIC VIOLENCE HOUSING FIRST (DVHF)**

Considering the complex interrelationship between domestic violence and housing instability, DV agencies have increased efforts to ensure that survivors and their families are safely and stably housed. The DVHF model is increasingly becoming popular as a low-barrier intervention to address the housing needs of survivors by providing flexible services and financial assistance to help survivors quickly find and stay in permanent affordable housing. While DVHF is an adaptation of the Housing First (HF) model, there are distinct differences in these approaches. The DVHF model focuses on getting survivors of domestic violence into stable housing as quickly as possible following the survivor's guidance in deciding what housing options are best for them (e.g., understanding that some IPV survivors are at immediate risk and would prefer to initially remain in a highly secure setting such as a DV shelter) and then continuing to provide support as they rebuild their lives. The three pillars of the DVHF model include survivor-driven trauma-informed mobile advocacy, flexible funding assistance, and community engagement. Considering funding and resource limitations, fewer programs offer all components of the DVHF model.

Mobile advocacy involves a process whereby advocates focus on addressing the needs identified by survivors rather than on pre-determined needs promoted by agencies. Advocates are mobile, meeting survivors where it is safe and convenient for them. Advocates also engage in trauma-informed practice. Community engagement involves advocates working closely with housing providers, service providers, and community members to connect survivors to resources that meet their immediate and long-term needs. Community engagement efforts to improve housing stability among survivors include direct advocacy with landlords (such as negotiating extensions for survivors, preventing eviction, and rent increases) and direct advocacy and engagement with the housing providers (such as cultivating partnerships with local housing authorities to ensure that survivors are prioritized in housing placements).

DV agencies that provide flexible financial assistance can support survivors to rebuild their lives by providing unrestricted funds directly to survivors to pay for their critical needs related to housing and housing stability such as rent, security deposit, transportation, and education costs. Flexible financial assistance provides a medium for survivors to access resources. This approach is survivor-centered because it puts survivors in charge of the funds received so they can self-determine how to use these funds without program-level supervision or oversight. This intervention centers on trauma-informed practice and minimizes the burden placed on survivors by traditional service models because it does not require survivors, particularly those who are in crisis to demonstrate their worthiness for funding by providing extensive documentation of their needs or supporting evidence to verify that funds were used appropriately.

There is a growing body of research evaluating the impact of DVHF on increasing safety and housing stability among survivors and their families. Evidence from a **pilot evaluation** of the DVHF model revealed that most survivors who received the intervention retained their housing 18 months after accessing housing and reported an increase in safety and stability for themselves and their children. Additionally, a recent rigorous **evaluation** of the DVHF model revealed that survivors who received mobile advocacy and flexible funding were more stably housed and experienced fewer re-victimization 6-months later when compared to those who did not receive mobile advocacy and flexible funding.

## **RAPID REHOUSING (RRH)**

Rapid rehousing is an intervention model that primarily focuses on getting survivors out of homelessness and into permanent housing of their choice in the community as quickly as possible with rental assistance provided for a specific period, and then addressing additional needs after they are stably housed. Rapid-rehousing programs include housing identification (i.e., assisting survivors to find and secure

appropriate housing) and move-in financial assistance (i.e., covering move-in costs such as rent and utilities for a defined amount of time to stabilize in permanent housing). Some grant funds are available for DV agencies to implement RRH programs. For example, the LGBT Center of Central PA is currently implementing a rapid-rehousing program for survivors. The 12-month program covers moving costs and pays rent for the first three months with the option for survivors to continue receiving financial support for the remaining nine months of the program. While participating in the program, survivors are required to meet with a case manager monthly to receive support to sustainably transition to self-sufficiency.

## **COMMUNITY-ORIENTED APPROACH TO SERVICE PROVISION**

Organizations that are rooted in and serve BIPOC and other multiple marginalized communities have historically been excluded from funding opportunities and lack adequate resources. These communities have also been denied the opportunity to document and self-determine their own needs, strengths, and pathways to well-being. These discriminatory practices promote a deficit narrative in which communities get help from external institutions to solve their issues and the members of the community are treated as individuals who are broken and dependent on external services provided to them.

To disrupt this white supremacist narrative and elevate an asset-based narrative that acknowledges the insight, knowledge, strengths, and drive that communities must lead their own development, NRCDV has shifted its focus to center on community-driven solutions to housing instability. NRCDV is partnering with community-based organizations serving diverse populations. These community partners include Madre Tierra (Mother Earth), the LGBT Center of Central PA, A Miracle 4Sure, Caminar Latino, and Ain Dah Yung.

One of the community-based initiatives identified in the needs assessment is the model of community-building and ongoing support provided by a grassroots organization, Madre Tierra (Mother Earth). This model of support deviates from the practice of mainstream organizations which focuses more on short-term support to instead center the practice of following up with survivors after attending to their expressed needs. In this model, program staff stays connected with survivors by reaching out to them periodically to follow up on their well-being and offer additional support and encouragement such that survivors become part of a larger community. have found this to be greatly beneficial, powerful, and healing, especially in instances where survivors are interested in building community but are hesitant to connect with the agency because they do not want to take resources from those who may be in

crisis. Utilizing a model where the program staff follows up regularly with survivors takes the burden off.

While the agency has limited capacity to provide permanent housing support to survivors, Madre Tierra runs a support group program where survivors can collaboratively learn life skills that are instrumental in addressing their housing needs such as interviewing for a job and navigating housing systems (e.g., requesting an interpreter and seeking assistance with reviewing a leasing agreement, and asking landlords targeted questions when renting an apartment or unit). Preliminary findings from an ongoing research study by Dr. Lopez-Zeron indicate that these skill development opportunities have been particularly beneficial in helping survivors maintain safe and stable housing.

Another aspect of community-building and ongoing support provided by Madre Tierra is the intentional process of forming connections and networks for survivors. Survivors who have previously received services from the organization are provided the opportunity to advise and support other survivors seeking help from the agency. This component of the model addresses the disconnection and isolation that exists among Latinx survivors, particularly immigrant survivors. The organization maintains a WhatsApp group chat where 51 survivors share information and resources around housing and other needs. Survivors also rely on the network for communal support around practical needs such as moving and painting their homes. These networks have been particularly beneficial for survivors experiencing increased vulnerability such as immigrant survivors who have prior negative experiences interacting with systems or are afraid of deportation and feel safer interacting with and receiving support from other survivors outside of traditional systems/structures. This model represents a philosophical shift in service provision away from the paternalistic process of providing restrictive emergency or temporary support to survivors towards a collaborative, familial approach.

Another aspect of community-building and ongoing support implemented in this setting is related to material needs. Survivors who have received services from Madre Tierra practice an informal economy structure of community collective savings. Survivors in the community network voluntarily participate in an effort where they pool funds together to support members of the group who are most in need. Every month, the group collectively decides who receives the money and these funds have been used to support survivors who have pressing needs such as paying for a security deposit, rent, or utilities. This approach to resource sharing allows survivors to safely access monetary resources. By relying on the community's collective process of fundraising, survivors can choose to not engage with traditional banking systems and government systems.

Another organization that applies a community-building and ongoing support model is **A Miracle 4 Sure**. The organization applies a strengths-based approach to service provision that focuses on identifying existing community resources to meet the immediate and long-term housing needs of survivors and identifying opportunities to provide culturally sensitive and meaningful support to survivors even when traditional services are not available. This approach to service provision centers on relationship building and ongoing support. For example, advocates offer to accompany survivors to a counseling session or the welfare office instead of just providing transportation. Advocates also stay connected with survivors and conduct regular welfare checks to ensure that survivors have the resources needed to rebuild their lives. Advocates also work closely with survivors to identify interpersonal resources and connections that they can rely upon. This includes identifying friends or family members that can also provide support to survivors while advocates continue working to address the survivor's needs. In instances where the survivors' needs are beyond the scope of services provided, advocates work closely with survivors to ensure they can access alternative resources within the community.

### **CULTURALLY RESPONSIVE AND HOLISTIC ON-SITE SERVICE PROVISION MODEL**

Another community-oriented approach identified in this needs assessment is the holistic service provision model implemented by **Ain Dah Yung**. The agency provides a complete suite of culturally responsive on-site services. Specifically, this community-based agency provides an emergency shelter, transitional housing program, and a 42-unit permanent supportive housing project for Indigenous Youth. In addition to providing housing services, the agency implements a comprehensive service model by providing voluntary on-site services to increase self-sufficiency, wellness and address the basic and safety needs of survivors. These services include mental health support (individual counseling, family therapy, and support groups), a food pantry, and a clothing closet. The agency also has transition coaches on-staff who provide housing case management support to residents to assist them in gaining/maintaining permanent supportive housing. Transition coaches work directly with residents to provide support on navigating eviction notices, annual recertifications, income verifications, and all other housing-related paperwork. The agency also utilizes a community-oriented approach toward housing service provision. Specifically, Ain Dah Yung separates the operations and management of their permanent supportive housing property from the agency's social services. This means that agency staff is not directly involved in the management of the property. This approach allows survivors to freely access the agency's services without the fear of losing their housing if they disclose challenges/difficulties (such as substance misuse) that may negatively impact their housing eligibility. This approach

also allows transition coaches to build trusting relationships while providing housing case management support to survivors.

## **CULTURALLY RESPONSIVE COORDINATED ENTRY PROCESSES**

As a culturally specific social service agency, Ain Dah Yung worked with Tribal lawyers to create a sub-targeting policy passed through the Ramsey County Continuum of Care (CoC) that would make the coordinated entry process more culturally responsive to Native survivors. The targeting policy recognizes the impact of historic and recurring disparities that have created disproportionate housing outcomes for communities of color. With this policy, agencies/programs – such as culturally responsive programs – can seek approval to provide specialized supportive services to persons from the targeted cultural sub-populations. When agencies/programs that have been approved by the governing board to provide specialized supportive services to target subpopulations notify the priority list of an opening, the priority list manager will identify the top household on the priority list that also matches the agency's/program's approved targeted population and eligibility for placement. If the priority list does not have any household that matches the agency's/program's targeting criteria, the agency/program will follow specific procedures outlined in the policy to identify a household that meets Coordinated Entry (CE) eligibility and targeting criteria. As a culturally specific agency, this policy allows Ain Dah Yung to prioritize providing supportive services to Native survivors from the CoC priority list.

## **LEVERAGING DIVERSE FUNDING SOURCES TO CREATE SUBSIDIZED AFFORDABLE HOUSING UNITS**

Another innovative housing solution implemented by Ain Dah Yung involves leveraging private funding sources that are less restricted than government funding. The agency collaborated with Tribal leadership to privately sponsor subsidized housing units for survivors. These private units are operated outside the coordinated entry system and made available to survivors who have critical needs and experience greater barriers to accessing housing. Leveraging privately sponsored funding to create housing units allows the agency to address the needs of survivors more flexibly without the restrictions of government-sponsored housing.

## **STRATEGIC ADVOCACY EFFORTS**

Findings from this needs assessment also revealed strategic organizing and advocacy efforts undertaken by advocates and DV agencies to address the housing needs of survivors. These efforts include 1) direct advocacy and engagement with local housing authorities to raise awareness about the housing needs of DV survivors, 2)



organizing to secure land and build new housing developments for survivors, and 3) direct advocacy with legislators to raise awareness about the relative success of ongoing community-based interventions/initiatives to address survivors' needs and advocate for additional support to scale up successful interventions.

## **INVESTING IN HOMELESSNESS PREVENTION**

Another important aspect of ensuring survivors have access to safe, stable, and affordable housing is investing in preventive services designed to help people stabilize their lives, achieve self-sufficiency, and remain in their homes. To this end, advocates that were engaged in the listening session reported that their agencies include a focus on community-based violence prevention and street outreach activities in their work. This involves providing and/or connecting survivors to mainstream services including medical care, mental health counseling, substance abuse treatment services, assistance with post-secondary education, job training, and employment counseling.

# EMERGING HOUSING INTERVENTIONS

Findings from this needs assessment also revealed emerging initiatives that community-based organizations are interested in exploring to address the housing needs of survivors. These include housing cooperatives, a community fair housing promotion model, and savings assistance programs.

## **HOUSING COOPERATIVES**

Housing cooperatives are an emerging approach to addressing the housing needs of survivors. Housing cooperatives are independent organizations not owned by the government. Members are not renters, instead, they own their homes together. Housing cooperatives vary and may include single-family homes, townhouses, high-rise apartment buildings, mobile home parks, etc. Housing cooperatives are person-centered and focused on community building by valuing independence, democracy, equality, and community. Housing cooperatives offer an alternative way to live and unique social benefits including elimination of outside landlords, shared maintenance responsibilities, community control, community involvement, and security. Cooperatives also offer economic advantages including affordability, tax deductions, and limited liability. Given the increasing interest of survivors in homeownership, Madre Tierra is currently participating in a 3-month course to learn how to develop and manage a housing cooperative as a potential solution to addressing the housing needs of survivors.

## **COMMUNITY FAIR HOUSING PROMOTERS**

Another emerging approach to addressing the housing needs of survivors focuses on adapting the health promotion framework to create a community fair housing promotion model. The health promotion model involves training health promoters (promotores de salud) to develop and implement social outreach and community organization strategies. The exact responsibilities of health promoters vary but primarily include training new hires, providing accurate health information to the public, giving community presentations on health topics, and connecting community members with service providers. Madre Tierra is currently working to adapt the health promoters' model by co-creating a fair housing promotion curriculum with survivors that will include information on community-based housing resources, trauma-informed and survivor-centered housing-related resources. Advocates will use the curriculum to train survivors as housing promoters who will be responsible for conducting community outreach, providing housing-related information and resources to survivors and their families, and connecting survivors with community-based resources to meet their multiple needs.

## **SAVINGS ASSISTANCE PROGRAMS**

There are ongoing strategic efforts to provide support for homeownership to low-income families. An example of this effort is the Greater Erie Community Action Committee (GECAC) Money Works for You Savings Account program. Low-income individuals and families can save money through a 1:1 matched savings program such that participants maintain savings account through a bank that waives account fees for program participants. GECAC then matches the amount of money saved by participants and participants apply the savings towards meeting short and long-term goals (e.g., purchasing a home). Another example is the Family Self-Sufficiency Program provided by the Dauphin County Housing Authority. Through this program, participants in the Section 8/Housing Choice Voucher Program can receive support to be financially independent. Specifically, when participants secure income from employment, the program opens an escrow account on their behalf. The housing authority deposits funds in the savings account to match the amount paid by the participant for rent. Participants can use escrow funds to cover the costs of purchasing a home. Housing assistance programs and DV agencies can adapt this model to provide financial support to survivors to purchase a home or meet other housing-related needs. A Miracle 4Sure is currently working to identify potential opportunities to collaborate with existing savings programs to advocate for the prioritization of the housing needs of survivors.

# RECOMMENDATIONS

Findings from this needs assessment have useful implications for policymakers, funders, DV service providers, and advocates. It is important to note that securing safe, stable, and accessible permanent housing for survivors and their families cannot be accomplished without a collective effort to prioritize survivors' needs across policies and programs.

## FOR POLICYMAKERS AND FUNDERS

### **Increase funding for longer-term and permanent housing options for survivors.**

- Leverage existing federal and state funding sources to support equitable access to permanent housing units for survivors. Doing so provides opportunities to retool existing sources for maximum and best use such as increasing the availability and development of affordable-accessible housing, access to federal housing assistance, integrating affordable housing units with market-rate housing, and financially investing in community-driven housing solutions and homelessness prevention efforts.
- Increase federal legislative efforts to address housing discrimination against domestic violence survivors and other housing barriers in all types of housing (federally funded public housing, subsidized housing, and private housing). This should include eliminating barriers to accessing housing resources for formerly incarcerated survivors and survivors with diverse family structures.
- Increase investments in prevention efforts to reduce the incidence of homelessness among survivors and their families.
- Assess and improve coordination between federal departments and state administrators. Ensuring a more coordinated, timely, and concerted effort of providing federal guidance to state administrators on how funds can be used contributes to avoiding delays in funding disbursements. Additionally, improvements in systems coordination will aid in identifying and developing responsive solutions to unique implementation challenges that may arise.

### **Recognize the need for adequate support and resources to facilitate the implementation of trauma-informed and survivor-centered housing interventions/initiatives by DV agencies.**

- Identify diverse and revolving funding to strengthen sustainable permanent housing solutions. The housing security of survivors and the stability of programs are dependent on flexible and reliable funding sources. By allocating and implementing diverse funding solutions, survivors have access to flexible funding options which are responsive to their needs, provide access to broader permanent housing options, and help DV service providers to better respond to

survivors. For example, policies that support the flexible use of funds for the development of education and training opportunities, access to healthcare, or towards the use of survivors earning thriving wages contribute to their economic outcomes and long-term housing security.

- Increase funding for culturally specific programs that have deep expertise in responding to the needs of marginalized and underserved survivors. Increasing funding opportunities for these community-oriented programs enhance the diversity and innovation of culturally responsive housing services.
- Provide federal and state funding to promote cross-sector collaborative efforts between housing and domestic violence service providers and develop approaches for best practices.
- Allocate additional funding to support budgetary increases in staff time, new hires, and other administrative allowances for DV agencies to implement staff-intensive initiatives.

## **FOR ADVOCATES AND SERVICE PROVIDERS**

While this section includes recommendations for advocates and service providers, it is important to acknowledge that the implementation of these recommendations is dependent on grant-making programs/institutions making significant funding investments into these efforts. Without adequate financial resources, the capacity of advocates and service providers to implement these recommendations is limited.

### **Increase prevention education and awareness-raising activities.**

- Increased awareness among marginalized communities about the nature of homelessness, an individual's right to housing, and how to access support services and resources. Increase protections for survivors from housing discrimination and tenant exploitation.
- More attention and resources should be directed towards increasing public knowledge and federal and local enforcement of survivor housing protections. A compendium of state and local laws that affect domestic violence survivors' housing rights should be drafted and shared with DV advocates as a resource for providing housing advocacy services to survivors. Additionally, communication materials that outline relevant state and local housing protections for survivors should be developed by service agencies and disseminated through strategic prevention programming efforts.

### **Improve coordination and connection across other services.**

- Expand collaborations between housing and domestic violence service providers. As homeless and DV service systems often intersect, service providers across these systems must be knowledgeable about the intersection between DV and

homelessness to better serve survivors. Collaboration among victim service providers and advocates, housing providers, and housing and homelessness advocates is necessary to ensure that survivors' safety and housing needs are met. Specifically, DV regional service coordinators should be hired to strategically enhance collaborations between DV and homeless service providers, improve and expand programming and organizational capacity to meet the needs of survivors served.

- Increase community engagement efforts to build relationships and networks to facilitate housing identification. This can include developing coordinated response networks between advocates and landlords/homeowners who rent out their properties for residential purposes. This would allow advocates to readily access a network of housing options for survivors and get survivors housed promptly.
- Create learning communities and information networks to share information and resources on promising interventions and funding opportunities, particularly for programs serving survivors from marginalized communities.

**Implement promising and innovative interventions that support survivors in securing and sustaining permanent housing.**

- Engage in coordinated advocacy efforts at the city, county, state, and federal levels to increase budget allocations for housing, prioritize the housing needs of survivors, and ensure landlord accountability by enforcing housing codes and responding to code violations. Such funds should go beyond rent relief to include long-term investments in affordable housing.
- Engage in efforts to increase housing inventory and address the housing shortage by raising funds through public and private donors/funding agencies to build housing units or purchase buildings with multiple housing units and rent them to survivors at affordable prices.
- Identify public and private sources to support the provision of more flexible funding and direct cash assistance to survivors.
- Implement low-barrier domestic violence housing first approaches that do not require survivors to satisfy specific requirements before they can be safely housed. Instead, prioritize efforts to secure safe and accessible housing first to create stability and then address other issues that the survivor indicates needing help with such as substance abuse, education, etc.
- Allocate adequate resources to bolster follow-up services. Program staff should regularly engage in outreach to survivors who have received agency services. Ensure that there are advocates assigned to regularly follow up with and provide support to these survivors.
- Provide information, resources, and support for survivors who are interested in homeownership, particularly survivors who are unfamiliar with the housing

systems or unable to independently purchase housing. Efforts to support survivors can include developing informational materials/resources on state homeowners' programs, strategic advocacy to raise awareness about the exploitative practices of housing corporations among homeowners within local communities and encouraging homeowners to sell on the open market, and providing support for survivors to purchase and maintain their own homes.

**Center survivor-centered and trauma-informed approaches in service delivery.**

- Bring the lived experiences of survivors to the front and center, ensure the survivors are engaged at all levels, and services provided are responsive to the unique needs of survivors.
- Provide ongoing training, supervision, and support to increase the capacity of advocates and DV service providers to implement culturally sensitive, survivor-led, and trauma-informed services.
- Regularly assess and evaluate advocacy, service provision, and delivery efforts with an emphasis on racial equity measures.
- Prioritize the provision of low-barrier services to survivors and eliminate strict requirements and restrictions around residential transitional housing, HUD occupancy standards, and permanent supportive housing that penalize survivors.

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