Ending Veteran Homelessness S1EP4: Tiny Shelters and the Low-Barrier Revolution

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[00:00:24] Not offering this very rigid model is allowing the Veterans to say, "This is who I am, and this is what I want. And thank you for coming along with me on this journey."

[00:00:38] **Shawn Liu:** Welcome to Ending Veteran Homelessness, your firsthand look into our nation's efforts to ensure that every Veteran has a safe and stable place to call home. From the Department of Veterans Affairs, Homeless Programs Office, I'm your host, Shawn Liu.

[00:00:51] If you're a Veteran who is Homeless, or are at risk of homelessness, reach out. Call the National Call Center for Homeless Veterans at [00:01:00] 877-424-3838. Trained counselors are standing by to help, 24 hours a day, seven days a week. That number again is 877-424-3838.

[00:01:14] In the homeless services sector, there's a lot of energy these days around tiny homes - dwellings that are generally 400 square feet or less in size. Many homelessness and real estate advocates are championing the development of tiny home communities as a way to address the increasingly dire affordable housing crisis.

[00:01:35] But with any hot topic, there's a lot of debate. And I'm sure we'll fill an entire library with the talking points as to whether or not tiny homes are a sustainable solution. And while we may eventually do an episode about tiny homes on this podcast, this month, we're actually talking about something a little bit different -tiny shelters.

[00:01:55] You see, in the U.S., when we think about Veterans experiencing homelessness, [00:02:00] they largely experience it in two ways: sheltered

homelessness and unsheltered homelessness. Veterans who experience sheltered homelessness often live in places such as emergency shelters, transitional housing programs, or other supportive settings.

[00:02:14] In contrast, Veterans who experience unsheltered homelessness live in places not meant for human habitation such as cars, tents, parks, sidewalks, abandoned buildings, or literally on the street. And it's that second one, unsheltered homelessness, that is a growing concern for our country.

[00:02:32] Now, with that context in mind, I wanna zoom into one community, Los Angeles, California. Back in October of 2021, the VA greater Los Angeles healthcare system began partnering with community organizations to place tiny shelters physically on the property of their West LA Campus. These tiny shelters would serve as emergency shelters - temporary dwellings, where Veterans can stay to get help with clinical care, [00:03:00] food, and other supportive services as they continue on their journey to permanent housing.

[00:03:05] As of the time of this recording, there are about 140 active, tiny shelter units on the West LA Campus. And they always stay full. It's that last bit that I wanna focus on. The shelters pretty much always stay full. Now, the greater Los Angeles VA has traditional emergency shelter and transitional housing beds.

[00:03:25] And a lot of those beds are currently empty. That's a somewhat maddening problem - to have a lot of vacant beds on one side and a lot of unsheltered Veterans on the other side. And yet the tiny shelters almost always stay full.

[00:03:40] What gives? What makes these tiny shelters so appealing to Veterans? Veterans who some would mistakenly call "resistant to services."

[00:03:49] Veterans who some would mistakenly believe, "choose to be homeless." Why do the tiny shelters stay full? That's a really great question. And to help us better understand how the [00:04:00] VA Greater Los Angeles Healthcare System is revolutionizing how we think about the barriers that Veterans face when seeking shelter and getting off the streets, I could think of no one better to talk to than Los Angeles's very own Chanin Santini.

[00:04:13] Ms. Santini is the Care Treatment Rehabilitation Initiative Program Manager and the Site Supervisor within the Community Engagement and Reintegration Service at the VA Greater Los Angeles Healthcare System. For the last 13 years, Ms. Santini has dedicated herself to working with Veterans experiencing homelessness in a variety of programs, including Los Angeles's screening clinic, their Homeless Patient Aligned Care Team, the HUD-VASH program, and with transitional housing.

[00:04:39] Ms. Santini is also one of two VHA appointed LGBTQ Veteran Care Coordinators at Los Angeles, where she helps LGBTQ+ identified Veterans get connected to VHA resources.

[00:04:50] Chanin, welcome to the show.

[00:04:52] Chanin Santini: Thank you for having me. I'm so happy to be here.

[00:04:55] **Shawn Liu:** Yeah, we're really excited to have you on. This is a super fascinating topic. And I wanna just acknowledge [00:05:00] right out of the gate for our listeners.

[00:05:01] Both of us are recovering from COVID right now. I'm actually on the tail end. And Chanin, you just were relatively recently diagnosed. You just got it. So, apologies for any hoarseness our voices. But really, really appreciate you coming on. I think we're doing weird work life balance with working while having COVID.

[00:05:19] But first, before we get started, can you tell us a little bit about yourself? Who are you, how did you get into VA?

[00:05:25] **Chanin Santini:** Sure. So, my name's Chanin Santini. I'm originally from New York. But then I went to grad school in Philadelphia. And when I was looking for an MSW internship, found that one was available at the Philadelphia VA.

[00:05:37] I have a family of military members. So I didn't join the military myself. But I figured, "let me hear, let me see, let me experience what the VA is all about from an internship perspective." And while I was there, I got such rich introduction to this system of VHA. And as an intern, I was overwhelmed. Just the different acronyms [00:06:00] and the different experiences.

[00:06:01] But I was nestled within the addiction recovery unit and an opiate treatment program, which was very rewarding work, doing couples, groups, individual therapy. And when I graduated, the positions that they only had were within homeless programs, in the HUD-VASH program. So I wanted a job and I said, "you know what? This is my way of figuring out if this is what I wanna do -work with the Veterans, work with like my family members."

[00:06:26] And I took it. And I've never looked back. And I've been in homeless programs since 2010 now. That's a long time.

[00:06:34] I saw this position that was posted, that was talking about screening clinic and HPACT. And I said, what is this? This seems great.

[00:06:41] Like a social worker-led medical model. How is this gonna work? And so I took that chance and I've been at GLA now since 2013 and never would look back.

[00:06:50] **Shawn Liu:** Yeah, that's fantastic. So you've done a little bit of everything in your VA career. And I wanna acknowledge, especially for this particular podcast, we really try to [00:07:00] dive into the alphabet soup of all of the different programs. To really help our listeners, Veterans, members of the public understand the different bits.

[00:07:07] So I definitely have a lot of empathy, especially for the younger version of you that went into VA, wide-eyed with the whole sea of programs that were out there. And people, I think both intuitively understand, but also don't realize just how big VA is and how fully encompassing it is with a variety of different programs, all with their own little bit of alphabet soup and acronyms and whatnot.

[00:07:32] These days you are with Care Treatment Rehabilitation Services in Los Angeles. What is it? How did it get started? Why is it important?

[00:07:41] **Chanin Santini:** So I have to take you back about two and a half years when COVID came into our forefront. The CDC put out social distancing and a lot of our transitional housing programs and emergency shelter programs really practiced social distancing. So, their capacity lowered. And some Veterans are put to hotels. But what we noticed was [00:08:00] there were a lot more unhoused Veterans popping up. And we were like, "Where can we place them?" Because of the CARES Act and some other things that were able to happen, the first iteration of CTRS, we were in a parking lot in tents. Which was, very, just, I never heard of this. Like the VA was offering this.

[00:08:17] And then we realized that the, the asphalt was just a little too hot. Then we moved to this grassy area and we put the Veterans on a tent, on a platform, on the grass. It wasn't as hot and was a little bit cooler. Then in October of 2021, we got our first three Pallet shelters through a revocable license and some community partners.

[00:08:39] And now we are at 140 within our program. It came out of a necessity and then we realized we can do so much with this. This is such a groundbreaking, new idea.

[00:08:48] And it's really rewarding work. We're getting Veterans improved healthcare outcomes, mental healthcare outcomes, and pushing them along that housing continuum to end up in permanent housing, if [00:09:00] that's what they want.

[00:09:00] **Shawn Liu:** There's a lot of really great principles underlying everything that you just said. I heard things like harm reduction, this idea that, all things being equal, we would prefer our Veterans to be housed, not unhoused, but if the next best thing outside of literally them being on the street is essentially being within our campus in a relatively safe tent, that's better. And then there's this iterative process of improving things as you go making it better, especially if you're gonna be providing these services on an ongoing basis. And then the other part too, that I heard is a value that I really love is this concept of just compassionate, pragmatism, right? This idea that you're gonna do the best thing that you can for your Veterans right now. During a massive global pandemic.

[00:09:43] You called the CTRS, the actual units, pallet shelters. Could you share a little bit about what those are and how they're configured? Cause these are essentially the units that the Veterans are living in on the Los Angeles campus. So, can you just provide us a little bit of a visual since this is essentially [00:10:00] radio? What are Pallet shelters? How do they look?

[00:10:02] **Chanin Santini:** Sure. We have 135 that are 8'x8' white boxes with four walls, a roof, a door, windows. We have four windows on each side, two on the front and two on the back. We have an air conditioner, heater, we have a little shelving unit so Veterans can store their items. There is a bed that falls down on one of the right sides, or the left hand side. And there's electrical plugs and outlets.

[00:10:26] People ask, "They're tiny homes, right?" And I say, "Well, no. They're not." When you think of a tiny home, Shawn alluded to a larger space, right? A 400 square foot type of tiny space where you have maybe a kitchen, or a shower, running water, a toilet. These are not that.

[00:10:41] These Pallet shelters, the Veterans had saw them. There's another community out here called Hope of the Valley that had these pop up within a couple years. And one of the Veterans had said, "Hey, why don't we do that

here? These tents are really brittle. Break really easily. Doesn't have any air conditioning or electrical to it.[00:11:00] We get some of these?"

[00:11:01] And that's what happened. We listened to the Veterans and said, "Let's see how we can make this happen."

[00:11:05] **Shawn Liu:** This is a really important distinction that you're bringing up. These are not tiny homes, they're shelters. So, while they're climate controlled, while they have electrical outlets, if I heard correctly, they don't have bathroom, they don't have kitchenette. There are still other facilities that Veterans would have to go to that are communal.

[00:11:21] **Chanin Santini:** Yes. And we have those. We have a shower trailer readily available. We just received a laundry facility on site. We have a dining hall where meals are provided three times a day.

[00:11:30] I've seen some of them where I just feel like, "Wow, this is amazing. You've made this even better." They bring in like mini fridges or microwaves and they have their own little space. And then we have five or so that are about 10'x10', which are for couples or partners or someone who wants to maybe live with a significant other or maybe our child. Two beds on either side. So, within that, you get a little bit more space, and you have two beds. They're not essentially together, but they're on either sides of the walls. They still have the windows, air conditioning, and plugs and all [00:12:00] that.

[00:12:00] We are also one of the only housing programs that take couples without children or couples and spouses that whoever they identify as their spouse or whoever they want can go into this program.

[00:12:09] **Shawn Liu:** That's really important, keeping family households intact. With the idea of these are being emergency shelter and not tiny homes, these are not the Veterans' final destination. This is not where they're going to end up. All of the Veterans living in CTRS are still on a housing journey with the goal of ultimately getting some kind of other permanent housing, whether it's a subsidized apartment or reuniting with family or friends. But this is not where they're going to end up. Is that correct?

[00:12:33] **Chanin Santini:** Absolutely. We are just a mechanism to help them figure out what are their options? What do they want? Is it that family reunification? Is it maybe getting your documents and getting a Section 8 voucher? Are you gonna just wait on a referral from SSVF and then find your

own apartment? Are you just saving up enough money to say, "You know what? Maybe California is not for me, but I'll move someplace else."

[00:12:53] We're there, the team and I, to help and facilitate whatever the Veterans wishes are in their permanent housing plan.

[00:12:59] **Shawn Liu:** Talk to me a little [00:13:00] bit about why CTRS is so appealing. One of the things that I understand in Los Angeles, especially with the resources in your community, is that you have Veterans who are still unsheltered, and you have some temporary beds that are essentially still vacant, but CTRS stays as close to full as you can get. What do you think makes CTRS so appealing in contrast to say some of the other traditional, temporary programs that we might offer them?

[00:13:27] **Chanin Santini:** I think because we're still an initiative and we're learning a lot as we're growing, a lot of the Veterans see that and say, "Oh wait, this is a cool program. I could be a part of."

[00:13:35] Right now we don't have a time limit. Some of our transitional housings or maybe emergency shelters have, "Oh, you can only stay here 60 to 90 days or six to nine months, or up to two years." Right now, we don't have a time limit on that because we realize, for some of our Veterans who've been chronically homeless and maybe suffer from some kind of severe mental illness or substance use, that maybe housing hasn't been on their mind at first.

[00:13:56] Maybe it's, "I just wanna survive today." My team and I [00:14:00] really take a focus on that and say, "Okay, we're not gonna force this. You're gonna come out in your own time. Get settled. Let's throw some options at you and let's move forward in what you wanna do." I think, because we offer this low barrier and low demand model, it really helps meet the Veterans where they are.

[00:14:16] The only thing we need for a Veteran to come into our program right now is a negative COVID test. That is it. We don't need paperwork, referral for anything like that. We can just take a Veteran who has a negative COVID test and get them into one of our Pallets.

[00:14:29] There's a real sense of community when we look at CTRS. One thing I love about the Veteran community is that they share resources and it is a good old game of telephone, where they share this information. Veterans hear about this from others and say, "You know what? I wanna come here. I wanna get resources. I wanna get connected to whatever I can."

[00:14:47] We have a lot of great people coming down, whether it be our mental health intensive case management team, our street medicine, nurse practitioners, that are all coming on site providing care to the Veterans. They don't have to leave to go to a traditional [00:15:00] clinic or something like that. When we look at the larger transitional housing program models, not every Veteran's gonna fit into that. Especially the ones who've been chronically homeless. And that's what I think a low demand model really helps.

[00:15:13] We really serve a hard to reach and hard to engage population. Maybe they've fallen out of regular, traditional transitional housing. We are there to say to them, "Okay. It's okay. We'll take you. Let's get a small win for today. Let's go and get that DMV paperwork. Let's apply for that birth certificate." We don't put these expectations, that you need to get this within day two of being here. Because we understand when you're out on the street, you're in survival mode. You don't really know what it's like to live with others. We really want our Veterans to feel comfortable and being able to have their own autonomy of their journey. And I think the Veterans are seeing that.

[00:15:48] **Shawn Liu:** This is a really fascinating bit. This idea of low barrier services. And when I think about low barrier, I think about what you described. A lot of the expectations that we [00:16:00] as service providers often put on our program participants to get access to and participate in our programs, whether it be classes or having to work on specific goals that as you described may not be the ones that, that particular Veteran wants to work on right now.

[00:16:15] And what I heard from you is that there's this idea that when we create services that are responsive to the Veterans - and you described just even the creation of the use of Pallet shelters is in response to feedback that the Veterans told you - that when you really approach case planning and housing planning, being so responsive to what they want, as opposed to what we think that they should need, that Veterans respond well. They actually engage and participate and utilize services more.

[00:16:43] In some ways it feels a little bit counterintuitive that if we lowered the demands and lowered the barriers, that actually increases Veterans' engagement. Am I on the right track here? How else do you think about low barrier models implementing them in the real [00:17:00] world and why it's so important for other service providers to do the same?

[00:17:03] **Chanin Santini:** Especially here in Los Angeles, we have a very large unhoused population and we have these traditional transitional housing

programs that are still sitting empty. And yet CTRS is at full capacity. And every day someone's like, "Oh wait, can I get in today?"

[00:17:17] I think we really have to look at and examine what are we doing well there? And I think a lot of it has to be just giving the Veterans the time and the space, especially the ones who've been out on the street for very long periods of time, that breath and that compassion and empathy to say, "Okay, is today gonna be the day? And if you're ready, I'm ready for you. But if not, I'll come back to you tomorrow."

[00:17:40] We have that flexibility where we can say, this is working here and we are moving people into permanent housing. We are moving people across the continuum into maybe transitional or the domiciliary or other avenues.

[00:17:53] Not offering this very rigid model is allowing the Veterans to say, "This is who I am, and [00:18:00] this is what I want. And thank you for coming along with me on this journey."

[00:18:03] I've done the traditional, clinical treatment programs where I was the liaison. And I was like, wow, we're discharging people because they're using. This is really crappy cause we know they're gonna still use. And so here at CTRS, if we know somebody's using, we'll talk to them, we'll try to see and offer them options. And if they're not ready, we'll offer maybe even harm reduction approaches, offer them that they make sure that they have their Narcan readily available. We're not blind to the fact that we know Veterans are using on site, but we are just trying to make sure that they're gonna be using safely.

[00:18:30] **Shawn Liu:** I imagine that for many listening in whether they're Veterans, community partners, or maybe even VA staff as well, that some of this might be a journey for us to do as well to evolve and to shape how we provide services in a way that's more responsive, more Veteran- centric. Some of the things that you touched on with about dignity and respect and compassion, I think are just such amazing themes.

[00:18:54] Chanin, thinking ahead now, I know that people are probably listening and like, "Okay, well this is fantastic. [00:19:00] What's next? How do we get involved? How do we get plugged in?" Where are we headed with this?

[00:19:04] **Chanin Santini:** What we really need is some more support in getting more staffing. This might be shocking. We've been doing this work with three social workers and two peer supports. That's shocking to me when I look

at the acuity of the Veterans that we're serving. Hoping that we're gonna get more staff on board. Maybe a nurse practitioner. We're gonna get some more Pallets.

[00:19:24] I think as a model for this to move into the national level, if a VA has the space and wants to really engage in this model, this is a really great opportunity to do it. Like every VA, if they have the space to do this, it really provides dignity. It's not a tent. There's something so beautiful about a Veteran being able to close their door and come out when they're ready to talk to you. There's something so beautiful about that. And then them trusting us to get them to where they need to go, whether that be, "Okay. You're gonna put my referral in, right?" Yeah, we gotcha.

[00:19:52] I'm excited and hopeful for the future, because I think with more staffing, we'll be able to even do more.

[00:19:57] **Shawn Liu:** I'm really excited to see where CTRS goes. [00:20:00] I could definitely hear the passion and excitement in your voice to have this, not only continue to blossom and thrive, but also to expand throughout the rest of the country. And my understanding is that VA is actually working on identifying a couple additional pilot sites to essentially expand CTRS.

[00:20:16] So hopefully this time, next year we might see even more.

[00:20:19] Before we let you go, we'd like to close on this show with why. The Veterans who listen in, they want to know, especially for those of us like myself, I'm not a Veteran. You mentioned that you come from a Veteran family, but you're not a Veteran yourself. We can definitely hear the passion and commitment in your voice, but as the last word, can you share a little bit, just putting a bow on it, what is your, why? Why are you so driven to make CTRS happen? To really provide these accessible, responsive, compassionate services to our Veterans? What is your why for this?

[00:20:52] **Chanin Santini:** Oh, this is a good one. Thirteen years ago when I came to VA, I didn't know if I was gonna fit in. I had tattoos and I was a little spunky. Everybody had [00:21:00] always told me like, "Whoa, you've got a lot of fight. I don't know if VA's gonna be a place for you."

[00:21:03] But, when I started getting into homelessness, I realized being unhoused is so multifaceted. You lose your true self. I've been homeless before, and it was hard. I remember having a case manager at this shelter. Mind you, I had an MSW and a job. My house had just burned and I didn't have a place to go. Something that was out of my control. And I had just all this judgment, I had fallen on tough times.

[00:21:25] I wanna be able to help these Veterans move into permanent housing and stay permanently housed because I look at these Veterans sometimes as my grandpa or my dad or my uncle. And I think I would want someone to meet them and greet them with as much respect and dignity and time and just empathy as if they were their own family.

[00:21:46] And I think that is my why. That's what keeps me motivated.

[00:21:49] **Shawn Liu:** Chanin Santini is the CTRS Program Manager and Site Supervisor with the VA Greater Los Angeles Healthcare System. Chanin, thank you so much for the gift of your time.

[00:21:58] **Chanin Santini:** Thank you so much, Shawn, I appreciate [00:22:00] it.

[00:22:00] **Shawn Liu:** If you wanna know more about the services that VA provides to Veterans experiencing homelessness and housing instability, visit us online at www.va.gov/Homeless.

[00:22:10] And if you're a Veteran who is Homeless or at risk of homelessness, reach out. Call the National Call Center for Homeless Veterans at 877-424-3838. Trained counselors are standing by to help 24 hours a day, seven days a week. That number again is 877-424-3838.

[00:22:31] That's all for this month, we've hoped that you found this time to be valuable and that you feel empowered in our collective work to ensure that every Veteran has a safe and stable place to call home.

[00:22:41] Take care.