SOS RICHMOND SAFE ORGANIZED SPACES

Special Newsletter For Local Public Officials

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What Happens Between Contact and Stability?

How creating connection in the in-between improves our communities.

As a local leader, you play an important role in shaping how our community responds to homelessness. We want to share what the people closest to homelessness know about moving individuals from extreme instability toward permanent housing and how the peer-to-peer model facilitates early intervention.

Getting People Closer to Permanent Housing

Permanent supportive housing is one of our most effective tools for ending chronic homelessness because it combines permanent housing with the ongoing support people may need to remain housed. National data show high rates of housing retention among people placed in permanent supportive housing and even among people who have experienced chronic homelessness and significant behavioral health challenges.

But permanent supportive housing can only work for people who are able to reach it.

Getting there requires navigating multiple systems, maintaining contact with providers, completing paperwork and appointments, responding when opportunities arise, and staying engaged through inevitable setbacks. For people living with the daily instability and trauma of homelessness, those steps present significant barriers.

This is where SOS Richmond plays an important role.

SOS Richmond staff members on the job. Photo by Maurice Tierney

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Much of the journey towards measurable progress happens in-between what is recorded in traditional program outcomes. Our qualitative observations reveal another important pattern—one that O'Neill Fernandez, SOS Richmond Director of Wellness & Programs, calls becoming **"program positive."**

Being program positive means continuing to take the next step toward stability and being willing to engage. Those steps can look very different from person to person, and many are difficult to capture through conventional program metrics: trusting someone for the first time, returning to a program after a setback, beginning to ask for help, becoming willing to try another resource, or developing enough stability to begin thinking about what comes next.

For Ebony Blake, progress happened incrementally.

“I got my place now. I got the job. I go to school,” she told us. Her trajectory wasn't linear, though. Ebony left her RV on Rydin Road after the encampment’s closure and moved out of state to housing. She later returned and was welcomed back. SOS Richmond connected her to CORE, which helped her secure housing.

Ebony Blake, SOS Richmond Staff Member

“I got my place now. I got the job. I go to school,” she shared. **Her trajectory wasn't linear, though.** Ebony left her RV on Rydin Road after the encampment’s closure and moved out of state. She later returned and was welcomed back. SOS Richmond connected her to CORE, which helped her secure housing.

“It was one small step and then another,” she explained. “It's been a lot of small steps to this and I’m doing all I can.”

The space for individual progression matters. Employment, housing, and education appear as separate outcomes on a data sheet. **Ebony's experience shows how progress develops holistically over time: one step creates greater stability from which another step becomes possible.** These immeasurable but profound wins are important to acknowledge and celebrate.

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Trust is Often the First Step.

When Angie was living at the Castro encampment, she began showing up to shower. At first, the shower itself was significant. But through those repeated interactions, Angie developed a friendship with an SOS Richmond staff member and began learning about resources she hadn't previously known how to access.

“I was getting so much help that I was never getting before,” Angie remembers. “All this has been out here, and I didn't know it.”

The resources existed. The connection to them did not.

For Angie, that connection began with trust. **She says that because she had already developed a friendship with someone at SOS Richmond, she became more willing to “open up, take that chance, take that risk.”** Soon after connecting with SOS Richmond, she says, she began making progress toward getting off the street.

Today, Angie and Ebony use their own experiences to create those connections for others.

Angie now supports others finding stability in their own lives. Photo by Maurice Tierney

Many of the people who come to SOS Richmond knew Angie and Ebony when they were living outside. They know where they came from, and they can see where they are today. That shared experience allows them to show others that greater stability is possible for them, too.

They also understand that trust cannot be rushed. With someone new, Angie says, you “have to start off really slow.” Introduce yourself. Listen. Ask what they need. Deliver. Show up again.

SOS Richmond staff member Leyla Williams doing street outreach. Photo by Maurice Tierney

A shower can create the first safe interaction. A peer relationship can make someone willing to ask for help. **Trust can lead to engagement with another organization.** One successful experience can make another

possible. And when something doesn't work, a continuing relationship and caring offer can help someone regroup rather than disconnect from the system altogether.

Over time, those incremental changes help people move toward the outcomes our systems are designed to produce and measure: housing, employment, education, health, and greater long-term stability.

SOS Richmond's peer-led model doesn't replace the work of housing providers, workforce agencies, health systems, or other community partners. It helps people reach those resources, remain engaged through setbacks, and continue moving toward permanent housing.

Investing in this connective work helps strengthen the effectiveness of the broader homelessness response system and helps more people reach the permanent housing resources designed to end their homelessness.

For more information, reach out to Daniel Barth at dbarth@sos-richmond.org or reply to this email.

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