



PRESENTATION TO
THE JOINT MEETING OF THE
COMMITTEES OF PUBLIC HEALTH AND URBAN AFFAIRS
SEPTEMBER 12, 2018



HAVEN FOR HOPE

- Comprehensive services on a 22-acre campus: leverages public funding through private partnerships
- An excellent partnership between Haven for Hope and the State's Healthy Community Collaborative (HCC) funding has worked extremely well and changed tens-of-thousands of lives
- Collaborative relationships: 185 nonprofit agency partners - 63 on campus and 77 community referral partners
- Persons enrolled in Permanent Supportive Housing (mental illness, substance use, or co-occurring disorders): Over 90% retained housing for 12 months
- Services address root issues related to homelessness through a transformation process
- Dignity and respect for people receiving campus services
- Recovery: person-centered services focused on individual transformation
- Trauma: services tailored to recognize the debilitating effects of trauma to assist persons experiencing homelessness
- Peer Integration: employ persons with shared similar experiences

HOMELESSNESS, HOUSING, AND MENTAL ILLNESS

- Severe mental illness has been identified as one of the primary causes leading to homelessness.
- In a 2015 survey performed by the U.S. Conference of Mayors, 22 cities were asked for the three largest causes of homelessness in their communities. Mental illness was one of the three largest causes of homelessness for single adults.
- Permanent supportive housing has been shown to lower public costs associated with the use of crisis services such as shelters, hospitals, jails and prisons. (2)
- Compared to the general housed population, people without homes have been and are now more severely impacted by Social Determinants of Health, leading to increased mortality, chronic health conditions, mental illness, substance use, and risky health behaviors. (3)

Sources: (1) National Coalition for the Homeless (2017). Mental illness and homelessness. Retrieved from: <http://nationalhomeless.org/wp-content/uploads/2017/06/Mental-Illness-and-Homelessness.pdf>
(2) National Alliance to End Homelessness (2018). Permanent supportive housing. Retrieved from <https://endhomelessness.org/ending-homelessness/solutions/permanent-supportive-housing/>
(3) Fazel, S., Geddes, J. R., & Kushel, M. (2014). The health of homeless people in high-income countries: descriptive epidemiology, health consequences, and clinical and policy recommendations. Lancet (London, England), 384(9953), 1529–1540. Retrieved from [http://doi.org/10.1016/S0140-6736\(14\)61132-6](http://doi.org/10.1016/S0140-6736(14)61132-6)

COMPONENTS OF SUCCESSFUL SUPPORTIVE HOUSING PROGRAMS

- Housing Units: Leases that are held by the tenants without limits on length of stay
 - Scattered site: strategies such as HUD's Housing First model utilizes individual units across the community, often causing isolation and relapse
 - Site-based: facility designed to deliver supportive services on the property
- Supportive Services: Individually tailored and flexible supportive services that are person-centered, voluntary, can be accessed 24 hours a day/7 days a week, and are not a condition of ongoing tenancy
 - Case Management: provides clinical support to resident at a frequency determined through on-going assessment
 - Peer Support: provides assistance to resident throughout transition from homelessness
- Funding Structure: Integrated resources that support both the housing unit and the supportive services
 - Housing: provided through HCC grant, available vouchers, and client benefits
 - Services: provided through HCC grant and other sources

SUPPORTIVE HOUSING FOR PHYSICAL AND MENTAL HEALTH IS THE BEST MEDICINE

THE PROMISE OF SUPPORTIVE HOUSING FOR GOOD HEALTH



Prevents onset of new illness and injury

Improves access to high-quality, coordinated health/behavioral health care and other critical social services

Promotes lifestyle behaviors that lead to good health

SOCIAL AND ECONOMIC IMPACT OF SUPPORTIVE HOUSING: MASSACHUSETTS' HOME AND HEALTHY FOR GOOD PROGRAM

6 months prior to supportive housing

766 program participants

Services:

- 1,812 emergency department visits
- 3,163 overnight hospital stays
- 847 ambulance rides
- 2,494 detox stays

Cost per person, per year: \$33,190

- Medicaid: \$26,124
- Shelter: \$5,723
- Incarceration: \$1,343

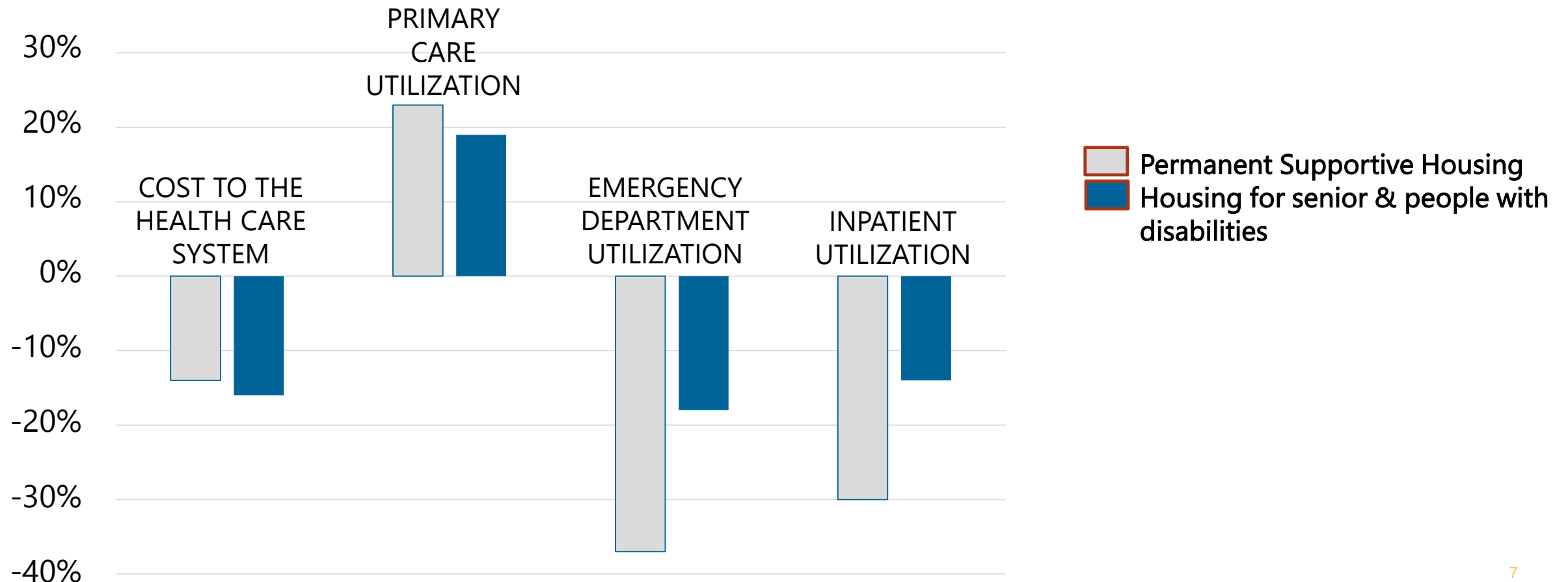
Total annual cost: \$25,423,540

12 months after supportive housing

766 program participants

- Cost per person, per year: \$8,603
- Total annual cost: \$6,589,898
- Annual cost savings: \$18,833,642

THE IMPACT OF SUPPORTIVE HOUSING ON THE HEALTH CARE SYSTEM



CURRENT CHALLENGES

- Housing Capacity
 - Vouchers: limited availability of set-aside allocation from housing authority (In San Antonio, there is a 7-8 year wait list for a voucher.)
 - Site-based PSH: no site-based facilities available in San Antonio
 - Scattered-Site PSH: 1% turnover rate last year in San Antonio
- Service Capacity
 - Resources do not adequately cover expenses for support services
- Sustainability and Efficiency
 - Capital needed for the construction of site-based PSH facilities
 - On-going funding to sustain the service delivery of persons residing in PSH facilities
 - Efficient delivery of services through on-site assistance

RECOMMENDATIONS

1. Continue full funding of the Healthy Community Collaborative program.
2. Establish funding for capital and service delivery to create Permanent Supportive Housing (PSH) site-based units.
3. Seek investment from non-traditional funders (i.e. health plans and hospitals) to invest in PSH.
4. Begin collaborative discussions on how to address the severely mentally ill population who have limited options and would benefit from site-based Permanent Supportive Housing.

INDIVIDUAL IMPACT SUPPORTIVE HOUSING

- Information provided is supported by people that have experienced homelessness and transitioned into supportive housing program. At Haven for Hope, we have approximately 1,700 individuals (including children), many of whom have profound mental health needs.
- There are regularly developing stories of Haven residents who have been helped with Supportive Housing, and, unfortunately there are tragic stories of those whose mental health and ability to live independently have deteriorated that could have been helped with site-based Permanent Supportive Housing.
- The lack of Supportive Housing options slows down the ability of Haven for to enable Transformation and, therefore, a continued flow of helping those who need it most.
- Stories – Jake, Everett, Debbie.