



# Testimony to the House Committees on Public Health and Urban Affairs

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## Joint Interim Charge

- **“Study the overlays among housing instability, homelessness, and mental illness. Review the availability of supportive housing opportunities for individuals with mental illness. Consider options to address housing stability and homelessness among people with mental illness.”**

## Policy asks

- 1. Build upon Healthy Community Collaboratives program**
- 2. Increase Rental and Utility Assistance for Clients at LMHAs**
- 3. Providing funding to Maintain Service Levels for Mental Health Grant Programs (e.g. HB 13 and SB 292)**
- 4. Invest in small group home model for those with high needs**
- 5. build a true continuum of care in and around psychiatric hospitals**
- 6. Special Needs Supportive Housing set-aside: Low Income Housing Tax Credit (LIHTC) program**

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- REGION 1**  
NAMI LUBBOCK  
NAMI TEXAS PANHANDLE
- REGION 2**  
NAMI COLLIN COUNTY  
NAMI DALLAS  
NAMI DENTON COUNTY  
NAMI GRAYSON, FANNIN & COOKE  
NAMI KAUFMAN COUNTY  
NAMI SOUTHERN SECTOR DALLAS  
NAMI TARRANT COUNTY  
NAMI WICHITA FALLS
- REGION 3**  
NAMI EL PASO
- REGION 4**  
NAMI ABILENE  
NAMI MIDLAND
- REGION 5**  
NAMI AUSTIN  
NAMI BRAZOS VALLEY  
NAMI TEMPLE AREA  
NAMI WACO
- REGION 6**  
NAMI GREATER LONGVIEW  
NAMI TYLER
- REGION 7**  
NAMI KERRVILLE  
NAMI SAN ANTONIO  
NAMI VICTORIA
- REGION 8**  
NAMI FORT BEND  
NAMI GOLDEN TRIANGLE  
NAMI GREATER HOUSTON  
NAMI GULF COAST
- REGION 9**  
NAMI GREATER CORPUS CHRISTI  
NAMI LAREDO  
NAMI RIO GRANDE VALLEY
- Revised 4-15-17

# Supportive housing is a policy priority of NAMI Texas

- In Summer 2018, we surveyed our membership for their input on 2019-20 Public Policy Priorities. Hundreds responded, with over 90% indicating that it is either *very important* or *somewhat important* that housing for people with mental illness be one of our priorities.
- NAMI offices around the state receive thousands of calls every year from people seeking resources and information. The two most frequent resources sought are 1.) housing and 2.) help for people with mental illness who have entered the criminal justice system.





# NAMI Public Policy Principles: Housing

- **Housing is critical to recovery and should be immediately available to sustain treatment, resiliency, recovery and community for people with mental illnesses. People with serious mental illnesses especially need a wide array of options for decent, affordable, supportive housing based on individual needs and choices.**
- **Based on individual needs and choices, living independently in the community should be given priority. Supportive housing is essential for community integration (for which there is a legal requirement) and necessary to avoid institutional settings (\$).**
- **Funding, services and support should follow the person with respect to all housing choices, including housing provided by care-givers. Available, affordable housing choices should also facilitate access to education, employment, transportation and other needs of daily living.**

# Housing As A Social Determinant of Health

- Access to safe, quality, affordable housing - and the supports necessary to maintain that housing - constitute **one of the most basic and powerful social determinants of health.**
- Supportive housing provides 1.) physical safety, protection, and access to basic needs, and 2.) access to quality health care through a space for delivery and staff linking residents with services.

## Supporting housing outcomes: health status, cost savings, reduction in ER utilization

- Denver study found that 50 percent of supportive housing residents experienced improved health status, 43 percent had better mental health outcomes and 15 percent reduced substance use
- Chicago study found that supportive housing saved Medicaid over \$22,000 per person, per year
- Maine performed a Medicaid cost analysis in rural areas that found almost a 46% reduction in health care costs for those in supportive housing
- Independent evaluation of Housing First program in Fort Worth: participants reduced their number of visits to psychiatric emergency rooms (ER) by 50 percent, medical ER by 55 percent, and urgent care by 64 percent. This produced net expenditure diversion of \$274,179 over six months, with further savings anticipated.



# Housing First evidence

- “Initial research conducted in the United States shows Housing First (HF) to be a promising approach, yielding superior outcomes in helping people to rapidly exit homelessness and establish stable housing. Findings from the AH–CS demonstration project reveal that HF can be successfully adapted to different contexts and for different populations without losing its fidelity. **People receiving HF achieved superior housing outcomes and showed more rapid improvements in community functioning and quality of life than those receiving treatment as usual.**”

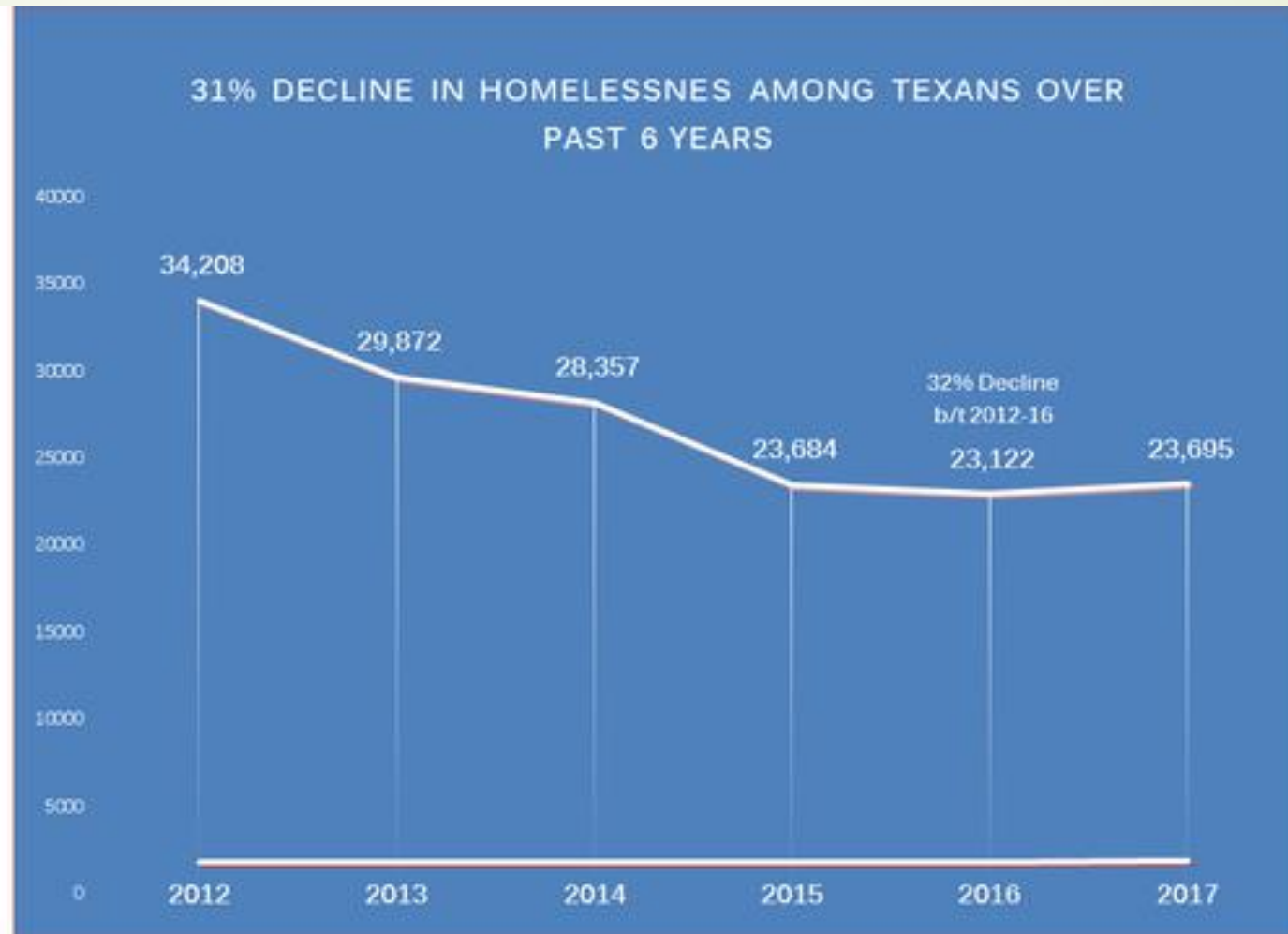
-Source:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4679127/>

# Homelessness in Texas

- Considerable decreases 2012 to 2016, uptick in 2017 and 2018
- January 2017 Point In Time: roughly 23.5 thousand Texans experiencing homelessness
- About 37% of homeless are in families
- 20-30% have a serious mental illness
- 17% are considered chronically homeless (continuously homeless for a year or more, or has had at least four episodes of homelessness in the past three years)
- 13% fleeing domestic violence
- 12% are veterans

# Homelessness in Texas



# Basic Facts: Housing and Mental Illness

- In January 2016, 20% of people experiencing homelessness had a serious mental illness, and a similar percentage had a chronic substance use disorder.
- Approximately 30% of people experiencing chronic homelessness have a serious mental illness, and around two-thirds have a primary substance use disorder or other chronic health condition
- About 15-17% of those who are homeless on any given night experience patterns of chronic homelessness
- 85% of those receiving public sector mental health services are unemployed

# SEVERE COST BURDEN

- Rental housing is increasingly unaffordable, with demand far outstripping supply
- Density is limiting future development in many of our major cities.
- According to the National Low Income Housing Coalition, in 2016, more than 11 million renter households nationwide spent more than 50% of their income for rent.
- The Department of Housing and Urban Development indicates that families paying more than 30 percent of their income on housing are considered “cost burdened, and may have difficulty affording necessities such as food, clothing, transportation, and medical care.”



# ESTIMATING THE NEED FOR AFFORDABLE HOUSING

- In Texas, the population estimate for 2017 is 28,304,596. It is estimated that 15.6% of the population is in poverty. That is 4,415,517 people.
- In Texas, the SSI payment for one person in 2018 is \$750/month or \$9,000 per year.
- It can be argued that people on SSI are on in extreme poverty

Persons in Household	
	100%
1	\$12,140
2	\$16,460
3	\$20,780
4	\$25,100
5	\$29,420
6	\$33,740
7	\$38,060
8	\$42,380

## Not the same: “low income” and “poverty”

- Housing industry definition of “low-income” is not equal to poverty.
- HUD defines “low income” as at or below 80% of area median income – in many communities, these households earn incomes well above the poverty line – and even further above the SSI rate.
- Therefore, when housing is built for “low income” people, the rents are priced at the very top of what these households can pay.

## PEOPLE WITH SERIOUS MENTAL ILLNESS: PRICED OUT!

- In Texas, average one-bedroom rents are 103% of monthly SSI payments!
- People on SSI often cannot come close to affording “low-income” housing.
- It is no surprise that people in extreme poverty and who experience serious mental illness are not successful competitors for the small number of affordable units that are available.

# Patchwork of Federal, State, and Local Housing Programs

- Section 811 Project Rental Assistance Program
  - Housing Choice Voucher Section 8 Program
  - Project Access
  - Community Development Block Grant
  - HOME program
  - USDA
  - Low-Income Housing Tax Credits
  - Veterans Affairs Supportive Housing
  - Shelter Plus Care
  - HUD Consolidated Plan Resources
  - National Housing Trust Fund
  - Healthy Community Collaboratives
  - Rental Assistance for Clients at LMHAs
- Very few targeted specifically those with disabilities. Even fewer for MH disabilities.**  
**-Limited capacity in existing programs**  
**-Group homes are the de facto option.**  
**Most are severely lacking in quality**

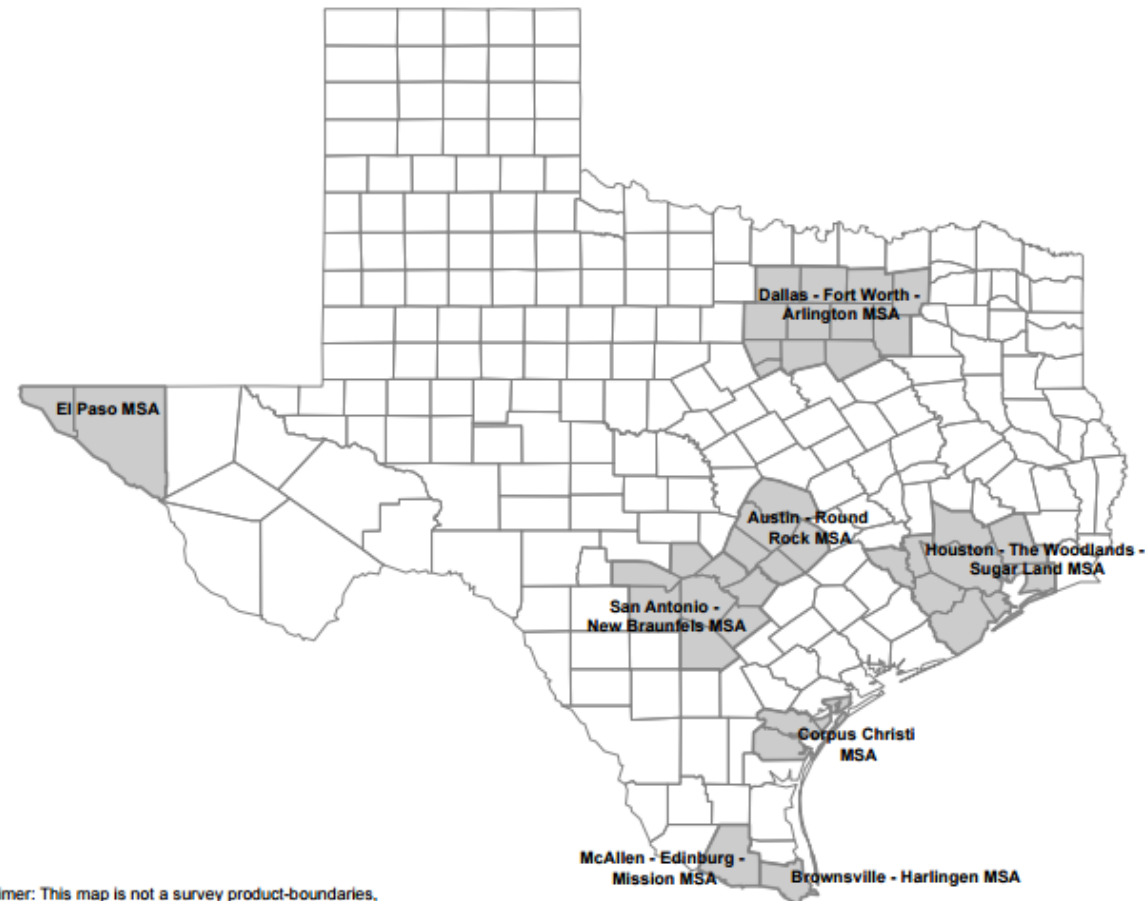
# SNAPSHOT: HUD 811 PROGRAM

- One of the very few programs targeted to persons with disabilities
- Relatively small program compared to the others mentioned
- Important because of its targeting and new rules that result in the creation of highly affordable, integrated housing units
- Encouraging and incentivizing development using multiple sources of capital, such as federal Low Income Housing Tax Credits and HUD HOME funds;
- Allowing the use of Project Based Rental Assistance to help state and local governments work with developers to create integrated supportive housing units in affordable rental housing developments.



# Texas Section 811 Service Areas (2016)

State of Texas Section 811 Service Area: 2016



Disclaimer: This map is not a survey product-boundaries, distances and scale are approximate only.

# Policy ask 1: Build upon Healthy Community Collaboratives program

- Framework: Texas Government Code, Section 539.002
- Grants to establish or expand collaboratives that bridge public and private sectors to provide services for people experiencing homelessness, substance abuse issues, or mental illness
- HHSC Rider 46, not to exceed \$25,000,000: \$10,000,000 may be set aside to fund collaboratives in rural areas
- Assists participants with achieving recovery and re-integration within their communities through the provision of permanent housing
- Connects participants with support services such as mental health treatment, substance use treatment, and employment services
- HOUSING FIRST USING A PUBLIC-PRIVATE PARTNERSHIP MODEL WORKS!

## Policy ask 2: Increase Rental and Utility Assistance for Clients at LMHAs

- National Low-Income Housing Center, May 2016: “The Supportive Housing Rent and Utility Assistance Program provides rental assistance for up to 18 months up to a maximum of \$10,392 per year for participants who are homeless or imminently at risk of homelessness and receiving services at the Local Mental Health Authorities. The program is administered by the Texas Department of State and Health Services, Mental Health and Substance Abuse Division [now under HHSC], and funds rental assistance through 18 Local Mental Health Authorities (LMHAs).
- “Approximately \$10.8 million received in the 83rd Texas Legislative Session” – DSHS
- “In FY 2016, the program received \$5.4 million.” – Hogg
- The program today provides longer-term assistance of up to 18 months and a limit of approximately \$10,300 per recipient, and shorter-term assistance (up to three months) of approximately \$2,600 in assistance for rent and utilities.
- Funding in FY 2018-19?: not immediately clear
- LMHA Directors have expressed that there are not enough of these funds

## **Policy ask 3: Providing funding to Maintain Service Levels for Mental Health Grant Programs (e.g. HB 13 and SB 292)**

- **Mental Health Matching Grant Programs created by HB 13 and SB 292 have flexible enough parameters that housing services for people with mental illness could be funded. (definitely HB 13, possibly SB 292)**
- **Support HHSC Exceptional Item 37 to maintain fiscal year 2019 funding and service levels.**

## Policy ask 4: Invest in small group home model for those with high needs

- ▶ Texas has the ability to further fill the housing and services gap for those with serious mental illness by supporting the establishment and operating costs of small group homes as an alternative to institutional care.
- ▶ The proposed model is similar to that which the IDD population has had for decades – ICFs and small group homes for IDD.
- ▶ A much more robust and service-enriched offering than the average existing group home in Texas.
- ▶ Permanent, supportive, affordable housing with on-site services that can support either diversion from institutional settings – essential for those with high needs.
- ▶ These groups homes may be funded by the state and operated by either for-profit businesses or nonprofit entities; regulated through contract.



## Policy ask 5: build a true continuum of care in and around psychiatric hospitals

- UTHHealth Continuum of Care Campus for Behavioral Health
- Austin State Hospital re-design initiative
- ETC.
- Housing is a key component of continuum of care. Without at least transitional housing, many are discharged to homeless shelters and experience recurrence in hospitalizations. Housing interrupts the cycle.
- Fully fund HHSC Exceptional Item #8: Funding State Hospital Planning and Construction (Comprehensive Plan Phase II)

## Policy ask 6: Special Needs Supportive Housing set-aside: Low Income Housing Tax Credit (LIHTC) program

- The LIHTC program is overseen by Texas Department of Housing and Community Affairs (TDHCA). TDHCA works with developers and stakeholders to create an annual scoring tool that is used for each competition. This is called the Qualified Allocation Plan (QAP). There are some federal regulations that apply to the QAP but largely the criteria is set by the state. In Texas, the governor must approve of the QAP each year. The process for applying for tax credits is costly and highly competitive with only about 50% of projects getting funded each year. Factors that can influence selection of applications include where the proposed property will be located (high opportunity/low poverty area, a community revitalization area, or an urban core within certain mileage from the City Hall); city support; neighborhood support; legislative support.
- **Creating a set-aside for projects that serve "Persons with Special Needs-- Supportive Housing."** Set asides are applied to applications during the selection process. TDHCA has to award a certain percentage to the set-asides before any other tax credits can be awarded. The current set-asides are for rural properties, non-profit developers, and at-risk properties.

# Those Whose Lives Have Been Changed

- *“Having a stable place to live is the most important part of my recovery and stabilizing my mental health. It has allowed me to gain strength and knowledge on my disorder and get it under control knowing that my basic needs were met and stable too. Having housing has allowed me to be a productive volunteer as well as an employee.”*
- *“Our daughter is currently living in Section 8 housing. Without this support, she would not be able to afford an apartment on her own. Living independently has helped immeasurably in her learning to develop the skills and confidence to meet life on her own terms. She has since found a job in which she can support herself, and begun engaging in the local community.”*