Strategies for Ending Chronic Homelessness Experienced by People Living With Mental Illness

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Where do Non-Elderly People With Mental Illness Live?

• Number of people with mental illness experiencing chronic homelessness???
  • 362,163 homeless in HUD most recent “Point in Time” count
  • 85% of the chronic population in many US cities

• In Emergency Shelters: 180,000 adults with disabilities

• HUD “Worst Case” Housing Needs Report: 1.31 million non-elderly adults renters with disabilities with very low incomes in 2011:
  • Paying more than 50% of income for rent and/or
  • Living in seriously substandard housing

• In Institutions: 412,000 adults age 31-64 in nursing homes; 40,000 in state psychiatric hospitals;

• In Adult Care Homes, Large Group Homes, Assisted Living ??
SSI Beneficiaries are Poor

• In 2014:
  • 4.9 million non-elderly persons with disabilities received SSI

• Federal SSI -- $726/month & $8,714/year

• Federal Poverty Level (1 person) -- $931/month & $11,170

• 21 States provided state-funded supplements to SSI for non-elderly people living in the community
  • Supplements ranged from $5(NE) to $362 (AK)
Priced Out in 2014 Study

• The average income of a single individual receiving SSI payments was $8,995 annually or $750 per month
  • National average rent for a modest one-bedroom rental unit was $780
  • equal to 20.1% of the national median income for a one-person household
  • 23% below the 2014 federal poverty level

• In 2014 it was virtually impossible for a single adult receiving SSI to obtain decent and safe housing in the community without some type of rental assistance
  • On average nationally, a person receiving SSI had to spend:
    • 104% of monthly income to rent a modest one-bedroom housing unit
    • LOWEST: (TN and OK) = 60%
    • HIGHEST: Honolulu (HI) = 191%

• 90% of monthly SSI to rent a studio unit

• In eight states and DC - the average studio/efficiency rent exceeded 100% of the income of an SSI recipient.
SSI Income

- SSI Benefits 19% of Median Income
- 50% of Median Income
- 30% of Median Income
HUD Rent Subsidy Programs
Addressing the “Affordability Gap”

• Public housing units = 1.1 million units (affect of “elderly only” housing policies)
  • Only 16% assist people with disabilities

• HUD “Assisted Housing” = 1.2 million units (affect of “elderly only” housing policies)
  • Only 17% assist people with disabilities

• Other programs = 443,000 units

• Section 811 = 30,000 units

• Homeless programs = 50,000
What is the Solution? Permanent Supportive Housing

• 3 Legs of the PSH Stool
  • Capital (LIHTC)
  • Operating Subsidy (Section 8 project-based, 811 PRA)
  • Supportive Services (Medicaid)

• PSH improves housing stability, employment, mental and physical health, and school attendance; and reduces active substance use. People in supportive housing live more stable and productive lives.

• Cost-Effective: PSH costs essentially the same amount as keeping people homeless and stuck in the revolving door of high-cost crisis care and emergency housing.

• Beneficial: PSH helps build strong, healthy communities by improving the safety of neighborhoods, beautifying city blocks with new or rehabilitated properties, and increasing or stabilizing property values over time.

• See more at www.csh.org
What is PSH?

• It is Permanent
• Residents . . .
  • are tenants;
  • have leases with full rights of tenancy;
  • pay rent; and
  • can keep their apartments as long as they pay their rent and abide by the terms of their leases.
• It is supportive:
• Supportive services, including
  • Case management
  • Clinical social work
  • Other medical services
  • Supportive employment
  • are provided on-site and/or arranged by the service provider.
• Rent is subsidized by the local housing agency
• Engaging in services is not a condition of tenancy
What PSH is Not

• It is not
  • A group home: In group homes residents share facilities, including bedrooms and baths. Meals are prepared by staff. Residence is at the will of the service provider. Adherence to treatment is a condition of residence.

• A nursing home
  • Nursing homes and group homes lead to dependent living: PSH fosters independent living.

• A shelter bed or transitional housing
What Works? Housing First

• What is “Housing First”?
  • Simple expeditious application process,
  • No requirement for tenant to participate in or complete treatment prior to obtaining structured housing, intensive case management available once housed,
  • Conditions of tenancy do not exceed normal conditions for other leaseholders

• Numerous studies demonstrate cost effectiveness
Funding for the HUD McKinney-Vento Program

- FY 2016
  - $2.25 billion, $115 million above FY 2015
  - $250 million for Emergency Solutions Grant (ESG) program
  - $1.918 billion for local Continuum of Care (CoC) competition

- FY 2017 House T-HUD funding bill (HR 5394) -- $2.487 billion, up $237 million over current level
- FY 2017 Senate T-HUD funding bill (S 2844) -- $2.3 billion
What Can You Do?

• Get involved in your local HUD Continuum of Care

• [https://www.hudexchange.info/grantees/?granteesaction=main.searchresults&programid=3](https://www.hudexchange.info/grantees/?granteesaction=main.searchresults&programid=3)

• Participate in the “ConPlan” planning process for your state and local housing and community development agencies – state HFA, local PHA

• More information at:
  • [www.naeh.org](http://www.naeh.org)
  • [www.tacinc.org](http://www.tacinc.org)
  • [www.csh.org](http://www.csh.org)
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