

#NAMIcon16

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)



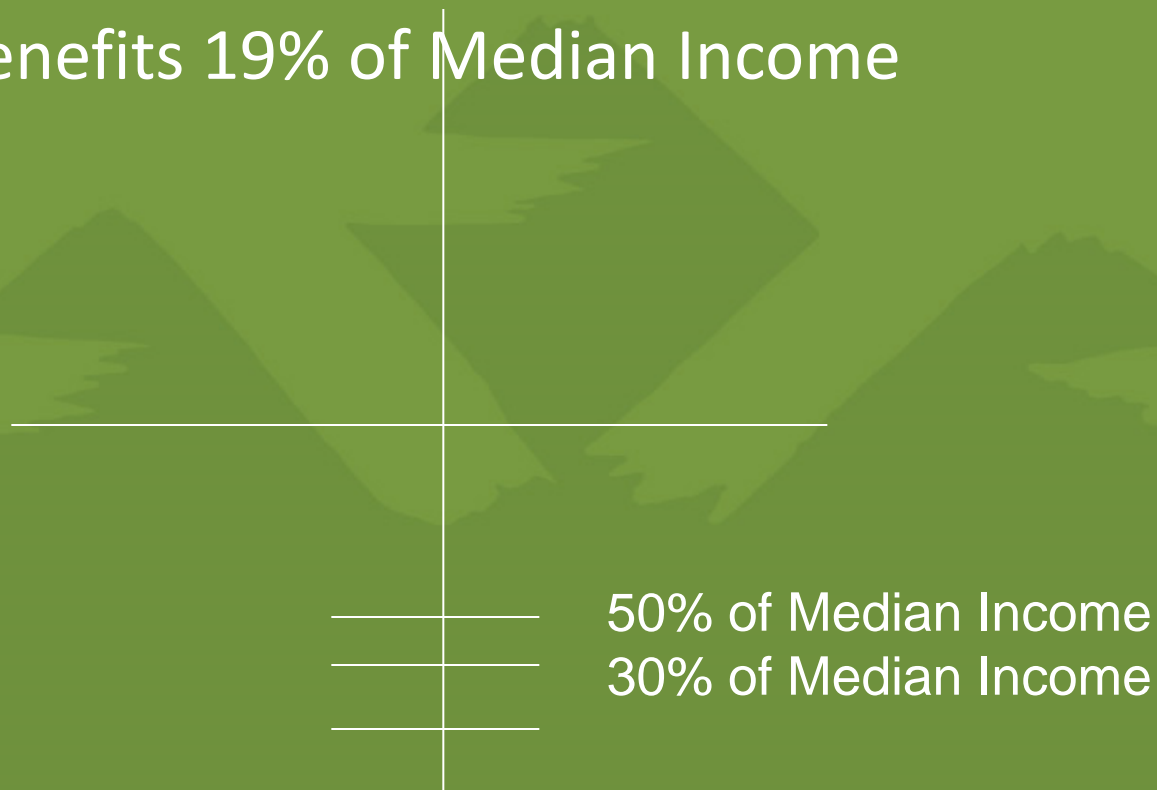
Priced Out in 2014 Study

- <http://www.tacinc.org/knowledge-resources/priced-out-findings/>
- 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



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/?grantees_action=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
 - www.tacinc.org
 - www.csh.org



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