

EVIDENCE THAT SUPPORTIVE HOUSING WORKS

Santa Clara County has one of the largest homeless populations in the nation. Beyond the suffering it inflicts on those living on the streets, homelessness also puts an enormous strain on public resources and emergency services. A comprehensive report found that Santa Clara County spends roughly \$520 million annually providing services for homeless residents. To tackle this issue, the County of Santa Clara in partnership with key public and private stakeholders, launched the Community Plan to End Homelessness in Santa Clara County. One of the primary strategies identified in the plan to end homelessness is building additional permanent supportive housing.

Permanent Supportive Housing is permanent, affordable housing for homeless people, combined with an array of supportive services. The approach is designed for people who haven't been successful in other traditional housing programs, who have been homeless for a long time, and who might have other challenges that make it difficult to maintain housing, such as mental illness, drug use, and trauma. In Permanent Supportive Housing, services are specifically designed to assist homeless persons to maintain housing, and increase their self-sufficiency, health, and well-being. The County has also adopted a Housing First approach to implementing permanent supportive housing. Housing First prioritizes providing homeless persons with safe, stable housing first, and then connecting them with the services that they need once they are housed.

Studies from across the U.S. have shown that Permanent Supportive Housing is an effective tool in ending homelessness and improving people's health. It can also lead people to use fewer emergency services and, thereby, help to reduce public costs. Likewise, the County has embraced the Housing First approach because of its effectiveness in helping homeless persons. This report provides a brief description of this approach, as well as a short summary of its benefits, as supported by research. It shows that we can end homelessness in Santa Clara County if we have the support of the community to invest in what works.

We Have a Homelessness Crisis

On any given night, there are about 7,400 homeless people living in Santa Clara County. Three-quarters of them are living on the streets, unsheltered from the elements. In addition, over 2,000 are considered chronically homeless. That is, they have one or more disabling conditions, and have been living on the streets for a year or more.^[1] Unfortunately, Santa Clara County has the third-highest rate of chronic homelessness in the U.S.^[2]

Santa Clara County is also home to many frequent users of costly public systems. Homeless persons often struggle to access the health care and supportive services that they need. Living on the streets and other challenges like mental illness or substance abuse can make it difficult to keep track of appointments. Homeless persons may not feel comfortable in traditional clinic settings, or may have had negative experiences with health providers in the past. As a result, instead of going to a doctor to receive regular care, they access crisis services from emergency rooms, hospitals, jails, and other County systems that are not designed to meet their needs. Frequent users cycle in and out of costly emergency services, but never get the coordinated care and support that adequately address their physical or mental health issues. This cycle isn't just ineffective, it is expensive. Santa Clara County spends \$520 million per year on services for homeless people, with the top 5% of frequent users accounting for 47% of all public costs. The highest 10% of frequent users use over \$62,000 in services every year per year while homeless.^[3]

To tackle homelessness, the County and its public and private partners developed the Community Plan to End Homelessness In Santa Clara County. At the heart of the Community Plan is Permanent Supportive Housing for homeless residents with the greatest needs, especially those making frequent use of costly public services.

What is Supportive Housing?

Supportive Housing is safe, affordable housing combined with comprehensive supportive services. It helps homeless people to stay housed, get healthy, and build the skills they need to live independently. Supportive housing usually comes with no time limits, so people can receive services and stay housed as long as they need. Each person's rent is based upon their income, so they pay what they can afford. Supportive services are designed to be flexible, voluntary, and based upon each individual's unique needs. Supportive Housing looks just like other types of housing and is designed to blend into the surrounding neighborhood. While other types of housing (such as nursing homes) also combine housing and services, supportive housing is more focused on each person's own choices and level of independence, their connection to the neighborhood, and their particular path to wellness.

What is Housing First?

Housing First is an approach for helping homeless people by prioritizing their immediate housing needs. In other approaches or programs, homeless people may have to achieve certain goals to prove that they are ready for housing. They might have to get clean and sober, find a job, or commit to treatment before they can get housing. However, studies have shown that people are more likely to achieve their goals when they are stably housed. For example, finding and keeping a job is much easier when you have stable housing. Conversely, staying sober or keeping a doctor's appointment is much harder when you are homeless. The Housing First approach does not expect people to be "housing ready." Rather, it acknowledges that stable housing is the foundation for homeless people to achieving independence and well-being.

Maintaining Housing to Maintain Health

Supportive Housing, utilizing the Housing First approach, will employ the support and care services needed to help people remain housed. The following are guidelines to establish greater housing stability and wellbeing for clients:

- Screen people in (instead of out): Homeless people are often turned down for housing because of poor credit ratings, lack of income, criminal history, or prior evictions. Housing First programs acknowledge that many homeless people will likely have similar issues, and do not hold these histories against them. Instead, Housing First programs actively seek out people with the highest needs for assistance, and places them at the top of the priority list for housing.
- **Don't make people jump through hoops for housing:** The Housing First approach provides people housing without preconditions such as promising to stop drinking or attend therapy sessions in exchange for housing. However, people are more likely to succeed and achieve their goals once stable housing is secured.
- Make it quick: Housing First programs strive to eliminate long waiting periods, numerous of interviews, and extensive forms to complete. Ideally, enrollment can happen at a single location, in one sitting, after which people are provided with housing as quickly as possible.
- **Give support when people are ready**: Housing First programs attempt to connect homeless people to support services, but they do not force them to participate. Housing First programs place people into housing as quickly as possible, and then provide services to people as they are ready receive them.

- **Ensure housing rights**: People in Housing First programs are tenants, and are entitled to the same rights, responsibilities, and protections of any other tenant with a lease. This works for landlords and owners, because their units are protected. This also works for tenants by helping them to strengthen their credit ratings and housing history while ensuring that they won't lose their housing for breaking minor program rules.
- **Do "whatever it takes" to keep people in housing**: Housing First programs help formerly homeless people learn to become good neighbors. Additionally, they help the landlord and tenant to avoid potential conflicts and resolve issues that may have been caused by a minor violation of their lease.

Supportive Housing Ends Homelessness for Good

- Studies across the U.S. show that 75-85% of single adults and 80-90% of families stay housed in supportive housing. This includes hard to serve populations with very high needs.^[4]
- In Santa Clara County, there are about 2,800 units of Supportive Housing. Over the last three years, more than 96% of the people in those units were still housed at the end of the year.^[5]

The Housing First Approach Demonstrates Positive Results for People Considered "Hard to Serve"

- In a Housing First program for people with mental illness and heroin addiction, 81% remained stably housed.^[6]
- In a New York study, 86% of the homeless "frequent users" who were placed into Supportive Housing remained housed after 2 years.^[7]
- Formerly homeless people especially people with the highest needs are more likely to stay housed when they are in programs with voluntary services and other client-centered practices.^[8]

Supportive Housing Includes Health Care

• For people with HIV/AIDS, medications provided through health care providers help patients to reduce viral levels in their bodies, leading to stronger immune systems and reducing their risk of death.^[9]

- Research has shown that heroin users with mental illness who were housed were almost twice as likely to get active drug treatment (64.5%) as compared with people who were waiting for housing (33.3%).^[10]
- In one program for severe alcoholics, people placed into housing drank five fewer drinks every day after a year in housing, and went from being drunk 28 days per month to 10 days per month.^[11]

People in Supportive Housing Use Fewer Emergency Services

- After 12 months in Santa Clara County's *Project Welcome Home* program, chronically homeless people went to the emergency room 55% less, sought psychiatric services 68% less, and had 38% fewer visits to other County healthcare services.^[12]
- Frequent users in New York placed in housing used 44% fewer ambulance transports, spent 55% fewer days in mental health hospitals, and reduced residential drug treatment stays from 10 days per person to zero.^[13]
- Homeless people in Chicago went to the hospital 21% less and to the emergency room 31% less after they were housed. In other words, for every 100 homeless people in housing, the city could expect 49 fewer hospitalizations, 270 fewer hospital days, and 116 fewer emergency room visits.^[14]
- A study of chronically ill homeless individuals found that housing led to a 29% decrease in hospitalization, 29% decrease in hospital days, and 24% decrease in emergency room visits.^[15]

Providing Housing Reduces Costs

• In Santa Clara County, placing the highest-need people into Supportive Housing reduces annual per-person service costs by more than \$42,000 (from over \$62,000 to less than \$20,000).^[16]

- In one Chicago study, placing people with chronic medical conditions into supportive housing led to annual cost savings of \$6,300 per person.^[17]
- The cost of services for people housed in a Housing First program declined by 53%, or roughly \$15,000, in their first year after housing.^[18] In other words, every \$10 invested in Housing First programs led to an average savings of \$21.72.^[19]

Evidence Indicates that Supportive Housing Does Not Impact Property Values

- In a large study including 7,500 units of Supportive Housing in New York City, there was no impact on the property values of homes in close proximity to Supportive Housing. This was true for Supportive Housing of all sizes in a wide variety of neighborhoods.^[20]
- In an Ohio study, supportive housing had no impact upon property values or crime rates in the surrounding neighborhoods.^[21]
- In Fort Worth, the property values of homes close to Permanent Supportive Housing increased at a faster rate than other neighborhoods in the city.^[22]

Santa Clara County Can End Homelessness

Santa Clara County can end homelessness by doing what works: increasing the number of affordable housing options and connecting people to the homes and services that they need to remain housed. The County has invested heavily in Permanent Supportive Housing and other housing programs. As a result, 3,000 people have moved from homelessness to housing in just two years. From January, 2016 through January, 2018, 180 new units of permanent supportive housing were built and 655 additional units were in the pipeline.^[23]

The 2016 Measure A Affordable Housing bond of \$950million provides an opportunity for the <u>County of</u> <u>Santa Clara Office of Supportive Housing</u> to partner with cities, residents, and the affordable and supportive housing community to address housing needs of the community's poorest and most vulnerable residents, including veterans, seniors, the disabled, foster youth, victims of abuse, chronically homeless, and individuals suffering from mental health or substance abuse illnesses. The bond proceeds will contribute to the creation and/or preservation of approximately 5,100 affordable housing units. A portion of the bond funds will also be used to provide new opportunities for renters and firsttime homebuyers with moderate incomes.

Sources and More Information

^[1] Applied Survey Research (2017) *Santa Clara County 2017 Homeless Census and Survey: Comprehensive Report.* Retrieved online on 2/16/18:

https://www.sccgov.org/sites/osh/ContinuumofCare/ReportsandPublications/Documents/2017%20Sant a%20Clara%20County%20Homeless%20Census%20and%20Survey%20Report.pdf

^[2] United States Department of Housing and Urban Development. (2016) Annual Homelessness Assessment Report. Retrieved online on 2/16/18:

https://www.hudexchange.info/resources/documents/2016-AHAR-Part-1.pdf

^[3] Fleming, D., et al. (2015) *Home Not Found: The Cost of Homelessness in Silicon Valley*. Economic Roundtable. Retrieved online on 2/14/18: https://destinationhomesv.org/wp-content/uploads/2015/05/er_homenotfound_report_6.pdf.

^[4] United States Interagency Council on Homelessness. (2017) *The Evidence Behind Approaches that Drive an End to Homelessness*. Retrieved online on 2/14/18:

https://www.usich.gov/resources/uploads/asset_library/evidence-behind-approaches-that-endhomelessness.pd; Leff, H., et al. (2009) "Does One Size Fit All? What We Can and Can't Learn From a Meta-Analysis of Housing Models for Persons with Mental Illness." *Psychiatric Services* 60(4) : 473–482; Rog, D., et al. (2014). "Permanent Supportive Housing: Assessing the Evidence." *Psychiatric Services* 65(3): 287-294.

^[5] County of Santa Clara Office of Supportive Housing. (2018) *Supportive Housing System in Santa Clara County: Report to the Housing, Land Use, Environment, and Transportation Committee*. January 5, 2018. Retrieved online on 2/16/18:

https://www.sccgov.org/sites/osh/ContinuumofCare/systemperformance/Documents/2018%20Support ive%20Housing%20Reports/2018-01-05%20Supportive%20Housing%20System%20Report.pdf

^[6] Tsemberis, S.; Joseph, H.; et al. (2012) "Housing First for Severely Mentally III Homeless Methadone Patients." *Journal of Addictive Diseases* (31)3: 270-7.

^[7] Aidala, A.; McAllister, W; Yomogida, M; and Shubert, V. (2013) *Frequent User Service Enhancement 'FUSE' Initiative: New York City FUSE II Evaluation Report*. Columbia University Mailman School of Public Health.

^[8] Davidson, C., et al. (2014) "Association of Housing First Implementation and Key Outcomes Among Homeless Persons With Problematic Substance Use." *Psychiatric Services*. 65(11), 65(11): 1318-24

^[9] Buchanon, D., et al. (2009) "The Health Impact of Supportive Housing for HIV-Positive Homeless Patients: A Randomized Control Trial." *American Journal of Public Health* 99(3): 675-80; Schwartz, S. et al (2009). "Impact of Housing on Survival of People with AIDS." BMC Public Health 9: 220 (Published online).

^[10] Tsemberis, S., et al. (2012) *Full citation above*.

^[11] Larimer, M., et al. (2009) "Health Care and Public Service Use and Costs Before and After Provision of Housing for Chronically Homeless Persons with Severe Alcohol Problems." *Journal of the American Medical Association* 301(13): 1349-57. ^[12] County of Santa Clara Office of Supportive Housing. (2018) *Full citation above*.

^[13] Aidala, A., et al. (2013) *Full citation above*.

^[14] Kidder, D., et al. (2007) "Access to Housing as a Structural Intervention for Homeless and Unstably Housed People Living with HIV: Rationale, Methods, and Implementation of the Housing and Health Study." *AIDS and Behavior 11:* 149-161.

^[15] Sadowski, L., et al. (2009) "<u>Effect of a Housing and Case Management Program on Emergency</u> <u>Department Visits and Hospitalizations Among Chronically Homeless Adults</u>." JAMA 301 (17), 1771-1778.

^[16] Fleming, D. et al. (2015) *Full citation above.*

^[17] Basu A., et al. (2012) "<u>Comparative Cost Analysis of Housing and Case Management Program for</u> <u>Chronically III Homeless Adults Compared to Usual Care</u>." Journal of Health Services Research, pp. 523-543.

^[18] Larimer, M., et al. (2009) *Full citation above*.

^[19] Goering, P., et al. (2014) *National At Home/Chez Soi Final Report*. Calgary, AB: Mental Health Commission of Canada. Retrieved online 2/13/18:

https://www.mentalhealthcommission.ca/sites/default/files/mhcc_at_home_report_national_cross-site_eng_2_0.pdf.

^[20] Furman Center for Real Estate and Urban Policy at New York University (2008) *Impact of Supportive Housing on Surrounding Neighborhoods: New York City Evidence*. Retrieved online 2/20/18: http://furmancenter.org/files/FurmanCenterPolicyBriefonSupportiveHousing_LowRes.pdf

^[21] Urban Decision Group (2013) *Permanent Supportive Housing Impact Analysis: Property Values, Land Use and Crime*. Retrieved online 2/20/18: https://shnny.org/uploads/Columbus-NIMBY-Study-2013.pdf.

^[22] City of Fort Worth Directions Home Initiative (2008) *Our Neighbors, Our Neighborhoods: The Impact of Permanent Supportive Housing on Neighborhoods in Fort Worth, TX*. Retrieved online 2/20/18: https://shnny.org/research/supportive-housing-property-values-in-texas/

^[23] County of Santa Clara Office of Supportive Housing (2018) *Full citation above*.