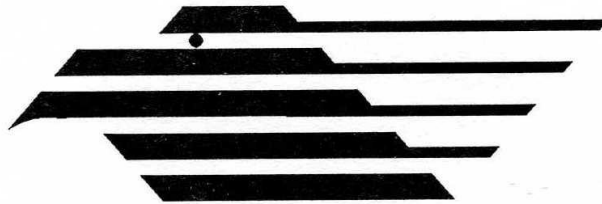




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Interagency Council on the Homeless



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UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

HOUSING WHEN? EVIDENCE BASED PRACTICE FOR SOLVING HOMELESSNESS

Sydney, Australia

April 2, 2009



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

WORLDWIDE CONSPIRACY





What's Working?

- 1. Unprecedented Political Will**
- 2. Unprecedented Strategic Planning**
- 3. Unprecedented Innovative Initiatives**
- 4. Unprecedented Increased Resources**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

THE NATIONAL PARTNERSHIP: INVESTMENT, INNOVATION, AND RESULTS IN ENDING HOMELESSNESS

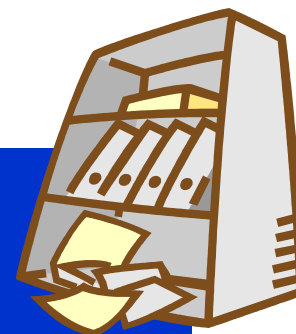


UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

1. UNPRECEDENTED POLITICAL WILL



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS



JURISDICTIONAL CEO'S FATE OF PLAN WITHOUT POLITICAL WILL



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

ECONOMICS OF HOMELESSNESS



POLITICAL WILL AND HOMELESSNESS

Moral reasons to respond to homelessness

Spiritual reasons to respond to homelessness

Humanitarian reasons to respond to homelessness

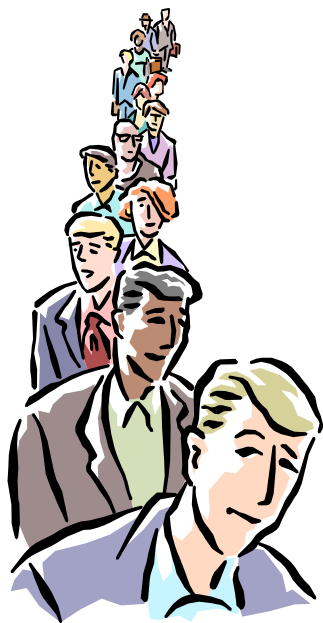
Economic consequences of homelessness



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED RESEARCH/DATA

WHAT ARE THE CHARACTERISTICS OF INDIVIDUALS EXPERIENCING CHRONIC HOMELESSNESS?



- ❖ Unaccompanied individuals
- ❖ Homeless for a year or more or multiple times over a several year period
- ❖ Disabled by addiction, mental illness, chronic physical illness or disability, or developmental disability
- ❖ Frequent histories of hospitalization, unstable employment, and incarceration
- ❖ Average age - early 40s

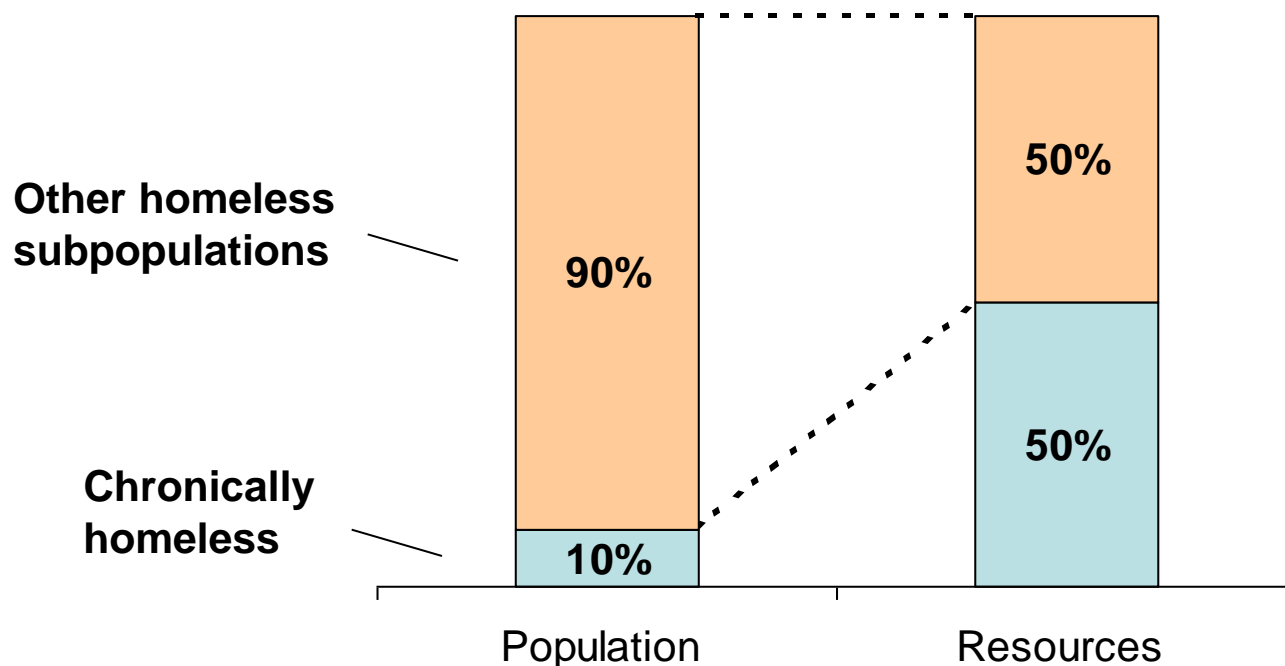


UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED RESEARCH/DATA

INDIVIDUALS EXPERIENCING CHRONIC HOMELESSNESS CONSUME A DISPROPORTIONATE AMOUNT OF HOMELESS RESOURCES

10% of the homeless population consumes over 50% of the resources



Burt, Martha R., Laudan Y. Aron and Edgar Lee. 2001. Helping America's Homeless: Emergency Shelter or Affordable Housing? Washington, DC: Urban Institute Press. Kuhn, R. & Culhane, D.P. (1998). Applying cluster analysis to test of a typology of homelessness: Results from the analysis of administrative data. The American Journal of Community Psychology, 17 (1), 23-43. Community Shelter Board. Rebuilding Lives: A New Strategy to House Homeless Men. Columbus, OH: Emergency Food and Shelter Board.



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED RESEARCH/DATA

INDIVIDUALS EXPERIENCING CHRONIC HOMELESSNESS CONSUME A DISPROPORTIONATE AMOUNT OF MAINSTREAM RESOURCES

Individuals experiencing chronic homelessness are heavy users of costly public resources, including:

- ❖ **Emergency medical services, ambulance, EMT's**
- ❖ **Primary health care, multi-day hospital stays**
- ❖ **Behavioral health care, psychiatric treatment, detox facilities**
- ❖ **Justice system: Police, law enforcement, corrections, courts**



65 COST STUDIES – COUNTERINTUITIVE RESULTS





UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: BIRMINGHAM, ALABAMA

BIRMINGHAM/JEFFERSON COUNTY, ALABAMA:
One Homeless Man Costs \$334,000 in Hospitalizations

One chronically homeless man with heart failure and mental illness experienced **44 preventable medical hospitalizations** in Birmingham from 2001-2005, with **36 additional emergency room visits**, according to research in the city's 10- Year Plan. His inability to pay for and take his required cardiovascular medications caused his heart to deteriorate, leading to most of his hospital admissions.

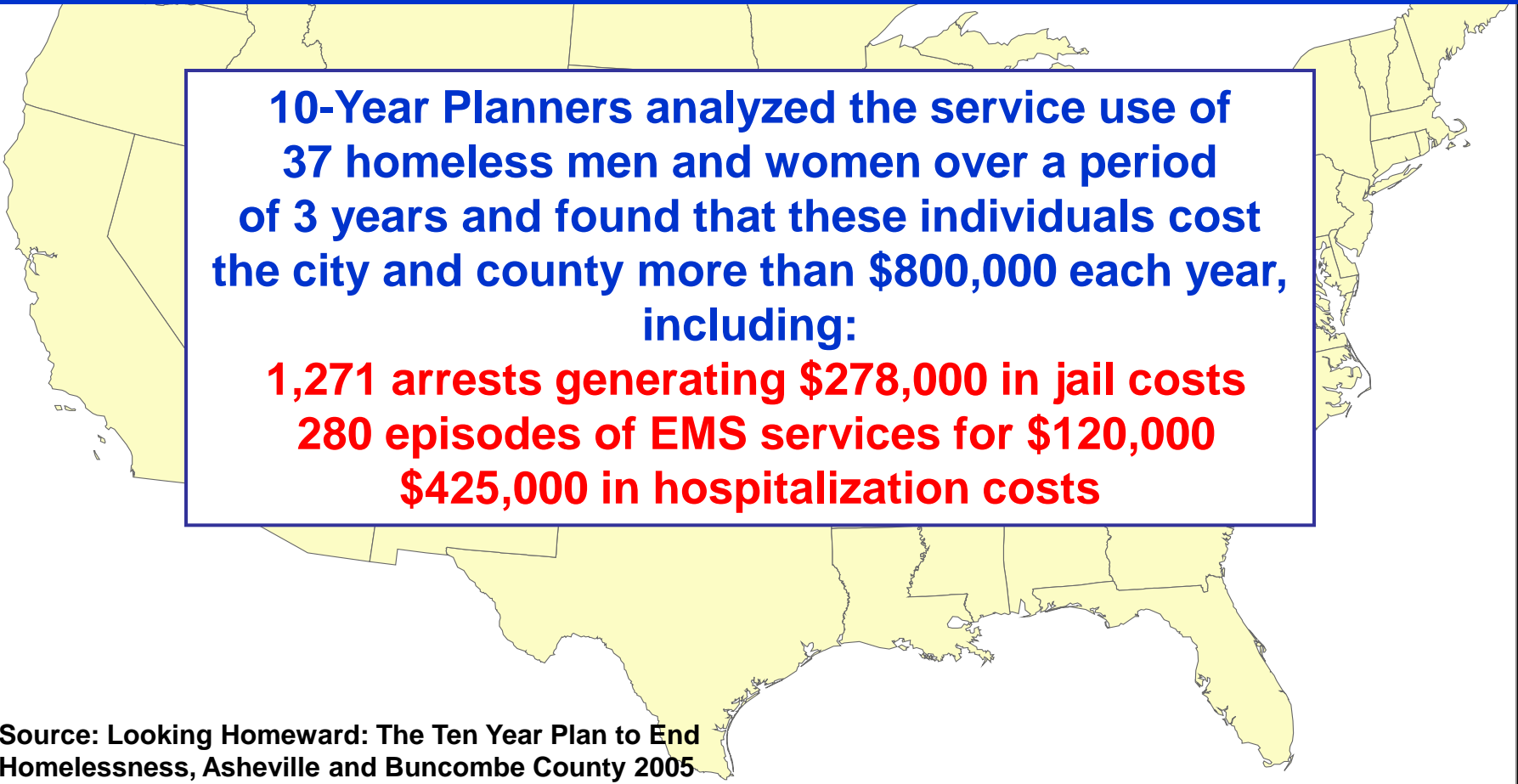
He accrued **\$334,275 in hospital charges**, a cost absorbed entirely by the taxpayers of Jefferson County, Alabama.

Source: Birmingham 10-Year Plan



**UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: ASHEVILLE, NORTH CAROLINA**

**ASHEVILLE/BUNCOMBE COUNTY, NORTH CAROLINA:
In the Shadow of the Smokies, Costs are Brought to Light**

A light yellow map of the United States is in the background. A blue-bordered box is centered over the eastern half of the country, containing text about homelessness costs in Asheville, North Carolina.

**10-Year Planners analyzed the service use of
37 homeless men and women over a period
of 3 years and found that these individuals cost
the city and county more than \$800,000 each year,
including:**

**1,271 arrests generating \$278,000 in jail costs
280 episodes of EMS services for \$120,000
\$425,000 in hospitalization costs**

**Source: Looking Homeward: The Ten Year Plan to End
Homelessness, Asheville and Buncombe County 2005**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: TUCSON, ARIZONA

TUCSON/PIMA COUNTY, ARIZONA:
Police and Fire Personnel Answer the Call – At a Price

New research prepared for the Tucson 10-Year Plan showed:

Downtown Tucson police officers spent about 200 hours in 1,070 encounters with people who are homeless during April, at an estimated cost to the Police Department of \$64,000.

Tucson's Fire Department last year spent an estimated \$2 million answering an estimated 3,000 calls - out of a total 76,000 911 calls - from people who are homeless.

Source: Tucson 10-Year Plan



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: BOSTON

BOSTON, MASSACHUSETTS:

119 Homeless People: 18,000 Hospital Visits

The Boston Health Care for the Homeless Program tracked 119 persons experiencing chronic homelessness for 5 years and discovered that they had more than 18,000 emergency room visits at an average cost of \$1000 per visit.

Source: Boston Health Care for the Homeless Program



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA – INSIGHTS FROM COST STUDIES
RENO, NEVADA

RENO/WASHOE COUNTY, NEVADA:
Million Dollar Murray –
The Most Expensive Man in Nevada

Two frustrated police officers tracked the costs of two chronically homeless individuals, two of whom accounted for **\$100,000 and \$120,000 in hospital expenses in less than a year.**

The officers determined that one individual – **“Million Dollar Murray”** – had cost more than **\$1 million** in hospitalization, incarceration, detox treatments, and ambulance rides.

“We spent \$1 million not to do anything about him.” –
Reno P.D. Officer Patrick O’Bryan

Source: Reno Police Department, Downtown Enforcement Team



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: SAN DIEGO, CALIFORNIA

SAN DIEGO, CALIFORNIA:

Cost Study Reaction:

**“We could have placed them in condos
with ocean views for less.”**

**The University of California at San Diego followed
15 chronically homeless street people for 18 months, tracking
their use of behavioral health acute systems, mental health and
substance abuse services, law enforcement interventions on
the streets, and temporary periods of incarceration.**

TOTAL COST: \$3 MILLION, \$200,000/PER PERSON

Source: UCSD Medical Center, 1998



**UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: SEATTLE/KING COUNTY**

**COST ANALYSIS:
SEATTLE/KING COUNTY**

**\$2.5 million in savings to public systems
through Housing First**

**Seattle's 1811 Eastlake Housing First initiative
for 75 chronic inebriates**

**\$2.5 million in savings achieved 12 months after housing
placements**

**Savings achieved in emergency medical care, jail, sobering center,
and detox**

1811 Eastlake annual operating costs: \$1 million



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: MASSACHUSETTS

MASSACHUSETT HOUSING FIRST INITIATIVE :
67% Decrease in Health Care Costs after Housing

Massachusetts tracked chronically homeless individuals successfully stabilized through the statewide Home and Healthy for Good Housing First initiative and used individual state Medicaid health care payment data to identify:

Annual health care costs per person decreased from an average of \$26,124 before housing placement to \$8,500 after housing placement, a savings of \$17,625 per person and a 67% decrease.

Source: MA State Medicaid Data



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: MASSACHUSETTS

**COST ANALYSIS:
MASSACHUSETTS**

93% drop in hospital days and client expenses

Massachusetts's 15-year Special Initiative to House the Homeless Mentally Ill

Before housing placement:

46,423 hospital days accrued by 146 sample clients in 2 years before housing placement

Yields average of **102 hospital days** per client for all clients

\$420 per day cost for DMH, or

\$19.5 million over two years prior to housing, or

\$9.75 million annually, or

42 percent of the annual appropriation for the program of \$23.1 million

After housing placement: 93 percent drop in average per-client-in- housing hospital days with a similar drop in cost per average client



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: QUINCY, MASSACHUSETTS

**COST ANALYSIS:
QUINCY, MASSACHUSETTS**
Hospital Savings and Stable Lives

**In conjunction with its first shelter closing resulting from
Housing First success under its jurisdictional
10-Year Plan, Quincy researchers found:**

77% decrease in number of inpatient hospitalizations

44% decrease in hospital days

Resulting in \$51,750 in hospital savings

86% reduction in psychiatric hospitalizations

83% decrease in ER use

Source: Quincy Housing First Final Report, September 2007



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: PORTLAND, MAINE

COST ANALYSIS:
PORTLAND/CUMBERLAND COUNTY, MAINE
Post Housing Health Care Savings
in Ambulance, Treatment,
Emergency Room, Jail, and Police Utilization

Researchers tracked 99 chronically homeless individuals who moved to permanent supported housing.

50% reduction in service costs in ambulance and emergency room use, jail nights, and police contacts after housing placement, dropping from an average of over **\$28,000 per person annually to \$14,000**,

Health care costs decreased 59% after housing placement.

Mental health care costs decreased 41%.

Treatment utilization increased by 35%.

\$497,042 = Health care savings

\$128,373 = Emergency room savings (62% decrease)

\$255,421 = Inpatient hospitalization savings (77% decrease)

Source: Cost of Homelessness – Greater Portland, September 2007.



**UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: PORTLAND, OREGON**

**COST ANALYSIS:
PORTLAND/MULTNOMAH COUNTY, OREGON**
**Cost Savings Post Placement -
More than \$16,000 per person per year**

**Central City Concern followed 35 homeless individuals
placed in housing supported by ACT teams.**

**Pre-enrollment health care and incarceration costs
per person = \$42,075**

**Post-enrollment health care and incarceration costs +
supported housing cost per person = \$25,776**

Annual cost savings per person = \$16,299

**Source: Estimated cost savings following enrollment in the
Community Engagement Program, Central City Concern, 2006**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: CHICAGO

**COST ANALYSIS:
CHICAGO/COOK COUNTY**

**Housing First approach saves \$2.2 million
in hospital costs in first year**

Chicago Housing to Health Partnership placed homeless individuals with chronic illnesses directly into housing from hospitals.

- ❖ **72% housing stability rate** versus 15% for control group
- ❖ **\$12,000**: annual costs for housing and case management per person
 - ❖ **2/3 decrease** in nursing home days
 - ❖ **2.5 times** less likely to use an emergency room
- ❖ **1.5 days** of inpatient hospitalization compared to 2.3 days for the "usual care" control group
 - ❖ **\$873,000 less** in medical care costs than control group
- ❖ **\$3.1 million** in hospitalization costs versus \$5.3 million for the control group



**UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: DENVER
COST SAVINGS**

**COST ANALYSIS:
DENVER, COLORADO
Cost Savings to be Reinvested**

- ❖ Housing First study examined emergency room, inpatient medical, psychiatric, outpatient medical, detox services, incarceration, and shelter costs and utilization for 2 years pre- and post housing placement.
- ❖ Average of 8 years of homelessness per person
- ❖ Over 80% housing retention at 6 months
- ❖ 73% reduction in emergency costs or nearly \$600,000 in the 2 years post placement compared to 2 years while homeless.



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS
UNPRECEDENTED RESEARCH/DATA –
INSIGHTS FROM COST STUDIES: DENVER
COST SAVINGS – REINVESTMENT STRATEGY FOR HOUSING

❖ Total emergency costs = \$31,545 per participant, or \$4.7 million total.

❖ Program cost = \$711,700 per person

❖ If cost savings are realized, program cost could be reduced to \$513,000 per person

❖ Total savings = \$200,000 per person

❖ Program would be able to create 200 new units of housing for persons who are chronically homeless.

❖ Only outpatient health costs increased, as participants were directed to more appropriate and cost effective services by the program.

August 2008:

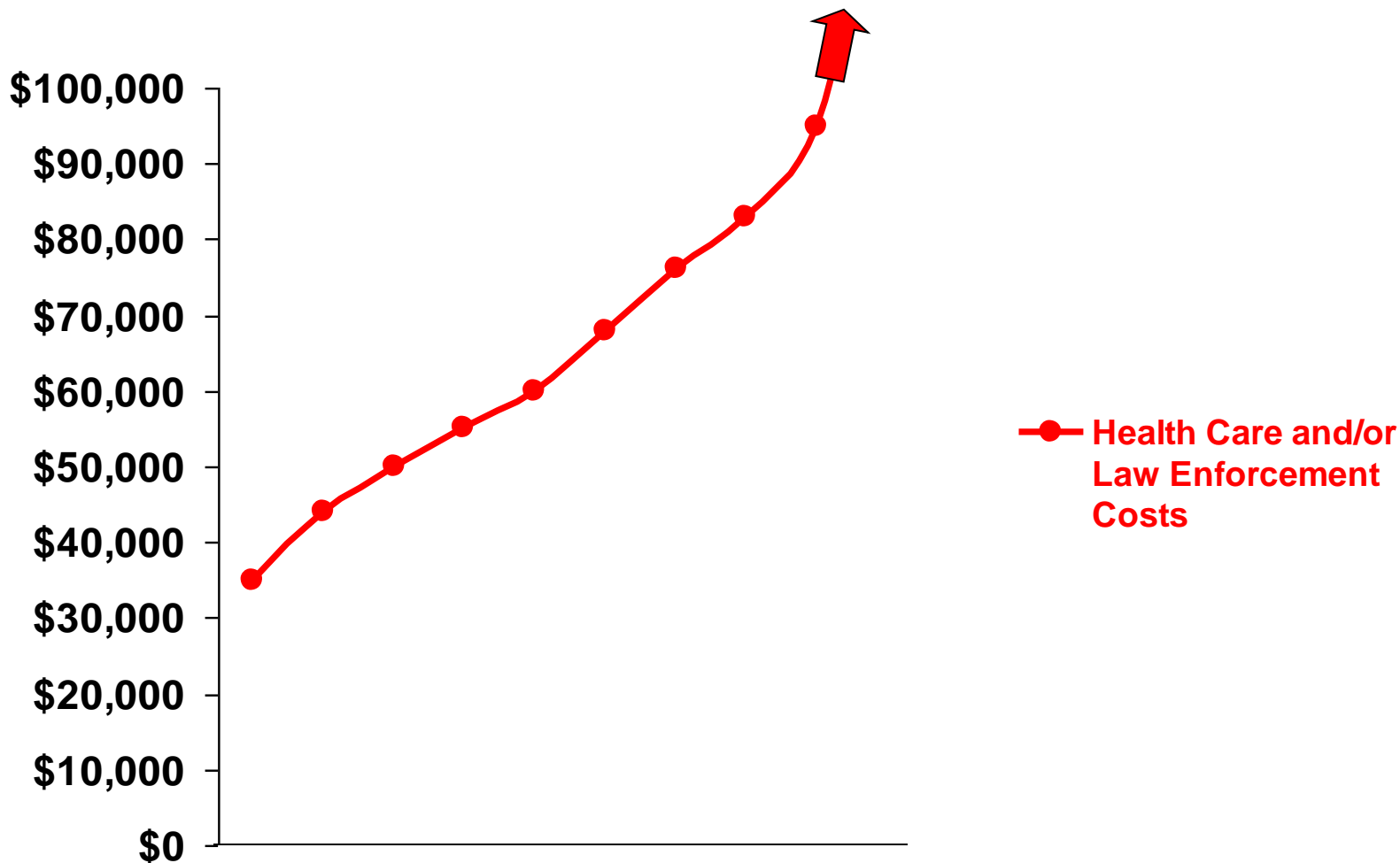
Mayor Hickenlooper announces Denver will re-invest \$20 million in savings in public systems to create 200 new units of housing for persons who are chronically homeless.



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED RESEARCH/DATA

Costs of Permanent Supported Housing vs. Costs of Chronic Homelessness in Health Care and Law Enforcement Systems

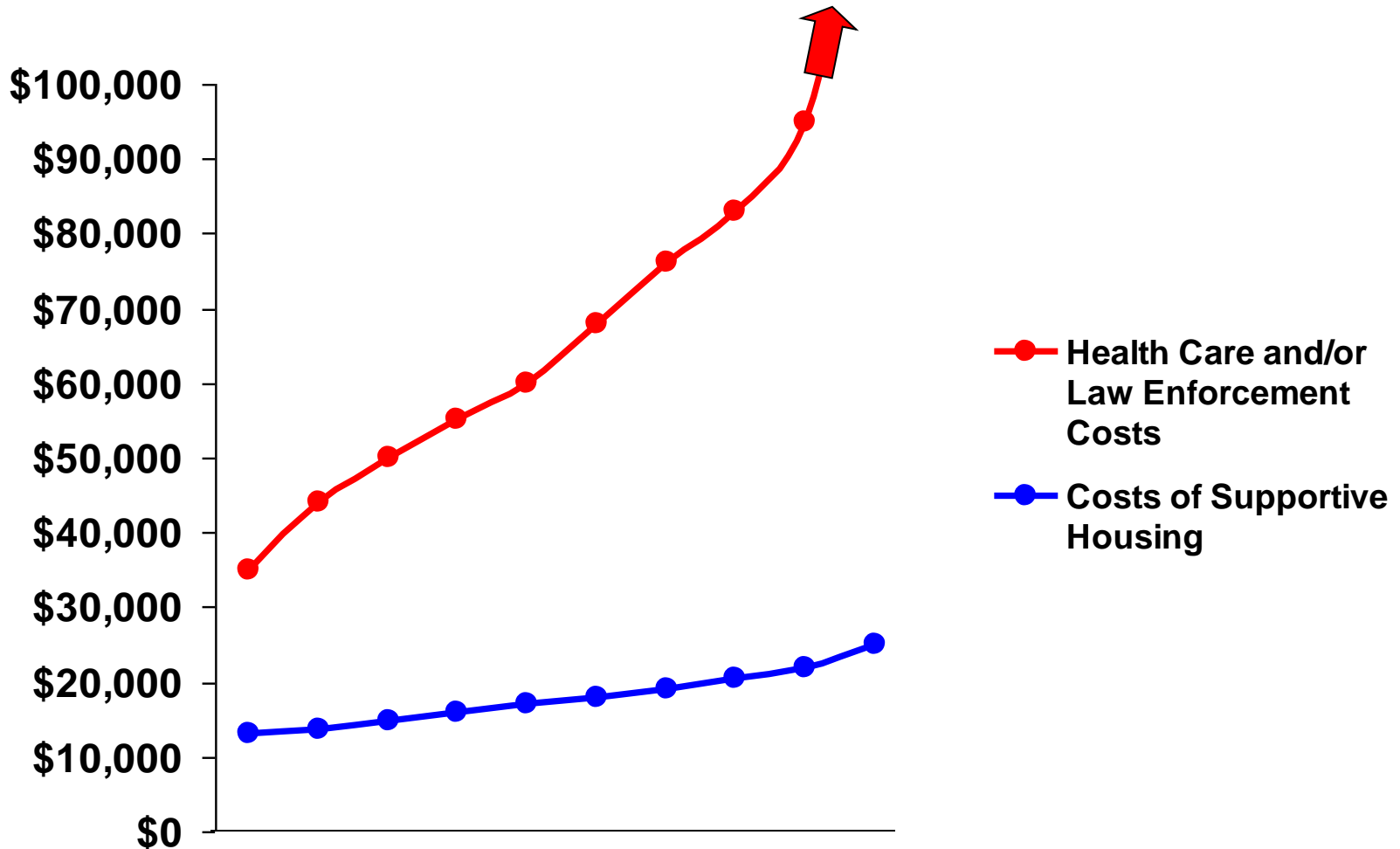




UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED RESEARCH/DATA

Costs of Permanent Supported Housing vs. Costs of Chronic Homelessness in Health Care and Law Enforcement Systems





UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED RESEARCH/DATA

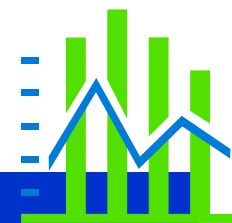


NEW RESEARCH RESULTS ON FAMILY HOMELESSNESS

- Much lower MH/SA rates
- Not different from poor housed families
- Relatively homogeneous

Most needy families get few system resources

Least needy families get most resources



The Average Cost of Long- Term Shelter Stays for Families

❖ City 1	\$27,140
❖ City 2	\$55,200
❖ City 3	\$55,516*
❖ State A	\$65,268
[compared to average 3-bedroom subsidy for 12 months in State A of \$15,468]	

- Includes McKinney-Vento funding and public service contracts; other jurisdictions do not include these revenue sources

SOURCE: Culhane, et al., Patterns and Costs of Family Shelter Utilization: Do Family Characteristics Matter?



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED PARTNERSHIP AND POLITICAL WILL

Constellating the National Partnership



- **Every level of government**
- **Every element of the private sector**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED PARTNERSHIP AND POLITICAL WILL

COUNCIL MEMBERS/FEDERAL PARTNERS

U.S. Department of Veterans Affairs

U.S. Department of Agriculture

U.S. Department of Commerce

U.S. Department of Defense

U.S. Department of Education

U.S. Department of Energy

U.S. Department of Health and Human Services

U.S. Department of Homeland Security

U.S. Department of Housing and Urban Development

U.S. Department of the Interior

U.S. Department of Justice

U.S. Department of Labor

U.S. Department of Transportation

USA Freedom Corps

United States Postal Service

Social Security Administration

General Services Administration

Office of Management and Budget

Corporation for National and Community Service

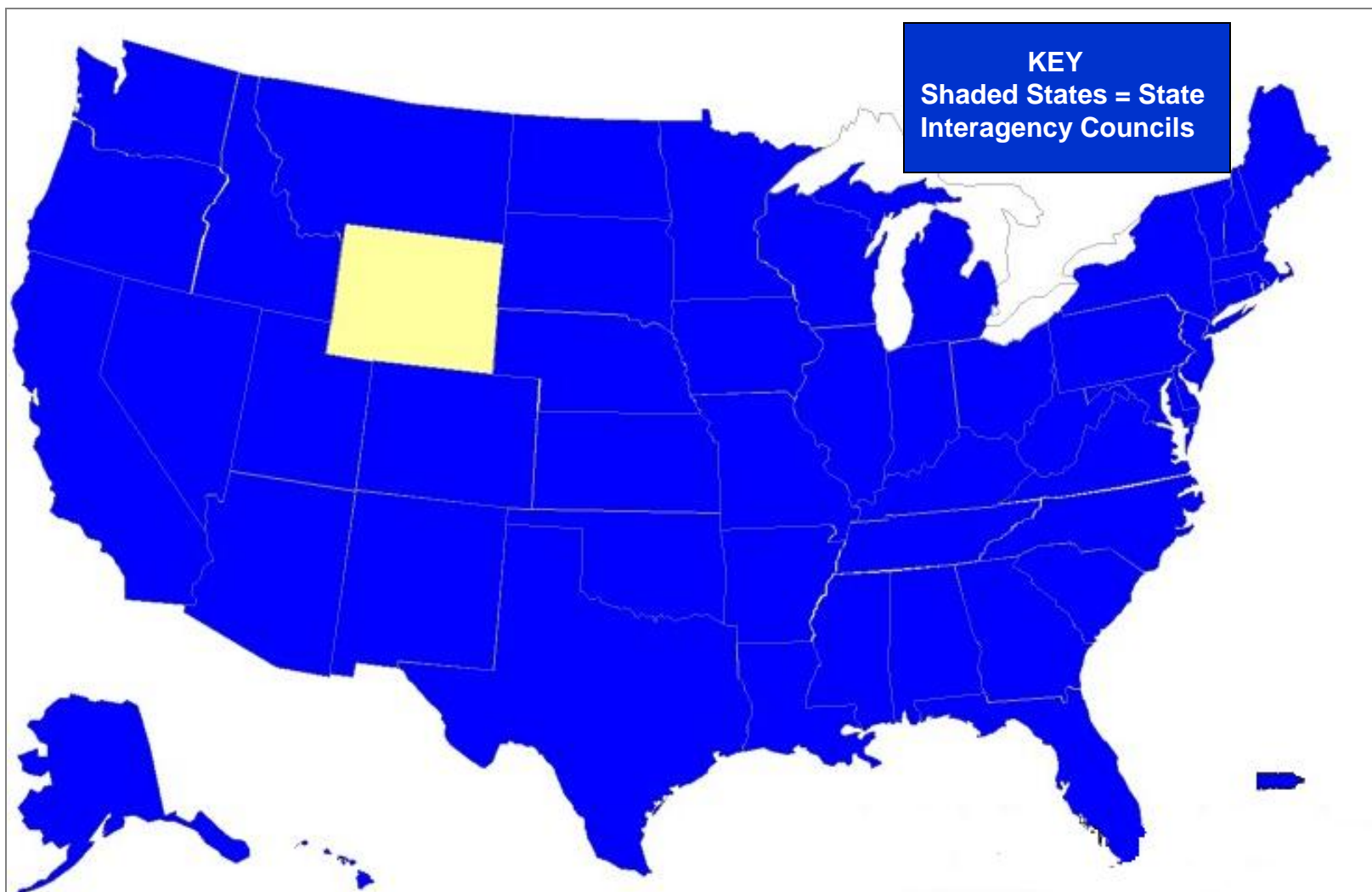
White House Office of Faith Based and Community Initiatives



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED PARTNERSHIP AND POLITICAL WILL

Status of State Interagency Councils on Homelessness (2009)

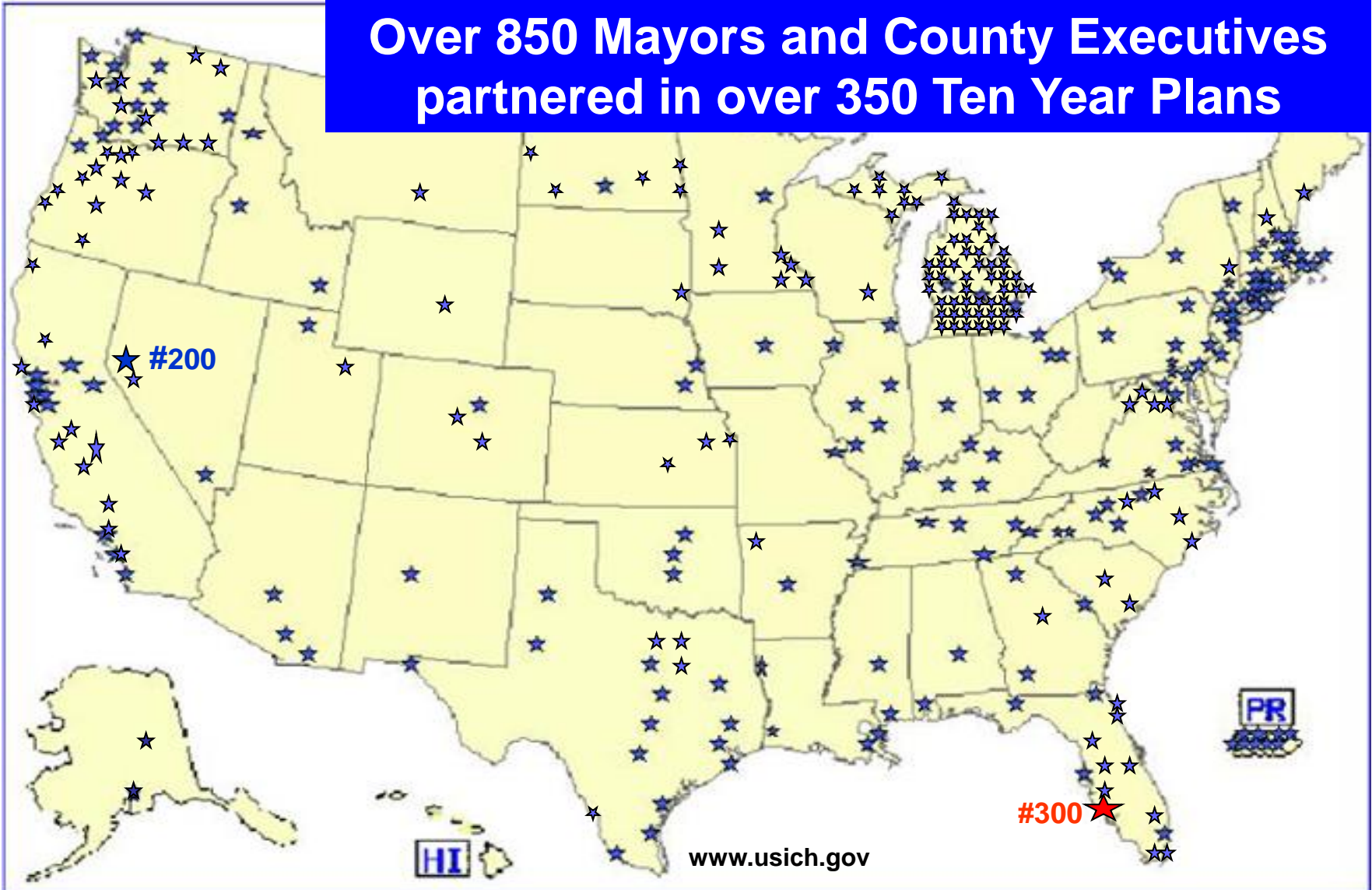




UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED PARTNERSHIP AND POLITICAL WILL City and County 10-Year Plan Update (April 2009)

**Over 850 Mayors and County Executives
partnered in over 350 Ten Year Plans**





UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED PARTNERSHIP AND POLITICAL WILL

KEY PUBLIC AND PRIVATE STAKEHOLDERS: INCLUSIVE PARTNERSHIPS TO DEVELOP AND SUPPORT 10 YEAR PLANS



**Mayor/
County
Executive**



**Agency /
Department
Heads**



**Federal
Agencies**



**State
Government**



**Law
Enforcement
Officials**



Librarians



**Hospital
Administrators**



**Individuals
experiencing
Homelessness**



**Faith-based
Organizations**



**General
Public**



**Non-profits /
foundations**



**Business
& Civic Leaders**



**Housing Developers
& Service Providers**



**United Way/
Chambers
of Commerce**



Jailers



Judges



Academia



**Parks &
Recreation
Departments**

www.usich.gov



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

UNPRECEDENTED PARTNERSHIP AND POLITICAL WILL

PUBLIC AND PRIVATE SECTOR PARTNERS IN ENDING CHRONIC HOMELESSNESS



*National League
of Cities*



**PRESIDENT'S NEW FREEDOM
COMMISSION ON MENTAL HEALTH**

[Mission](#) | [Background](#) | [Commissioners](#) | [President's Remarks](#) | [Contact Us](#) | [Home](#)



National Alliance to End Homelessness



Corporation for Supportive Housing

www.usich.gov



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

2. UNPRECEDENTED STRATEGIC PLANNING



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

**Good intentions,
Well meaning programs,
Humanitarian gestures . . .**

Strategic, results-oriented plans.



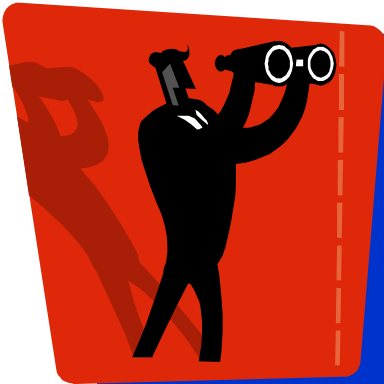
INTENT OF PLAN

The Verb of Homelessness

- Manage
- Maintenance
- Accommodate
- ✓ **End/Abolish**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS



REFRAMING THE ISSUE

Social services frame

Business frame



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

THE NEW VERNACULAR

Changing the verb: Moving from managing the crisis to ending the disgrace

1. Research driven	Conjecture and Anecdote
2. Performance based	Process based
3. Results oriented	Maintenance oriented
4. Accountability ensured	Good intentions
5. Consumer centric	Provider centric
6. Business focused	Social services focused
7. Partnership enhanced	Isolated response
8. Innovation infused	Status quo maintained
9. Inductive planning	Deductive planning
10. Inclusive partnership	Limited response

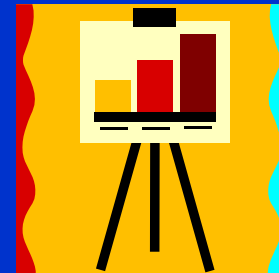


INNOVATION

❖ Conjecture

❖ Anecdote

❖ Hearsay



❖ **Field-tested, evidence-based
innovative initiatives**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

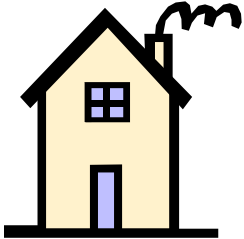
BUSINESS FRAME



CONSUMER CENTRIC

Who are the consumers?

What do they want?



Pill?

Program?

Protocol?

Place

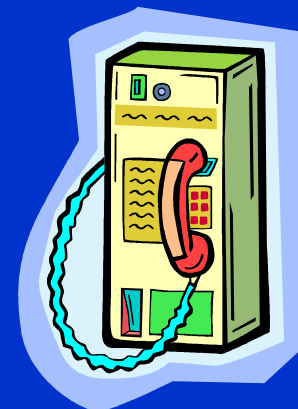
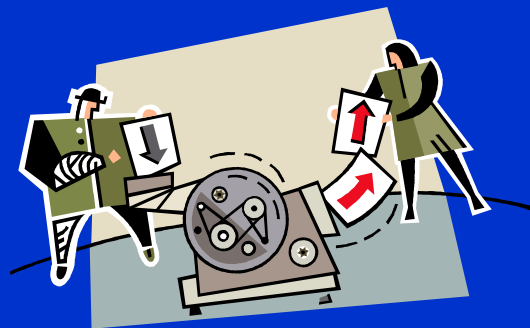
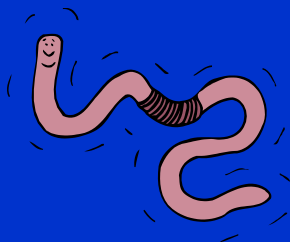


SINGLE METRIC

❖ Not a growth industry!



Evolutionary Innovations





UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

3. UNPRECEDENTED INNOVATIVE INITIATIVES



WHAT WORKS?

Innovation in Planning

Field-Tested



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED: PROVEN BEST PRACTICES



FEDERAL MANAGEMENT AGENDA

GOOD . . . TO BETTER . . . TO GREAT



RESEARCH ON HOMELESSNESS

PROJECT HOMELESS CONNECT



**JURISDICTIONALLY-LED,
COMMUNITY-BASED 10-YEAR PLANS**

**ASSERTIVE COMMUNITY TREATMENT TEAMS
(ACT)**



PSYCHOTROPIC MEDS - NO WRONG DOOR



COST BENEFIT ANALYSIS STUDIES

**HENNEPIN COUNTY HOMELESS PREVENTION/
RAPID EXIT**



STREET ENUMERATION BASELINES

**HOUSING FIRST & PERMANENT SUPPORTED
HOUSING**



**PREVENTION PROTOCOLS – NO
DISCHARGE TO HOMELESSNESS**

HOUSING SEARCH/STABILIZATION



**THERAPEUTIC COURTS – HOMELESS
& BEHAVIORAL HEALTH COURTS**

EMPLOYMENT INNOVATION



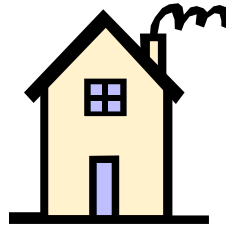
CRISIS INTERVENTION TEAMS (CIT)





UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



HOUSING FIRST & PERMANENT SUPPORTED HOUSING

**Changes the Equation of Response and Offers the
Customer What They Want**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



ASSERTIVE COMMUNITY TREATMENT TEAMS (ACT)

Multi-disciplinary, Clinically-based Teams

To Engage, not Enable

To House, not Harass



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



PROJECT HOMELESS CONNECT

**One-Day, One-Stop Strategies
Creating a Trajectory Out of Homelessness by
Welcoming Our Neighbors and Solving Their
Problems - All the Way from Haircuts to Housing**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



PREVENTION PROTOCOLS

**No Discharge to Homeless
from Public or Private Systems
of Care, Treatment, or Custody**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



EMPLOYMENT INNOVATION

Ready, Willing, And Able

Massachusetts Model

“Work Works” to Build Stable Lives



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



JURISDICTIONALLY-LED, COMMUNITY-BASED 10 YEAR PLANS

**Shaped around Business Principles, Consumer
Preference, and Political Will**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



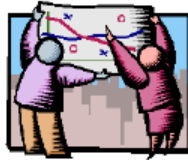
RESEARCH ON HOMELESSNESS

**Typologies Inform Policy and
Investments and Tell Us What Works**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



STREET ENUMERATION BASELINES

Quantify Magnitude of Problem in Business Frame



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



COST BENEFIT ANALYSIS STUDIES

**Reveal Economics of Homelessness and
Cost of Effective Interventions**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



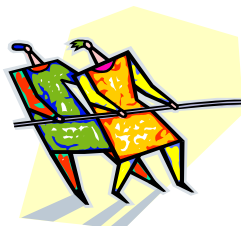
ALTERNATIVE & THERAPEUTIC COURTS – HOMELESS, DRUG, & BEHAVIORAL HEALTH COURTS

**Specialized Courts that Practice Accountability,
Affirmation, and Cost Savings**



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



CRISIS INTERVENTION TEAMS (CIT)

Police as Part of Solution

- A community partnership strategy to work with mental health consumers & family members
 - Quality training for police as part of a team
- Improved response, decreased violence and stigma



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



PSYCHOTROPIC MEDS - NO WRONG DOOR

Offer Stability in Access and Life



UNITED STATES INTERAGENCY COUNCIL ON HOMELESSNESS

INNOVATION INFUSED



HENNEPIN COUNTY HOMELESS PREVENTION/RAPID EXIT PROGRAM

**Stops the Human Tragedy Before it Begins
through Timely Intervention**



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INNOVATION INFUSED



HOUSING SEARCH AND STABILIZATION

“Real Estate Agents” for Homeless People



4. UNPRECEDENTED INCREASED RESOURCES



HOMELESSNESS

20 years of:

- ❖ Increasing numbers
- ❖ Decreasing morale
- ❖ Expanded funding
- ❖ Limited results



Demoralized

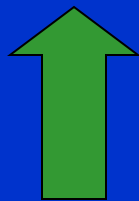
that the issue seemed intractable and unsolvable

Remoralized

that we can now see change and solutions

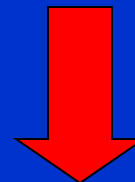


NEW HEADLINES:



Resources up

Homelessness down

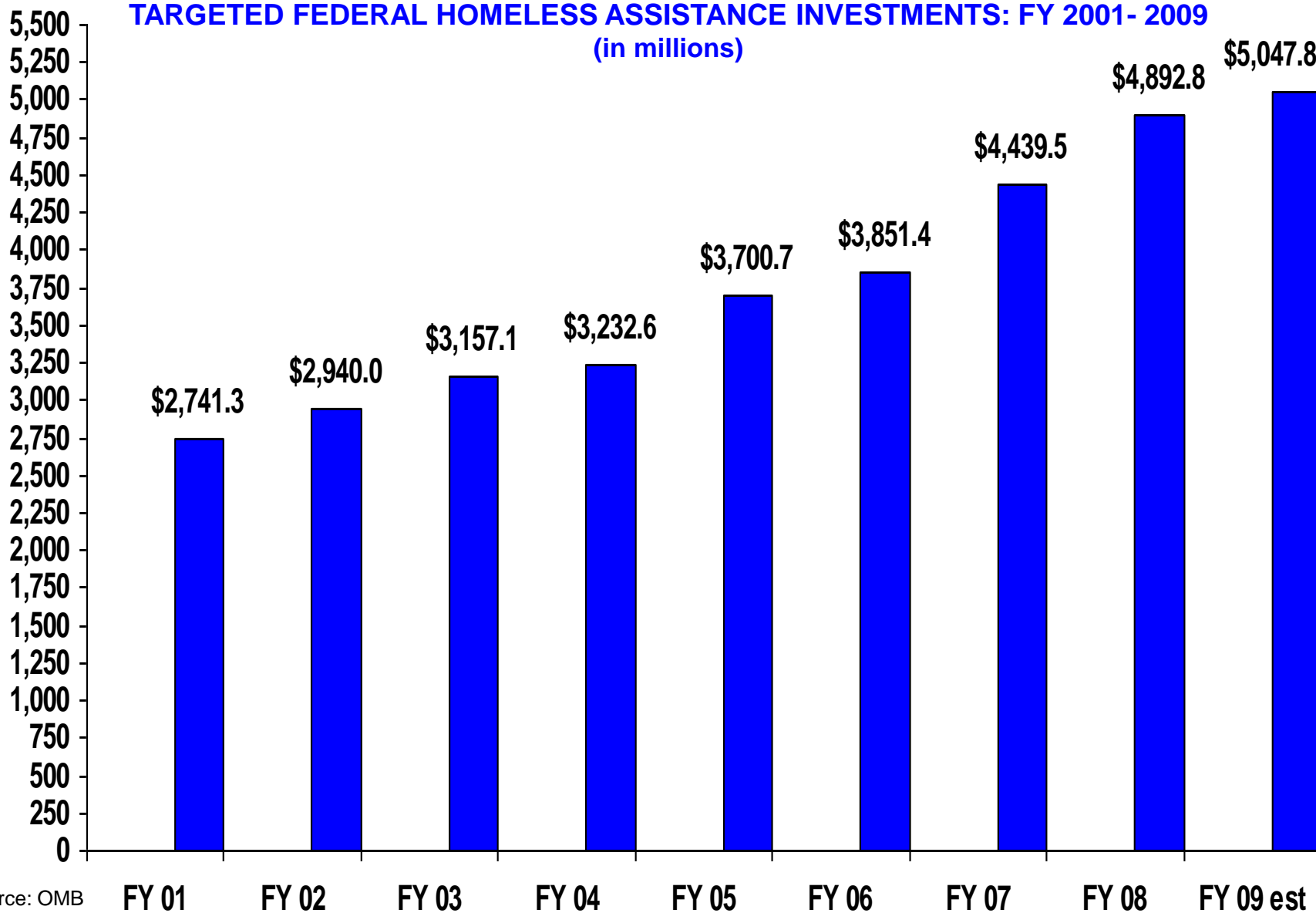




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UNPRECEDENTED RESOURCES AND INVESTMENTS

TARGETED FEDERAL HOMELESS ASSISTANCE INVESTMENTS: FY 2001- 2009 (in millions)



Source: OMB

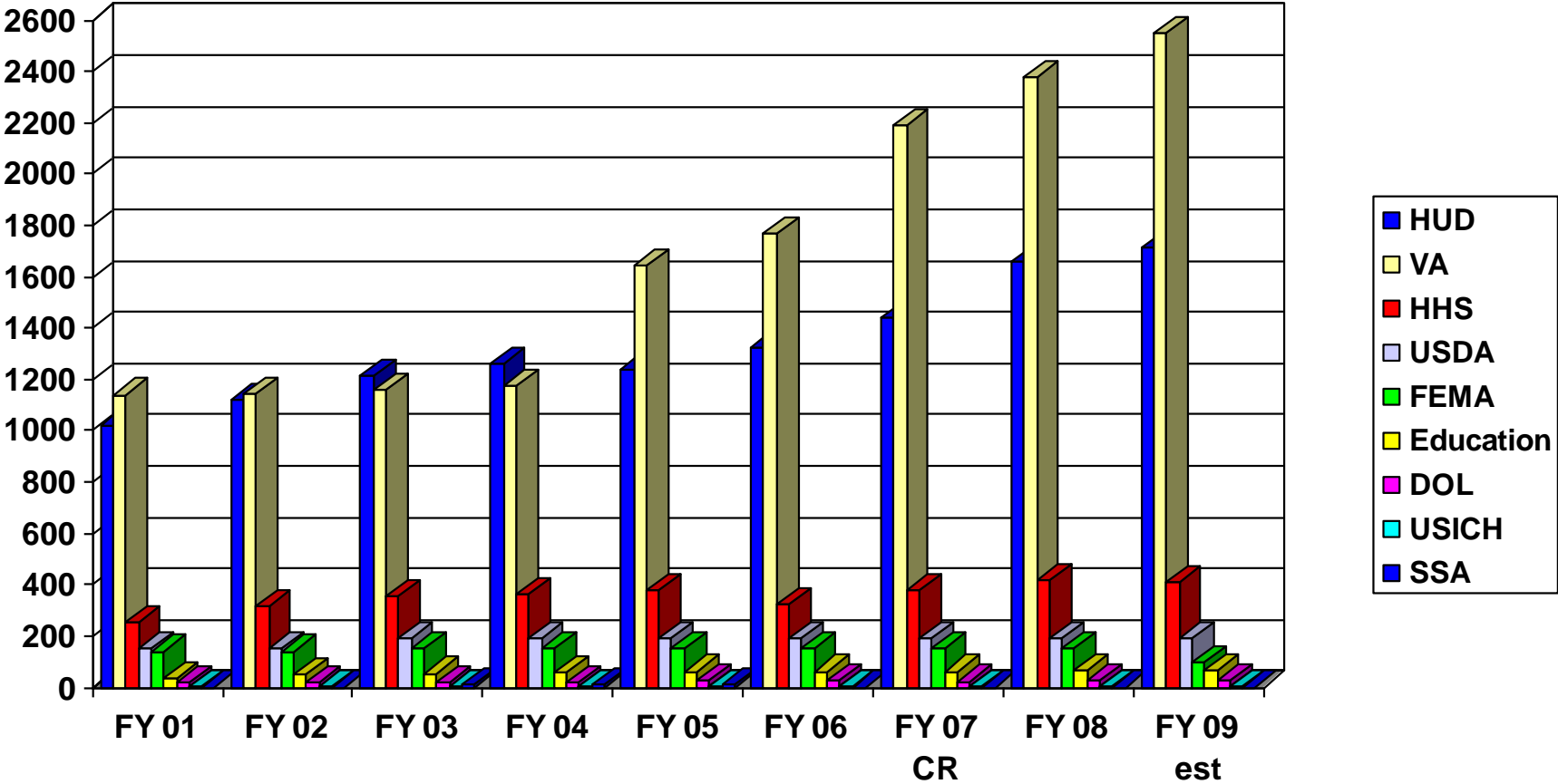
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UNPRECEDENTED RESOURCES AND INVESTMENTS

TARGETED FEDERAL HOMELESS ASSISTANCE INVESTMENTS: FY 2001 - 2009
(in millions)





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FEDERAL MAINSTREAM RESOURCES



CONSUMER-CENTRIC MAINSTREAM RESOURCES

including benefits, income, health care, and education:

- ☐ Medicaid
- ☐ Earned Income Tax Credit
- ☐ SSI/SSDI ☐ TANF
- ☐ Food Stamps
- ☐ Veterans benefits ☐ Veterans health care



To End Homelessness

**Innovative Initiatives Alone
Increased Resources Alone**

**Requires Strategic Plan
infused with Political and Civic Will**



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RESULTS

FROM NATIONAL PARTNERSHIP AND INVESTMENT



**12% reduction overall in homelessness
across the nation from 2005 to 2007.**

763,010 (2005)

671,888 (2007)

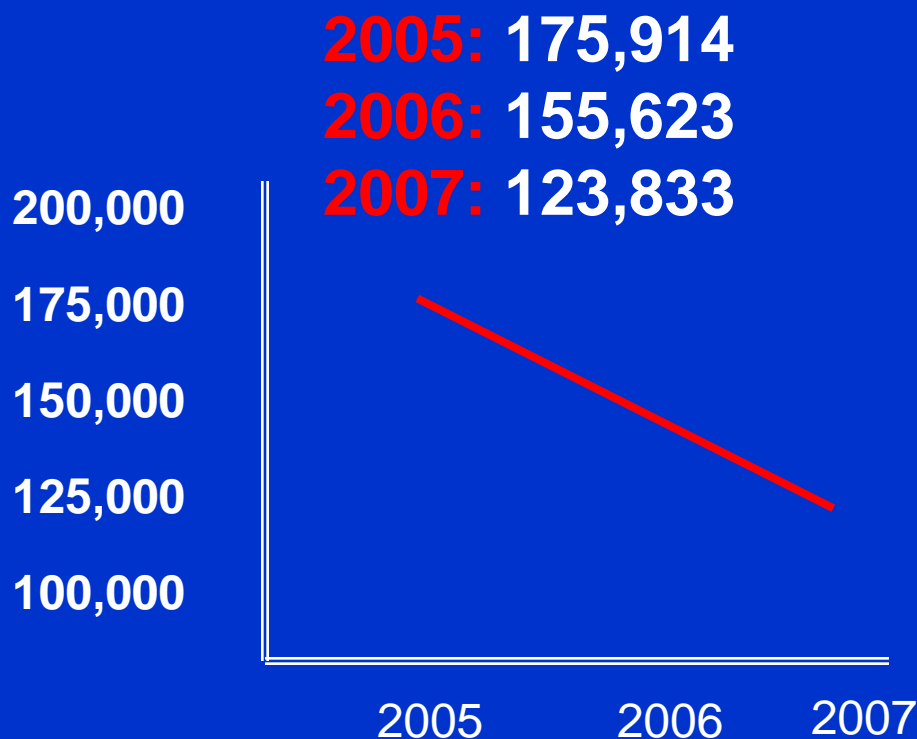
* Source: HUD estimate from all continuum of care data



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UNPRECEDENTED NATIONAL RESULTS IN REDUCING STREET AND CHRONIC HOMELESSNESS

30% Decrease in chronic homelessness across the U.S.



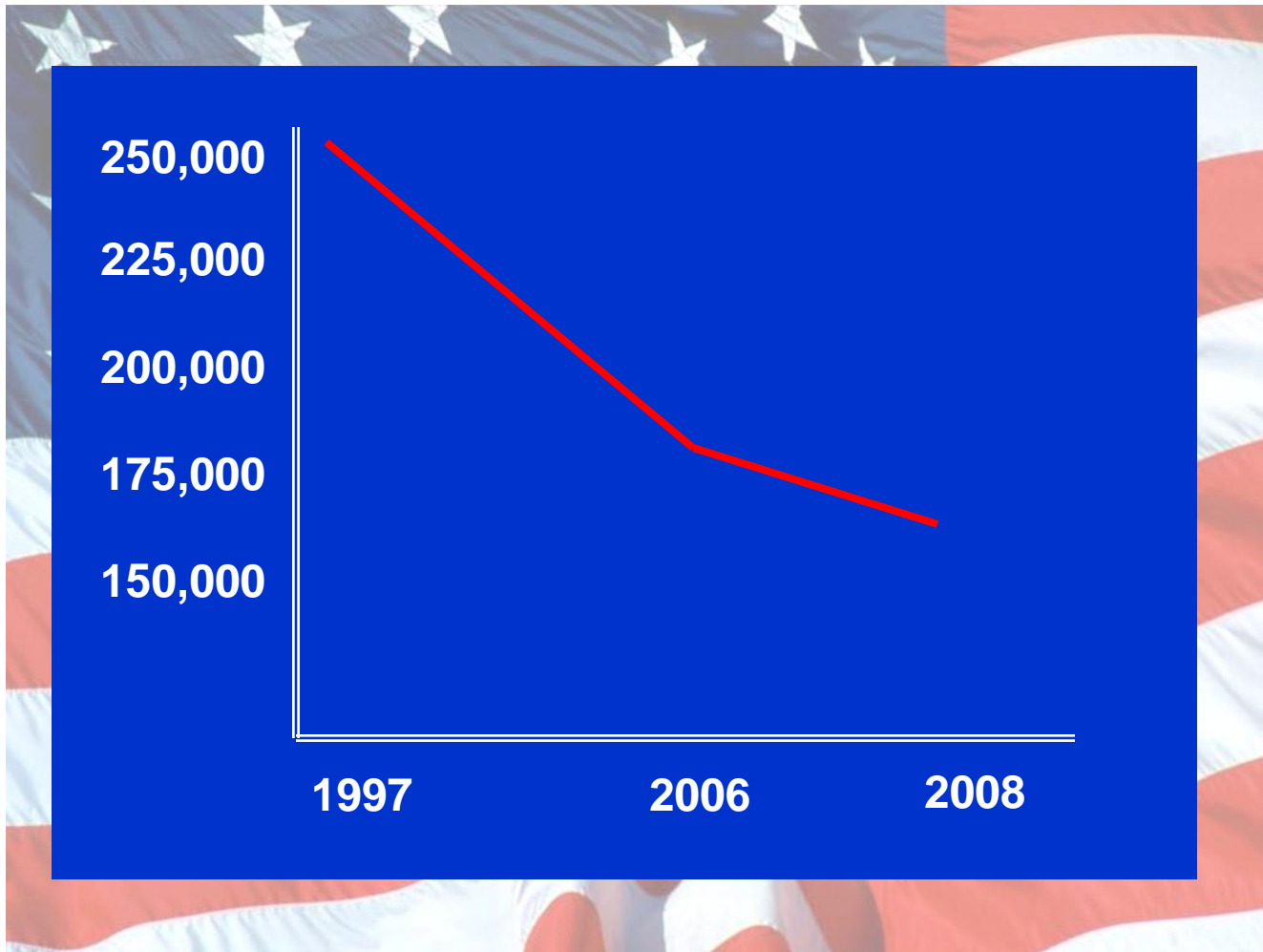
* Local data based on reports from a single day count in cities and counties.



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RESULTS-ORIENTED

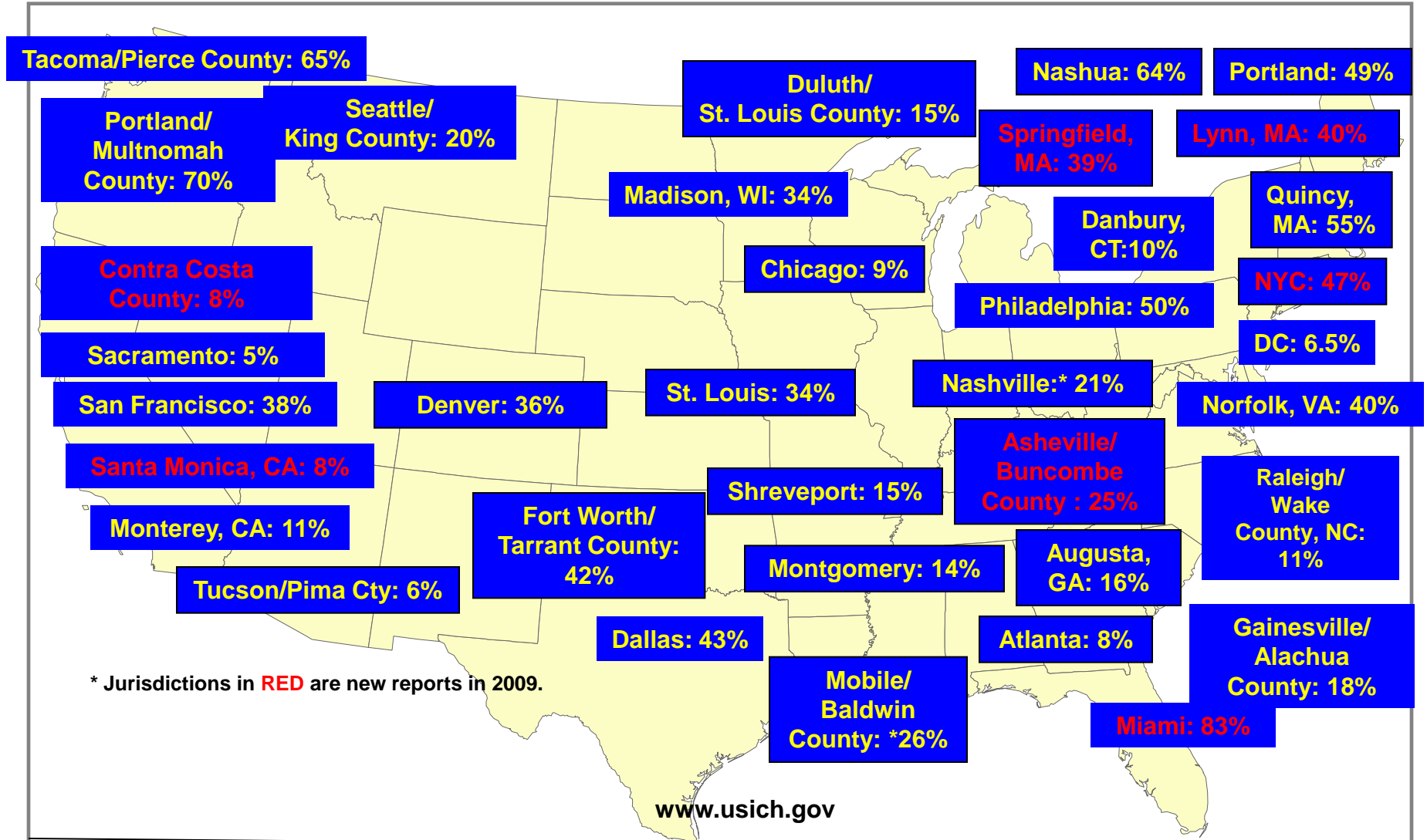
Almost 40% Decrease in Number of Homeless Veterans 2001- 2007

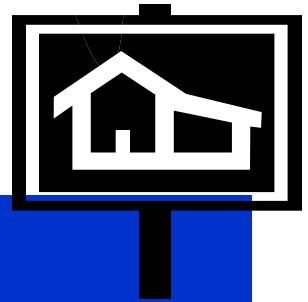




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RESULTS IN REDUCING STREET AND CHRONIC HOMELESSNESS: DECREASES FROM LOCALLY REPORTED DATA





Impact of Double Trouble of Mortgage/Foreclosure Crisis and Job Loss:

- ❖ **Street and Chronic Homelessness staying down**
- ❖ **Family numbers up**



Mortgage/Foreclosure Crisis

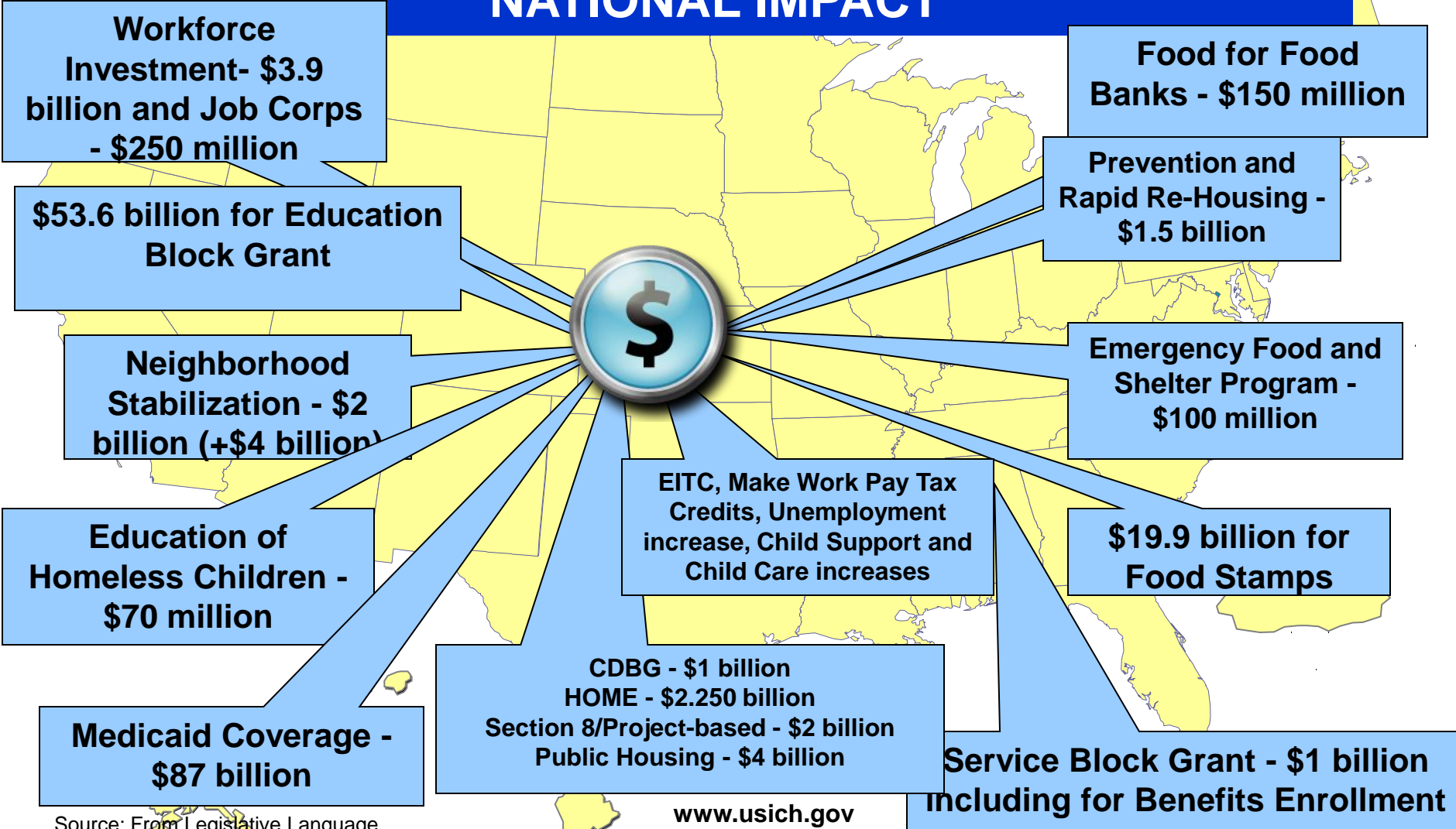
Dual impact

+ Challenges for:

- ❖ low-income renters
- ❖ people with disabilities
- ❖ people on fixed incomes
- ❖ single parent households



AMERICAN RECOVERY AND REINVESTMENT ACT: NATIONAL IMPACT



Source: From Legislative Language



“Art of legitimate larceny.”

The art of pilgrimage.



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“Impossible, impossible, impossible. Sure impossible.”

“Failure is impossible.”



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