

Explainer



History of the State of Connecticut's Supportive Housing Initiatives

Homelessness among Individuals with Chronic Conditions

At least 33,000 people experience homelessness each year in Connecticut, including 13,000 children. And approximately 10-20% of homeless individuals have been found to experience chronic, long-term homelessness.¹ National studies indicate that among adults experiencing chronic, long-term homelessness, many experience mental illness, have a history of alcohol or drug addiction, or are HIV positive.

For chronically homeless individuals who also cope with interconnected physical and mental health problems, homelessness is not a static state but a part of a cycle of crisis and

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temporary relief. People who struggle with mental illness often become homeless as a direct result of their illness, which is reciprocally made worse by their lack of a safe place to live. This frequently leads to hospitalization,

institutionalization, or imprisonment. If released without sufficient support services, an individual often falls back into homelessness and the cycle continues.

People addicted to drugs and alcohol face similar problems. Addiction is exacerbated by living on the streets and may lead to arrest and imprisonment. If an individual undergoes treatment in an emergency room or detoxification clinic but is then released into the same situation they came from, this can lead to relapse. And in precarious situations like homelessness, chronic illnesses are exacerbated. The frequent use of hospital emergency rooms

by homeless individuals as a replacement for preventative care detracts from recovery and is an expensive measure.

Historical Context for the Emergence of Supportive Housing as a Solution

Beginning in the 1960s, state psychiatric hospitals throughout the country began to close, in the process of deinstitutionalization. This movement was a turning point in the treatment of those with developmental disabilities, mental illness, and other disabilities. Treatment shifted from long-term hospitalization in institutions towards a community-based approach. Many state psychiatric hospitals would be closed by the late 1980s, leaving former patients to seek out the community- and family-based treatment which was meant to replace institutionalization. However, the demand for community-based treatment did not fit the supply or federal funding for these local programs, and many individuals with psychiatric illness were absorbed into the criminal justice system or became homeless.

What was needed was safe, affordable housing that allowed those with chronic conditions to live in the community while keeping a reliable support system in place. Supportive housing, which incorporates affordable housing with support services, emerged as a solution to the homelessness faced by individuals coping with chronic conditions. Throughout the U.S., major cities such as New York, Chicago, and San Francisco, tested the model and found it to be an effective as well as economical long-term solution to chronic homelessness.

The need for supportive housing was present in Connecticut: homeless shelters were at capacity, hospitals around the state were treating numerous episodes of illness and injury among indigent, often homeless, users of alcohol and drugs, and the State had been progressively discharging long-term patients from its three

large psychiatric hospitals for several years. But the supportive housing concept had not been tested to the same extent in mid-size cities like New Haven and Hartford, or in towns the size of New Britain and Middletown. Although there was a “model” for supportive housing, it required adaptation to Connecticut’s governmental structures and interests and to local conditions and needs.

Supportive Housing in Connecticut: The Demonstration Project

In 1993 the Melville Charitable Trust offered funding for the Corporation for Supportive Housing (CSH) to initiate a supportive housing demonstration in Connecticut. The Corporation for Supportive Housing joined forces with the

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State of Connecticut, several housing developers, and several human services providers to create the Connecticut Supportive Housing Demonstration Program. This initiative produced 281 units of service-enriched permanent housing for homeless and at-risk populations.

This demonstration program, researched by the University of Pennsylvania Health System in 2002, substantiated the success of supportive housing: ²

- Tenants decreased their utilization of restrictive and expensive health services.
- Tenants increased their usage of less expensive ongoing and preventative health care. For example, Medicaid-funded inpatient health and behavioral health care provided to tenants dropped by 71 percent from two years prior to three years after they entered the housing.
- Tenants reported high levels of satisfaction with all aspects of the housing and services.
- Tenant income increased, on average from \$500 to \$639 per month.
- Two-thirds of tenants reported being

employed or in education and training programs.

- Neighborhood property values increased by more than 30 percent for eight of the nine projects in the study.
- The majority of neighbors and nearby business owners report that their neighborhoods look better or much better than before the projects were built.
- Development of the projects yielded \$72 million in direct and indirect economic and fiscal benefits to Connecticut communities.

Supportive Housing Pilots Initiative

Building on the success of the Demonstration Program, in 2000 the State of Connecticut launched another initiative designed to produce new supportive housing units, extend the reach of supportive housing to new communities, and increase the number of nonprofits providing supportive housing at the local level. The overall purpose of the Supportive Housing Pilots Initiative was to build a solid statewide foundation for taking supportive housing to scale in Connecticut.

Its goal was to produce at least 650 new units of supportive housing statewide, most of which would serve formerly homeless men, women and families coping with mental illness and/or chemical dependency. As in the Demonstration Program, this program involved the cooperative efforts of six State agencies, CSH, philanthropy and the nonprofit community. The first 350 of the 650 supportive apartments were created in the form of “scattered site” apartments: helping tenants move into existing rental properties and linking them with visiting support services and case management. The Pilots Initiative also financed 15 new site-based projects to create new supportive housing: as of 2007, 261 units are in various stages of production from planning to completion.

The State of Connecticut Supportive Housing Pilot’s Initiative was awarded Harvard University’s Kennedy School of Government Ash Institute 2006 Innovations in American Government award, recognizing the initiative for its innovation in building a network of state, federal, and non-profit resources to achieve its goal of creating new supportive housing units and providing support services to residents.

Next Steps

Because of the Supportive Housing Pilots Initiative and the Connecticut Supportive Housing Demonstration Program that preceded it, Connecticut now has a base of experience from which to continue its supportive housing work. This experience includes a statewide network of nonprofits experienced in supportive housing creation, a process for State agency collaboration in financing supportive housing, and a track record in using State funds to leverage substantial Federal and private-sector investment in supportive housing development.

In 2005, the state legislature approved funding for 500 new units of supportive housing over the 2005-2007 biennium. This initiative, Next Steps, will create 350 supportive housing units through new development and rehabilitation and 150 units using existing rental properties. The Next Steps Initiative combines resources from public and private sources to finance the creation of permanent supportive housing for individuals as well as families experiencing persistent and chronic homelessness. This initiative is designed to respond to some pressing needs:

- Families are the fastest growing segment of the homeless population, and fewer supportive housing units currently exist in Connecticut to serve families with multiple challenges than individuals. The Next Steps Initiative calls for a substantial increase in the development of supportive housing for families.
- Adults with mental illness, substance addiction and/or other disabling health conditions represent the largest percentage of households experiencing long-term homelessness. Of particular concern are adults who are frequent users of emergency shelters and those transitioning from foster care or incarceration. Next Steps will create new units of supportive housing for adults through both development of new units and leasing of scattered units

The first completed phase of Next Steps consisted of 150 scattered site units. In early 2006, funds were distributed for Round 1: 131 units of new development. Round 2 of development funding was announced in September of 2007: 168 units in six new

developments. There will also be up to 275 more supportive housing units created through a scattered site leasing approach.

Supportive Housing to Date

In 2007, the Corporation for Supportive Housing released an evaluation of the three state-funded supportive housing initiatives to date: the Demonstration Program, Pilots Initiative, and Next Steps Initiative.⁴ There have been 986 units of supportive housing created through these state initiatives. There have also been more than 1,800 units created through nonprofit provider organizations, public housing authorities, and the Connecticut State Department of Mental Health and Addiction Services, bringing Connecticut's total supportive housing units in existence and in the development pipeline to approximately 3,000.

Endnotes

1. "Chronic Homelessness." National Alliance to End Homelessness. <http://www.endhomelessness.org/section/policy/focusareas/chronic>
2. Supportive Housing Demonstration Report. Corporation for Supportive Housing. <http://www.csh.org/index.cfm?fuseaction=Page.viewPage&pageID=3244>
3. "Supportive Housing Pilots Initiative." Government Innovators Network, Harvard University John F. Kennedy School of Government. <http://www.innovations.harvard.edu/awards.html?id=48941>
4. "Connecticut Supportive Housing Initiatives 2006 Status Report." Corporation for Supportive Housing. http://www.ctreachinghome.org/images/stories/2006_status_report_final.pdf

Links

For more information on Connecticut's Supportive Housing Initiatives, visit the Corporation for Supportive Housing's site: <http://www.csh.org/index.cfm?fuseaction=Page.viewPage&pageId=3932&nodeID=88>

Written for www.lyceumcenter.org, a resource maintained by the Partnership for Strong Communities.

The Lyceum Center is dedicated to creating a common ground for all those working on solutions to homelessness, the development of affordable and supportive housing and the creation of vibrant healthy communities.

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