

# Opening Doors - CT Legislative Recommendations

FY 2015-2016

### In 2013 11,026 households experienced homelessness in Connecticut.

Even more households are one lost job or unanticipated expense away from homelessness. Emergency shelters are above capacity, and people experiencing homelessness or housing instability exceed the number of available beds.

The following recommendations were developed through a cross sector, multi-partner, statewide planning process as priorities for moving Connecticut forward on its path to end homelessness. Connecticut is within reach of meeting our goal of ending Veteran and chronic homelessness by the end of 2016. With the right state commitment and investment, Connecticut will be a national leader in achieving these goals.

### **Expand Permanent Supportive Housing to Address Chronic and Youth Homelessness in the State:**

Supportive housing is a cost-effective way to address chronic homelessness by matching permanent affordable housing with services. Overwhelming evidence suggests that supportive housing leads to stability and reduces use of such high-cost public services as emergency rooms, prisons and nursing homes. To end chronic homelessness by the end of 2016, *Opening Doors-CT* would require about 1,400 units of supportive housing from state and federal level resources.

#### **Reaching Home proposes:**

- 500 new units per year of permanent supportive housing: 250 scattered site and 250 through flexible funding that pairs services and/or rental subsidies with new or existing housing units. A flexible funding pool will leverage existing resources and better integrate individuals who are chronically homeless into the community. At least 100 rental subsidies will be targeted to a pilot for highrisk and high-cost adult Medicaid beneficiaries who also experience homelessness. 30 units of permanent supportive housing will be for youth age 18-26 who are homeless or aging out of state care and at risk of chronic homelessness. The youth program is modeled on the Interagency Committee on Supportive Housing's approach for adult supportive housing, where rental subsidies are coupled with capital and services. The youth pilot will include two to three demonstration sites.
- 100 new units of permanent supportive housing development to ensure a balanced supply of permanent supportive housing and support a variety of community-based approaches. Continued new development will assist toward the twin goals of ending Veteran and chronic homelessness in Connecticut in the next 2 years.

### **Expand Rapid Re-Housing across the State:**

Many families benefited from the homelessness prevention and rapid re-housing programs initially funded by the 2009 federal stimulus. Three years after receiving Rapid Re-Housing, 82% of single adults have not returned to a Connecticut shelter. For families, the result is 95%.

Reaching Home proposes \$2 million in FY 2016 and an additional \$1 million in FY 2017 for rapid rehousing. These funds will allow providers to serve approximately 1,000 and 1,500 households, respectively, bringing Connecticut closer to the goal of ending family homelessness by 2020, including families made homeless by domestic violence.

Homelessness is unacceptable. Homelessness is solvable and preventable. Homelessness is expensive. Invest in solutions.



## Reaching Home is Opening Doors...

### ...to a Future where Everyone has a home

### Support Existing Recipients of CT's Integrated Health and Housing Neighborhoods (CIHHN):

Connecticut is the recipient of a national grant to implement CIHHN, a pilot project for an innovative model of supportive housing linked to coordinated health care for 150 individuals who are homeless, enrolled in Medicaid and using high levels of costly health care. AIDS Connecticut, in conjunction with Reaching Home and local and statewide partners, is working to lower public costs and improve wellbeing by integrating housing, case management and health care services. This innovative pilot is funded by the Corporation for Supportive Housing (CSH) and backed by a prestigious national Social Innovation Fund grant.

The Malloy Administration dedicated 150 rental subsidies to serve these high-need individuals. The model requires housing stability services that are not currently available and are critical to its success. **Reaching Home recommends \$375,000 annualized in FY 2016 for housing stabilization services for existing CIHHN recipients.** 

### Sustain Support for the Homeless Youth Program to Address the Safety Needs of Youth in Crisis:

Unaccompanied runaway and homeless youth currently fall through the cracks of existing state systems. The 2013 Connecticut study, *Invisible No More*, found they experience significant mental health needs, have been victims of assault and sex trafficking, and engage in sex simply to survive. There are presently few services to help these youth, not enough providers and very few places to sleep. Fewer than seven Connecticut private agencies provide crisis housing or street outreach for youth. **Reaching Home proposes continued funding for the Homeless Youth Program that is currently budgeted at \$1 million annually.** 

### **Continue Support for Development of Deeply Affordable Housing:**

Deeply affordable rental housing helps prevent homelessness. Connecticut has the 6th highest rental costs in the nation. There is a shortage of 90,734 units of housing for extremely low income renters (those making 0-30% of area median income). **Reaching Home recommends the state continue to invest in deeply affordable housing**, including incentives for deep income-targeting in future state housing development funding rounds, and devoting rental subsidies for housing developers to pair with state capital financing to increase access for very low income households.

These initiatives rely on the preservation of existing homeless services and housing resources. For more information, contact Alicia Woodsby at <u>alicia@pschousing.org</u> or (860)-244-0066.

Many thanks to the leaders of the seven Reaching Home Workgroups tasked with the compilation of the recommendations and development of the Opening Doors – CT strategies, chaired by:

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