DRAFT PROPOSAL - Fund and Expand Access to Supportive Housing – Oppose Policies that Add Barriers to Housing

Statement/Position: The Coalition opposes proposals that increase barriers to housing for chronically unhoused individuals, including mandated citations and criminal charges for non-violent offenses. State laws should encourage collaboration with local governments and financially support their efforts to provide affordable accessible housing.

The Problem: Cities are struggling to increase access to affordable housing while also addressing public safety concerns associated with unhoused people. People who are unhoused or lack stable housing and those leaving jails, prisons, psychiatric facilities and nursing homes often need supportive housing. The agencies that provide this support often encounter barriers when a person is ready to engage in treatment and supports because of their past interactions with law enforcement.

Cities and community based agencies need access to state and federal funding and support for their efforts – not mandates that are counter-productive and create barriers for individuals to access housing.

Homelessness is a serious problem in the United States – *need Kansas statistics* – In addition to persons who are unhoused at any time, many individuals are at imminent risk of losing their housing. People with mental health and substance use conditions comprise a disproportionate percentage of people who lack stable housing compared to individuals without mental health and substance use conditions.

Why this matters: Individuals who are unhoused are more prone to become involved with the criminal justice system – often being arrested for non-violent "crimes of survival" particularly trespass. Unhoused individuals are also more apt to become victims of crime. Additionally, in many states, there are more people with mental illnesses in prisons and jails than in the public and private mental hospitals combined. Supportive Housing programs are effective when implemented using Housing First principles – but must rely on state and federal funding and city support to provide affordable apartments and houses along with treatment and supports. Strong relationships with property owners require trust and reliable funding.

Housing First does not mean housing only. Housing First programs point to the importance of providing mental health services in concert with housing, and is a proven strategy to permit persons with mental health conditions, even those with severe symptoms, to live safely in the community and avoid homelessness, psychiatric hospitalizations and involvement in the criminal justice system

The bottom line: Linking people with mental health and substance use conditions to Supportive Housing is an evidence based practice for recovery in the community. The Coalition urges the Kansas Legislature to support access to permanent and transitional supportive housing, increase availability to a full array of housing options, and increase support for mental health and addictions services needed to ensure persons with mental health conditions can access and maintain housing.

Add evidence citations from MHA paper to back of the issue paper…

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The rest of the story about KDADS Housing Programs:

It is important to understand that KDADS programs serve only Kansans who are eligible for the program. For Kansans who are unhoused due to other circumstances, options to create access to affordable housing must occur outside of KDADS.

Interim Housing (IH)

Interim Housing (IH) projects assists homeless persons experiencing Serious Mental Illness (SMI) who may also have a co-occurring Substance Use Disorder (SUD) or youth who are 18 to 21 years of age with Serious Emotional Disturbance (SED). SMI is defined as a diagnosable mental, behavioral or emotional disorder of sufficient duration to cause serious functional impairment in an individual's major life activities.

Interim Housing projects are short-term (up to nine months), project-based housing that provides immediate community-based housing for persons who are homeless with an emphasis on those who are homeless and being discharged from inpatient or residential mental health or substance use treatment facility (e.g., a state psychiatric hospital (SPH), nursing facility for mental health (NFMH), SUD facility or community hospital inpatient psychiatric program).

The goal of the IH grant is to provide immediate community-based housing to prevent discharging individuals from inpatient or residential mental health or substance use treatment facilities to homeless shelters or to street homelessness.

Supported Housing (SHF)

The Supported Housing Fund Program (SHF) program provides affordable housing linked to services to low-income, homeless or potentially homeless individuals experiencing Severe Mental Illness (SMI). The goal is to provide persons with SMI the help and support they need to stay housed and live more independent, healthy, productive, and fulfilling lives. The SHF program supports eligible individuals to obtain and maintain housing in the least restrictive environment possible. This is achieved by providing temporary funds to meet the cost of their housing needs.

Housing First v. Housing Ready

Housing First is the practice of housing an individual to enable treatment and recovery and provide support for living independently. Housing Ready policies are counter-productive because they will only provide housing to those who are already free of behavioral health symptoms and compliant with recommended treatment. Housing ready policies ignore the vital role of housing in providing stability, reducing stress and decreasing symptoms, so that people are able engage in productive treatment and support options. Requiring a person to be "housing ready" results in long stays in psychiatric hospitals or other institutional settings when they could live safely in the community. This violates the community inclusion mandate of the Americans with Disabilities Act as interpreted by the U.S. Supreme Court in Olmsted v. L.C.