



Joint Committee on Appropriations, February 10, 2016
Testimony of Christi Staples, Partnership for Strong Communities, on the Department of Housing Budget

Good afternoon, Senator Bye, Representative Walker and members of the Joint Committee of Appropriations. My name is Christi Staples, and I'm here on behalf of the Partnership for Strong Communities, a statewide nonprofit policy and advocacy organization dedicated to ending homelessness and expanding affordable housing to strengthen Connecticut communities. The Partnership staffs and manages two statewide campaigns – Reaching Home and HomeConnecticut focused on these goals, respectively.

In 2012, Connecticut's Reaching Home Campaign launched the implementation of Opening Doors –CT, the statewide plan to prevent and end homelessness that follows the federal Opening Doors plan. Four years later, Connecticut is the first state to end chronic homelessness among veterans – meaning that we have the capacity and systems in place to quickly identify and connect Veterans to the assistance needed to achieve stable, permanent housing within 90 days. However, this system must be maintained.

The cumulative impact of federal, state, and local level planning efforts combined with critical state resources and community collaboration wouldn't have been believable just a few years ago. Connecticut has also seen significant reductions in chronic homelessness, and is on track to end all chronic homelessness by the end of 2016 – meaning it will be rare, brief, and nonrecurring. Connecticut has transformed a disjointed system of shelters into coordinated access networks with a single point of entry and a common tool for assessing vulnerability and need. This progress is happening through the coordination of multiple strategies, such as 100-day challenges in communities across the state that set audacious goals around chronic homelessness to accelerate the pace of the system change necessary to meet that goal, community lists that prioritize individuals and families in need of housing assistance by vulnerability and need, a public/private partnership to tackle employment outcomes for families exiting homelessness, and a new youth count to determine the number of youth experiencing homelessness across the state, to name a few.

In order to maintain this positive momentum and meet our goals as a state, we ask for your support for continued investment in these effective solutions.

Expand Permanent Supportive Housing for High Need and Chronic Homelessness: Permanent Supportive Housing (affordable housing with supportive services) continues to be the most effective housing model to assist people with high needs and those experiencing chronic homelessness and is proven to cut system costs by up to 70%. **Reaching Home recommends \$1.5 million for rental subsidies and \$1.125 million for services in FY 17 for 150 new units of scattered site supportive housing in order to reach the goal of ending chronic homelessness in the state.**

Expand Rapid Re-Housing: Rapid re-housing (housing location and short-term housing subsidy) is a cost effective way to help many singles and families exit homelessness quickly and permanently – over 80% of single adults, 90% of families did not return to homelessness three years after rapid re-housing assistance. **Reaching Home recommends \$747,000 in FY 17 to continue the support that Coordinated Access Networks need to function effectively during this critical start-up phase.**



Support Coordinated Access to Homeless Resources: Connecticut's eight Coordinated Access Networks (CANs) of providers are working together across the state as teams to serve those in need more effectively from emergency shelter through the full range of housing options. **Reaching Home recommends \$2 million for FY 17 for Rapid Re-Housing.**

Provide Immediate Assistance for Homeless Youth in Crisis: Great strides have been made in advancing the Opening Doors for Youth Plan, including the completion of a homeless youth count which estimated 3,000 homeless/housing unstable youth in our state. We need immediate options to support vulnerable youth facing homelessness in our state. **Reaching Home recommends \$2 million in FY 17 to plug critical gaps in the housing continuum for youth and young adults experiencing homelessness.**

Providing homes for people who have been homeless has saved the state and its municipalities millions of dollars by reducing the use of hospitals, nursing homes, prisons, and other temporary, costly responses ⁱ

Connecticut Collaborative on Re-Entry (CCR), formerly known as FUSE, targets and provides supportive housing to men and women who cycle through the homeless service and corrections systems. The total lifetime cost for jail and shelter services for the first 30 men and women was more than \$12 million. Early outcomes showed that participants housed for 12 months or more experienced a 99% decline in shelters days and a 73% decrease in jail episodes.

The state's Social Innovation Fund project is currently testing a similar approach, targeting high-cost Medicaid beneficiaries who are also in the homeless system. As of June 2014, 69 people were housed through the initiative. With spending of roughly \$76,000 per person in Medicaid benefits in the previous 12 months, these 69 people accounted for \$5.2 million in Medicaid costs over the last year. The average adult Medicaid beneficiary costs about \$7,000 per year.

Years of wise and strategic investments by Governor Malloy and the Legislature are a major factor in getting us to this point. Disinvestment at this critical juncture could be detrimental to these efforts for the state. We are creating a system to address the most vulnerable and difficult to serve, but the system must be able to manage the inflow of people entering homelessness on a regular basis.. Homelessness is an unacceptable condition for any Connecticut resident, and an expensive public policy problem. Existing housing/homelessness resources along with the above investments proposed by the Reaching Home Campaign will continue to save public resources and help families and individuals, including Veterans, transition to housing, stability, and hope.

ⁱ Arthur Andersen, *Connecticut Supportive Housing Demonstration Program* (University of Pennsylvania Health System, Department of Psychiatry, Center for Mental Health Policy and Services Research, 2002).