

## **NJAMHAA and Partners Advocate for Resources to Serve the Homeless**

The Interagency Council on Homelessness recently held a hearing to learn of challenges to and best practices for serving the homeless population. Three of the speakers were from the NJAMHAA network: Gail Levinson, Executive Director of the Supportive Housing Association of New Jersey; Joyce Campbell, MSW, LCSW, Associate Executive Director for External Affairs at Catholic Charities, Diocese of Trenton; and Shauna Moses, Associate Executive Director of NJAMHAA.

Levinson, Campbell and Moses, as well as several other speakers, illustrated the benefits of the Housing First model, while also acknowledging the benefits of other models. Levinson noted that Housing First entails the provision of housing vouchers and supportive services, including coordination of care to manage complex medical issues. Levinson stressed the need for a state policy to end chronic homelessness. She also reinforced that "the Department of Human Services can be an important catalyst and coordinator" and that "the Division of Mental Health and Addiction Services [DMHAS] is well suited to serve this population." No doubt she also means the community-based providers who are funded by DMHAS, which are NJAMHAA members!

Campbell expressed her agreement for a state policy of not only Housing First, but also Rapid Re-housing, which, in Mercer County, has resulted in a 50 percent reduction of funds spent on public assistance and significant increases in housing stability. However, a major barrier is the fact that the working poor are ineligible, Campbell noted.

Elizabeth Buck, Program Manager for Stakeholder Engagement at the Camden Coalition of Healthcare Providers, shared compelling statistics. "One percent of patients account for three-tenths of Camden's healthcare costs. These are the super-utilizers and 30 percent of them are chronically homeless. Only when we get them into housing does their utilization decline," she said. Buck shared the striking example of one woman who was in the hospital 450 times in one year, which cost more than \$1 million. After she was provided with housing, she was in the hospital 12 times during the following year, which resulted in a savings of hundreds of thousands of dollars, compared to the previous year.

Moses shared the personal perspective through quotes from clients in Greater Trenton Behavioral HealthCare's Housing First program.

\* Margaret: "Once you have housing, then you can move forward. I went to school and got a Certified Nursing Assistant license, and I'm about to start a job," Margaret said. She was also continuing with substance abuse treatment and about to obtain a driver's license.

\* Catherine: "Once I got my own home, then I had a sense of self-respect and dignity. Nothing's going to stop me. Housing First literally saved my life." she said. At the time, she had earned a certification to work as an addictions counselor and was close to completing a degree in social services.

\* Alex: "Getting a place to live healed me. It makes you want to go up the ladder instead of going around in a circle." At the time, he had been in recovery from substance use for three years and was volunteering at a senior citizen housing program.

Moses stated that outreach is a best practice and stressed that sufficient fee-for-service reimbursement rates are essential to ensure ample time for providers to "meet clients where they are - literally and figuratively - in order to develop trust and engage clients into services."

Moses concluded her testimony saying, "By working together to enhance providers' ability to serve homeless individuals, we will see many more individuals like Alex, Margaret and Catherine lead the lives they deserve to live."