## Homeless and Policy – Part II

[Announcer] This podcast is presented by the Centers for Disease Control and Prevention. CDC – safer, healthier people.

[Samantha Williams] I am Dr. Samantha Williams, a research psychologist at the CDC. Today I am speaking with Nan Roman, the President and CEO of the National Alliance to End Homelessness.

Nan, what affect will the Affordable Care Act have on homeless population?

[Nan Roman] I would say that there are two major areas that we are looking at. First, the health reform measures are very encouraging and we're really excited about them. The lack of health insurance and health care is definitely something that impacts homelessness. It impacts it because people don't have health insurance. They pay a lot of money for needed health care, which leaves them too little to pay for housing.

The fact that people will be insured will make it easier to finance some of those services through Medicaid. So there is a steep learning curve there for the current provider network, which really, largely, does not use Medicaid reimbursement, but there is a possibility to finance permanent, supportive housing.

[Samantha Williams] What policies are in place that will help end homelessness for veterans?

[Nan Roman] Policies can have an impact on ending homeless among veterans. Veterans are over-represented in the homeless population. The profile of homelessness among veterans is a little bit different than it is in the general population. More veterans are single than in the general homeless population. More veterans who are homeless have (more) disabilities than in the general homeless population. So policies are very important to bring an end to homelessness among veterans in two areas: 1) many veterans who are homeless, really, are chronically homeless or disabled and they need permanent, supportive housing. So we need to provide more permanent, supportive housing for them.

The Department of Veterans Affairs has not been involved much in permanent, supportive housing. It's happening now through the HUD Vash Program, which provides housing and services. In terms of services, there will have to be policy changes as well. Because homeless people—especially people with mental illness, addictions, and also illnesses in physical disabilities—have a hard time often accessing medical care through conventional means. They need a more consumer-oriented system, more available to them where they are, more linked to housing. The VA will probably be looking at how to provide medical services in a way that's more effective for homeless consumers over the next few years in order to achieve their goal of ending homelessness among veterans in five years.

[Samantha Williams] What policies can help address homelessness in youth and young adults?

[Nan Roman] Homelessness among youth and young adults is probably the least, wellunderstood segment of the homeless problem. We don't have a lot of data on that. What we do know is that there seems to be a link between homelessness among youth and young adults and child welfare. It's not that being in foster care causes people to become homeless, but there's an over representation of people with foster care history in the youth and young adult homeless population. I think the solutions around that, as far as we know, and again, I don't think we have a lot of good research on this, seem to have caring relationships with adults because so many young adults and youth become homeless in the absence of any adult because they're detached from their families or other adults. So creating meaningful relationships with adults is an important part of it, and as with all homeless people, housing is an important part of it. In youth, it's a little less about permanent housing, because permanent housing really means something different to young people, whether they're homeless or not. Young people tend to be more transient. So it can be a transitional housing model, but it needs to be a model with services that help them get the skills that they need to live independently.

[Samantha Williams] Tell me about families who are homeless and how they differ from other groups.

[Nan Roman] About half of the homeless population is families with children. And we have been learning over the past—I would say five years—a lot about what works to help them. This is largely an economic problem, and in terms of the characteristics of homeless families, again, they really don't differ largely from the characteristics of poor families. So they don't have more mental illness, they don't have more children, they don't have lower education levels. They really look pretty much the same as poor housed families. The focus is now on solutions for families with children is really to get them back into housing as rapidly as possible. Most families that become homeless are spending their time amassing their resources to get back into housing. When you think about it, if an apartment costs, say \$900 a month, you've lost your apartment and you want to get back into another one, you need first and last month's rents and deposits. That's at least \$2,000 to get back into an apartment. If you had \$2,000, you probably wouldn't have lost your apartment in the first place. So they're going into the shelter system or transitional housing, basically to save \$2,000. Often, we're paying \$10,000, \$15,000, \$20,000, \$25,000, to house them in transitional housing while they save \$2,000. Maybe we should just give them the \$2,000 and that's increasingly what's happening.

There is a federal program that was funded through the stimulus called the Homelessness Prevention and Rapid Rehousing Program (HPRP). It was a \$1.5 billion program that was designed to prevent an increase in homelessness resulting from the recession. It was very focused on prevention that was giving people money to pay rent or rearages. This has been extremely effective. Communities are learning how to do rapid re-housing and prevention, and I think that this will continue as a primary approach to family homelessness. There is a small percentage of families where somebody has a serious disability in the family that requires a more intensive services environment—essentially permanent, supportive housing again. And there's new federal policy through the, "HHAP," which is the HUD Homeless Assistance Program upcoming that will allow us to do permanent, supportive housing for families. [Samantha Williams] Nan, thank you for being with us today and for participating in the inaugural Public Health and Homelessness Symposium at CDC. If listeners would like more information about the National Alliance to End Homelessness, please visit www.endhomelessness.org.

[Announcer] For the most accurate health information, visit <u>www.cdc.gov</u> or call 1-800-CDC-INFO, 24/7.