

Data References



Addictions

CSH estimates that 2% (35,906) of the 1,671,062 people identified by the Substance Abuse and Mental Health Services Administration (SAMHSA) as engaged with addiction treatment services have needs consistent with supportive housing. This estimate was developed by beginning with the entire population of clients in treatment in each state with data pared down based on some key assumptions around client characteristics and housing and services need. First, to avoid counting those captured in other systems (e.g. homeless system), we include only those that are in residential treatment or hospital inpatient treatment at the time of the survey, excluding those receiving outpatient services. Further, among individuals in residential or hospital inpatient treatment programs, we assume only a portion - those with a co-occurring mental health condition in addition to an addiction disorder - would need the level of supports provided in supportive housing. Finally, we discounted this total by 25%, to exclude the majority of individuals receiving treatment in private for-profit settings (approximately 41% of clients in the 2016 data), many of whom may not meet income requirements for supportive housing. (1)

Addiction services system census data and indicators of need: (1. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. National Survey of Substance Abuse Treatment Services (S-SSATS): 2016.)

Indicators of need for people involved in treatment services: (2. Padgett D, Gulcur L, Tsemberis S. Housing First services for people who are homeless with co-occurring serious mental illness and substance abuse. *Research on Social Work Practice*. 2006; 16:74-83.); and (3. Padgett D, Stanhope V, Henwood B, Stefancic A. Substance use outcomes among homeless clients with serious mental illness: comparing Housing First with Treatment First programs. *Journal of Community Mental Health*. 2011 April; 47(2): 227-232.)



Adult Homelessness

CSH estimates that 104,950 people identified by the U.S. Department of Housing and Urban Development (HUD) through their annual report to Congress on homelessness at a point in time have needs consistent with supportive housing. CSH developed different need estimates for two subsets of homelessness data:

- CSH estimates that 90% (76,989) of the 85,543 people identified as chronically homeless in HUD's annual report to Congress have needs consistent with non-time-limited supportive housing. The percent need estimate was developed using a mixture of academic research and reports, eligibility factors of long-term homelessness and disabling conditions as well as CSH's experience working with local communities to do financial modeling for supportive housing, ranging between 80-100% based on information from local stakeholders.
- CSH estimates that 10% (27,961) of the 279,605 people identified as not chronically homeless in HUD's annual report to Congress have needs consistent with non-time-limited supportive housing. The percent need estimate was developed using a mixture of academic research and reports as well as CSH's experience working with local communities to do financial modeling for supportive housing, ranging between 5-35% based on input from local stakeholders. (2, 4)

Homeless systems census data: (1. Department of Housing and Urban Development, Office of Community Planning and Development, 2017 Annual Homelessness Assessment Report to Congress. December 2017.)

Indicators of need: (2. Lockard Edens, E., Mares, A., and Rosenheck, R. Chronically Homeless Women Report High Rates of Substance Use Problems Equivalent to Chronically Homeless Men. *Womens Health Issues*, 21-5, 383-389, 2011.); (3. Lawrence D. Rickards, Et al. Collaborative Initiative to Help End Chronic Homelessness. *Journal of Behavioral Health Services & Research*, 2009.); Stefan G. Kertesz, Et al. Housing First for Homeless Persons with Active Addiction: Are We Overreaching? *The Millbank Quarterly*, Vol. 87, No.2, 495-534, 2009.); (4. United States Interagency Council on Homelessness. *Ending Chronic Homelessness in 2017*, 2015.); and Lee, Barrett A., Kimberly A. Tyler, and James D. Wright. "The New Homelessness Revisited." *Annual review of sociology* 36 (2010): 501-521. PMC. Web. 19 May 2016.)



Aging

CSH estimates that 19% (226,033) of the 1,189,646 identified by the Centers for Medicare and Medicaid Services have needs consistent with supportive housing. This percent estimate was developed by looking at the overall percentage of people in nursing home care that have zero to three impairments of Activities of Daily Living and no more than mild cognitive impairment. This estimate is supported by demographic shifts that indicate higher rates of aging adults in private and public housing, supportive housing, and homelessness. (2, 3)

Nursing Home Census, ADL and Cognitive impairments: (1. Department of Health and Human Services, Centers for Medicare and Medicaid Services. *Nursing Home Data Compendium*, 2015 Edition.)

Demographic shifts and indicators of need: (2. Kaiser Family Foundation, *Medicaid and Long-Term Services and Supports: A Primer*, 2015.); and (3. National Alliance to End Homelessness, *Demographics of Homelessness Series: The Rising Elderly Population*. Sermons, W. & Henry, M., 2010.)



Family

CSH estimates that 52,756 families in the U.S. need supportive housing and highlights a continued need for data development. CSH reviewed three primary data sources for the family systems needs assessment:

- CSH estimates between 10-30% of the 56,606 families, identified by the U.S. Department of Housing and Urban Development (HUD) annual report to Congress, are in need of supportive housing. For this paper, the need was modeled at 16% (9,089) families in need of supportive housing. CSH arrived at this estimate based on both length of stay and clinical conditions indicating need for long-term services.
- CSH estimates 18% (43,667) of the 242,593 families with children placed in foster care are in need of supportive housing. CSH calculated this number by multiplying the average number of children per family under the U.S Census by rates of repeated episodes with child welfare and indicators of housing instability. Although this was annualized data, CSH used a proxy for point in time system capacity due to an average length of stay of 13.3 months.
- CSH reviewed National Center for Homeless Education (NCHE) data to assess supportive housing needs for families experiencing homelessness in public schools, showing roughly 2.6% (758,443) of the 28,395,826 families in public education report homelessness. However, because the definition used in education is inconsistent with HUD's, the NCHE data does not currently offer accuracy sufficient to estimate supportive housing need. This highlights a need for greater collaboration to assess housing and services needs across their systems of care.

Family Systems Census Data: Families in homeless systems (1.US Department of Housing and Urban Development, Office of Community Planning and Development, 2017 Annual Homelessness Assessment Report to Congress. November 2017); Families in child welfare systems (2. U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, www.acf.hhs.gov/programs/cb Preliminary Estimates for FY 2016);

Families in education systems (3. Education of Homeless Children and Youth, Consolidated State Performance Report Data. National Center for Homeless Education, University of North Carolina-Greensboro, SY 2016-2017.)

Needs estimate for families in the homelessness system 10-30%: among homeless mothers in Massachusetts, 52% had current major depressive episode, 42.5% had current PTSD, and 28.4% had history of alcohol/drug abuse or dependence (4. Weinreb, L. F., Buckner, J. C., Williams, V., & Nicholson, J. (2006). A Comparison of the Health and Mental Health Status of Homeless Mothers in Worcester, Mass: 1993 and 2003. American Journal of Public Health, 96(8), 1444-1448.)

Indicators of need for families with children in foster care system: 18% repeat involvement with child welfare system; (2) 48.7% of a sample of children in foster care in one California county were found to have been removed from homeless or unstably housed parents (5. Zlotnick C, Kronstadt D, Klee L. Foster care children and family homelessness. American Journal of Public Health. 1998;88(9):1368-1370.); as many as 30% of children in foster care are primarily there due to the lack of housing (6. Harburger, Deborah S., and Ruth A. White. 2004. "Reunifying Families, Cutting Costs: Housing-Child Welfare Partnerships for Permanent Supportive Housing." Child Welfare 83 (5) 493-508.); 37% of families who experienced out-of-home placement were homeless in previous year (7. Courtney M., Dworsky, A., Lee, J., & Raap, M. (2009) Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 23 and 24. Chicago: Chapin Hall at the University of Chicago.); substance use rates ranging from 36-79%, 25% rates of mental health issues, and 15% rates of co-occurrence (8. Amy C. D'Andrade and R. Chambers. "Parental problems, case plan requirements, and service targeting in child welfare reunification" Children and Youth Services Review (2012): 2131-2138.)



CSH estimates that 268,980 people involved with IDD systems have needs consistent with supportive housing. This estimate was developed by examining data drawing from two non-profit databases that compile data from multiple private and public sources including the Centers for Medicare and Medicaid Services and the US Census Bureau. (1, 2) Data on transition to supportive housing is limited for people with developmental disabilities because of the historically high rates of extended family caretaking and institutional placement. CSH applied a preliminary percent need estimate to roughly one third (33%) of census counts in three distinct settings:

- CSH estimates that 33% (72,184) of 216,574 of people living in Intermediate Care Facilities have needs consistent with supportive housing. (3, 4)
- CSH estimates that 33% (40,477) of 121,443 people living in other Medicaid funded group homes have needs consistent with supportive housing. (3, 4)
- CSH estimates that 33% (156,319) of 469,005 people on state waiting lists for services and residential programs have needs consistent with supportive housing. (3, 4)

Census data for intellectual and developmental disability systems: (1. The Case for Inclusion: An Analysis of Medicaid Outcomes for American with Intellectual & Developmental Disabilities. United Cerebral Palsy. Online Database, <http://caseforinclusion.org/data/>, updated May 2016.); and (2. Community and Work Disparities, American with Disabilities Act Participatory Action Research Consortium (ADA-PARC). Online Database, http://centerondisability.org/ada_parc/index.php, updated May 2016.)

Indicators of need: people in institutional care (1. U.S. Department of Health and Human Services. Medicaid Financed Institutional Services: Characteristics of Nursing Home and ICF/IID Residents and their Patterns of Care, August 2013.); and people community settings (2. Easter Seals' Living with Disabilities Study. Harris Interactive. 2010.)



Justice

CSH used census counts of jail, prison, probation and parole systems from the Bureau of Justice Statistics as the primary driver for this needs assessment totaling roughly 1.7MM people incarcerated and 4.6MM people under community supervision at a point in time. CSH then developed estimates of supportive housing need for each system driven by academic studies and reports indicating rates of experiencing homelessness, before and after incarceration, and informed by rates of behavioral, cognitive and primary health issues in custody. CSH assumes a similar profile of people involved with jail and probation, and prison and parole, respectively. However, the needs assessment for supportive housing is applied only to the custodial systems of jail and prison. The community corrections need is being considered as largely captured by homeless systems analysis and a missing data projection of 10% in the overall national supportive housing needs assessment. This, however, may not capture the full need for community corrections and this is an area for further data development. CSH estimates that 19% of people in jail (102,940), and 10% of people in prison (131,621) have needs consistent with supportive housing, for a total supportive housing need projection of 234,561.

Correctional Systems Census Data: Prison (1. Bureau of Justice Statistics. Prisoners in 2016, NCJ 248955); Jail (2. Bureau of Justice Statistics. Census of Jails: Population Changes, 1999-2013 NCJ 248627); Parole and Probation (3. Bureau of Justice Statistics. Probation and Parole in the United States, 2014, NCJ 249057)

Experience of homelessness and jail estimate at 19%: 25% (4. Homelessness and Indicators of Mental Illness among Inmates in New York City's Correctional System. Michaels, D., Zoloth SR, Alcabes P, Braslow CA, Safyer S. Hospital Community Psychiatry, 1992 Feb; 43(2):150-5.); 16% (5. Incarceration Associated with Homelessness, Mental Disorder and Co-occurring Substance Abuse. McNeil D.; Binder, R. & Robinson J.C. Psychiatric Services; July 2005, Vol 56 (7), 840-846.); and 15% (6. Jail Incarceration, Homelessness, and Mental Health: A National Study. Greenberg, G. & Rosenheck, R. Psychiatric Services; February 2008, Vol. 59 No 2, 170-177.)

Experience of homelessness and prison estimate at 10%: 9% (7. Bureau of Justice Statistics. Mental Health and Treatment of Inmates and Probationers, 1999, NJC 174463); 11% (8. Homeless Shelter Use and Reincarceration following Prison Release. Metraux, S. & Culhane, D. Criminology and Public Policy; Volume 3, No 2, 2004, 139-160.); and 10% (9. Métraux and Culhane; David Michaels et al., "Homelessness and indicators of mental illness among inmates in New York City's correctional system." Hospital and Community Psychiatry 43 (2002):150-155.)

Prevalence of clinical conditions for people incarcerated: over 50% of inmates have mental health issues, including 23-30% symptoms of major depression and 24% symptoms of psychotic disorders (10. Bureau of Justice Statistics. Mental Health Problems of Prison and Jail Inmates, 2006, NJC213600); 62% of inmates meet the definition of substance use and 46% meet the definition of substance dependence (11. The National Center on Addiction and Substance Abuse at Columbia University. Behind Bars II: Substance Abuse and America's Prison Population, February 2010); and 25-87% experience of Traumatic Brain Injury (12. National Centers for Disease Control. Traumatic Brain Injury in Prisons and Jails: An Unrecognized Problem, 2007)



Mental Health

CSH estimates that 56,428 identified by the Substance Abuse and Mental Health Services Administration census of residential and institutional care settings for mental health have needs consistent with supportive housing. (1) Data on transition to supportive housing from residential mental health care varies greatly by state and setting although efforts to facilitate are becoming more common nationally. CSH applied a 24% estimate of supportive housing need each of these care settings:

- CSH estimates that 24% (15,176) of the 63,244 people receiving services in institutional care settings have needs consistent with supportive housing. (2, 3)
- CSH estimates that 24% (41,252) of the 171,883 people receiving services in residential care settings have needs with consistent with supportive housing. (2, 3)

Census data for mental health systems: (1. Department of Health and Human Services, Substance Abuse & Mental Health Services Administration. Drug & Alcohol Service Information System, Annual URS Output Tables, 2017.)

Indicators of need: (2. Kuntz, Crystal. Persons with Severe Mental Illness: How do they fit into long term care? Department of Health and Human Services, 1995.); and (3. Schiff, J. W., Schiff, R., and Schneider B. Developing and Estimate of Supported Housing Needs for Persons with Serious Mental Illnesses. International Journal of Population Research. Volume 2014, ID 245024.)

Veterans

CSH estimates that 55% (21,740) of the 39,528 veterans identified by Veterans Affairs Housing and Urban Development as homeless in the annual report to Congress have needs consistent with supportive housing. (1) This is a subset of homeless individuals and families depicted in this national needs assessment. The percent indicator for veterans experiencing homelessness is higher than for other individuals or families and is informed by higher rates of disability advanced age, mental health and substance abuse and dependence. (2, 3) It should be noted that the data pulled for this report is based on the 2017 AHAR and due to high levels of resources and coordinated effort currently directed at ending veteran homelessness, there has been significant progress toward reaching this goal in many states and localities since these numbers have been published. As such, it is feasible to expect significant shifts in these numbers by the 2018 AHAR.

Veteran and homelessness system census data: (1.US Department of Housing and Urban Development, Office of Community Planning and Development, 2017 Annual Homelessness Assessment Report to Congress. December 2017.)

Indicators of need for veterans experiencing homelessness: (2. Veterans and homelessness. Washington, DC: Congressional Research Service. Perl, L., 2015.); and (3. Vital Mission: Ending Homelessness Among Veterans. The Homelessness Research Institute at the National Alliance to End Homelessness, 2007.)

Youth

CSH estimates that 42,944 transition aged youth in the United State have needs consistent with supportive housing. CSH reviewed three primary data sources for the transition aged youth system of care needs assessment:

- CSH estimates that 80% (28,698) of the 36,010 homeless and unaccompanied youth identified by Housing and Urban Development annual report to Congress have needs consistent with non-time-limited supportive housing. (1) This report is supported by the much larger estimates of homeless youth from the Department of Justice and Substance Abuse and Mental Health Services Administration which include homeless youth in families and exceed 1.5 million annually. The percent need was driven by prevalence of mental health, trauma, addiction, and criminal justice involvement. (4)
- CSH estimates that 25% (5,133) of the 20,501 youth identified by the Department of Health and Human Services, Administration for Children and Families as aging out of foster care annually have needs consistent with non-time-limited supportive housing. (2) The percent need was driven by rates of homelessness after exiting foster care, incidence of Post-Traumatic Stress Disorder, trauma, and mental health symptoms. (5, 6, 7, 8, 9) Although this was annualized data, CSH used as a proxy for point in time system capacity due to an average length of stay in the child welfare system of over a year.
- CSH estimates that 20% (9,133) of the 45,573 transition aged youth identified by the Department of Justice, Office of Juvenile Justice and Delinquency Prevention residential census have needs consistent with non-time-limited supportive housing. (3) The percent need was driven by rates of homelessness prior to arrest, mental health symptoms, substance use, and traumatic brain injury. (10, 11, 12, 13)

Transition aged youth systems census data: Homeless and unaccompanied (1. US Department of Housing and Urban Development, Office of Community Planning and Development, 2017 Annual Homelessness Assessment Report to Congress. December 2017); aging out of foster care (2. U.S. Department of Health and Human Services Administration for Children and Families. Child Welfare Outcomes 2016 Report to Congress. AFCARS Foster Care File.); and juvenile justice-involved (3. U.S. Department of Justice. Office of Justice Programs, Office of Justice and Delinquency Prevention. Census of Juveniles in Residential Placement 2013 <http://www.ojjdp.gov/ojstatbb/corrections/qa08401.asp?qaDate=2013>. Released on April 27, 2015.)

Indicators of need for transition aged youth: prevalence of depression, major trauma, PTSD, substance use, and arrest records for homeless unaccompanied youth (4. US Department of Health and Human Services ACYF, Street Outreach Program Data Collection Project. 2016.); prevalence of mental health, substance use, homelessness prior to and after aging out, and PTSD (5. National Youth in Transition Database. July 2014 Data Brief #3.), (6. Jim Casey Youth Opportunities Initiative. Issue Brief: Cost Avoidance, The Business Case for Investing in Youth Aging Out of Foster Care. May 2013.), (7. Midwest Evaluation of the Adult Functioning of Former Foster Youth. Chapin Hall, University of Chicago. 2011.), (8. USICH Supplemental Document to the Federal Strategic Plan to Prevent and End Homelessness: June 2010.), and (9. US Children's Bureau Numbers and Trends 2016: Foster Care Statistics.); and prevalence of mental health, substance use, traumatic brain injury, history of homelessness prior to arrest (10. Shufelt, J. and Cocozza, J., Youth with Mental Health Disorders in the Juvenile Justice System: Results from a Multi-State Prevalence Study. National Center for Mental Health and Juvenile Justice, June 2006.) (11. Cocozza, J. and Skowyra, K. Youth with Mental Health Disorders: Issues and Emerging Responses. Office of Juvenile Justice and Delinquent Prevention, DOJ. Juvenile Justice v7, n1, pp 3-13 2000.), (12. Alemagno, S. et. al. Characteristics of Incarcerated Youth Reporting Homelessness. Journal of Juvenile Justice. Vol.2 Issue 1. 2012), and (13. Feierman, J. et. al. Ten Strategies to Reduce Juvenile Length of Stay. Juvenile Law Center. 2015.)



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