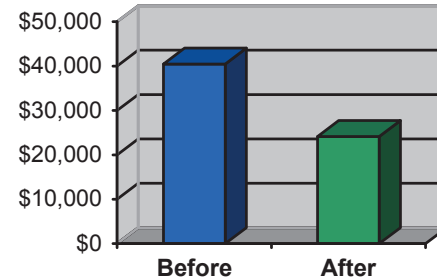




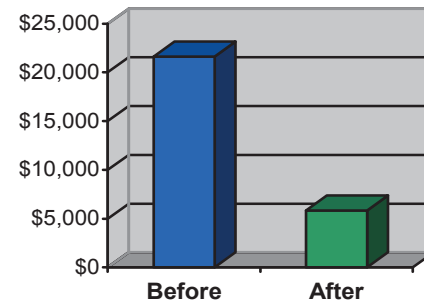
Supportive Housing Reduces Spending on Services

Fifteen studies nationwide show that supportive housing dramatically reduces spending on services for homeless people. Three studies quantify total per-person costs ‘before’ and ‘after’ placement.

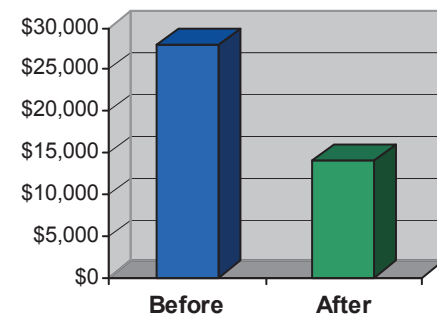
New York, NY: \$16,282 less per unit per year¹



Denver, CO: \$15,773 less per person per year²



Portland, ME: \$14,036 less per person per year³



¹ Culhane, Dennis et al. “Public Service Reductions Associated with Placement of Homeless Persons with Severe Mental Illness in Supportive Housing.” *Housing Policy Debate*, 2002.

² Perlman, Jennifer and John Parvensky. *Cost Benefit Analysis and Program Outcomes Report*. Denver Housing First Collaborative, 2006.

³ Mondello, Melany, et al. *Cost of Homelessness: Cost Analysis of Permanent Supportive Housing*. Corporation for Supportive Housing/Maine Department of Health and Human Services, September 2007.

Supportive housing reduces emergency room costs, detox costs, hospital costs and mental health inpatient costs.

Emergency Rooms: Six studies quantified tenants' average use of emergency room care before and after moving into supportive housing.

San Francisco I ¹	↓ 58%
Seattle I ²	↓ 74%
Chicago ³	↓ 50%
Maine ⁴	↓ 62%
Cape Cod ⁵	↓ 67%
San Francisco II ⁶	↓ 66%

De-Tox: Four studies indicate that once chronic inebriates move into supportive housing, their need for costly detox services practically disappears.

Seattle II ⁷	↓ 87%
Colorado ⁸	↓ 82% (visits)
	↓ 84% (costs)
Minneapolis ⁹	↓ 89%
Seattle I	↓ 97%

Hospitals: As tenants stabilize and begin managing their chronic illnesses, use of hospitals falls sharply, according to seven studies.

San Francisco I	↓ 57%
Colorado	↓ 40%
San Francisco II	↓ 44%
Seattle I	↓ 75%
Chicago	↓ 42%
Maine	↓ 59%
Seattle II	↓ 41%

Psychiatric Inpatient: Once mentally ill homeless tenants are placed in supportive housing, their use of psychiatric inpatient services drops significantly, replaced by on-site services.

Maine	↓ 41%
New York ¹⁰	↓ 60%
Illinois ¹¹	↓ 49%
San Francisco I	↓ 100%

¹ Proscio, Tony. *Supportive Housing and Its Impact on the Public Health Crisis of Homelessness*. Corporation for Supportive Housing, 2000.

² Debra Srebnik, Ph.D. *One Year Outcomes Report for Plymouth on Stewart "Begin at Home" Program*, King County Mental Health and Chemical Abuse and Dependency Services Division, October 2007.

³ *Initial Findings of the Chicago Housing for Health Project*. Presented at National Housing and HIV/AIDS Summit, March 2008.

⁴ Mondello, Melany, et al. *Cost of Homelessness: Cost Analysis of Permanent Supportive Housing*. Corporation for Supportive Housing/Maine Department of Health and Human Services, September 2007.

⁵ Hamilton, Lee M. *Costs Of Homelessness: A Study Of Current and Formerly Chronically Homeless 28 Individuals On Cape Cod, Massachusetts*. Cape Cod Commission, 2009.

⁶ Martinez, Tia E. and Martha R. Burt. "Impact of Permanent Supportive Housing on the Use of Acute Care Health Services by Homeless Adults." *Psychiatric Services*, July 2006.

⁷ *1811 Eastlake: First-Year Preliminary Findings*. Downtown Emergency Service Center, November 2007.

⁸ Perlman, Jennifer and John Parvensky. *Cost Benefit Analysis and Program Outcomes Report*. Denver Housing First Collaborative, 2006.

⁹ Thornquist, Lisa. *Anishinabe Wakiagun Residents' Use of Emergency Services in Hennepin County, MN*. Hennepin County Adult Services Chemical Health Division, 2001.

¹⁰ Culhane, Dennis et al. "Public Service Reductions Associated with Placement of Homeless Persons with Severe Mental Illness in Supportive Housing." *Housing Policy Debate*, 2002.

¹¹ Noqaski, Alyssa, et al. *Supportive Housing in Illinois: A Wise Investment*. The Heartland Alliance Mid-America Institute on Poverty, 2009.