

Homelessness and Mental Illness

Homeless – an individual who lacks a fixed, regular, and adequate nighttime residence.

Mental Illness – a health condition of the brain that results in a disruption in a person’s thinking, feeling, moods, and ability to relate to others.

Homelessness is a growing social injustice in the United States. On any given night, approximately 600,000 Americans are homeless, and more than 2 million people are homeless throughout the year. According to conservative estimates, one-third of people who are homeless have serious mental illnesses, and more than one-half have substance use disorders. Some people with mental illness use chemicals or alcohol to self-medicate in trying to control their symptoms.

Four of the ten leading causes of disability in the United States and other developed countries are mental illnesses, which include major depression, bipolar disorder, schizophrenia, and obsessive-compulsive disorder. Three times as many people died of suicide in Wisconsin in 2000 than were killed by homicides. And, 90% of persons who complete suicide suffer from a mental illness or substance abuse disorder.

According to [Kaiser statehealthfacts.org](http://Kaiser.statehealthfacts.org) **the percent of adults with poor mental health in 2004, for Wisconsin, is 36%**, compared to 33.9% of the United States. Wisconsin males comprise 30.8%, females 41.0%, compared to national percentages of 28.7% for males and 38.8% for females.

Statistics are not available on individuals who are homeless and living with mental illness in Couleecap’s four county service area of Crawford, La Crosse, Monroe, and Vernon. People who are homeless are a transparent population. They may be living with friends, in cars, in tents, under bridges, or in jail. Many have jobs, but social problems or health costs drain them of the finances they need to maintain housing. We hear about them when they get into trouble.

The La Crosse County Housing Commission (LCHC) and the Mental Health Coalition of the Greater La Crosse Area have indicated a high need for housing assistance for persons who are homeless and have a mental illness. This need was identified through groups of professionals who met over the course of a year and discussed needs/concerns in the La Crosse area. The LCHC, a 40-member group of concerned community members, identified housing as one of its top priorities and noted two specific gaps: 1) a disconnect between programs; and 2) a place for mentally ill persons to live who can’t function in a group living setting. Reasons a group setting may be difficult could be if they don’t get along with others, or would rather live in a less restrictive environment provided they have a case worker and can stay on their medications.

The Mental Health Coalition lists as a top concern comprehensive mental health services with re-integration planning (personal financial management, transportation, etc.) along with affordable, quality, community-integrated housing for people living with a mental illness. La Crosse Salvation Army reports that 50% of its residents need mental health care, while approximately 40% of Couleecap’s supportive housing participants are living with a mental illness. In a typical month, Couleecap turns away 10-12 homeless households in La Crosse County due to lack of space and funds. Each year, we provide information and referral services to approximately 350 homeless households that we are unable to serve because we are at capacity.

The Balance of State Continuum of Care – Gaps Analysis survey conducted for one day, September 23, 2005, from various service agencies in Crawford, La Crosse, Monroe, and Vernon counties included the following information:

How many of the persons you served on September 23, 2005 in shelter, with motel vouchers or in transitional housing were in any of the following categories?

Subpopulations Served:

Seriously Mentally Ill	32	Persons with HIV/AIDS	0	Youth	9
Chronic Substance Abuse	84	Victims of Domestic Abuse	44	Veterans	65

Subpopulations served include:	Crawford	La Crosse	Monroe	Vernon
Seriously Mentally Ill:				
• Households with children	0	5	1	0
• Individuals	5	21	6	0
• Persons in households with children (count all persons in the household)	0	12	4	0
Dually Diagnosed: (Serious Mental Illness and Chronic Substance Abuse)				
• Households with children	0	4	1	0
• Individuals	7	14	21	0
• Persons in households with children (count all persons in the household)	0	11	4	0
Chronic Substance Abuse:				
• Households with children	0	0	1	0
• Individuals	8	27	49	0
• Persons in household with children (count all persons in the household)	0	0	4	0

How many of the persons you served on September 23, 2005 in shelter, with motel vouchers, or in transitional housing were in need of any of the following supportive services?

Subpopulations served include:	Crawford	La Crosse	Monroe	Vernon
Mental Health Care:				
• Households with children	0	7	1	0
• Individuals	4	23	39	0
• Persons in households with children (count all persons in the household)	0	22	3	0
Substance Abuse Treatment:				
• Households with children	0	4	0	0
• Individuals	8	13	7	0
• Persons in households with children (count all persons in the household)	0	12	0	0

Tenant Based Rental Assistance

Coulecap recently received funding to operate a Tenant Based Rental Assistance (TBRA) program in Crawford, La Crosse (excluding the City of La Crosse), Monroe, and Vernon counties. This program provides rental assistance and security deposits for individuals or households that are homeless and living with a serious mental illness, or co-occurring mental illness and substance use disorders. Participants will be provided with housing in scattered-site leased apartments. Case management services will be provided through county Human Services. Participants will be required to pay 30% of their income towards rent. At least 90% of the rental units will be used to serve households at or below 60% of County Median Income. The overall objective is to locate hard-to-serve persons, engage them in services, help them secure housing, provide services so they maintain housing and stabilize, and help them find other subsidized or unsubsidized housing.

New Hope Programs

New Hope is a housing program operated by Couleecap that works with people who have physical and/or mental disabilities. The majority of people in the New Hope programs have a dual diagnosis with chemical dependency, a common occurrence for people with disabilities because they often self-medicate in hopes of alleviating their pain.

In New Hope, participants have a wide variety of abilities. Joan (not her real name) has been in the program for three years. She is the mother of two teenage children and she has schizophrenia. Prior to entering the New Hope program, she had not lived in an apartment for more than six months at a time. She didn't feel safe in any neighborhood. Joan has now been living in her current home for three years, and there is no indication that she feels unsafe or has a need to move. Four months ago, she took over her own finances. Previously an appointed representative handled her income and paid her bills. She is starting to apply for employment and looking into attending cosmetology school, which is a big step for her. A long-term goal is to finish school and start a business. A year ago her oldest child was not attending school and at risk of dropping out. This December her daughter will be graduating from high school and is planning on going to school at Winona Technical College.

People who are homeless and living with mental illness encounter many barriers and challenges. Emergency shelters and transitional housing programs may be ill-prepared to meet their needs. Medical and benefits advocacy may not be available to clients needing these services. People experiencing active symptoms may be asked to leave housing prematurely or not be admitted to housing programs. Staff may have limited training in identifying and working with people who are homeless and living with a mental illness.

Couleecap will continue to be a leader in providing housing options to low-income people. We will continue to search for funding in collaboration with county agencies and local organizations to fill the gaps that exist.

What you can do to make a difference

EDUCATE....yourself, family, friends, colleagues, and community on the causes and solutions to homelessness and mental illness.

ENGAGE IN ADVOCACY....for policies and programs that effectively serve people who are homeless and living with mental illness on the local, state, and federal levels.

ASK....when you wish to donate goods and services. Find out what people and service providers could really use. Call housing organizations and other service agencies for their *wish lists*, and encourage your family and community to make a donation.

VOLUNTEER....your time and ideas to programs within your community and neighboring areas.

Couleecap, Inc. is a private non-profit 501(c)3 charitable organization created in 1966. Our four-county service area includes Crawford, La Crosse, Monroe, and Vernon counties in Wisconsin. For more than 39 years, we have been helping low-income people build on their strengths and become more self-sufficient. We operate over 30 programs in the areas of housing, family and youth services, and emergency services.

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References:

Balance of State Continuum of Care – Gaps Analysis, Data from September 23, 2005

Kaiser statehealthfacts.org

La Crosse County Housing Commission

Mental Health Coalition of the Greater La Crosse Area

National Mental Health Association

National Alliance to End Homelessness

Salvation Army

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