

Community Snapshot

San Francisco



July 2005

THE NATIONAL ALLIANCE TO END HOMELESSNESS

Progress in Ending Homelessness

San Francisco's Department of Public Health began a permanent supportive housing program in 1998 called Direct Access to Housing. Instead of providing services while people are homeless, Direct Access helps people move quickly into permanent stable housing and provides the services necessary for them to maintain their housing and make progress toward recovery and self-sufficiency. The program provides housing for about 600 formerly homeless people, most of whom have mental health, substance abuse, and chronic medical conditions. In addition to providing permanent housing and improved care, the program produces a substantial reduction in emergency room utilization and incarceration among its residents. Building on the success of Direct Access, the Department of Human Services began implementing the Housing First program the following year. The Housing First program provides permanent housing and supportive services to people living on the streets and in shelters who were receiving cash assistance from the city. The Housing First Program became the cornerstone of the implementation of the Care Not Cash Program, a local welfare reform measure that provided housing and services in lieu of cash to homeless single adults. The Care Not Cash Program has housed over 900 formerly homeless single adults since its implementation in May of 2004.

Efforts to end chronic homelessness continued in 2004, when a planning committee appointed by the mayor and 126 community-based organizations developed The *San Francisco Plan to Abolish Chronic Homelessness*. Guided by the principles of interagency collaboration and reprioritization of funds, the Ten Year Planning Council charted a course to develop 3,000 units of permanent supportive housing and make systematic changes to transform homeless assistance. In addition to the focus on permanent housing, San Francisco's plan involved a commitment to homelessness prevention that includes:

From 2002 - 2005, chronic homelessness in San Francisco dropped 28 percent.

- Improving discharge planning so that people who exit institutions like jails, prisons, and psychiatric hospitals do not become homeless;
- Expanding housing options for people with mental illness;
- Developing more housing options for former foster care and homeless youth;
- Expanding eviction prevention services;
- Coordinating mainstream and veteran specific services and increasing housing options for veterans; and
- Increasing the capacity of substance abuse treatment programs so they can serve more homeless people.

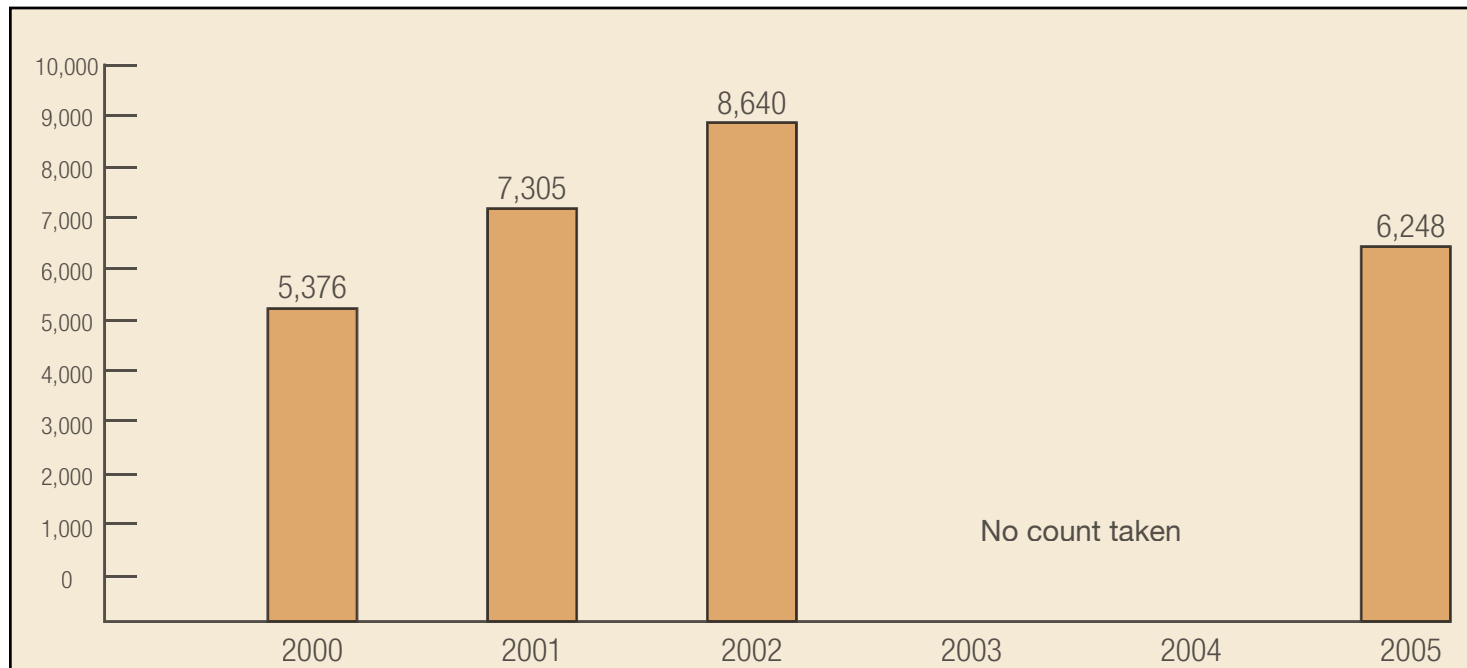
Key Initiatives

The ten-year plan highlights a few key initiatives:

- *Housing First*. The city is refining all homeless services for the chronically homeless to operate in the context of permanent supportive housing. 24-hour crisis clinics and sobering centers will replace shelters and transitional housing. City officials believe that immediately placing homeless individuals in permanent supportive housing and providing supportive services is the most effective method of ending chronic homelessness.
- *Redirect Funds*. The ten-year plan commits to finding new money, but also places emphasis on redirecting funding. The plan recommends more funding be directed to options that provide permanent supportive housing. Seven city departments that directly spend homeless dollars are streamlining funds and collaborating on initiatives to end chronic homelessness.



Exhibit 1. Homeless People in San Francisco



Source: City of San Francisco

Outcomes

The city's focus on using permanent housing to end chronic homelessness is beginning to show results. According to data from the annual point-in-time estimates, from 2002 to 2005 the number of homeless people dropped from 8,640 to 6,248, a decline of 28 percent (see exhibit 1).

Over the past year, the city's Housing First initiative housed over 900 people. It is also proving to be cost effective. An analysis of system expenditures showed that the city currently spends \$61,000 per year for emergency room services and incarceration for each chronically homeless person. Providing permanent supportive housing costs the city approximately \$16,000 per year, and results in much better health and housing outcomes for individuals.

Homeless people are coming in off the street. Over the last two years, street homelessness declined by 40 percent (from 4,535 to 2,655). During 2004, 101 homeless people died because of exposure to harsh

weather and untreated health complications. Although this is still far too high, it represents a 40 percent reduction from 169 the year before.

Across the country, communities are making progress in ending homelessness. The National Alliance to End Homelessness *Community Snapshot Series* highlights strategies, programs and innovations in these communities. To learn how to end homelessness in ten years, visit www.endhomelessness.org.

The National Alliance to End Homelessness is a nonprofit organization dedicated to solving the problem of homelessness and preventing its continued growth. Our mission is to mobilize all sectors of society in an alliance to end homelessness.