

MEMO TO: MHSOAC
DATE: June 14, 2008
FROM: NAMI CALIFORNIA
PURPOSE: Feedback on MHSA Implementation for July 24 OAC Meeting

MHSA HOUSING

Many NAMI families are currently housing ill family members in their family homes or fully paying for housing elsewhere. These families are in dire need of relief and support. Individuals with mental illness and co-occurring disorders, who are living at home or who are dependent upon the financial underwriting of their families, are “at-risk” of homelessness when supporting families exhaust their emotional and financial resources and can no longer provide housing for the family member.

NAMI California is concerned about “at-risk” target populations, including individuals housed by their families, in the MHSA Housing program for the following reasons:

- During his presentation at the June MHSOAC meeting, Jonathan Hunter, Managing Director, Western Region, Corporation for Supportive Housing, recommended that MHSA housing be focused on current homeless populations.
- The OAC needs to be cognizant of the fact that the DMH Housing Review Tool does not mention “at-risk” populations. Without this focus in the review tool, “at-risk” populations are in jeopardy of becoming at-risk of being overlooked or discounted – at both the state and county levels.
- The language that is supposed to include “at-risk” populations does not specifically mention that “at-risk” populations can be populations who are currently housed by their families or others:
 - (v) Certification by the county mental health director as an individual who has been assessed by and is receiving services from the county mental health department and who has been deemed to be at imminent risk of being homeless.*
- Housing assistance is currently reserved for those in MHSA Full Service Partnerships which adds to the two-tiered system of care.
- For evaluation purposes, it is less complicated for counties to report “We’ve moved 100 people off the street into supported housing,” than to say “We’ve moved 50 people off the street into supported housing and 50 people “at-risk” of losing their current housing into supported housing.” This is a subtle incentive for counties to focus only on the currently homeless.
- It is not clear that “at-risk” language that includes individuals housed by families can be incorporated into the Integrated Plan.

NAMI California asks the MHSOAC to keep these considerations uppermost in their ongoing oversight of the MHSA Housing program and that the Commission makes recommendations for changes that address the concerns outlined above.

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Santa Clara County has cut the mental health budget each of the last 6 or 7 years. For the current fiscal year the cut was about \$16.8 million. The proposed cut for the coming fiscal year is \$8 million. The County is in deep financial crisis with no end in sight. The expectation is for continuing cuts in MH for the next several years. These cuts are deeply affecting the mental health infrastructure and, of course, reducing services to very ill persons. Of course, they also play havoc with the careers, morale, and dedication of mental health professionals. The support from federal and state dollars has diminished. We all know the financial trouble that the state is in and the feds are spending hundreds of billions on an unpopular war. So there is little prospect for increased state and fed dollars coming to the County.

The one thing that keeps the situation from being an almost total collapse is the MHSA funds. SCC expects around \$20 million in MHSA funds next fiscal year. So in dollars this will offset much of the \$24.8 million cut over from fiscal 07 to fiscal 09. As you know MHSA moneys are to be for "new" programs. So we really are "transforming" the system, cutting old programs and introducing new ones. It is far from clear, however, that there is any net improvement. I believe that most of the new programs are worthwhile, but then most of the old ones were as well. We are just shuffling chairs, if not on the Titanic, on a large ship listing sharply with many people falling overboard.

One example to illustrate what is happening in Santa Clara County. We are spending substantial MHSA money to provide housing for the homeless mentally ill. But with all of the other MHD cuts certain, we are creating new homeless as more ill persons slide off the listing ship because their lifeline is no longer available. Although we could never prove it conclusively, I suspect that we are creating new homeless people at least as fast as we create housing for the current homeless.

Riverside County is doing a very commendable effort with the Housing portion of MHSA funds. A 25 bed safe haven is up and running in Riverside and another is to be built in the Coachella Valley. Two projects with 15 apartments each within a 150 unit project are approved (one a senior project) to start construction very soon.

A lot of services are being cut because of the State Budget, and employees are being moved into MHSA created projects to protect their jobs. (Not sure if this is a good or bad thing) Either way our clients are seeing a lot less services.

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