

Housing Availability for People with Mental Disorders

Summarized by Thomas T. Thomas

Finding affordable housing in a safe neighborhood is a top priority for anyone with schizophrenia or other serious mental disorder. At our November 18 meeting, a panel of local housing experts discussed availability and eligibility issues in Alameda County. These experts included:

- **Karen Euston**, Housing Assistance Manager, Oakland Housing Authority (OHA)
- **Suzanne Gorham**, MFCC, Director of Case Management Services and Supported Independent Living Program, Bay Area Community Services (BACS)
- **Azikiwe Nantambu**, Services Coordinator and Manager, Berkeley Housing, Integrated Services Team, Building Opportunities for Self-Sufficiency (BOSS)

Karen Euston explained that OHA, like the Alameda County Housing Authority for which she used to work, is predominantly funded by the Department of Housing and Urban Development (HUD) through Section VIII certificates. These are for low-income people, although anyone on Supplemental Security Income (SSI) automatically qualifies. With the certificate, the recipient pays an amount equal to 30 percent of his or her monthly income for rent and utilities, and HUD pays the rest. Once you qualify for the program in one place, say in Oakland, you can generally use the certificate wherever you happen to live, unless special service requirements or other circumstances apply.

OHA currently runs a program, called Shelter Plus, for people who either are now or have a recent history of homelessness, and who also qualify as “hard to serve” by their drug and alcohol abuse, severe mental illness, or HIV or AIDS status. Unfortunately, Euston said, their program has a 10-year waiting list. OHA recently opened for one day to accept new applicants—who had to appear in person at the Oakland Coliseum—and received 14,000 applications, of which 12,000 were ultimately found to be viable.

Euston was excited about a new HUD program, called Mainstream, for people with disabilities as defined by the Social Security Act, including blindness, physical handicap, and severe mental illness. “We just found out that we have funding for 100 new Section VIII applications for Oakland under this program,” she said. “We hope Berkeley and the rest of Alameda County come through with their own applications.” She noted that Contra Costa County had received 200 applications.

Clearly, HUD-supported housing opportunities are currently very limited. “That’s a shame,” Euston said, “because Berkeley, and this whole area, used to be superb at helping people.”

She finished her remarks by noting that it was her experience that providing housing with services was the key to helping the applicant stay housed. The Mainstream program funding does include money for such services.

Suzanne Gorham said that her organization, BACS, also provides services, including case management and assistance with daily tasks like shopping and getting to appointments. Case managers are on call 24 hours a day by pager. However, in general, residents must be able to manage by themselves. BACS rent subsidies run to about \$350 per person.

BACS runs three houses in Oakland and single houses in Castro Valley, Pleasanton, Livermore, and other towns throughout Alameda County, totaling about 50 beds. BACS tries to locate its facilities close to bus lines and BART. Each house provides recipients with their own bedroom for privacy but otherwise offers communal living arrangements (except in apartments), and everyone has an assigned chore. BACS also manages about 100 other people in board-and-care facilities and hotels.

Azikiwe Nantambu, of BOSS, said he coordinates housing services at four sites in Berkeley and works with the Shelter Plus program as well. He said the new HUD funding includes money for services like substance abuse treatment and psychiatric assessments, all free to the client.

BOSS has expectations of its clients: the mentally ill must continue to see their therapist and take their medications; substance abusers must work on their problem. Case managers are on hand to monitor their progress. "But we don't police anyone to the point of discomfort," Nantambu said. "The goal is to keep the client in housing."

BOSS specializes in "transitional housing"—that is, helping the homeless get off the street, or the mentally ill to stabilize their lives after a relapse. "We train caterpillars to become butterflies," Nantambu said.

For the remainder of the evening, the experts fielded questions from the audience. Here's a sample:

How does one apply for these 100 new Mainstream applications for Section VIII housing?

That is still being determined, so it is too soon for individuals to take action. OHA submitted its grant request in collaboration with several local outreach agencies, which did not include ASA-AMI. However, Berkeley's Center for Independent Living was included, and they are a good source of advice and information.

People with schizophrenia don't always have much personal insight or control. How real are these opportunities for them?

Recipients have to feel they can accept independent housing and independent living. The vision for supported housing covers a variety of options, from money that pays the rent to intensely supported living conditions and group housing. That vision is not always a reality, but we're working on it.

What is your ratio of case managers to clients?

For BOSS, it's one psychiatrist on site four hours a week who cares for 135 people. BACS runs service teams of 2.5 full-time equivalent case managers for 100 clients, or about one professional for each 40 people. BACS also has a psychiatrist

available for 15 hours a week who sees about 60 people and bills the cost to MediCal.

The unfortunate reality is that 70 percent of people in subsidized housing are categorized as “dual diagnosis”—that is, they have a mental illness and a substance abuse problem. Many are “triple diagnosis,” which adds HIV and AIDS.

What is the NIMBY (Not in My Back Yard) factor in placing residents in subsidized housing?

BOSS has been successful in going back to the community and showing that these clients are getting their lives together.

OHA’s experience has been that landlords like the idea of housing with supportive services, because the clients are stable, which means lower turnover.

How involved are family members in these services?

The more support a person has, the better. Having the family involved in the client’s housing choices and care helps a lot. “We need to work together,” was the consensus among the experts.