

Mental health housing reform must be Spitzer priority

Carol Booth / Guest Column Ithaca Journal November 30, 2006

The progressive, upstate community of Ithaca hosted the first governor's debate in September. Unfortunately, the two questions and one back-up question that The Ithaca Journal had selected to ask the candidates were rejected by the New York 1 News Media group in New York City, the organizers of this debate. My question, related to the desperate need for supportive mental health housing with services, was one of the two rejected for the following reason: this question is too narrow to be of state-wide interest.

Given the fact that one out of five people will experience a mental illness in his or her lifetime and that one out of every two New Yorkers with mental illness is currently struggling to find community-based housing with services, Gov. Eliot Spitzer must make mental health housing reform a top priority for his administration. More than 200,000 New Yorkers are struggling with a serious mental illness right now — from Buffalo to Ithaca to Long Island.

The National Alliance on Mental Illness represents families and friends of individuals struggling with mental illnesses — major depression, bipolar disorder, schizophrenia and anxiety disorders — among others. The shortage of affordable housing and services is the number one issue facing NAMI-NYS members. Thousands of people with major mental illnesses are living with their family members, but as they get older, family members are no longer able to provide the level of care that their loved ones need. Others are homeless, aging out of foster homes and shuffled in and out of adult homes, hospitals and jails. Safe, affordable housing with supportive services such as case management, job training, counseling and social activities all increase the chances of recovery for people with mental illnesses. A house, a friend and a job — that's what is needed.

People with serious mental illnesses have a chance of recovery and can live more independently if they have appropriate housing in the community. However, in New York the demand for such housing is seriously outpacing the supply. The cost of leaving people homeless and relying on emergency interventions is far more expensive than reinvesting funds in supportive, community housing. The cost of jails and state and community hospitals, for example, can be upwards of

\$300,000 per year. Even the most expensive type of supportive housing, which provides the highest level of services to its residents, is only about \$40,000 per year. In addition, there are many types of mental health housing, particularly upstate, supported housing apartments in Central New York State, which cost only \$8,000 per year.

It's time New York approached mental health housing in a smarter, more effective and humane way.

The New York State Campaign for Mental Health Housing (NAMI-NYS is one of many members) is working to increase access to affordable housing for people with mental illnesses: Reforming existing models and programs to meet the complex needs of the residents being served; preserving approximately 30,000 existing units of supportive and licensed housing; developing approximately 35,000 units of mental health housing statewide over the next 10 years; passing a mental health housing waiting list law to accurately assess the unmet need for housing in New York state and provide a tool for the state to ensure wise investment.

We must redirect funds from costly institutional settings and emergency interventions to the development of more community housing units and to the preservation and reform of existing supportive housing to meet the challenges of caring for people struggling with mental illnesses. A mental health housing waiting list would provide information to state policymakers and would ensure that state dollars are spent more wisely on housing that makes a difference, rather than on emergency services like shelters and hospital rooms.

The time for change is now. Spitzer should embrace efforts to help people with mental illnesses lead more independent, fulfilling lives and should redirect state funding away from expensive emergency services and toward housing (with services) that really makes a difference.