

**Minutes**  
**Homeless Taskforce**  
**September 6, 2006**  
**United Way 245 N. Water**  
**7:00 – 8:30 am**

**Taskforce Members:**

Rev. Cheryl Jefferson Bell  Sue Castille  Gypsy Claar  Connie Dietz  Jack Focht  
 Patrick Hanrahan  Lou Heldman  Bernie Hudspeth  Bishop Michael Jackels  
 Bishop Scott Jones  Steve Martens  Janet L. Miller  Tim Norton  
 Marsha Stanyer  Mary K. Vaughn

Ex officio members:  Winston Brooks  Bill Buchanan  George Kolb

Staff:  Jenni Gluszek  Beth Oaks  Jeff Porter  Gloria Summers

**Welcome**

Jack Focht called the meeting to order at 7 a.m.

**New Business**

**COMCARE Presentation**

Debbie Donaldson, Director of Human Services - Sedgwick County, gave a presentation over the services the County provides to the homeless population (see attached handout). Part of the presentation covered the overflow shelter which serves approximately 70 individuals on a daily basis during the winter. The shelter is funded through a partnership between Sedgwick County, City of Wichita and United Way. The funding used is primarily spent on staff and some supplies, such as cots.

Discussed what COMCARE does for individuals who need inpatient psychiatric services. These clients are served by Via Christi b/c they have a psych unit. If the individual has been adjudicated and is deemed a danger to himself or others, Sedgwick County will pay for services, as long as the person receives inpatient care within the County. Otherwise he/she will be sent to the state hospital.

The impact of state hospital and in-patient alcohol and drug treatment center closures was discussed. Budgets for COMCARE and other community mental health centers had to increase significantly when this occurred.

Wichita liquor tax funds are used to pay for homeless individuals to seek detox treatment at Parallax.

Focht brought up the point that COMCARE would be more successful providing services if homeless individuals had housing and were not living on the street. Donaldson agreed but stated case managers have a good sense of where to find these individuals. Finally, community outreach programs which seek to identify homeless individuals were discussed. In addition to the outreach efforts of COMCARE – Homeless Program (Center City), primary outreach is done by the Wichita Children’s Home and Inter-Faith Ministries, as well as through informal networking where USD 259 liaisons talk to homeless kids about other homeless kids. The “no wrong door” approach is embraced.

## **USD 259 Presentation**

Sue Steele, USD 259 Educational Coordinator, presented on her role as a liaison between homeless students/families and the school district. Steele stressed the students she serves are not counted in the “chronic” population; the problem is bigger than that. Health and education consider those who “double up” as homeless, whereas HUD recognizes only those living in transitional housing or shelters. In 2005-2006, there were 825 students in a homeless situation with 550 in grades K-12. While these numbers seem to be increasing annually, Steele does not believe the numbers are increasing but that homeless students are being tracked better.

The biggest portion of Steele’s job includes coordinating transportation for these students back to their “school of origin” (the school they started classes at before becoming displaced, which may or may not be within the USD 259 district). Five to six years ago the 259 BOE agreed to pay for this service which is a considerable budgetary item: \$25,000 alone for taxis which are used 3-5 days per student, while bus routes are rerouted. Schools of origin are preferred because this causes the least disruption in a student’s educational experience. Due to shelter locations, the schools most affected by homelessness are Black, Hadley, Robinson, East, Marshall, North and Washington. Within the first three weeks of school, there are already 81 identified homeless students for 06-07.

When asked the 2-3 main reasons the families fall into homelessness, Steele responded that it’s a variety of causes which spiral into a crisis. Whether the initial issue is a parent being laid off, underemployment, etc varies.

## **Planning Process**

Currently the taskforce is in the first stage of planning. During this stage, education occurs through local research and presentations. Suggestions for future speakers include representatives from the Wichita Police Department, the city library, local shelters, emergency rooms and clinics, the foster care system, Veterans Association and corrections. It was also suggested that Richard Baron or another expert on low-income housing address the group since a lack of low-income housing appears to be a major cause of homelessness. Speakers will be asked to address the top 2-3 causes for homelessness within the population they see. After enough information has been gathered on the local community, the taskforce will begin looking at other communities.

## **Future Meetings**

In keeping with bi-weekly Wednesday mornings meetings, the next meeting will be Wednesday September 20, 2006 from 7-8:30 a.m. The meeting will be in the United Way of the Plains Board Room, 245 N. Water. Meetings are open to the public.

## **Adjournment**

Having no other business the meeting was adjourned at 8:34 a.m.

## **A Plan, Not A Dream: How to End Homelessness in Ten Years**

### **The Cost of Homelessness**

For mayors, city councils and even homeless providers it often seems that placing homeless people in shelters, while not the most desirable course, is at least the most inexpensive way of meeting basic needs. This is deceptive. The cost of homelessness can be quite high, particularly for those with chronic illnesses. Because they have no regular place to stay, people who are homeless use a variety of public systems in an inefficient and costly way. Preventing a homeless episode, or ensuring a speedy transition into stable permanent housing can result in a significant cost savings.

Following are some of the ways in which homelessness can be costly.

#### **Hospitalization and Medical Treatment**

People who are homeless are more likely to access costly health care services.

- According to a report in the New England Journal of Medicine, homeless people spent an average of **four days longer per hospital visit** than did comparable non-homeless people. This extra cost, approximately \$2,414 per hospitalization, is attributable to homelessness.<sup>1</sup>
- A study of hospital admissions of homeless people in Hawaii revealed that 1,751 adults were responsible for 564 hospitalizations and \$4 million in admission cost. Their rate of psychiatric hospitalization was over 100 times their non-homeless cohort. The researchers conducting the study estimate that the **excess cost for treating these homeless individuals was \$3.5 million** or about \$2,000 per person.<sup>2</sup>

Homelessness both causes and results from serious health care issues, including addictive disorders<sup>3</sup>. Treating homeless people for drug and alcohol related illnesses in less than optimal conditions is expensive. Substance abuse increases the risk of incarceration and HIV exposure, and it is itself a substantial cost to our medical system.

- Physician and health care expert Michael Siegel found that the average cost to cure an alcohol related illness is approximately \$10,660. Another study found that the average cost to California Hospitals of treating a substance abuser is about \$8,360 for those in treatment, and \$14,740 for those who are not.<sup>4</sup>

#### **Prisons and Jails**

People who are homeless spend more time in jail or prison -- sometimes for crimes such as loitering -- which is tremendously costly.

- According to a University of Texas two-year survey of homeless individuals, each person **cost the taxpayers \$14,480** per year, primarily for overnight jail.<sup>5</sup>
- A typical cost of a prison bed in a state or federal prison is **\$20,000** per year<sup>6</sup>

#### **Emergency Shelter**

Emergency shelter is a costly alternative to permanent housing. While it is sometimes necessary for short-term crises, it too often serves as long-term housing. The cost of an emergency shelter bed funded by HUD's

Emergency Shelter Grants program is approximately **\$8,067,<sup>7</sup> more than the average annual cost of a federal housing subsidy** (Section 8 Housing Certificate).

### **Lost Opportunity**

Perhaps the most difficult cost to quantify is the loss of future productivity. Decreased health and more time spent in jails or prisons, means that homeless people have more obstacles to contributing to society through their work and creativity. Homeless children also face barriers to education.

Dr. Yvonne Rafferty, of Pace University, wrote an article which compiled earlier research on the education of homeless children, including the following findings:

- Fox, Barnett, Davies, and Bird 1990: 79% of 49 homeless children in NYC scored at or below the 10th percentile for children of the same age in the general population.
- 1993: 13% of 157 students in the sixth grade scored at or above grade level in reading ability, compared with 37% of all fifth graders taking the same test.
- Maza and Hall 1990: 43% of children of 163 families were not attending school.
- Rafferty 1991: attendance rate for homeless students is 51%, vs. 84% for general population.
- NYC Public Schools 1991: 15% of 368 homeless students were long-term absentee vs. 3.5% general population.<sup>8</sup>

Because many homeless children have such poor education experiences, their future productivity and career prospects may suffer. This makes the effects of homelessness much longer lasting than just the time spent in shelters.

<sup>1</sup>Salit S.A., Kuhn E.M., Hartz A.J., Vu J.M., Mosso A.L. Hospitalization costs associated with homelessness in New York City. *New England Journal of Medicine* 1998; 338: 1734-1740.

<sup>2</sup>Martell J.V., Seitz R.S., Harada J.K., Kobayashi J., Sasaki V.K., Wong C. Hospitalization in an urban homeless population: the Honolulu Urban Homeless Project. *Annals of Internal Medicine* 1992; 116:299-303.

<sup>3</sup>Rosenheck, R., Bassuk, E., Salomon, A., Special Populations of Homeless Americans, *Practical Lessons: The 1998 National Symposium on Homelessness Research*, US Department of Housing and Urban Development, US Department of Health and Human Services, August, 1999.

<sup>4</sup>From the website of the National Law Center on Homelessness and Poverty, May 8, 2000.

<sup>5</sup>Diamond, Pamela and Steven B. Schneid, *Lives in the Shadows: Some of the Costs and Consequences of a "Non-System" of Care*. Hogg Foundation for Mental Health, University of Texas, Austin, TX, 1991.

<sup>6</sup>Slevin, Peter, *Life After Prison: Lack of Services Has High Price*. *The Washington Post*, April 24, 2000.

<sup>7</sup>Office of Policy Development and Research, U.S. Department of Housing and Urban Development, *Evaluation of the Emergency Shelter Grants Program, Volume 1: Findings* September 1994. p 91.

<sup>8</sup>Rafferty, Yvonne *The Legal Rights and Educational Problems of Homeless Children and Youth* pp 42-45. As reported on the website of the National Law Center on Homelessness and Poverty, May 8, 2000.