ALBUQUERQUE HEALTH CARE FOR THE HOMELESS

Interim Legislative Health and Human Services
Committee
September 15, 2021



Albuquerque Health Care for the Homeless (AHCH)

- Albuquerque was one of the original 19 cities nationwide to participate in the pilot and develop the Health Care for the Homeless (HCH) model in 1985.
- AHCH is a freestanding Federally Qualified Health Center (FQHC) and standalone 330(h) HCH project.
- Provides integrated primary medical and dental, behavioral health and social services through extensive outreach and at its central services campus.









AHCH

- Over 100 staff
- Serves nearly 7,000 people without homes each year.
- Serves exclusively people without homes, 95-98% at or below 100% Federal Poverty Line.
- NM expanded Medicaid in 2014. Clients were traditionally 85-95% uninsured, now that is flipped.

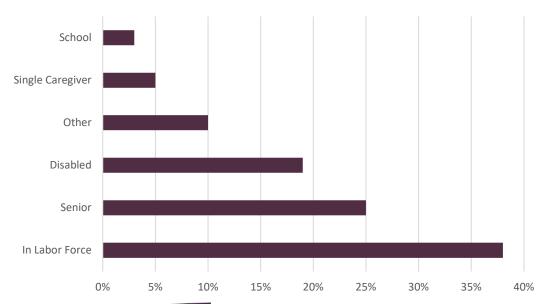




Housing and Homelessness in New Mexico

- New Mexico had <u>the highest increase in homelessness</u> in the country in 2019 at 27%
- In 2020 New Mexico had the <u>highest rate of chronic homelessness</u> at 51%
- 37.8% of people experiencing homelessness in New Mexico are unsheltered

New Mexico Extremly Low Income Renter Households



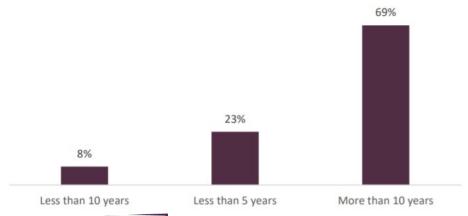


Source: National Low Income Housing Coalition

Housing and Homelessness in New Mexico

- Increasing numbers of seniors in AHCH census
 - Steady increase from 5% of AHCH census in 2016 to 7% 2020
- Increasing numbers of families and lack of options for families experiencing homeless
- Disproportionate impact on Native Americans
 - See Homeless Mortality Data
 - AHCH Census 11% of AHCH population, while Native Americans make up <u>4.6% of the population</u> in Albuquerque
 AHCH Clients

Living in NM Status 2019





COVID-19 and Housing Instability

- The <u>Economic Roundtable</u> projects that over the next four years, fallout from the pandemic is expected to cause chronic homelessness to climb 49% nationwide.
 - There are **63,823 <u>extremely low-income</u> (ELI)* renter households** in New Mexico and only 33,669 affordable and available units for these renters
 - 42,123 ELI households in New Mexico are <u>severely cost burdened</u>** and at immediate risk of homelessness
 - 15,500-unit gap for renters with extremely low incomes (ELI) In Albuquerque alone
 - "Just adding shelter beds to the existing capacity will not, by itself, bring
 people in from unsheltered sleeping arrangements to seek shelter."

 <u>Unsheltered homelessness has grown</u> despite unused bed capacity at the
 City's largest emergency shelter.

*Extremely low-income renters: income between 0 to 30% of Area Median Income

**Severely Cost Burdened: Paying more than 50% of income towards rent.

***stats are pre-pandemic



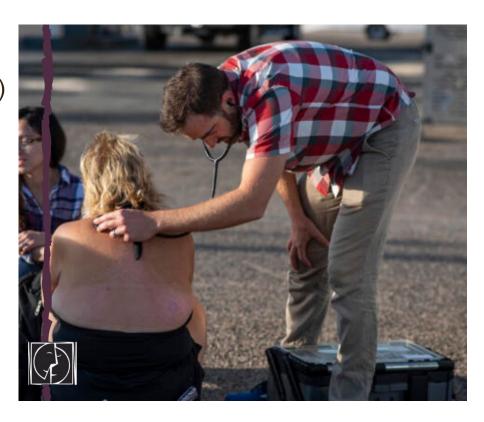
AHCH COVID-19 Response

- HCHs have an essential role in bridging the gap between homeless assistance providers and public health:
 - Provide technical assistance and training to homeless services providers
 - Provide health care expertise to homeless services providers
 - Share policy and practice recommendations
- Systems development with long-standing and emerging strategic alliances
- Support to shelters, new isolation spaces, lead on coordinated outreach
- Emergency Room coordination on street medicine outreach
- Increased coordination with New Mexico Department of Health facilitated coordinated universal testing of smaller shelter sites and high-risk populations



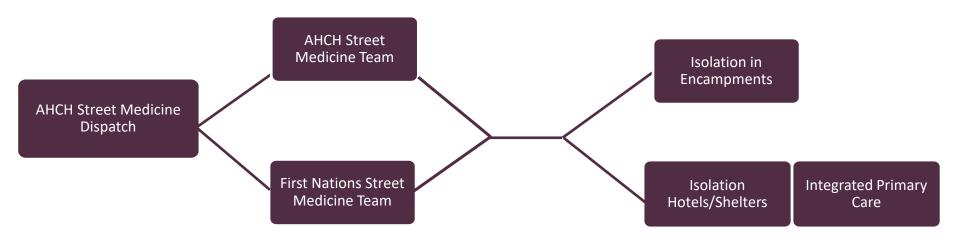
AHCH COVID-19 Response

- COVID-specific street medicine outreaches
- Increased staff deployment to the field (street, shelters, hotels)
- Emphasis on engagement, meeting people where they are, and COVID-19 education
- Integrated primary care at shelters and isolation hotels through extensive collaboration
- Social services and BH teams central to coordinated response
- Mobile COVID-19 testing and vaccines





COVID-19 Street Medicine Response System



AHCH mobilized street medicine response team through increased coordination with city, shelters, and emergency departments, to respond to rough sleepers affected by the pandemic.

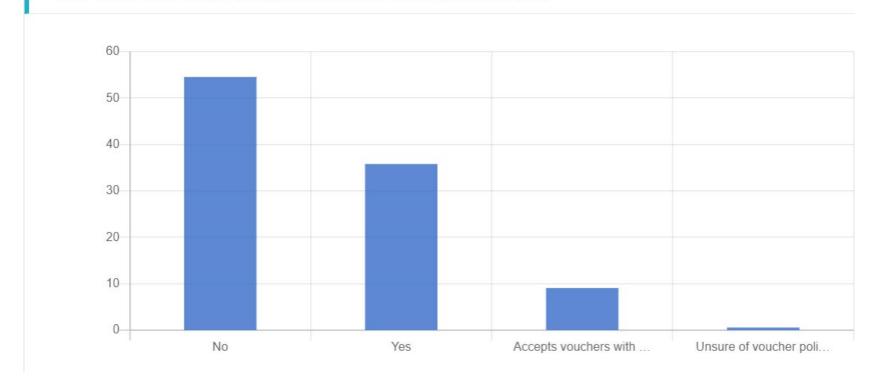
Isolation sites have proved the need and efficacy of the national <u>Medical</u> <u>Respite Care</u> model.



Decreasing Stock of Affordable Housing

Do you accept housing vouchers?

TYPE: "SELECT ONE". 176 out of 176 respondents answered this question. (0 were without data.)

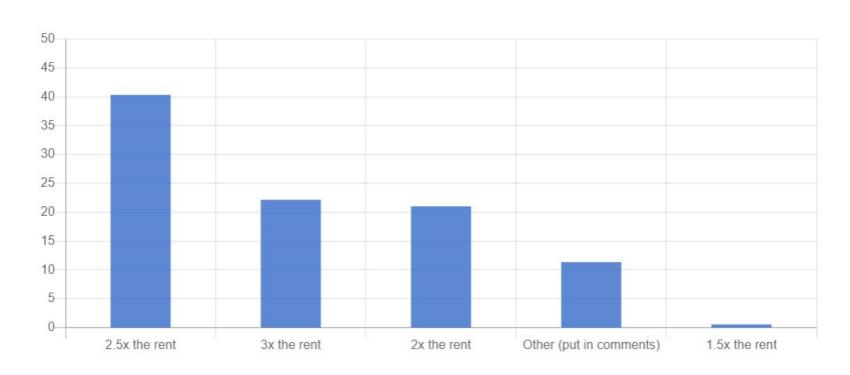




Decreasing Stock of Affordable Housing

Income requirements

TYPE: "SELECT_ONE". 168 out of 176 respondents answered this question. (8 were without data.)

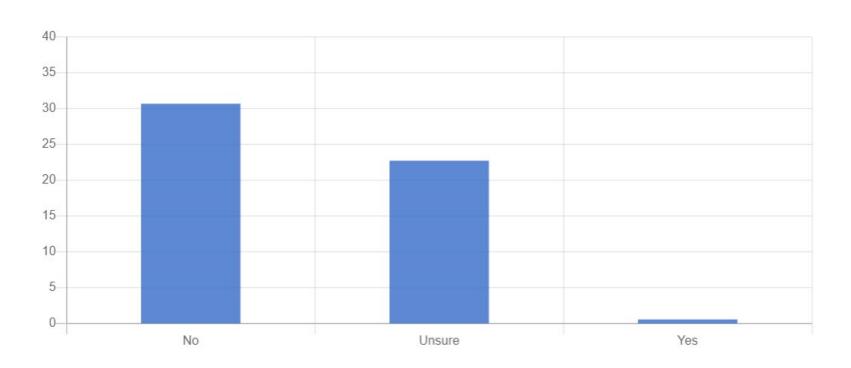




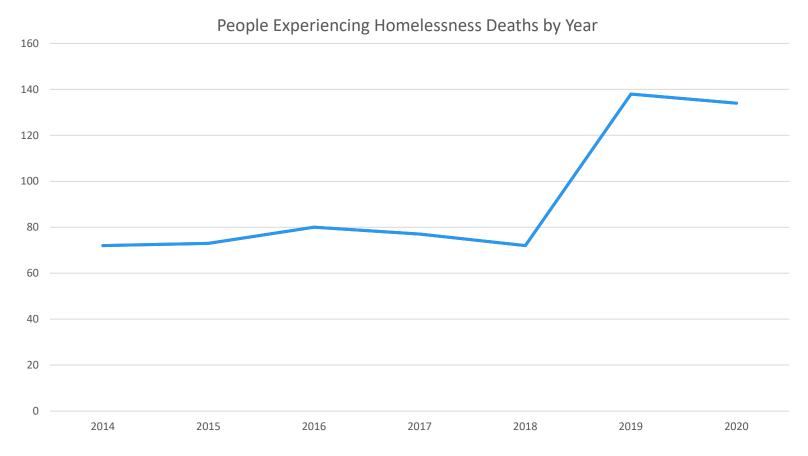
Decreasing Stock of Affordable Housing

If you had additional resources and support would you be interested in taking housing vouchers in the future?

TYPE: "SELECT_ONE". 95 out of 176 respondents answered this question. (81 were without data.)

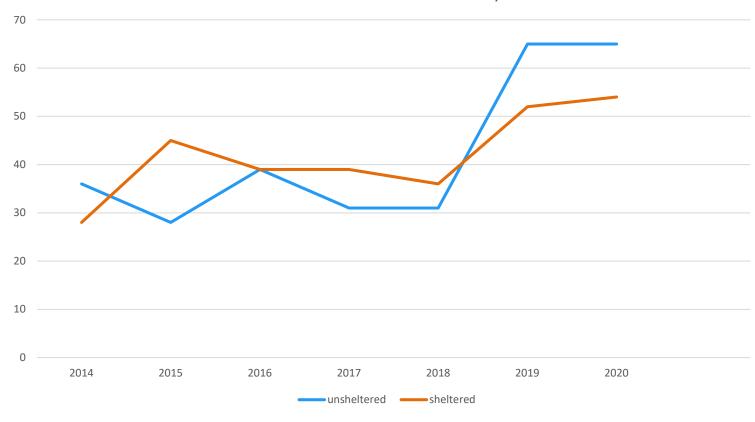




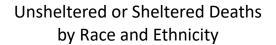


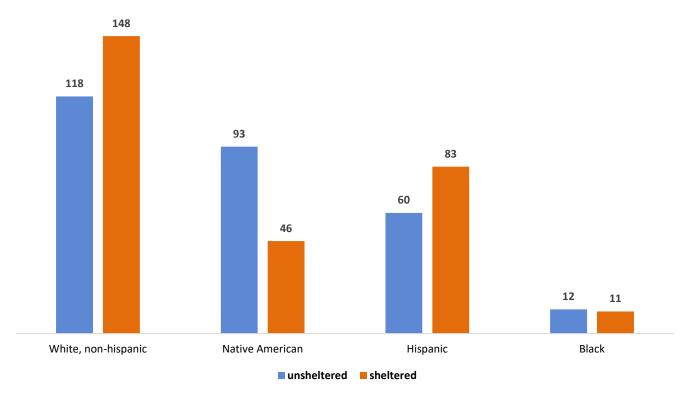


Unsheltered or Sheltered Deaths by Year



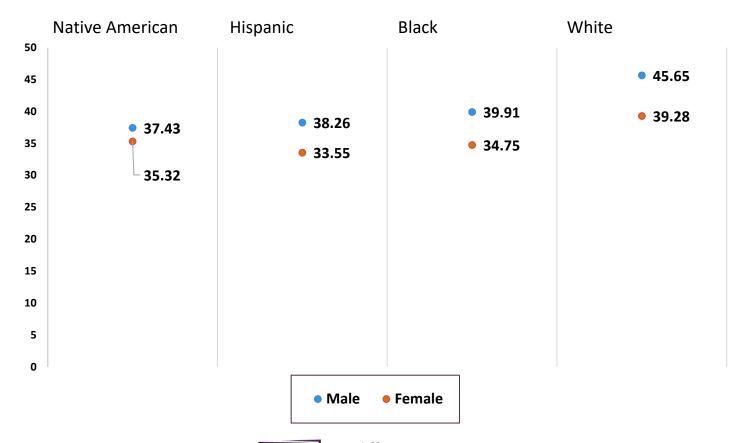








Mean Age at Death by Race and Gender





Violent Victimization, Safety, and Housing

- People experiencing homelessness are more likely to be victims of crime
 - Research from the National Health Care for the Homeless Council found that the rate of violent victimization in a national sample of people experiencing homelessness was almost 25 times that found in the general U.S. population (49% vs 2%).
- "An increase in spending on housing and community development paired with a decrease in spending on corrections is associated with both lower violent crime rates and lower prison incarceration rates." – <u>Justice Policy Institute</u>

Violent crime rates decreased when funding was shifted to housing from corrections.

	2000	2005	Percent change (2000-2005)
Housing expenditure as a percent of total expenditure	1.5%	1.7%	+10.74%
Corrections expenditure as a percent of total expenditure	2.8%	2.5%	-10.62%
Violent crime rate*	506.50	469.20	-7.36%

^{*}Rates are the number of reported violent offenses (murder, rape, robbery, and aggravated assault) per 100,000 people in the population.



Policy Priorities

Housing and Income Support

- Source of Income Discrimination legislation increased need for rental assistance and housing vouchers and decreasing number of landlords to accept them
- 2. Increased timeframes for evictions in NM Uniform Owner-Resident Relations Act (UORRA)
- 3. Increase and protect state investment in permanent supportive housing and rapid rehousing vouchers to address increases in homelessness via BHSD Linkages budget
- 4. \$12 million for NM Housing Trust Fund to build or rehabilitate affordable housing
- 5. Improve income supports through SSI/SSDI advocacy funding leverage more federal dollars into the state through a revolving loan fund
- 6. Guaranteed Basic Income



Policy Priorities

Health Care

- 1. NMDOH Rural Primary Health Care Act (RPHCA)
 - New Mexico's Federally Qualified Health Centers are on the frontlines of the COVID-19 response. RPHCA funding is critical to stabilize health centers serving an increasing population of people unemployed, uninsured, and newly experiencing homelessness.

2. Medicaid

- 1. Increase/protect investment in this essential health care and meet increased need
- 2. Guidance and support to local governments seeking to optimize and leverage Medicaid billing
- 3. Medical Respite
 - Pursue financing options through Medicaid
 - 4 states (CA, MN, NY, WA) are pursuing adding Medical Respite as statewide Medicaid benefit in their Medicaid plans



References

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