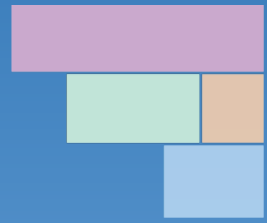


Georgia PATH Program Projects for Assistance in Transition from Homelessness



Georgia Department of Behavioral Health
and Developmental Disabilities



Homelessness & PATH 101

Sherri Downing

Kate Rio

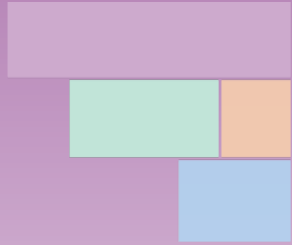
May 25, 2021

Introductions

Tell us about yourself

- What is your role as it relates to homelessness?
- Where are you located?
- What do you love most about the work you are doing?





Homelessness

“I’m not homeless – I’m houseless.” -- Nomadland

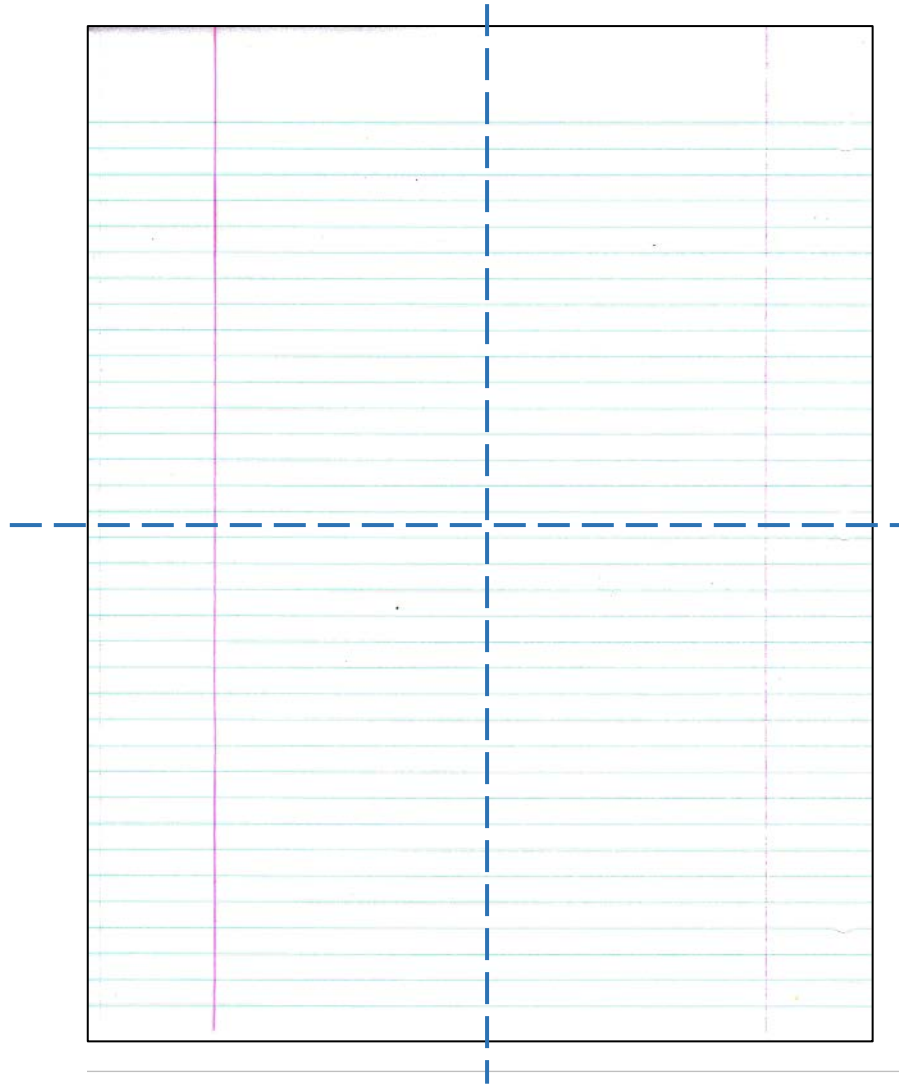


Homelessness

Homelessness is a condition of housing – not character. People experiencing homelessness often have multiple vulnerabilities and incredible resilience and strength.



What Does Homelessness Mean?



- Fold a sheet of paper into four sections
- Unfold it and smooth it out
- In each square, write one thing that “home” means to you

To me, home means...

- Safety
- A place where I can enjoy my family and pets
- A place where I can cook and eat food
- A sanctuary





*“Home is a shelter
from storms – all sorts
of storms.”*

- William J. Bennett



Homeless in Georgia

- 7,696 people identified as homeless on a single night in January 2020
 - 2,538 were people in families with children
 - 504 were unaccompanied homeless youth
 - 764 were veterans
 - 1,305 were experiencing chronic homelessness

According to the Department of Housing and Urban Development (HUD), chronic homelessness means:

- 1. An individual or head of household who has a disability and lives in a place not meant for human habitation , a safe haven, or emergency shelter AND**
- 2. Has been homeless and living in one of these places continuously for at least 12 months OR on at last 4 separate occasions in the last 3 years that together equal at least 12 months of homelessness.**



Homeless in Georgia

- In four states, more than half of all veterans experiencing homelessness were unsheltered. Georgia was one of them, with 51 percent of veterans unsheltered.
 - Georgia also had one of the largest changes in homeless veterans between 2009 – 2020: -1,996 or 72.3%.
- In 10 states, more than 2/3 of chronically homeless individuals were staying in unsheltered locations. In Georgia, that meant 68% of chronically homeless individuals were unsheltered.
 - In 2020, 10,234 were identified as homeless during the annual Point In Time count. 40.6% were unsheltered.

Homelessness

- Lacking safe, stable, and appropriate housing
- People can be categorized as homeless if they are living on the streets, moving between temporary shelters, staying with friends or family, living in deeply substandard housing, or staying in emergency shelter.
- People do not always recognize or admit they are homeless





Homelessness Definitions

- HUD defines homelessness by using four categories:
 - Literally homeless: Lacking a fixed, adequate nighttime address
 - Imminent Risk of Homelessness: Individual or family who will imminently lose their primary nighttime residence, and no subsequent residence has been identified AND they lack the resources needed to obtain other permanent housing
 - Unaccompanied Youth under age 25 or families with children who haven't had permanent housing over the past 60 days or have moved at least twice during that period
 - Fleeing/Attempting to Flee Domestic Violence



Chronic Homelessness

- According to the Department of Housing and Urban Development (HUD), chronic homelessness means:
 1. A homeless individual or head of household with a disability who
 - a. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter. AND
 - b. Has been homeless and living in one of these places continuously for at least 12 months OR on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living on one of the aforementioned places.

More About Chronic Homelessness

- Exiting an institution where they stayed for less than 90 days and met the definition of chronic homelessness prior to entering
- Family can be considered chronically homeless IF the head of household meets the definition.





Pathways into Homelessness

- Neither linear or uniform
- Extreme vulnerability
- Lacking adequate housing, income and supports
- What else?

Causes

- Intricate interplay between structural factors, system failures and individual circumstances
- No two stories are the same and none of them are happy
- Homelessness results from the cumulative impact of many factors, including poverty, trauma, disability

Causes of Homelessness: Structural factors

- Economic and social issues that affect opportunities and social environments
- Lack of adequate income, access to housing and health care, discrimination



Causes of Homelessness: Poverty

- Homelessness and poverty are tightly linked.
- People in poverty must make hard choices among many necessities, including housing, food, childcare, healthcare, and education.
- One paycheck away from disaster



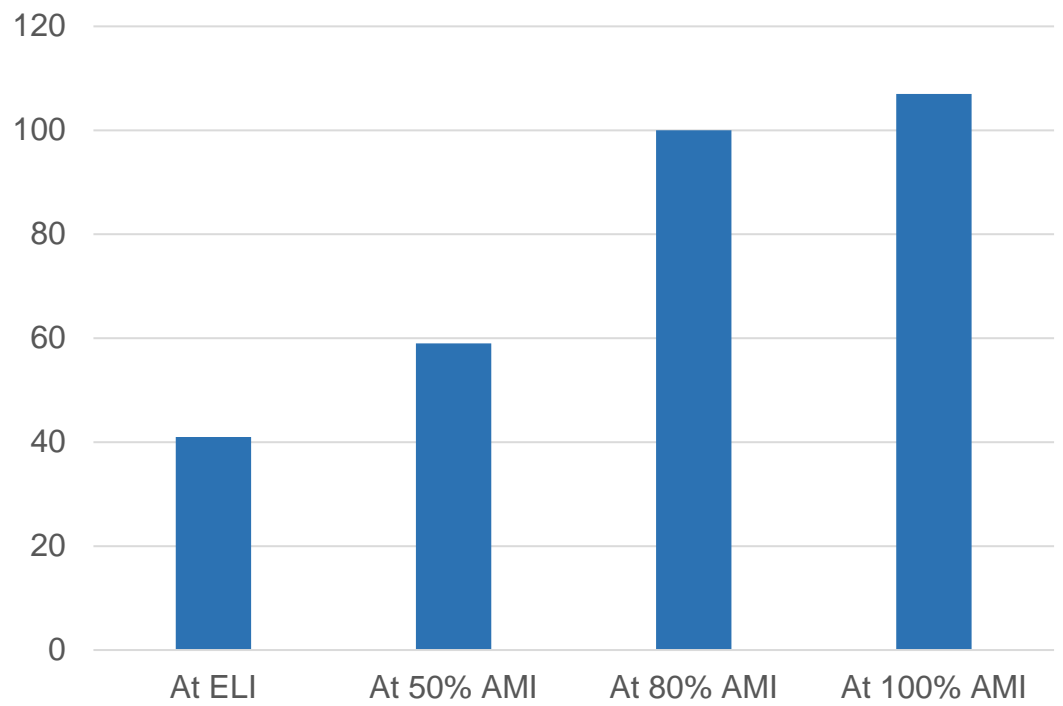
Causes of Homelessness: Housing

- There is a chronic and critical shortage of housing that is affordable, safe and stable
- According to the National Low Income Housing Coalition, across Georgia, there are 327,006 (24%) renter households that live on extremely low incomes (defined as 30% of AMI)
- Statewide shortage of 193,726 rental homes available to and affordable for extremely low-income renters
- An income of \$39,758 is needed to afford a two-bedroom rental home at Fair Market Rent
- 72% of extremely low-income renter households are severely cost burdened

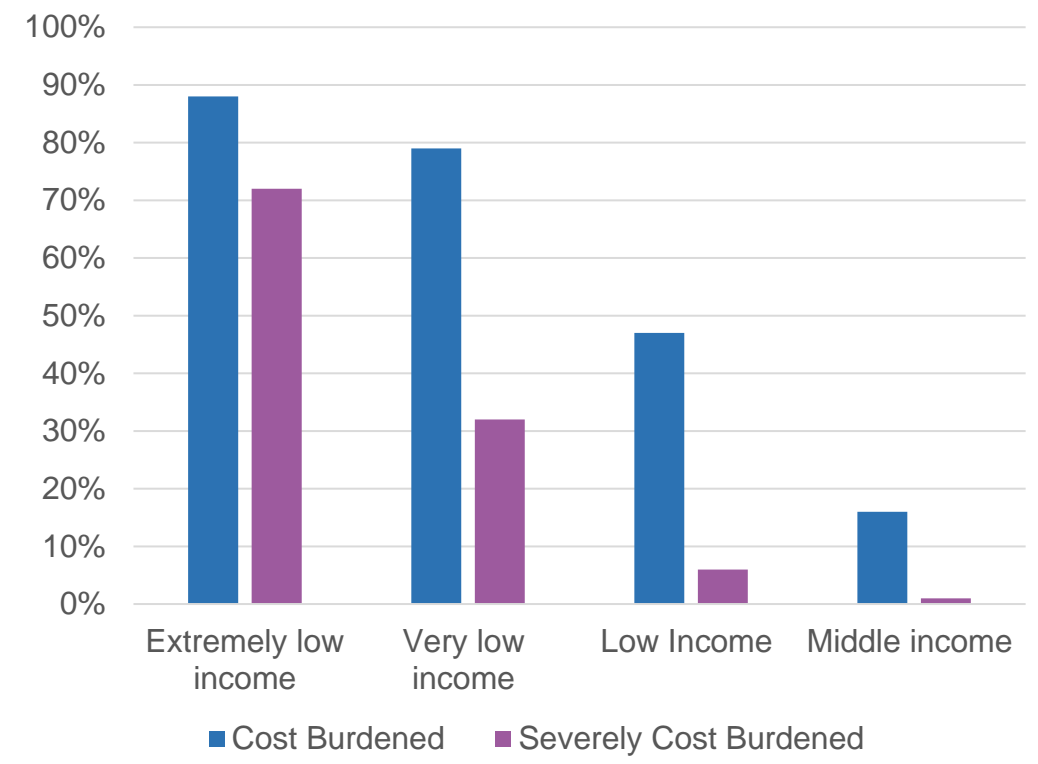


Housing Availability

Affordable and Available Homes per 100 Renter Households



Rent Burden by Income Level



The **monthly** maximum federal SSI amounts for **2021** are **\$794** for an eligible individual. The federal poverty rate for a 1-person household in Georgia is \$1,073. SSI=74% of poverty.



Causes of Homelessness: Disabilities

- PATH clients must be seriously mentally ill (SMI) or SMI with co-occurring substance use disorders (SUDs) AND homeless or at risk of homelessness
- The focus is on serving those who are most vulnerable and living in unsheltered situations
- People who have disabilities are at an increased risk of becoming homeless
- Homeless results from a complex interplay of factors
- Many studies report that mental illness and cognitive disability is higher among people experiencing homelessness



Homelessness and Justice Systems

- People with mental illness and substance use disorders are over-represented among people in jails or prisons, who also face significant barriers to employment and housing upon reentry.
- Some people who experience chronic homelessness get caught in a revolving door of incarceration, crisis services, life on the streets or in emergency shelters.
- People experiencing chronic homelessness experience frequent contacts with police and the criminal justice system, primarily due to citations involving public nuisance, public consumption of alcohol, trespassing, and low-level drug offenses.



Trauma and Homelessness

- The CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) Study
- 1995 – 1997 interviewed more than 17,000 Health Maintenance Organization (HMO) members receiving physical exams
- Looked at abuse, neglect, and household challenges
- Factors contributing to chronic homelessness: childhood trauma and recent physical abuse
- Adverse childhood experiences predict adverse adult outcomes including victimization, depression, health problems, substance abuse

Direct Experience

- Emotional abuse or neglect
- Physical abuse or neglect
- Sexual abuse

Household Challenges

- Witness to IPV
- Active substance abuse in the home
- Active mental illness in the household
- Parental separation or divorce
- Incarcerated household member

Homelessness

Homelessness is not a choice, but rather a journey that many find themselves in.

– Asa Don Brown



PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH)



- The goal of PATH formula grants is to reduce or eliminate homelessness for individuals with serious mental illnesses or co-occurring disorders, including individuals who are experiencing homelessness or are at imminent risk of becoming homeless.
- PATH funds are used to provide a menu of allowable services, including street outreach, case management, and services that are not supported by mainstream mental health programs.
- This formula grant is distributed annually to all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands.

- PATH is authorized by the [Stewart B. McKinney Homeless Assistance Amendments Act of 1990](#) and was reauthorized by [Section 9004 of the 21st Century Cures Act \(P.L. 114-255\)](#). PATH was part of the first major federal legislative response to [homelessness](#), is administered by the SAMHSA [Center for Mental Health Services \(CMHS\)](#).
- Annually, CMHS issues a funding opportunity announcement (FOA) prepared and submitted by State PATH Contacts (SPCs) under the signature of the governor (or designee) of a state or territory. The process is noncompetitive, but states/territories must complete an application to receive PATH funding.
- States solicit proposals and award funds to local public or nonprofit organizations known as PATH providers.

Allowable Activities

- Outreach
- Screening and diagnostic treatment
- Habilitation and rehabilitation
- Community mental health
- Substance use disorders treatment
- Referrals for primary health care, job training, educational services, and housing
- Housing services as specified in Section 522(b)(10) of the Public Health Service Act

Some PATH providers offer all of these services, while others focus on providing one or two of them.



Georgia PATH 2019

- The PATH Data Exchange (PDX) reports that there were 10 providers listed in 2019.
- Together they contacted 4,416 people during the reporting period
- 3,787 of the people contacted were new this reporting period
- 856 of those contacted during this reporting period were ineligible
- 12,685 instances of contact during the reporting period
- 2,566 people were enrolled.

Georgia PATH Accomplishments



- Among all those enrolled:
 - 1,178 were chronically homeless (45.9%)
 - 135 (5.3%) were veterans
 - 810 (31.6%) had co-occurring Serious Mental Illness (SMI) and Substance Use Disorder (SUDs)
- Living situations at project start
 - 46.4% unsheltered
 - 32.1% sheltered (includes emergency shelters, safe havens, hotels/motels, transitional housing, and interim housing)
 - 11.8% institutional care (corrections, foster care, hospital, nursing home, or treatment facility)
 - 9.4% permanent housing (includes living with family or friends, halfway houses, etc.)

- Most served by Georgia PATH were between the ages of 31 – 61
- 51.5% were male; 48% were female; and .5% were transgender
- 96.7% were non-Hispanic
- 75% were Black/African American; 21.9% were White

Services provided

The most common services provided included screening, case management, clinical assessment, community mental health, substance use treatment, housing eligibility determination, with other services offered less frequently. Those include reengagement, habilitation, residential supportive services, housing moving assistance, security deposits, and one-time rent for eviction prevention.

What Does the State PATH Contact Do?

- Responds to the PATH Funding Opportunity Announcement (FOA)
- Enters the PATH application and provider Intended Use Plans (IUPs) in WebBGAS
- Collaborates with providers to complete, review, and submit the PATH Annual Data Report



SPC Roles

- Participates in scheduling and developing federal PATH site visits
- Attends SAMHSA Grantee Workshops when scheduled
- Facilitates TA
- Provides support and oversight to providers
- Ensures 100% use of Homeless Management Information System (HMIS) for PATH data collection



- Ensures compliance with federal and state requirements
- Promotes PATH
- Participates in local, state, and federal initiatives and workgroups
- Conducts state monitoring (site visits) on an annual or biennial basis

SPC Role: Provider Monitoring



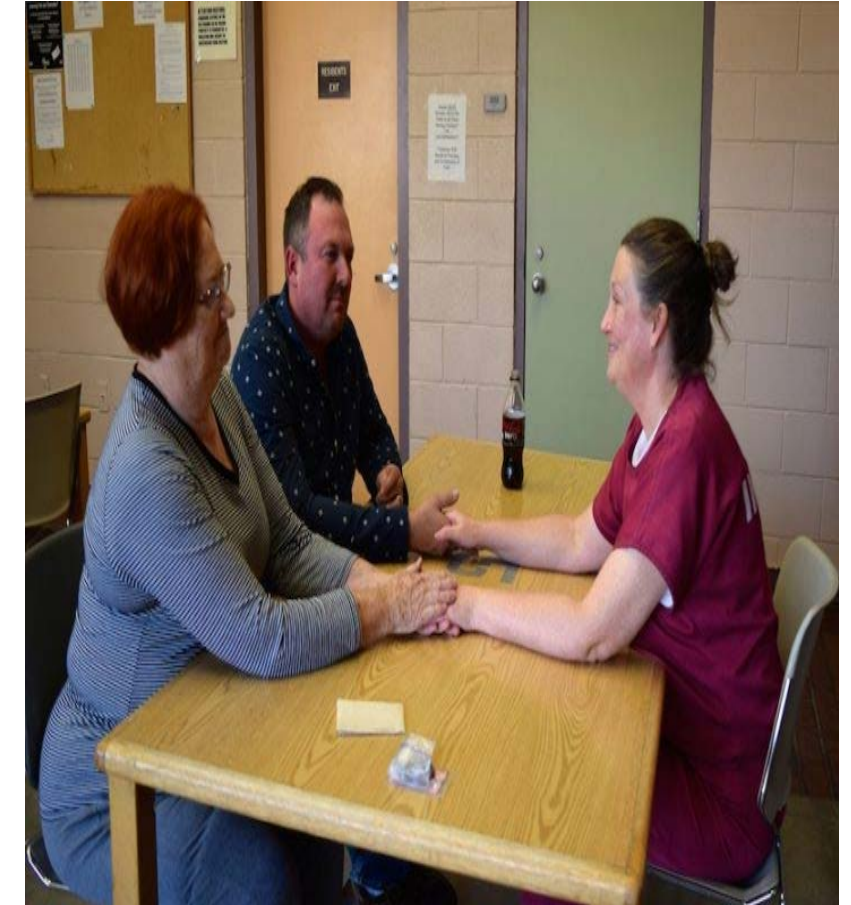
Why monitor PATH programs?

- Gain firsthand information and awareness of challenges and successes
- Maintain open lines of communication
- Provide onsite feedback and support
- It's required! by the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS awards 45 CFR 75.352: Requirements for pass-through entities

Why Monitor PATH Programs?

Ensure compliance with:

- PATH legislation,
- PATH FOA requirements,
- Federal grants management requirements,
- State requirements,
- Intended Use Plans (IUPs),
- line items and detailed budget narratives.



More importantly, to identify what's going right and to ensure people are getting the help they need.

Site Visit Strategies



- Convene collaborative meetings or conferences
- Conduct state-wide site visits and teleconferences
 - Onsite meetings
 - PATH teams
 - Focus groups with PATH-enrolled individuals
 - Executive directors
 - Fiscal staff
 - HMIS administrators (if applicable)
 - Conduct electronic health record/chart/HMIS reviews
 - Ride along with staff on community outreach
- Review and follow up on quarterly fiscal reconciliation reports and annual FFRs

PATH Requirements

- PATH Data Exchange (PDX)
- PATH providers are required to submit annual PATH data reports through PDX.
- Each state and territory has a designated member of the TA team who can offer TA during this process.
- Resources are posted at <https://pathpdx.samhsa.gov/>

The screenshot displays the PATH Data Exchange (PDX) website interface. At the top, the logo for PATH Data Exchange is visible, along with a 'Sign Out' link. Below the logo is a navigation menu with options: Home, Providers (highlighted), Resources, Users, and Setup. The main content area is titled 'Providers' and features a search bar with the placeholder text 'Search Name, Number, Contact.' and a 'Go' button. There are also several dropdown menus for filtering, including '2013', 'Any', 'Any', and 'Any'. Below the search and filter options is a table listing providers. The table has columns for 'REQ NUMBER', 'PROVIDER NAME', 'PRIMARY CONTACT', 'YEAR', 'ACTIVE', 'REPORTING', 'REPORT', 'REPORT STATUS', '%', 'ERRORS', and 'UPDATED'. The table contains 13 rows of data, all for 'Test Provider' providers in the year 2013. The 'REPORT STATUS' column shows various statuses such as 'Never Logged In', 'Not Started', 'In Progress', and 'Never Logged In'. The 'ERRORS' column shows the number of errors for each provider, with some having 0 errors and others having 1 or 2 errors. The 'UPDATED' column shows the date when the provider's information was last updated, with some entries dated 11/08/13 and others 11/11/13 or 11/12/13. At the bottom of the table, there is a pagination control showing '20 items per page' and '1 - 13 of 13 items'. Below the table are two buttons: 'Add Provider' and 'Email Selected'.

REQ NUMBER	PROVIDER NAME	PRIMARY CONTACT	YEAR	ACTIVE	REPORTING	REPORT	REPORT STATUS	%	ERRORS	UPDATED
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Not Started	0%	3	11/08/13
3	Test Provider		2013	Yes	Yes	Annual Report	Not Started	0%	3	11/11/13
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	In Progress	2%	2	11/08/13
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Never Logged In		0	
3	Test Provider		2013	Yes	Yes	Annual Report	Not Started	0%	3	11/12/13



PATH GPRA Measures

Measure 3.4.15: Increase the percentage of enrolled homeless persons in the PATH program who receive community mental health services

FY 2020 target: 65%

FY 2021 target: 65%

Measure 3.4.16: Number of homeless persons contacted

FY 2020 target: 120,048

FY 2021 target: 120,048

Measure 3.4.17: Percentage of contacted homeless persons with serious mental illness who become enrolled in services

FY 2020 target: 58%

FY 2021 target: 58%

Measure 3.4.20: Increase the number of PATH providers trained on SOAR to ensure eligible homeless clients are receiving benefits

FY 2020 target: 2,214

FY 2021 target: 2,214

Government Performance and Results Act (GPRA)

Additional Requirements



- PATH cannot exceed 20% of the state's allocation for housing costs.
- Submit a PATH annual data report that provides key information about impact.
- Intended Use Plan (IUP): Local providers must provide a brief description of the provider organization receiving PATH funds, including name, type of organization, geographic service area, the amount of PATH funds the organization will receive, clients to be contacted/served, enrolled and receive community mental health services, staff SOAR trained and number assisted through SOAR.

PATH and Homelessness



- PATH is the only program charged with outreach and engagement to assist people who are experiencing or at risk of homelessness AND who have a serious mental illness or series mental illness and co-occurring substance use disorders.
- Many PATH clients were formerly chronically homeless, but the disability under PATH must be a behavioral health disability.
- PATH makes a real difference in lives.



Questions and Discussion



Advocates for Human Potential, Inc.
Real World Solutions for Systems Change

ahpnet.com

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