



The Republican.

Outside Chance

With housing first, Springfield has a revolutionary, proven, cost-effective solution to homelessness. All they need are the buildings and the patience.

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By Bill Peters

SHIRLEY* LIES UNDER A BLANKET on a large, L-shaped sofa. She has an encyclopedic memory for addresses. Her feet twitch when she speaks. She'll tell you stories: that she lost her virginity to Jim Morrison at age 14 ? at Woodstock; that Martin Luther King told her she looked like Shirley Temple; that on 9/11, she lost dozens of pen pals on the 79th floor, and a limo picked her up at 4 a.m. and drove her to Ground Zero to dig up and recode the gold at the bottom. On TV, the Discovery Channel shows a live, goopy caesarian.

Shirley weighs 347 pounds. Since the 70's, Shirley has been kicked out of homeless shelters in Amherst, Springfield, Holyoke, Northampton, Westfield, and Boston. She was barred from riding the PVRTA for one year after an altercation with a bus driver. She lives off abbreviations — SSI, SSD, food stamps. Shirley is 51, has had 5 heart attacks, 11 angina attacks, diabetes, epilepsy, asthma, COPD, three types of arthritis in her shoulders, osteoarthritis in her knees, rheumatoid arthritis in her toes and fingers, spastic arthritis in her ribs, spine and hips, deafness in one ear, and a palsy-related coordination difficulty. She takes 19 medications. She's been to Baystate and Mercy Hospitals enough to have specific preference. She is also delightful.

"A lot of times I slept on someone's back porch," Shirley says. "One time, the landlord kicked me off. He told me to get a job. I said, 'Who is gonna hire a person who's had five heart attacks?'"

Shirley grew up in Springfield, in private special needs schools. She worked at a parts factory from age 16 to 41. In Worcester, 1976, there was a fire in her apartment. Shirley tells me she and her husband couldn't light a match to save their lives, that the landlord set

the fire. But they were arrested for arson, jailed a year before their trial.

"We were handicapped. He thought we were going to lower property value near Holy Cross College," Shirley says of her landlord.

While between shelters, she wandered into a meeting at a church in Sixteen Acres. She sat down on the plumpest couch — she was homeless, she said to the church staff, she could sit anywhere she wanted. That church put her up at a Howard Johnson motor lodge for five weeks last winter. Then, last December, the Springfield Mental Health Association didn't put Shirley into another shelter, nor did they force her into rehab, counseling, or medical services — although Shirley still uses plenty of them. Instead, they gave her an apartment. And then, later, they found her a better one — hardwood floors, near Longhill St.'s mansions. She's been off the street for almost one year, out of the psych ward for as much time.

"When I'm under a lot of stress I tend to have more seizures," she says.

THAT PROCEDURE OF PROVIDING THE HOMELESS A HOME before treatment is known as "housing first". It's a model that nearly 150 cities or counties nationwide have recently adopted, and after a successful 22-tenant trial run, it's being implemented on a larger scale in Springfield now.

"Having a psychiatrist at the Friends of the Homeless on Worthington StreetÉ being stabilized on her medication, having permanent housing where she isn't worried about where she's going to sleep has made all the difference," says Brian Fitzgerald, who does case management for Shirley.

A reversal of the traditional sheltering system — which often requires tenants to undergo strict treatment and counseling to maintain or transition into long-term housing — housing first can save millions of dollars, has proven immensely effective for individuals and families, and is rewriting Springfield's code for empathy.

MONDAY NIGHT BEFORE THANKSGIVING, our van's headlights swing over an alleyway off an empty Main St. I'm with a volunteer street outreach church group for the homeless. The church's pastor points out where they sleep: in a gas station convenience store, a car wash, ATM walk-ins, the steps of City Hall. The cold is metallic. The top of the Sheraton is visible; its lights are off.

We meet Eddie, curled into a doorwell. We give him soup; he takes it. His hands are cramped, slightly deformed. We offer him a blanket; he can't carry it. A bottle of gin on the doorstep is half empty. A volunteer asks about shelter.

"F--- the shelter," he slurs.

The pastor is African-American; Eddie mumbles an epithet, something about getting

robbed, and tries to press his watch into the pastor's hand. All Eddie wants is for us to sing Whitney Houston's "Greatest Love of All." Nobody gets past the first verse.

According to city research, each year, 1200-1400 Springfield individuals and 500-600 families spend time without a roof or under a temporary one. Housing first intentionally targets the smaller percentage of Springfield's long-term, chronic homeless, the difficult cases, the mentally ill who refuse help, who highly visible homeless who make pedestrians and business owners squeamish.

Later that night, we find Gram, a gray-haired, hippie-ish Vietnam vet and heroin addict, sleeping behind City Hall. He's been homeless for 15 years. Last week, he was hit in the head with a two-by-four and didn't want to go to the hospital. Sometimes, when he gets money for heroin, his friends beat him up and take it — then they'll laugh about it together later that month. Gram says he doesn't want to go to a shelter because he stinks.

What's more, shelters can be violent; tenants' belongings can get stolen. Required sobriety and transitional services often make the homeless distrustful of shelters and the system. If nothing else, the paperwork-heavy system often confuses or discourages the higher-maintenance homeless.

"Sometimes they'll start to read a letter and they'll say, 'Forget it,'" says Patty McDonnell, program director of Open Pantry's Jefferson Avenue Shelter. "I'll say, 'wait a minute, let me just read it for you.' Because it's so overwhelming and written in legalese. And then there's consequences."

Consequences like going back to the streets, getting arrested, getting sicker, getting crazier, getting poorer, landing in jail or the ER with bloated hospital bills, landing in a shelter again and repeating the cycle. Springfield's "Homes Within Reach" report, released in January, estimates about 250 chronic homeless individuals in Springfield. Average life expectancy: 47 years.

Between Friends of the Homeless, the Mental Health Association, and the Housing Authority in conjunction with the city, Springfield has around 140-50 housing-first units, with plans to create an additional hundred over the next decade. The program hasn't crammed the homeless in a tower somewhere — apartments are dispersed across the entire city. The lease is in the tenant's name. Rent is 30% of the tenant's adjusted income, and, like the rest of us, tenants can get evicted if they don't pay, if they wreck the place, if they disturb neighbors. Springfield Housing Authority or the Mental Health Association pays the difference to the landlords. Most importantly, the apartment comes first, the bureaucracy of services afterwards.

"When you create less barriers to get housed, especially if they have mental illness or active mental issues or active substance abuse — you measure success differently than you would with a traditional type of program," Fitzgerald says.

All the intensive services, counseling and rehabilitation are still available and strongly

encouraged for tenants. But ultimately, they're optional — a key component of housing first and a key component to persuading extreme cases off the back porches and bus stations. If tenants want help managing finances, or need a nurse, those services are a phone call away. But if they want to decline counseling or have a drink alone, they can.

On the first of every month, Shirley gets her SSI check. When needed, Fitzgerald drives her to Wal-Mart in Chicopee for groceries, clothes. Shirley hops in the handicapped cart and takes off. "He can't find me!" she says.

"We're not here to put her under a microscope," Fitzgerald says. "I do evaluate her, make sure things are going relatively okay. The goal is to help Shirley become a good tenant and a good neighbor. To build up a rent history." And, in turn, the building blocks for self-sufficiency and a record to show other landlords or even employers — things that are extremely difficult to do without a consistent address.

While the Department of Housing and Urban Development's definition of chronic homelessness is limited to individuals, there are some 50 Springfield families who match the profile for being hard to house.

An apartment complex run by the Housing Authority at the dead-end of Marble St., one of Springfield's most troubled blocks, has 15 housing-first 3-bedroom apartments for families leaving shelters. Case management is required for up to 9 months — a slight departure from pure housing first. When residents get home from work, they often check in with Pam Wells, the Housing Authority's Resident Service Manager. Her office is cramped with white-out-white walls. One tenant's child comes in and hugs her while we talk.

"It started last December," Wells says of housing first. "Are there issues along the way? Yes. It's not a perfect system. But they all still remain housed."

Shelter is a far cry from home for both parents and children. The state Department of Transitional Assistance places families where they can, which not only uproots families from their hometown, but risks turning poorer areas like Holyoke — which often have more services for less — into low-income repositories.

Many homeless families living in shelters grew up in foster care. One tenant I met, Erin, 23 — petite like a high-school student but with a distant rap cadence in her voice — bounced around Springfield's foster care system until she was 18. She had her first of two children there, and then the DTA sheltered her in Amherst, among an academic, wealthier culture.

"One of the major things is reliable transportation," McDonnell says of Springfield's homelessness. "In, say, Boston, New York, they have subway systems. In Springfield the buses don't run a lot so that's a problem for people."

Since joining the housing first program at Marble St., the staff set Erin up with an

internship at the DA's office. The morning after I meet her, she's scheduled to take a GED pre-exam.

The rehabilitated homeless often end up working for the system they survived, and Cynthia, a soft-spoken woman from Puerto Rico who sheltered at Broderick House, now works as a receptionist at Marble St. and in their applications department. Pamela, a thin, angular woman who Wells says has become "vibrant" since moving in, works in daycare and is taking courses on Saturdays to become a teacher.

"The staff, they're great people. Sometimes they push you to do things," Erin says of the housing first program. "If it weren't for them I wouldn't be going to [workforce education] to look for a job."

::The culture of treatments and cures; the sociology of independence::

IN THE 1980s, the decade rampant homelessness was born, Geraldine McCafferty, Springfield's Deputy Director of Homeless and Special Needs Housing, went to law school in Washington D.C.. She took classes next door to a 1,000-bed homeless shelter — one of the largest in the country. She was stepping over the homeless on her way to class. Then she took a leave of absence and supervised a 250-bed shelter, evening shift.

"I came from an upper-middle class background. It was really sort of shocking, much of what I saw," she tells me.

20% of Springfield's homeless are chronic homeless. But on any given night, they occupy between 50-70% of Springfield's beds. Housing first can free up beds and make those numbers plummet.

"There's been resistance to the idea of taking the hardest to serve and putting all our resources into them," McCafferty says. "I think the case is being made now that that's the best way to use limited resources."

The history of treating the chronic homeless is a history of punitive moralism, of assuming homelessness's problems and solutions came from within the person, not the home. Decades ago, Shirley would've been institutionalized. The trickle-down Reagan administration steered money from affordable housing almost entirely.

"At the beginning of homelessness people are trying to get out of it really hard, and they become more acclimated to it, and more discouraged and then they begin to identify more with the homeless," McCafferty says. "You're encouraging more long-term homelessness just by virtue of the fact that you're not getting people the tools they need to get out of homelessness."

Douglas McGray's article about housing first, published in 2005 in Mother Jones magazine, provides a nice breakdown of homeless care in the 90's. The 90's — as McGray

describes — saw the adoption of the Continuum of Care model, which required sobriety and rehab in conjunction with shelters — operating on the idea that one needs to earn their way out of homelessness, that morality and independence come from above before they can come from within. Permanent supportive housing, housing first's most direct predecessor, gave the homeless their own private place. But again, that required counseling, frequent AA meetings, budget management and job training services — clients were sometimes kicked out after a single slip-up.

Those services help many, undeniably. But, according to McGray's article — and certainly due to welfare reform — homelessness rose throughout the nineties. What's more, some providers continued to take in tenants with the cleanest records, allowing the system to look like a cure-all while still leaving extreme cases to the jails or the elements. After working in that system, Sam Tsemberis, housing first's pioneer, was discouraged too.

A June, 2007 Boston Globe article described Tsemberis as a "recovering psychologist." When I ask over the phone what that means, he says, "The question," for clinicians, "becomes 'How do we get this person into treatment?' Most clinicians won't even talk about housing. As useful as clinical insight might be, it is not at all what the client is interested in."

In 1992, Tsemberis created Pathways to Housing, a housing provider based in New York City, on the principle that if you want to end homelessness, give them a home first, let that home begin to stabilize the person. Then use services as needed.

Almost a decade later, according to Mother Jones, Pathways housed hundreds; its staff grew to 85 trained professionals. Then, U-Penn sociology professor Dennis Culhane published a cornerstone five-year cost analysis of the chronic homeless. He found that between jail time, traditional shelters, drug treatment and ER visits, the average chronic homeless individual in New York City ran up a \$40,000 tab — \$10,000 more than Springfield's median income.

There are averages, and then there are outliers. "We went to Baystate and we said, 'Can you look at ten homeless people and tell us what they cost?'" McCafferty tells me. "They looked at their 5 most frequent users of services and the five sickest. They cost an average each of a hundred-thousand a year."

Culhane found that the Pathways model, by simply giving the person a home first followed by optional services, cut those costs nearly in half.

From there, Tsemberis headed a study, published in 2004 in the American Journal of Public Health, in which 225 homeless participants — all severely mentally ill, more than half of whom were on the streets — were placed into Continuum of Care and Pathways to Housing. Pathways kept 80% of its tenants off the streets. Its tenants also said they felt more independent — posing what the study called a "profound challenge" to Continuum's assumption that the chronic homeless needed priming before housing. The study also

found that between Pathways and Continuum, drug and alcohol use stayed the same.

"There's nothing in the system that creates independence," Tsemberis says of Continuum. Housing first, he says, has been successful because it's ultimately based on consumerism. "You start the first day, we ask, 'What do you want?' The person is put in an independent decision-making role right from the beginning. They're driving, you're in the back seat."

Those results have hit Springfield, too. An address isn't just four walls and peace of mind, it's the fundamental way the world tracks your existence and builds history with you. One early housing-first tenant in Springfield, Juan, reconnected with his daughter and granddaughter after decades of homelessness — they could find him. Others have come around to helping themselves, too, under the system.

"People that they never thought would want treatment have begun expressing interest," McCafferty says. "They never, never did before."

ER visits have decreased under housing first, as have arrests, incarceration, etc. Non-emergency health expenses declined significantly in other areas, but not Springfield. Cost-effectiveness has been housing first's primary selling point, but it shouldn't be its only goal.

"It's about getting better care, which is what housed people expect all the time," says Jerry Ray, MHA's Director of Homeless Services. "But there's a cost associated with it. But if their quality of life gets better, their neighbor's quality of life gets better. It's not just about these nice little numbers that keep going down."

As numbers go down, nobody's arguing. Since housing-first units have been installed at the Marble St. facility, the other tenants have been able to use those services as well. Within one year of bringing in housing first, crime has decreased in the facility by 85%.

"I don't think we necessarily trumpet the fact that it has a lot to do with this program," Wells says of the decrease. "We didn't used to have a laundry here, because the laundry facility was vandalized so much. Now they're putting a laundry back in here. They had to lock the mailbox room because the mailboxes were being vandalized all the time."

::What is home? Selling altruism::

SPRINGFIELD'S YORK STREET JAIL looks part school, part church. Its red brick walls are mossed over, courtyard grass gray and sloppy, weeds squeezing through the concrete. Shut down as a jail in the 1990's and used as a shelter, its gymnasium was once stuffed with mattresses, bunched-up covers, clothing jammed into garbage bags. At night, residents lined its side entrance ramp, having a smoke before bed.

Earlier this spring, McCafferty visited the jail and told its tenants about housing first. In October, officials announced they would demolish the 120-year-old facility. The city

planned to move York Street's residents, some of whom were chronic homeless, into housing-first units when the jail was torn down. They're currently on a waiting list.

95% of Pathways' buildings in New York are run by private landlords and the community. In many other cities, housing first efforts are run by non-profits. That's for good reason — sometimes poverty is best managed directly, locally.

Administratively, the Springfield Housing Authority's housing first model — overseeing most of Springfield's housing-first units — is less traditional in that it's a hybrid of public and private resources. Rent money comes from the Housing Authority, but private landlords own the buildings themselves, and can volunteer apartment space into the system. That latter part, involving persuading the landlords to commit apartment space — and a 10-year contract committing to housing first — hasn't exactly worked out.

"Much of the housing first idea is you can come to somebody on the streets and say 'I have a key, I can take you back to an apartment,'" McCafferty says. "So that's been frustrating from our perspective and I know it's been frustrating for homeless people."

Manuel, one of those on Springfield's housing-first waiting lists, has a makeshift home in the newspaper-strewn dirt underneath the Connecticut River bike path. Tarp and bed sheets make for the walls, and in one corner, there's an ottoman and a recliner. His hair has gray, mad-scientist frizz. His beard is biblical.

"I turned in all the paperwork required, and they give me a number," he says. "Éthey didn't have any 1-bedroom apartments available. They had 2-bedroom apartments available. So, untilÉ there is a 1-bedroom apartment, I'm not gonna be able to get it."

"We have housing subsidies, we have service dollars, we have clients on the waiting list. We do not have physical apartments," McCafferty says. "We had hoped within this year to get to 140 [units]. If we get to 70, we'll be lucky. They put out requests for proposals looking for 100 units. The first response they got — 13 units."

Earlier this year, Peter Straley, CEO of Health New England, told McCafferty, "You need to market this thing." Landlords can still screen tenants, and tenants can be moved to another housing-first facility if they're disturbing their neighbors — something the city didn't make clear enough, McCafferty says.

HNE created brochures. The Chamber of Commerce mailed them. The United Way hit the phones. More landlords have begun to commit, and waitlisted tenants are ushered into apartments as they open up. But many of those apartments still need renovations.

"In many ways, it's a good thing for landlords," McCafferty says of housing first. "But there's fear ÉThat's the frustration too. You know it works, but you can't get it to everybody."

Many, including President Bush, love the housing-first argument, whose permanent housing approach gratifies the social-justice left while appealing to the right's utopianism of self-ownership and lower federal spending. In 1999, according to the Globe, Republicans approved legislature requiring Housing and Urban Development to devote a third of its funding to permanently housing the chronic homeless. The very idea of the 10-year Homes Within Reach plan came from Bush homeless czar and former Boston homeless advocate Philip Mangano, respected on both sides of the aisle. That hasn't alleviated concerns inside or outside of the shelter-providing community.

"I'm really happy they're doing it," McDonnell says of housing first. "My fear is: will there be enough case management? É Some people, if they didn't have the timely assistance to develop job skills, they're going to have an apartment, but then what? I do ultimately think that people have the power within themselves, but with assistance to bring that out. For a bazillion reasons, they just don't know they have it yet."

Springfield has had to move some housing-first tenants. Some chronic homeless — the 20% who aren't retained -- can take much convincing. "A guy lived in the woods for many, many years and when he first got his apartment, he would be there for an hour or so during the day, and he would still camp out," McCafferty says of a housing-first tenant in Northampton. "It took a very long time for him to transition into housing."

Some complaints, still, are all too pedestrian. Shirley wants to get another apartment. Her upstairs neighbor works at a bar on Worthington Street and comes home at 3 a.m.

"He throws his boots on the floor like they're coming through the ceiling," she says. Her landlord doesn't allow dogs, and she wants to have a dog to get her walking more. After living a transient life, committing to permanent space isn't easy. Currently, Shirley's apartment has one decoration — a Hannah Montana poster taped to the wall.

And, despite all evidence of independence and cost-effectiveness, ushering a homeless person into an apartment and requiring little in return makes some queasy for ethical reasons.

"We're willing to pay thousands of dollars if they get hospitalized, but not less for an apartment," Tsemberis says.

"I think the nice part of all this is restoring the dignity and the quality of life," Fitzgerald says. And then, more bluntly, partly parodying the cynicism towards homeless care, he says, "This isn't bunks for drunks."

WHEN OUR OUTREACH GROUP PULLS INTO A SHELTER on Worthington Street, right next to the Fifth Alarm strip club, the pastor calls volunteers out of the van. Before helping Gram out of the van, they ask him where he keeps his needles.

The pastor pulls out a bagged sandwich and presents the offer: "I'm gonna take this sandwich out, and I'm gonna give it to you, and you're going to take your heroin out of

your pocket and drop it in the bag."

"You're killing me," Gram says. But he gives up the heroin, gives up his needles.

The hard-to-house don't slip through the cracks overnight, and housing first could take months, years, to bring the homeless back in. For decades, their only alternative to homelessness was one where self-worth was defined for them.

"I'm not gonna stay, I'm just not gonna stay," Gram says as they lead him inside. But coffee is on. He'll stay for coffee, and then he's out of there. He'll take a piss, and he's out of there. "I'm an 'outside' guy," Gram tells the desk manager.

"I was too," the desk manager says.

The pastor lets that be their moment, a starting point, for whatever relationship needs to be built to convince someone that help is legitimate, for whatever immeasurable work needs to be done with immeasurable patience. Eddie, however, is still outside when another outreach van drives by. They ask him about Jesus. He says Jesus is hiding from him.
*Some names have been changed.