

## A difficult childhood leads to a cycle of abuse, homelessness and addiction

From a young age, she didn't feel safe. Maria Walker, born in 1960 in Puerto Rico to a family with 12 children, didn't have an easy childhood. At 12 her stepfather tried to sexually abuse her. By 13, he kicked her out of the family. With no place to call home and no family guidance, she soon became pregnant and worked as a dancer to survive.

*Maria's long-term, abusive relationship was "about getting high. And when he was high, he would abuse me, verbally and sexually."*

At age 21, Maria moved to the United States to live with her aunt, but that ended quickly. Shortly thereafter, Maria entered into an abusive relationship that lasted 11 years. During this time, Maria discovered that she had contracted HIV from intravenous drug use.

After learning that her mother was living in New Haven, she decided to move there in the hopes of starting fresh. But with no income to support her, the cycle continued – for the next 10 years she sold drugs and was in

and out of jail. After completing a 1.5 year sentence, she pledged to change her life and stay away from drugs and out of jail. But to make that happen, she needed something that had been missing from her life: support.

## An opportunity to start over

Support came in the form of transitional housing through McKinney House in Stamford, a two-year program designed for people living with HIV. McKinney House provided Maria with safety, stability and a sense of community, but was a temporary program.

Maria found the permanency she needed through the Pilots program at Family & Children's Agency of Norwalk. Maria secured a spot in their Next Steps Supportive Housing Program, which includes support services and a permanent residence.

Maria now leads a Danbury support group for people with HIV/AIDS and recently volunteered for the 2011 Point-in-Time count homeless census. When she's not doing support work, she advocates on behalf of others living with HIV/AIDS, giving educational presentations about the realities of HIV.



*"I'm not going to let anything come between me and my home."*

*-Maria Walker*

She's thriving in the first apartment she has ever called her own. "Even though it took me a lot of struggle through addiction and jail, I'm happy to be where I am." Maria credits the support she received from her case manager and the staff at Family & Children's Agency for her recovery and success. "I thank God that they've stayed with me from start to finish."

Maria has been clean for 7 years and her HIV is undetectable. Permanent supportive housing has helped Maria to rebuild her life, gain access to employment, stabilize her health and reconnect to her community.

## The high cost of Maria's homelessness

Helping Maria end her homelessness and get back on her feet through supportive housing wasn't just the right thing to do; it was also the most cost effective solution to ending her homelessness.

The year after Maria exited jail for the last time, she utilized a number of institutional services, including:

- **335 days at a sober house (halfway house)**
- **30 days in prison**
- **1 arrest**
- **44 re-entry program meetings**
- **72 substance abuse treatment out-patient meetings**

Over the course of the year, these institutional services cost over \$30,000 – with some of the programs/services billed at close to \$100/day.

## Supportive housing: lower costs, better outcomes

Supportive housing costs far less – approximately \$19,500 over a year – and the outcomes are unparalleled.

Through supportive housing, Maria has a safe and affordable place to call home and receives the support she needs. She no longer utilizes costly services now that she has this support.

Over the past year she has attended a weekly substance out-patient support group and used the emergency room once – nothing more.

### *What is Supportive Housing?*

**Supportive housing combines affordable apartments with on-site or visiting support and employment services.**

**A cost-effective solution for people with disabilities, mental illness, addiction and other issues, supportive housing provides its tenants with the support they need to stay housed and out of shelters, prisons, hospitals and other institutions.**

## The cost-effectiveness of supportive housing: how it works

Ending homelessness isn't just an ethical imperative, it's an economic imperative. The lack of a stable home damages a person's health and safety. For society, the costs are also high: treating homeless individuals in emergency systems that cannot address the root causes of their homelessness is expensive and merely continues the cycle.

Often, chronically homeless individuals access a wide array of high-cost systems – mental health, substance abuse treatment, prison, and health care – with little to no insurance. The costs of these systems are substantial: detox, \$588/day; hospital in-patient, \$1,089/day; psychiatric in-patient, \$1,187/day; emergency room visit, \$2,152/trip; ambulance, \$514/trip; prison, \$92/day. Worse, even after these services are utilized, homeless individuals still do not have a place to call home and often continue to suffer from illnesses that go untreated.

Supportive housing costs much less and is more effective.

For roughly \$54/day, or \$19,500 a year - \$10,000 for the rental subsidy that provides housing and \$9,500 for the case management services that provide support to the tenant – supportive housing can help an individual end his/her homelessness.