Treatment and Recovery Are Not Optional in Solving Homelessness

Substance Abuse – A Root Cause of Homelessness
The current prevailing strategy for combating homelessness, “Housing First,” emphasizes immediate placement in permanent housing for all homeless individuals. It seems simple – give a homeless person a home and they are no longer homeless.

The Housing First philosophy, however, overlooks a startlingly simple fact: Virtually all homeless people were once housed. If just having a home were the solution, those living on the streets wouldn’t be homeless in the first place.

What causes a person to leave their home for the streets? It’s a tough question. For anyone who has witnessed homelessness firsthand, it’s hard to deny that addiction to alcohol or other substances is a major cause of homelessness. In fact, the National Institutes of Health conservatively report that 38% of all homeless Americans abuse alcohol and 46% abuse other drugs.

However one reads the best information available, one must conclude that half or more of all homelessness is directly correlated with substance abuse and addiction.

Summary
The National Institutes of Health conservatively report that 38% of all homeless Americans abuse alcohol and 46% abuse other drugs.

Programs that focus on sobriety as a means of ending homelessness are effective in reducing addiction.

Housing First seems to increase housing retention and housing stability but shows no demonstrable evidence on positive substance abuse outcomes.

Persons with active addictions lose their housing and return to the streets at vastly higher rates than people whose addictions are controlled and whose needs are supported.
Homelessness cannot be solved without addressing addiction, which is why many community-based organizations, ministries, and social service programs serving the homeless focused on sobriety and addiction recovery. For decades, programs fighting homelessness emphasized a phased approach, moving people with special needs from the streets, through stabilization programs and eventually into permanent housing once their underlying needs, including addiction, had been addressed.

This approach has been replaced with placing the chronic, often-addicted homeless into permanent supportive housing to improve housing retention and stability rates. To free-up money for this more expensive approach, federal policy encourages the closing of shelters and ending funding for traditional recovery-based programs. Studies of Housing First’s impact on substance abuse, however, demonstrate significant challenges in methodology and inconsistent findings. It’s unknown, then, if focusing on housing retention and housing stability leads to positive sobriety outcomes for homeless persons.

What is clear is that cities are experiencing significant increases in chronic homeless. The decline in shelter beds and the pivot away from phased housing models emphasizing sobriety may have resulted in the latest increase of homeless that has caused a number of cities ordering homeless “states of emergency.”

The Cost of Failing to Treat Addiction
Because addiction and homelessness are so inextricably linked, without critical services and intensive interventions to address the addiction and other myriad issues that typically accompany homelessness, returns to the street are inevitable. The issue is not just a question of effectiveness; it’s also a question of cost. Persons with active addictions lose their housing and return to the streets at vastly higher rates than people whose addictions are controlled and whose needs are supported. Substance abuse and relapse are not just correlated with homelessness; it is correlated with repeat homelessness. Each return to homelessness and each trip through the revolving door of homeless programs represent duplicated expense and diminishing returns.

Policymakers focused on long-term solutions to homelessness must embrace the fact that substance abuse treatment is not a luxury for homeless people in housing programs. Research suggests that including recovery homes and programs that emphasize sober living as alternatives in potential housing services increases consumer choice and leads to positive recovery outcomes. In addition, no rationale exists why one type of permanent housing is subsidized by government funding (Housing First) and one is not (recovery housing). To make housing programs work for people battling addiction, treatment in a safe environment with recovery at its core is absolutely essential.