NAMI NC Position on Adult Care Homes and Department of Justice (DOJ) Ruling  
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North Carolina’s long and inexcusable reluctance to fund appropriate housing options for those living with mental illness has finally caught up with the state.

Lack of action over the years has resulted in another self-inflicted crisis within the mental health care system. Due to the lack of more appropriate residential placements, like homes and scattered-site supported living, people experiencing mental illness have had no choice but to accept residence in adult care homes that were never designed to meet their needs.

What does this mean for those living with mental illness?

- they may not be close to their family;
- they are not living in a home in which they would choose to live if any other alternative were available;
- they may be required to live alongside people who are decades older than they are;
- they often do not have any friends or other social support system surrounding them;
- they live in environments with rules and restrictions that are not typical for homes;
- they are now threatened with rulings that may not permit them to remain in what may have by default become their “home”.

To complicate things a little more, at times it can actually be dangerous to have a mix of people with such disparate needs and ages in one facility.

In the July 2011 Department of Justice communication to the North Carolina Attorney General, from 2003 to 2011 there were no fewer than five studies completed on the problem of co-locating individuals who have mental health care needs with the elderly in family care homes. The recommendations have been consistent: North Carolina needs more appropriate housing alternatives. And they have consistently been ignored.

We have lacked the political will to seriously address even this most basic of human needs – the need for a home. Now that there are findings by the Department of Justice that the state is in violation of the law, this could, and should, lead to a solution. But the timing could not be worse- it comes at a time when the budget is being slashed. Had North Carolina started to address this need in 2003, today’s challenges might have been much less onerous. Many more people would be receiving the services and supports they need in safe, affordable, and stable housing.

Unfortunately, we do not have that advantage. If the state cannot provide the Department of Justice with a reasonable plan that can be activated almost immediately, we face very
real potential for litigation in Federal Court for failing to honor the laws of this nation and the rulings of the Supreme Court.

What values should be taken into account before formulating recommendations on this complex issue?

1. Research on Outcomes
   Research has proven that scattered site supportive housing consistently yields better outcomes at a lower overall cost than congregate care models. It has been adopted as an evidence-based best practice by the Substance Abuse and Mental Health Services Administration (SAMHSA) in virtually every state in the nation. North Carolina has functionally refused to recognize this as a viable model. It has been said that the reason for this is that it is very hard for an “industry” to profit from this model so there is no incentive for them to advocate for it.

2. The Differences
   What really is the difference between scattered site homes and adult care homes? Size of the home and number of people for which each staff person is responsible, access to the community, the freedom to come and go, and staff training are all very different. Location is also different because scattered site homes are typically in neighborhoods. When done right, they can blend in like any other home and the resident is often very much a part of his or her local community. Adult care homes are much larger and typically institutional in design and appearance. The majority of adult care home residents are minimally involved in their local community because of the size and location of the facility. Shared and supported living options don’t just look like other homes – they are just like other homes in the community, except that supports are brought to the individuals as needed by the two or three people living there.

3. Civil Rights
   Basic civil rights are being violated when we intentionally segregate people with disabilities from their community and limit access to the same opportunities that all other citizens enjoy through our public policies and funding strategies.

4. Costs
   Funding housing is always cheaper than funding emergency room stays, law enforcement personnel, jails, or prisons. A person in control of his or her own housing, through ownership, rental, or sharing, is a person who is well on his or her way to long-term success in recovery. When we deny people access to a home to call their own, we are delaying or preventing recovery investing in models that don’t work.

5. Foreclosure Opportunities
   Housing markets across North Carolina are troubled with vacant homes that suppress the value of other occupied homes. We believe that it is the right time
for leveraging supply-demand to meet the needs of those with mental illness while also providing jobs through renovation and rehabilitation opportunities. With interest rates at an all-time low and foreclosures clogging the market, now would be a good time for the investment in housing – with a very high rate of return for all involved.

**Recommendations:**

1. *Allow Special Assistance (SA) funds to pay for housing of the person's choice,* rather than be limited to licensed facilities. This policy limits choice and leads to the institutional bias in our state.

2. *Expand NC’s award-winning Housing 400 – in five years add 10,000 units.* When coupled with a relatively small amount of state money, North Carolinians with disabilities were able to move to safe, affordable, and decent housing. Individuals with disabilities, including mental illness, can rarely afford safe and decent housing without a little subsidy support. We provide this subsidy to the adult care homes – why don’t we provide the same supports to people who want to live in their own homes and apartments? Let’s use Tennessee’s Creating Homes Initiative as a model; through a modest investment of $2.5M, over $250M was leveraged. 10% of those 10,000 units were home ownership deals. Let’s make it public policy to have these units in integrated locations throughout our communities.

3. *Expand funding for a start-up program that assists with* deposits for housing and utilities.

4. *Increase funding to the Housing Trust Fund.*

5. *Provide funding to ensure that the services necessary to support individuals in the homes of their choice are in place.* This will include statewide availability of mobile crisis teams and ACT Teams (delivered as they were designed), targeted intensive case management (to prevent catastrophic events and excessive use of the most critical resources – the Emergency Departments and local law enforcement), and Supported Employment; so people can get jobs to support themselves.

6. *Fund Peer Support as a valid and cost-effective way to assist people to live successfully in the community* as the research has proven it is.

7. *Commit to continue investing in housing and supports as the population grows* with a comparable percent of increase to the funding for subsidies.

While it takes time to locate, renovate/rehab, or build these housing alternatives, and to find and train the right providers to support people in their new homes, we must not use
this as an excuse to delay immediate action that can be taken, including the development of a comprehensive solution to this problem.

Most importantly, let’s take time to involve families and consumers in discussions and choices. We must eliminate institutional bias, especially making funding and services contingent upon living in a facility. People should be able to get the mental health care they need regardless of where they reside. We applaud the DOJ for including in their findings the importance of people who currently live in the adult care home facilities being able to make truly informed choices about where they want to live. We ask them to give us time to do this important job right. That’s empowerment.

Helpful links and resources:

http://www.recoverywithinreach.org/housingwithinreach/creatinghomesinitiative
http://www.tacinc.org/resources/data/pricedout/ The Technical Assistance Collaborative “Priced Out in 2010” (independent living as compared with congregate living)
http://www.tacinc.org/downloads/Worst%20Case%20Housing%202009%20FINAL.pdf
TAC comments on housing needs of people with disabilities