

San Diego County links homeless San Diegans with mental illness to supportive housing as a first step towards stability and recovery.

Housing Matters

Supportive housing is a community-based service model that provides housing integrated with support services such as: mental health services, primary health care, alcohol and drug services, case management and social services to help homeless individuals with mental illness gain stability and live more productive lives.

Supportive housing consists of two main components: permanent housing and social and mental health services. The combination of a stable home and access to mental health and social services, medical care, counseling, education and employment, has been proven to benefit not only the participants, but their neighborhoods and communities as a whole.

In San Diego, an estimated 9,641 people are homeless. Roughly 59 percent of unsheltered homeless

individuals have mental illness, a major contributing factor to their homelessness. Often, those with mental illness face discrimination when looking for housing. San Diego County Behavioral Health Services Division (BHS) is working to break the stigma associated with mental illness and homelessness. Homeless San Diegans with mental illness are young and old, women and men, parents, sons and daughters.

Individuals with mental illness are much more likely to become homeless than the general population because untreated mental illness can disrupt their ability to maintain relationships, hold jobs, receive health care, respond to offers of help, or maintain occupancy. Like other illnesses such as diabetes or heart disease, mental illness can be successfully treated with regular access to mental health care. But, treatment is seldom successful when people are living in shelters or on the street.

In the San Diego region, BHS is partnering with service providers and housing developers to address the dual stigmas of homelessness and mental illness. There are six Full Service Partnerships (FSP) that provide mental health services, case management, recovery services, educational programs, employment opportunities or training and social services. The FSPs target all populations—adults, older adults, transitional aged youth, and those in the justice system. The partnership between BHS, the FSPs, and the housing developers is instrumental to the success of the program. This partnership recognizes that Housing Matters, because a stable home in combination with social and mental health services can break the cycle of homelessness.

Home is where recovery begins.









SupportiveHousing = Recovery

Program Successes

National and local studies indicate that supportive housing provides a cost-effective, long-term solution to the continuing challenge of homelessness coupled with mental illness.

According to a University of California San Diego, School of Medicine study, published in the American Journal of Psychiatry, supportive housing is an effective health recovery process for homeless individuals with mental illness.

A stable home with social and mental health services result in (a):

- 70% increase in recovery.
- 42% can work after six months of supportive housing.
- 32% decrease in emergency services, and 14% fewer doctor's visits lowering public health costs by increasing the availability of hospital beds, and reducing emergency room waiting time simply by helping residents become stable and healthier.
- Medicaid payments drop an average of 55% when clients enter supportive housing.
- 17% fewer justice system referrals.
- Provides educational opportunities for participants, enabling them to become more self-sufficient.
- Participants feel better, need fewer psychiatric services, and discontinue alcohol and substance abuse.

Supportive Housing does/is:

- **not** increase crime or vandalism in neighborhoods.
- **not** a temporary shelter or psychiatric facility.
- not lower property values.

How It Works

Supportive housing units are typically part of a larger affordable housing development. BHS works with community partners and housing developers to designate a small percentage of units within the developments for qualified individuals who have psychiatric disabilities and who are homeless or at risk of homelessness. Tenants in these designated units are also provided with ongoing social and mental health services essential to their recovery and successful occupancy.

- Participants qualified for the services are people diagnosed with serious mental illness or other psychiatric disabilities, such as depression, post traumatic stress disorder or schizophrenia, who are also homeless or at risk of becoming homeless.
- All applicants for the designated units are screened and selected for occupancy.
- Tenants in the designated units hold their own leases, contribute to their rents, and are subject to the same rules and regulations as all other tenants.
- Tenants in supportive housing units are provided mental health services, other medical care, counseling and key social services that support their recovery for a healthier, more productive life.

Study after study has shown that the simple act of providing a home to homeless individuals with mental illness has positive, dramatic results — both for participants and for communities.

MHSA Process

Supportive housing is funded by the Mental Health Services Act (MHSA), a California voter-approved measure passed in 2004. A county-wide 30-day public notification process is required for all MHSA Housing Program-funded projects. All County residents have an opportunity to provide input and feedback to BHS during the 30-day process.

The 30-day Public Review posting for upcoming MHSA Housing Program developments can be found at: http://www.sandiego.networkofcare.org/mh/countycontent/san-diego/housing.cfm.

PROGRAM FACT SHEET



Developments and Developers in San Diego

The long-term goal for the County's MHSA program is to provide 241 supportive housing units for the homeless with mental illness. However, this is highly dependant upon the availability of funds from financial markets.

Currently, there are 12 County MHSA projects—with an estimated value of 34 million dollars in state and local funding—identified for development across the region. These 12 supportive housing developments outline just

one of the many elements of MHSA's supportive housing program. If all the existing projects are successfully developed, they will provide 973 housing units, with 194 of the units designated for MHSA supportive housing residents.

Developers currently active in the MHSA program: Father Joe's Villages, Townspeople, Squier/ROEM Properties, Affirmed Housing, BRIDGE Housing Corporation, MAAC Project, Wakeland Housing, Housing Development Partners, Hitzke Development and Meta Housing.

Supportive housing units have been integrated into developments across the San Diego region.

Project Name	# of MHSA Apartments	Total Units	Expected Opening	Location	Target Population	Developer
Developments Currently	Operating					
34th Street	5	34	2010	San Diego	Adults	Townspeople
15th & Commercial	25	65	2011	San Diego	Older Adults	Father Joe's Villages
Cedar Gateway	23	65	2011	San Diego	Adults Older Adults	Squier/ROEM Properties
The Mason	16	16	2012	San Diego	Adults	Housing Development Partners
Developments with App	lications App	proved	by CALHFA			
Citronica 1	15	56	2013	Lemon Grove	Transition Age Youth	Hitzke Development
Citronica 2	10	80	2013	Lemon Grove	Older Adults	Hitzke Development
Connections Housing	7	73	2013	San Diego	Center Star	Affirmed Housing
Tavarua Senior Apts.	10	50	2013	Carlsbad	Older Adults	Meta Housing
COMM22	13	130	2014	San Diego	Transition Age Youth	BRIDGE Housing/ MAAC Project
9th & Broadway	25	115	2015	San Diego	Transition Age Youth/ Adults	BRIDGE Housing
The Parkview	14	84	2014	San Marcos	Adults	BRIDGE Housing



More Cost Effective

Providing a home is more cost efficient than allowing people with mental illness to remain untreated and living on the streets. Nationally, the cost of one hospital stay for a person who experiences chronic homelessness and mental illness typically exceeds the cost of an entire year of funding for a supportive housing unit.

Supportive *Housing Matters* — to improve communities, to help the people — our friends, brothers, mothers, sons and daughters— who need help.

Funding

Supportive Housing is funded by the state of California Mental Health Services Act, a voter-approved measure that taxes individuals who earn more than \$1 million a year. These individuals pay an annual tax of 1 percent on any income over \$1 million.





Housing Matters because homeis where recovery begins.

If you know of someone who may benefit from supportive housing, or to learn more about why Housing Matters and the County of San Diego's supportive housing projects, please visit www.HousingMattersSD.org.

Housing Matters funded by the County of San Diego and produced by:



3033 Fifth Avenue, Suite 200 San Diego, CA 9 2103 (619) 814-2370 CookandSchmid.com

Sources for this Fact Sheet:

Gilmer, Stefancic, Ettner, Manning, and Tsemberis, "Effect of Full Service Partnership on Homelessness, Utilization and Costs of Mental Health Services and Quality of Life among Adults with Severe Mental Illness," Archives of General Psychiatry, November 2009.

University of California San Diego School of Medicine study published in the American Journal of Psychiatry, February 2005.

2002 Arthur Andersen report on homelessness

2012 Regional Task Force on the Homeless.



FREQUENTLY ASKED QUESTIONS



San Diego County links homeless San Diegans with mental illness to supportive housing as a first step towards stability and recovery.

What is "supportivehousing?"

Supportive housing is a community-based service model that provides housing integrated with support services such as: mental health services, primary health care, alcohol and drug services, case management, and social services to help homeless individuals with mental illness gain stability and live more productive lives. Supportive housing programs are used throughout the United States as a way to solve the dual challenges of homelessness and mental illness.

The National Coalition to End Homeless estimates that supportive housing is responsible for a 28 percent decline in chronic homelessness nationally between 2005 and 2008, with some communities experiencing even sharper declines.

Supportive housing has two components:
1) permanent housing for participants and
2) mental health services, case management services, rehabilitation and recovery services, substance abuse services, and social services for participants.

Who provides supportive housing programs?

Supportive housing is sponsored by the County of San Diego's Health and Human Services Agency under the purview of the Behavioral Health Services Division (BHS) in partnership with mental health service providers and housing developers to provide housing to persons experiencing homelessness and mental illness.

Supportive housing units are integrated into affordable housing developments across the region.

Who needs supportive housing?

Supportive housing is for our brothers, sisters, mothers, fathers, sons and daughters. People who are either homeless or at high risk of becoming homeless and who are living with mental illness.

- According to the National Institute of Mental Health, one in every four Americans suffers from a mental illness in a given year.
- Approximately 3.5 million Americans, including 1.35 million children, experience homelessness in a given year, according to the National Law Center on Homelessness and Poverty. The actual number is probably much greater.
- Approximately 59 percent of the region's unsheltered homeless suffer from mental illness.

- People with mental illness are much more likely to become homeless than the general population because untreated illness can disrupt their ability to maintain relationships, hold jobs, receive medical care, or respond to offers of help.
- Like other illnesses such as diabetes or heart disease, mental illness can be successfully treated with regular access to health care.

How does supportive housing work?

Supportive housing units are generally integrated in new affordable housing developments. BHS works with developers and community partners to make a small percentage of the units available to qualified participants in the Full Service Partnership (FSP) programs and to provide them with mental health services, case management, recovery services, educational programs, employment opportunities or training, and social services.

Participants hold their own leases and contribute to their rents, and are subject to the same rules and regulations as all other tenants.



FREQUENTLY ASKED QUESTIONS

Who pays for supportive housing?

Supportive housing, among other mental health and recovery services, is funded by the Mental Health Services Act (MHSA), a California voter-approved measure passed in 2004. This act taxes individuals with a personal income of more than \$1 million a year. These individuals pay a one percent tax on the portion of their income that exceeds \$1 million.

Is supportive housing safe to have in my neighborhood?

Yes. Participants enrolled in the FSP programs are carefully screened for eligibility before being accepted to the housing program and receive ongoing support and care.

- Statistics show that crime does not increase in neighborhoods with supportive housing.
- Supportive Housing is not a temporary shelter or psychiatric facility.

Will my home decrease in value if supportive housing comes here?

No. Numerous studies have proven that home values do not decrease when affordable housing developments with supportive housing for individuals with mental illness comes to a neighborhood. In fact, they frequently increase because of neighborhood improvements and revitalization.

Why should I support the supportive housing program?

Supportive *Housing Matters* because it works. It helps people get treatment for their illnesses and stop living on the streets. It helps communities save money on services for individuals experiencing chronic homelessness and mental illness.

Homeless San Diegan's with mental illness are a small percentage of the overall population, however, they use a large proportion of the most expensive community resources including acute hospital care, emergency department services, and law enforcement services.

- Studies in several cities have shown that a chronically homeless individual costs an average of \$42,000 a year in public services such as emergency care.
- In supportive housing, that cost dropped to \$16,000 a year—and often much less.

What kind of results does supportive housing get?

- A 70% increase in recovery over traditional treatment programs.
- Supportive housing increases part-time and full-time employment for participants, enabling them to become more self-sufficient with 42% of participants able to work full or part-time jobs after just six months of supportive housing.
- Formerly homeless people who move to supportive housing take better care of themselves, follow their medication schedules, and discontinue alcohol and drug abuse.
- Housing homeless people with mental illness reduces ER visits.
- Medicaid payments drop an average of 55% when clients enter supportive housing.
- 17% fewer justice system referrals.

Supportive Housing Projects and Developers in San Diego

Currently, there are 12 County MHSA projects—with an estimated value of 34 million dollars in state and local funding—identified for development across the region. These 12 supportive housing developments outline just one of the many elements of MHSAs supportive housing program. If all the existing projects are successfully developed, they will provide 973 affordable housing units, with 194 of the units designated for MHSA supportive housing residents.

Developers currently active in the MHSA program: Father Joe's Villages, Townspeople, Squier/ROEM Properties, Affirmed Housing, BRIDGE Housing Corporation, MAAC Project, Wakeland Housing, Housing Development Partners, Hitzke Development and Meta Housing.

Supportive *Housing Matters* because home is where recovery begins.

If you know of someone who may benefit from supportive housing, or to learn more about supportive housing, visit www.HousingMattersSD.org.

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2002 Arthur Andersen report on homelessness







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What is Supportive Housing?

Supportive housing is a community-based service model that provides affordable housing integrated with support services such as:

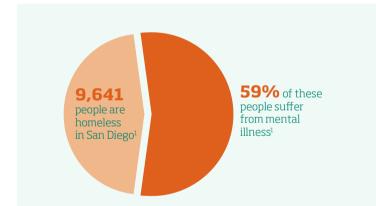
- · mental health services
- · primary health care
- alcohol and drug services
- · case management
- · social services

Supportive housing is for people who are either homeless or at high risk of becoming homeless and who are living with mental illness. They may be our brothers, sisters, parents, sons and daughters.

Individuals with mental illness are much more likely to become homeless than the

general population because their mental illness, left untreated, can disrupt their ability to maintain relationships, hold jobs, receive health care, respond to offers of help, or maintain occupancy. Mental illness is a major contributing factor to their homelessness. This model helps these individuals gain stability and live more productive lives.

The County of San Diego's Behavioral Health Services Division (BHS) partners with service providers and housing developers to provide supportive housing and break the stigmas of homelessness and mental illness.





Why it works

Working with its partners, BHS designates a small percentage of units within affordable housing developments for qualified individuals who have psychiatric disabilities and who are homeless or at risk of homelessness and are in Full Service Partnership (FSP) programs administered by BHS. Tenants referred by the FSP to these designated units are also provided with ongoing social and mental health services that are essential to their recovery and occupancy. In addition, the tenants are given educational opportunities, enabling them to become more self-sufficient.

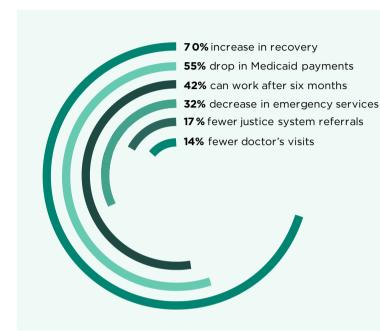
All applicants are screened and selected for occupancy. Supportive housing tenants hold their own leases, contribute to their rents, and are subject to the same rules and regulations as all other tenants.

^{1. 2012} Regional Task Force on the Homeless

^{2.} National Institute of Mental Health

Program successes

A stable home with integrated social and mental health services produces positive results, such as:



Supportive Housing:

- does not increase crime or vandalism in neighborhoods
- is not a temporary shelter or psychiatric facility
- does not lower property values



HOUSING MATTERS because home is where recovery begins

If you know of someone who may benefit from supportive housing, or to learn more about why Housing Matters and the County of San Diego's supportive housing developments, please visit www.HousingMattersSD.org

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San Diego County links homeless San Diegans with mental illness to supportive housing as a first step towards stability and recovery.



9th & Broadway

Total Units	250
Number of BHS Units	25
Employee Units	2
Number of Affordable Units	223

Anticipated Completion Date December 2014

Full Service Partnership (FSP) Providence Community Services Community Research

Foundation

9th & Broadway

901-921 Broadway & 917 9th Avenue | San Diego, CA | 92101

DEVELOPER

BRIDGE Housing Corporation www.bridgehousing.com

CONTACT

Aruna Doddapaneni adoddapaneni@bridgehousing.com (619) 231-6300

PROJECT DESCRIPTION

9th & Broadway is a planned 250-unit affordable housing community located at the southeast corner of 9th Avenue and Broadway in downtown San Diego. 9th & Broadway will be a 17-story building with two levels of underground parking. Of the 250 apartment units, 25 will be reserved for adults and transition age youth with serious mental illness eligible for supportive services under the Mental Health Services Act (MHSA) program. This program is part of a larger initiative by the County of San Diego's Behavioral Health Services Division (BHS) to link homeless or at risk of homelessness individuals with mental illness to permanent housing and social services.

Two units will be reserved for 9th & Broadway employees. The remaining 223 units will be available to low income families and individuals earning between 30 and 60 percent of the Area Median Income (AMI).

Residents of 9th & Broadway will have access to three major common areas, all of which are integrated with open air spaces to take advantage of San Diego's climate. The complex also includes a kitchen, community room and outdoor space on the ground floor. The fifth floor includes a laundry room, supportive services office, seminar room and outdoor space including barbecues and a resident garden. The 15th floor features a terrace with views of San Diego facing the Bay. There will be approximately 5,775 square feet of ground floor retail space fronting Broadway as well as 9th Avenue.

TOTAL ESTIMATED COST \$76,000,000 BHS ESTIMATED CAPITAL FUNDS \$2,812,150

The development of 9th & Broadway is made possible through the financial assistance and dedication of Centre City Development Corporation, California Department of Housing and Community Development, California Housing Finance Agency as Administrator of the Mental Health Services Act Housing Program and San Diego Housing Commission. BHS is contributing an additional estimated \$1,349,832 in operating funds.





WHY IS THIS PROJECT HERE?

The goal of 9th & Broadway is to provide safe, livable, affordable housing linked to client centered, voluntary, wraparound services to promote residential stability and self-sufficiency.

County of San Diego BHS and 9th & Broadway have partnered with two Full Service Partnership (FSP) providers to provide supportive services to the BHS tenants: Providence Community Services for the transition age youth tenants, and Community Research Foundation (CRF) for the adult tenants. Providence Community Services has provided quality mental health and substance abuse services for children, youth, adults and families throughout Southern California since 1996. BHS transition age youth tenants in 9th & Broadway will typically be participants in Providence's Catalyst program, a program for homeless or at risk of homelessness transition age youth who have been diagnosed with a serious mental illness. Prior to admission to the Catalyst program, the transition age youth residents may have been in foster care, juvenile institutions, or been involved in the justice system.

CRF will provide BHS adult tenants of 9th & Broadway Assertive Community Treatment (ACT), an evidence-based form of intensive case management. For each eligible adult BHS tenant, CRF will assign an ACT team



that is available 24/7 to be responsible for structuring a service plan for each client and monitoring the client's progress.

The tenants in the 25 BHS units will receive all necessary services, including assessment and evaluation, mental health services, emergency assistance, individual goal/service planning, independent living skills development and employment services, to lead them to self-sufficiency and break the cycle of homelessness.

What is BHS "supportive housing?"

Supportive housing is a community-based service model that provides housing integrated with support services such as: mental health services, primary health care, alcohol and drug services, case management, and social services to help homeless individuals with mental illness gain stability and live more productive lives.

Supportive housing consists of two main components: permanent housing, and social and mental health services. The combination of a stable home, coupled with access to mental health and social services, medical care, counseling, education and employment, has been proven to benefit not only the participants, but their neighborhoods and communities as a whole.

In San Diego, an estimated 9,641 people are homeless. Roughly 59 percent of unsheltered homeless individuals have mental illness, a major contributing factor to their homelessness.

BHS is partnering with service providers and housing developers to address the dual stigmas of

homelessness and mental illness. The partnership recognizes that Housing Matters, because a stable home in combination with social and mental health services can break the cycle of homelessness.

Home is where recovery begins.

For more information about:

BHS's Housing Matters campaign www.HousingMattersSD.org

BRIDGE Housing Corporation

www.bridgehousing.com (619) 231-6300

The FSP Provider:

Providence Community Services www.provcorp.com (619) 640-3266

Community Research Foundation www.comresearch.org (619) 275-0822









Supportive Housing: HOME IS WHERE RECOVERY BEGINS

The County of San Diego Health and Human Services Agency (HHSA) launched **Housing Matters**, a countywide campaign to reduce the stigma and discrimination around homelessness and mental illness, and increase awareness, understanding and backing for supportive housing as a solution to these related issues.

In January 2010, San Diego County Department of Mental Health Services retained Cook + Schmid to create and implement the multi-faceted community outreach campaign, **Housing Matters**

Housing Matters Campaign Message Points

- 1. For homeless San Diegans with mental illness, home is where recovery begins.
- 2. Mental illness is a major cause of homelessness.
- 3. Homeless San Diegans with mental illness are your brothers and sisters, parents, sons and daughters.
- 4. A stable home leads to recovery.
- 5. Often, homeless San Diegans with mental illness get jobs after getting housing.
- 6. Housing the homeless with mental illness reduces ER visits.

Campaign Deliverables

Audit	Website	Fact Sheets, FAQs, One-pagers,	
Focus Groups	Presentations	Direct Mailers, etc.	
Baseline Survey (January 2010)	Documentary Videos (Supportive Housing Clients + Advocates)	'Step into my shoes' Interactive Booth	
Tracking Survey (October 2011)	,	Media Relations	
Branding	Public Service Announcements	Mad'a Dana	
-	Development/Developer Outreach	Media Buy	

Media Buy includes

Broadcast (Local TV and Cable)	Billboards	Bus Shelters
Radio Broadcasters Association (RBA)	Bus Sides	Online, Print + Radio Interviews



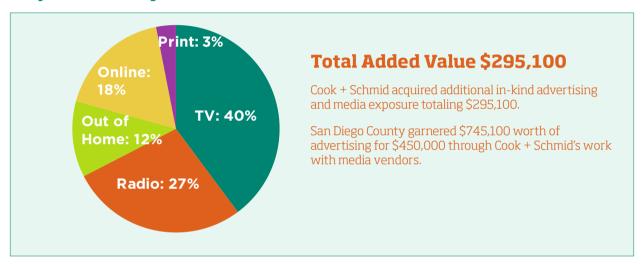
CABLE + Broadcast	Average Reach	Freque	ency *This
Adults 21-54	84.5%	7.5	means that we reached 95% of our
Households	95%*	6.3	target (Adults 21-54 and Households), an average
			of 6 times per month since campaign launch in November, 2010. This is HUGE for a campaign of this size!

Total number of Cable + Broadcast			
Quantity Placed	Quantity Run	FREE Spots	
3,020	4,675	1,655	

*REACH is the % of people exposed to y our message

*FREQUENCY is the number of times youreach each person with your message

Project In-Kind by Percent



Tracking Survey Results

In January 2010, a baseline survey of San Diego residents was conducted to establish statistically reliable benchmark measures of the public's awareness, understanding, and opinions as they relate to supportive housing, persons with psychiatric disabilities, and related issues. The benchmark findings helped shape the **Housing Matters** campaign.

In October 2011, Cook + Schmid conducted a Tracking Survey to evaluate the success of the campaign and to measure the impacts of the campaign in raising public awareness of—and shaping opinions about—supportive housing in San Diego.



San Diego, CA 92103

(619) 814-2370 CookandSchmid.com Kalie Standish

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SAN DIEGO COUNTY MENTAL HEALTH SERVICES

Mental Illness Stigma and Housing Discrimination Reduction Campaign

TRACKINGSURVEY

ExecutiveSummary

INTRODUCTION: Home is where recovery begins. The County of San Diego Health and Human Services Agency (HHSA) launched *Housing Matters*, a countywide campaign to reduce the stigma and discrimination around homelessness and mental illness, and increase awareness, understanding and backing for supportive housing as a solution to these related issues. Opposition to supportive housing is usually based on inaccurate information and misperceptions. Experience with existing units shows that fears about how supportive housing will change a neighborhood are unfounded. Therefore, a major goal of the campaign was to increase both the familiarity with the term "supportive housing" and specifically what this term meant.

Supportive housing provides permanent housing units for people with psychiatric disabilities who have previously been homeless or are at risk of becoming homeless. Typically integrated within a larger affordable housing development, supportive housing is not an emergency or temporary shelter or treatment facility. Tenants hold their own leases and are responsible for at least a portion of their rent. In addition to providing a stable living environment, supportive housing includes services that help tenants to remain stable, including counseling, job training, and substance abuse assistance.

To achieve the goals of the campaign, Cook + Schmid developed a strategic plan and best practices that called for implementing the following elements:

Audit Website Fact Sheets, FAQs, One-Pagers, Direct Mailers, etc. Focus Groups Presentations 'Step into my shoes' Baseline Survey (January 2010) Documentary Videos (Supportive Interactive Booth Housing Clients + Advocate) Tracking Survey (October 2011) Media Relations **Public Service Announcements** Branding Media Buy Development/Developer Outreach

PURPOSE: In January 2010, a baseline survey of San Diego residents was conducted to establish statistically reliable benchmark measures of the public's awareness, understanding, and opinions as they relate to supportive housing, persons with psychiatric disabilities, and associated issues. The benchmark findings helped shape the Housing Matters campaign. In October 2011, Cook + Schmid conducted a Tracking Survey to evaluate the success of the campaign and to measure the impacts of the campaign in raising public awareness of—and shaping opinions about—supportive housing in San Diego.

Key Findings

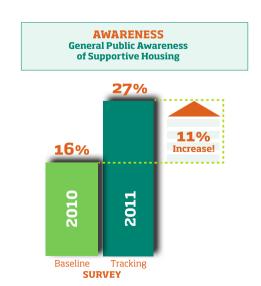
Didthe campaign raise public awareness of supportive housing in San Diego?

Yes. The most pronounced effect of the public education campaign has been to raise the public's awareness of supportive housing as a concept. Whereas 16% of the general public had heard of supportive housing in 2010, the campaign succeeded in increasing awareness to 27% as recorded in this tracking survey.

*11% increase over the course of 21 months

Didthe campaign increase the public's accurate understanding of supportive housing?

Yes. Among those who had heard of supportive housing prior to the interview, the percentage who were able to describe supportive housing correctly tripled between the baseline and tracking surveys in response to the camp aign.





The term supportivehousing means different things to different people, in the baseline survey, many respondents thought the term referred to housing assistance for low-income families as opposed to housing that is provided to peoplewith psychiatric disabilities who have been homeless or are at risk of being homeless. Although a substantial percentage of the general public continues to have this misperception, the campaign has succeeded in improving the public's knowledge and understanding of the concept overall.

Did the campaign succeed in increasing public acceptance of supportive housing?

General supportfor the concept was so high in the baseline study (86%) that the campaign had little room to improve supportfor supportive housing in general (88%). Although the vast majority of residents supportthe concept of supportivehousing, the true litmus test is whether individuals are willing to supporthaving it in their neighborhood. From this perspective, the campaign was effective in improving the public's acceptance of supportivehousing. Whereas 64% of San Diego residents in 2010 indicated that they would supporthaving supportivehousing for individuals with psychiatric disabilities within a half mile of their home, the post-campaign percentage was substantially higher at 71%.

In what respects has public opinion about supportive housing not changed?

The importance that San Diego residents place on reducing the homeless populationand providing counseling, training and supportservices to the disabled, remained steady between the baseline and tracking surveys. For example, whereas 62% of residents rated reducing the homeless population as at least very important in 2010, the corresponding percentage in 2011 was similar at 64%. The perceived need for more supportive housing during this period also remained steady, with 65% perceiving a need for additional housing, 15% seeing no need, and 20% unsure.

ACCEPTANCE SD Residents in Support of Supportive Housing Within 1/2 mile of Their Home



KNOWLEDGE General Public's Ability to Describe Supportive Housing



DATA COLLECTION: The method of data collection was telephone interviews conducted during weekday evenings (5:30 p.m. to 9 p.m.) and on weekends (10 a.m. to 5 p.m.) between September 28 and October 2, 2011. It is standard practice not to call during the day of weekdays because most working adults are unavailable and thus calling during those hours would bias the sample. Interviews averaged 10 minutes in length.

NEXT STEPS: The findings in the Tracking Survey reached the academic standard of success and showcased the positive effects the *Housing Matters* campaign has had on increasing the awareness and supportof supportive housing among residents in San Diego. While the mass media portion of the contract has come to a close, moving forward into year 3 of the contract, Cook + Schmid has developed several strategic projects to hone in on those areas where additional education and supportis needed. The 'What is Supportive Housing' documentary video explains what supportivehousing is, dispels the misperceptionsaround this highly successful service, and puts a human face on the issue by telling the stories of Alex, Carol and Hortencia, who are no longer living on the streets and now have a home. An interactive kiosk/booth will launch in December and will be available at county buildings, libraries, health clinics and special events throughout the region. Additional videos, PSAs and targeted community presentations and outreach tactics will all help reinforce the concept of supportivehousing and help alter any misperceptions/discriminations associated with the service model.

For more information, please visit www.HousingMattersSD.org or by email at info@HousingMattersSD.org.

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