

STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

Senate Committee on Ways and Means
H.B. 1934 SD1, Housing

Comments of Linda Rosen, M.D., M.P.H.
Director of Health

March 28, 2014

1 **Department's Position:** The Department of Health (DOH) appreciates the intent of this measure as
2 amended, provided that its enactment does not reduce or replace priorities within our Executive
3 Supplemental Budget Request for Fiscal Year 2014-2015.

4 **Fiscal Implications:** Sections 2 and 3 appropriate unspecified sums for substance abuse treatment and
5 mental health support services and clean and sober housing support services, respectively.

6 **Purpose and Justification:** Sections 2 and 3 of the measure appropriate unspecified sums, to be
7 expended in Fiscal Year 2014-2015 by DOH for substance abuse treatment and mental health support
8 services for individuals who are homeless or at risk of becoming homeless, and clean and sober housing
9 support services.

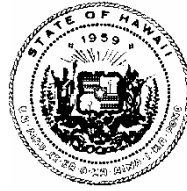
10 Persons affected by substance use and mental health are at higher risk for homelessness, chronic
11 health conditions, involvement in the criminal justice system, social isolation and often become high
12 users of health care services. Programs that provide dual treatment focus both on the substance and on
13 mental health stabilization. Treatment episodes are generally longer in duration and more
14 comprehensive; typically, providing more positive client outcomes and a higher rate of long term
15 recovery. Long term recovery is also strongly tied to stable housing that is drug and alcohol free.

1 Stable housing is a critical component in the continuum of substance abuse treatment and
2 recovery. Approximately 17 percent of clients served by ADAD contracted providers did not have
3 stable housing at admission. At discharge and follow-up, unstable housing status was reduced to
4 14 percent and 7 percent, respectively.

5 As a member of the Governor's Hawaii Interagency Council on Homelessness which is
6 comprised of community leaders, state department directors, and federal agency representatives, DOH is
7 involved with the development of a unified plan on addressing homelessness by increasing transitional
8 and permanent housing options and acquiring increased federal funding.

9 We are aware of the need for clean and sober housing support services for those who are
10 homeless or at risk of becoming homeless. Within DOH, efforts to address homeless clients with mental
11 health, substance use and co-occurring mental illness and substance use disorders are coordinated
12 between the Alcohol and Drug Abuse and Adult Mental Health Divisions to ensure that clients receive
13 appropriate care. It should be noted, however, that as needs are identified and priorities are assigned to
14 address the issue of homelessness, the proposed services in this measure must also be viewed within the
15 context of the Department's Executive Supplemental Budget Request.

16 Thank you for the opportunity to testify on this measure.
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STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
P. O. Box 339
Honolulu, Hawaii 96809-0339

March 28, 2014

MEMORANDUM:

TO: The Honorable David Y. Ige, Chair

FROM: Patricia McManaman, Director

SUBJECT: **H.B. 1934, H.D. 1, S.D. 1 – RELATING TO HOUSING**

Hearing: Friday, March 28, 2014; 9:35 a.m.
Conference Room 211; State Capitol

PURPOSE: The purposes of H.B. 1934, H.D. 1, S.D. 1, is to appropriate unspecified amounts to various programs that provide housing, housing assistance, and supportive services to individuals at risk of or experiencing homelessness, and amends the structure and composition of the homelessness working group.

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this measure to provide funding for a variety of programs that impact our State's ability to address homelessness provided it does not adversely affect priorities set forth in the Executive Supplemental Budget.

Regarding Part I, Sections 2 and 3 of this bill, the DHS defers to the Department of Health.

Regarding Part I, Section 4, the DHS defers to the Hawaii Public Housing Authority (HPHA).

Regarding Part II for the Housing First program, the Department asks that the Legislature support the Department's priorities as requested in the Executive Supplemental Budget submitted by Governor Abercrombie which contains a request for \$1,500,000 for continuation of the Housing First Program. The second year of the State's Housing First program will be favorably impacted by the Department of Health's recent award from the Substance Abuse and Mental Health Services Administration (SAMHSA) grant for intensive support services for unsheltered homeless who have severe psychiatric disabilities and/or co-occurring substance abuse disorders. Legislative support of the Governor's budget request will allow the Housing First program to be operated for a third fiscal year with substantial opportunity for leveraging of funding with the DOH's program.

Housing First is a nationally recognized best practice that was implemented for the first time in Hawaii in 2012. The Housing First program, administered by DHS, has been successful in engaging and placing some of urban Honolulu's most chronically homeless and vulnerable individuals into stable housing. A rich array of support services (substance abuse, mental health, general health/disability treatment) has been accessed to help provide the "wrap around" services that are necessary to maintain this population in stable housing situations.

The funding requested in the Executive Supplemental Budget for the Housing First Program is critical to addressing housing for the chronically homeless. Including Housing First funding in the DHS base budget will allow the issuing of contracts for multiple years and bring stability for the providers resulting in more stable housing options for Hawaii's homeless.

Part III of this bill would provide unspecified funding for a homelessness prevention and rapid rehousing program. The Department has yet to implement the

Homelessness Prevention and Rapid Re-Housing program funded by the 2013 Legislature due to the lack of staffing resources. We note that the Homeless Programs Office (HPO) already administers HUD funded HPRP funds (totaling approximately \$162,000) on behalf of the Neighbor Islands. The City and County of Honolulu administers the HUD funded HPRP funds (totaling approximately \$560,000) on Oahu.

Regarding Part IV, of this bill for Continuum of Care, the DHS appreciates the intent to provide state matching funds for the HUD-funded Continuum of Care (CoC) permanent supportive housing programs across the State, and provides the following comments. The state matching funds are used by agencies to leverage approximately \$8 million of HUD federal funds to house over 500 eligible disabled homeless individuals and families. Many agencies utilize matching funds to pay a portion of the very substantial administrative demands of the program. For example, every month providers must not only work with clients placed in housing and ensure support services are provided, but they must also pay landlords for every person who is housed. The Department suggests that consideration be given to allow the City and County of Honolulu (which would administer the funding for Oahu providers via a Memorandum of Agreement) to request reasonable administrative fees.

Regarding Part V, the DHS defers to the Hawaii Housing Finance and Development Corporation (HHFDC).

Regarding Part VI, the Department notes that the Homeless Assistance Working Group (HAWG) as established in Act 222, Session Laws of Hawaii 2013, was successful in engaging different components of the community to address homelessness and its solutions. The Hawaii Interagency Council on Homelessness (HICH) is tasked with much of the same work as HAWG, and the HICH has successfully embarked on an ambitious agenda to end homelessness. The HICH statewide plan as

well as systemic changes to the provision of homeless services (aligned with national initiatives and evidence based practices such as Housing First) are being implemented. The HAWG is duplicative of the intent of the HICH. The consolidation of the efforts of the HAWG into the HICH would be a more effective use of resources.

The DHS respectfully requests that the Legislature provide additional staffing and resources sufficient to support any additional programs and services it wishes the Homeless Programs Office (HPO) to implement and administer. The HPO works hard to keep pace with its current workload but as noted in the 2013 DHS Single Audit report, the current HPO staff of the Program Administrator, two clerical staff, and three program specialists, were insufficient to properly oversee and administer its myriad of contracts. The HPO gratefully acknowledges the Legislature's authorization of an additional program specialist position last session, and the HPO is aggressively working to establish that position. Any new additions of programs and services will, however, necessitate additional staffing.

Thank you for the opportunity to provide comments on this bill.



HB1934 Homeless: Treatment, Housing, Rental Assistance, Housing First:

- COMMITTEE ON WAYS AND MEANS: Senator Ige, Chair; Senator Kidani, Vice Chair
- Friday, March 28, 2014; 9:35 a.m.
- Conference Room 211

HAWAII SUBSTANCE ABUSE COALITION Supports HB1934 HD1 SD1

Good Morning Chair Luke, Vice Chair Kidani, and Distinguished Committee Members. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization of more than twenty treatment and prevention agencies.

When housing is coordinated with comprehensive treatment, poor health is improved and extensive costs are avoided.

- It is critical that appropriate treatment is provided to this homeless population. As typical with chronic homeless, issues often include substance use disorders coupled with mental illness, and adverse medical conditions. Treatment addresses:
 - Complex brain functions and behavior.
 - Individual problems and needs.
 - Mental illness
 - Integrates medical, psychological, social, vocational and culture.
 - Therapies for motivation, coping skills, social skills, and relationships.
 - Medication needs that reduce cravings.
 - Changing needs over time as stressors and challenges change.
- Clean and Sober housing that provides support systems and a stable environment significantly reduces the risk for relapse.
- After investing significant funding for homeless treatment, a Rental Assistance, “shallow subsidy,” is essential to for starting with permanent housing.
- Housing First approaches for the chronic homeless is growing in popularity across the nation because it has demonstrated positive outcomes.

Because they can be “frequent flyers” for costly emergent care and re-occurring “pass through” in our Judiciary systems, the chronic homeless are generally included in the 20% who account for 80% of our health costs.



Treatment with Housing and Rental Assistance can avoid exorbitant health costs and have positive outcomes.

Since this population is so expensive to society, a reasonable investment in treatment for medically necessary conditions coupled with clean and sober housing as well as Rental Assistance and Housing First projects would help Hawai'i avoid substantial costs.

We very much appreciate the opportunity to provide testimony.



CATHOLIC CHARITIES HAWAII

TESTIMONY IN SUPPORT OF HB 1934, HD1, SD1: RELATING TO HOUSING

TO: Senator David Y. Ige, Chair; Senator Michelle N. Kidani, Chair; and Members, Committee on Ways and Means

FROM: Betty Lou Larson, Legislative Liaison, Catholic Charities Hawaii

Hearing: Friday, March 28, 2014; 9:30 AM; Room 211

Chair Ige, Vice Chair Kidani, and Members, Committee on Ways and Means:

Thank you for the opportunity to provide testimony **in support of HB 1934**, appropriating funding for a variety of critical programs targeted at addressing and ending homelessness. I am Betty Lou Larson, Legislative Liaison at Catholic Charities Hawaii.

Catholic Charities Hawaii supports **Housing First as our top priority, in Part II of this bill**. We must find ways to successfully transition folks off our streets and beaches. Housing First is a model that works. It is an evidence based initiative for moving chronically homeless people into permanent housing with wrap around services. **Housing First is cost-effective.** In a study just released on 3/24/14, the University of North Carolina found that Housing First resulted in “drastic savings on health care costs and incarceration.” For the 85 homeless adults housed, there was a 78% reduction in ER visits, and a 79% reduction in days hospitalized! **The City of Seattle found that housing 95 chronic homeless persons with Housing First saved the city \$4 million in the first year of operation.** Hawaii’s homeless providers are collaborating with the state, counties, landlords, and other private entities, on Housing First. There is great energy to move forward and make a significant impact on ending chronic homelessness. However, to make Housing First work in Hawaii, funding must be stable and ongoing. State funding would provide housing subsidies needed to quickly move chronically homeless people into housing. Without ongoing funding, those placed will live in fear that the funding for their housing will go away, and they might be put back on the streets. We need funding for Housing First to make a significant difference for those homeless on our streets and beaches.

Part I, Section 4: \$1,000,000 for the Shallow Rent Subsidy program could create another pathway out of homelessness for working homeless. Working people have income to pay rent but not a full market rent. A shallow rental subsidy of no more than \$300/month, after the family pays 40% of their income for rent, would enable these working people and their families to move into permanent housing. For this subsidy to be effective, it would need to be ongoing.

Part IV: \$500,000 for matching funds to HUD funded Continuum of Care permanent supportive housing programs. Statewide, these program bring in about \$8 million in federal monies for rental subsidies to house homeless persons. They need to match these funds and provide the critical wrap-around services to stabilize them in affordable housing.

We urge your support for these pathways out of homelessness, especially Housing First..





“SERVING THOSE WHO SERVED”

TESTIMONY IN SUPPORT OF HB 1934 HD1 SD1: RELATING TO HOUSING

TO: Sen. David Ige, Chair; Sen. Michelle Kidani, Vice Chair; and members of the Senate Committee on Ways and Means

FROM: Darryl J. Vincent, Chief Operating Officer U.S.VETS

Hearing: **Friday, March 28, 2014, 9:35 AM, Room 211**

Dear Chair Ige, Vice Chair Kidani, and members of the committee,

Thank you for the opportunity to provide testimony in **strong support** of House **Bill 1934**, appropriating funding for a variety of critical programs targeted at addressing and ending homelessness. I am Darryl J. Vincent, Chief Operating Officer for the United States Veterans Initiative (U.S.VETS), an agency providing services to homeless veterans across the nation and local homeless individuals and families with children, for both veteran and non-veteran households, as well as a member of Partners In Care, Oahu’s Continuum of Care of service providers meeting the needs of homeless persons. U.S.VETS Hawaii supports this bill which has the potential to make a tremendous difference in the lives of local homeless individuals by providing multiple avenues out of homelessness, one of which is **Housing First**, which U.S.VETS Hawaii fully supports, with emphasis on:

Part II: Housing First Programs funding of \$1.5 million:

Housing First is an evidence-based best practice in which highly vulnerable chronically homeless individuals are placed in permanent housing with comprehensive support services, which provides them the stability to address the underlying problems that led to chronic homelessness.

Housing First has been consistently shown to significantly improve the health and well-being of our most vulnerable and medically fragile residents. It also significantly reduces costs associated with homelessness such as hospitalization, emergency services, arrests, and incarceration. Across the nation, the many communities who have adopted **Housing First** paradigm have seen large decreases in their chronically homeless population and related costs. Multiple studies clearly demonstrate that **Housing First** is the best way to end chronic homelessness. The vast majority of **Housing First** participants remain housed, and because they are stabilized, communities have seen public costs reduced by approximately 75% for each participant, saving millions of dollars.

U.S.VETS respectfully urges you to add funding for **Housing First** to the **base budget** which will ensure continued funding for this critical support.

Again, thank you for providing U.S.VETS the opportunity to testify in strong support of HB 1934 as a service provider and member of Oahu’s Continuum of Care of service providers, working for solutions to end homelessness across the islands and across the nation.

: “The successful transition of military veterans and their families through the provision of housing, counseling, career development, and comprehensive support.”

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Testimony of Hawai'i Appleseed Center for Law and Economic Justice
Supporting HB 1934 Relating to Housing
Senate Committee on Ways and Means
Scheduled for Decision Making Friday, March 28, 2014, 9:35 AM, Room 211

Hawai'i Appleseed Center for Law and Economic Justice is a nonprofit, 501(c)(3) law firm created to advocate on behalf of low income individuals and families in Hawai'i on civil legal issues of statewide importance. Our core mission is to help our clients gain access to the resources, services, and fair treatment that they need to realize their opportunities for self-achievement and economic security.

Thank you for an opportunity to testify in **strong support** of House Bill 1934, which would fund critical programs to address homelessness, including Housing First, Continuum of Care permanent supportive housing, a shallow subsidy rental assistance program, and other programs. We support:

Housing First funding of \$1.5 million: Housing First is an innovative and highly successful approach to housing the most challenging populations of individuals experiencing homelessness. A person who has been chronically homeless needs, first and foremost, stable permanent housing. Once placed in housing, the individual can receive the services and supports necessary to address the underlying issues that lead to homelessness in the first place, such as mental illness or substance use disorders. Housing First has worked around the country, in both urban and rural areas, and kept the most vulnerable individuals housed and improved their quality of life. The U.S. Interagency Council on Homelessness has long endorsed it as a best practice. Research has also demonstrated the cost-efficacy of this approach: it often costs less to house a chronically homeless person and provide comprehensive supportive services than to leave them unsheltered, due to the high costs of emergency interventions such as ER visits or incarceration that leave individuals homeless.

Shallow subsidy funding of \$1 million: The shallow subsidy program is targeted to help homeless households who are ready to rent to leave transitional housing and move into a permanent, market rate unit. Many families in transitional housing are ready to rent, but even if they are working full time, their income may be too low to afford market rents. This is no surprise, given that Hawai'i has the highest cost of shelter in the country and a severe shortfall of affordable rentals. Almost three out of four extremely low-income households are paying more than half of their income on rent. The options for public housing or other subsidies are extremely limited and have long waitlists. As a result of this lack of affordable rentals, families who are ready to rebuild their lives in stable housing are instead stuck in transitional housing. This subsidy would help meet the gap for working homeless families who have income but cannot pay a full market rent.

Permanent supportive housing services funding of \$500,000: Permanent supportive housing is another critical tool to helping homeless individuals with a high level of need. By funding Continuum of Care programs, the state will be able to leverage a significant amount of federal funds in housing subsidies.

Again, thank you for the opportunity to testify in support of HB 1934 to fund these critical homeless intervention programs.

Aloha United Way

200 N. Vineyard Blvd., Suite 700
Honolulu, Hawaii 96817-3938
Telephone (808) 536-1951
Fax (808) 543-2222
Website: www.auw.org



Aloha United Way

Cover Sheet

Testifying Agency: Aloha United Way
Kim Gennaula, President & CEO

Senate Committee on Ways and Means
Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair

Friday, March 28, 2014 at 9:35 A.M.

Conference Room 211

HB 1934, HD1, SD1: Relating to Housing: Testimony in Support

Aloha United Way

200 N. Vineyard Blvd., Suite 700
Honolulu, Hawaii 96817-3938
Telephone (808) 536-1951
Fax (808) 543-2222
Website: www.auw.org



March 25, 2014

Senate Committee on Ways and Means
Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair
Friday, March 28, 2014 at 9:35 A.M.
Conference Room 211

HB 1934, HD1, SD1: Relating to Housing - SUPPORT

Dear Chair David Y. Ige, Vice Chair Michelle N. Kidani and Committee Members:

Homelessness continues to be one of our state's most serious and persistent social problems because the causes of homelessness are complex. Addressing these complex issues will require continuous effort and coordinated actions in many related areas like substance abuse, mental illness, work skills development and employment, emergency shelters, transitional housing and affordable housing.

Aloha United Way supports HB 1934, HD1, SD1 which would fund critical programs to address homelessness, including Housing First, Continuum of Care permanent supportive housing, shallow subsidy rental assistance program, mental health and substance abuse treatment, and the homeless assistance working group.

As a community, it is critical that we support a comprehensive array of programs and services that aid Hawaii's homeless individuals and families in their efforts to obtain and maintain permanent, stable housing.

Thank you for the opportunity to testify. We urge your favorable consideration of HB 1934, HD1, SD1.

Sincerely,



Kim Gennaula
President & Chief Executive Officer



PARTNERS IN CARE Oahu's Coalition of Homeless Providers

TESTIMONY IN SUPPORT OF HB 1934 HD1 SD1: RELATING TO HOUSING

TO: Sen. David Ige, Chair; Sen. Michelle Kidani, Vice Chair; and members of the Senate Committee on Ways and Means

FROM: Peter K. Mattoon, Advocacy Committee Co-Chair, Partners In Care

Hearing: **Friday, March 28, 2014, 9:35 AM, Room 211**

Dear Chair Ige, Vice Chair Kidani, and members of the committee:

Thank you for the opportunity to provide testimony **in strong support** of House Bill 1934, appropriating funding for a variety of critical programs targeted at addressing and ending homelessness. I am Peter K. Mattoon, and I am an Advocacy Committee Co-Chair for Partners in Care (PIC), a coalition focusing on the needs of homeless persons and strategies to end homelessness. Partners in Care supports this bill as a means to provide multiple pathways out of homelessness, including:

Part I: Shallow Subsidy Program funding of \$1 million to help ready-to-rent homeless families cover the gap between their income and market rent so they can move into a permanent home instead of languishing in transitional housing because they cannot afford a market rental.

Part II: Housing First Programs funding of \$1.5 million:

Housing First is an evidence-based best practice in which highly vulnerable chronically homeless individuals are placed in permanent housing with comprehensive support services. This enables them to stabilize their lives and address the underlying problems that led to chronic homelessness.

Housing First has been consistently shown to dramatically improve the health and well-being of our most vulnerable residents. It also dramatically reduces costs associated with homelessness such as hospitalization, emergency services, arrests, and incarceration. Across the country, the many communities who have adopted Housing First have seen large decreases in their chronically homeless population and related costs. Study after study clearly show that Housing First is the **best way to end chronic homelessness**. The vast majority of Housing First participants remain housed, and because they are stabilized, communities have seen public costs reduced by around 75% for each participant, saving millions of dollars.

Part IV: Permanent supportive housing funding of \$500,000 to provide matching funds for continuum of care permanent supportive housing programs funded by HUD. By funding these programs, the state will be help the 600 homeless individuals with disabilities currently served by this program to stabilize their lives and remain housed while also leveraging a substantial amount of federal funding.

Again, thank you for providing Partners In Care the opportunity to testify in strong support of HB 1934 providing funds for solutions to homelessness, including Housing First, the shallow rental subsidy program, and Continuum of Care permanent supportive housing programs.



HPCA

HAWAII PRIMARY CARE ASSOCIATION

Senate Committee on Ways and Means

Senator David Y. Ige, Chair

Senator Michelle N. Kidani, Vice Chair

Testimony on House Bill 1934, HD1, SD1

Relating to Housing

Submitted by Robert Hirokawa, Chief Executive Officer

March 28, 2014, 9:35 am, Room 211

The Hawaii Primary Care Association (HPCA), which represents the federally qualified community health centers in Hawaii, supports House Bill 1934.

Housing is health. Hawaii's community health centers provided health care and other services to 12,459 unique patients experiencing homelessness in 2012. Housing, the lack of affordable housing, and homelessness are all social determinants of health: they are circumstances that influence the health of individuals and the health of communities, more so than an individual's genetic code.

House Bill 1934 provides a comprehensive approach to assisting individuals and families experiencing homelessness through a variety of services including medical assistance, shallow-subsidy rental assistance, investment in the Housing First model for chronically homeless individuals, funding to prevent homelessness and provide rapid re-housing, funding for the continuum of care permanent supportive housing programs, and funding for the construction and demonstration of innovative temporary housing solutions as they relate to the working group's findings and recommendations. In addition this measure makes changes to the current homeless assistance working group of which the HPCA has been a participant. Although helping individuals and families out of homelessness and into permanent, stable housing takes a combination of efforts around housing, health care, employment opportunities, child care, and other issues, House Bill 1934 provides an array of housing options and investment in substance abuse and mental health needs that is a good start to helping some of our most vulnerable neighbors.

For these reasons, the HPCA supports this measure. Thank you for the opportunity to testify.



Community Alliance *for* Mental Health

March, 28, 2014

To: Senate Committee on Ways and Means
Re: HB 2059, HD 2, SD 1

Aloha Chair Ige and members of the committee,

On behalf of the Community Alliance for Mental Health along with United Self Help we strongly support the passage of HB 2059, HD 2, SD 1.

The restoration of the conveyance tax to 50% and its dedication to the Rental Housing Trust Fund would greatly increase the number of individuals and families that can either remain in independent housing or matriculate for sheltered housing into independent housing.

The majority of these funds are used as deposits or loans and are returned to the state. They are used to help someone out of homelessness or to assist someone facing imminent homelessness to keep their home.

If we want to help end homelessness, to assist our most vulnerable populations, and to provide a safety net to our working poor who are never more than one or two paychecks from homelessness, then passing HB 2059, HD 2, SD 1 must be a necessary element of our toolbox.

Scott Wall
Vice President for Policy
Community Alliance for Mental Health

From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: Gladys.peraro@yahoo.com
Subject: Submitted testimony for HB1934 on Mar 28, 2014 09:35AM
Date: Thursday, March 27, 2014 9:37:15 AM

HB1934

Submitted on: 3/27/2014

Testimony for WAM on Mar 28, 2014 09:35AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Gladys Peraro	Individual	Support	No

Comments: Dear Chair Ige, Vice Chair Kidani, and members of the committee, Thank you for the opportunity to provide a comment in strong support for HB 1934, appropriating funding for Housing First, an evidence-based best practice which provides support for highly vulnerable chronically homeless individuals. Housing First has been consistently shown to significantly improve the health and well-being of our most vulnerable and medically fragile residents- the chronically homeless. It also significantly reduces costs associated with homelessness such as hospitalization, emergency services, arrests, and incarceration; the many communities who have adopted the Housing First paradigm across the nation have seen large decreases in their chronically homeless population. Again, thank you for the opportunity to provide comment in support of HB 1934.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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