

Housing for homeless alcoholics can reduce costs to taxpayers

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Providing housing and support services for homeless alcoholics costs taxpayers less than leaving them on the street, where taxpayer money goes towards police and emergency health care. Stable housing also results in reduced drinking among homeless alcoholics, according to a Seattle-based study published today in the *Journal of the American Medical Association (JAMA)*.

"Our study suggests that [homeless](#) alcoholics who qualify to take part in Housing First can stay out of jails and emergency rooms, and cost the taxpayer a lot less money as a result," said Mary E. Larimer, PhD, professor of psychiatry and behavioral sciences and adjunct professor of psychology at the University of Washington and lead author of the study. "We also found that these benefits increase over time and that they are possible without requiring that participants stop drinking. And yet, the longer the participants stay in the housing program, the less they drink."

The Housing First approach offers stable housing to chronically homeless, alcohol-dependent individuals without requirements of abstinence or treatment. It is being implemented in major cities throughout the United States. Initiatives that have adopted the comprehensive model have been criticized for allowing enrollees -- virtually all with severe substance abuse problems -- to continue to consume [alcohol](#) in their new quarters. The 1811 Eastlake study, funded by the Substance Abuse Policy Research Program (SAPRP) of the Robert Wood Johnson Foundation, represents the first US controlled assessment of the effectiveness of Housing First specifically targeting

chronically homeless alcoholics.

"These findings suggest that stable housing provided to people who are still drinking and addicted to alcohol can reduce their use of crisis services and ultimately their consumption of alcohol," Larimer said, noting that virtually every person invited to participate had agreed to enroll. The study also notes that restrictions on the consumption of alcohol in a housing environment may well prevent those most in need from accepting help.

"Each of them had cost state and local governments an average of \$86,062 per year before being housed, compared to an average of \$13,440 it costs per person per year to administer the housing program," Larimer said.

Because healthcare and criminal justice system costs for the participants continued to decrease over time, as did their alcohol use, Larimer says, she and her co-authors concluded that permanent housing may be necessary in order to take full advantage of the cost-savings identified in the study. The authors concluded that several factors were key to the success of the program, including the decision to limit rules and regulations on residents, and to provide them with supportive case managers, as well as easy access to providers of mental health and health care services within the housing program.

Source: Robert Wood Johnson Foundation

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