

AP/AL: Appropriation **Project Type:** Construction
Category: Health/Human Services
Location: Statewide **Contact:** Larry Streuber
House District: Statewide (HD 1-40) **Contact Phone:** (907)465-1870
Estimated Project Dates: 07/01/2000 - 06/30/2003

Brief Summary and Statement of Need:

If this project is delayed, than residents of rural and hub communities who have completed primary treatment will not have transitional housing at their disposal. Recidivism of persons early in recovery is frequently linked to lack of sober housing and supports. This project would allow residents, including women with children, to remain in or near home in this critical phase of recovery, and increase the likelihood of achieving a sober lifestyle. If this project is not funded now, this critical phase of recovery will not be provided and persons in rural and hub communities in the recovery process will most likely relapse, thus providing an additional cost to the state.

Funding:	<u>FY2001</u>	<u>FY2002</u>	<u>FY2003</u>	<u>FY2004</u>	<u>FY2005</u>	<u>FY2006</u>	<u>Total</u>
MHTAAR	\$300,000						\$300,000
Total:	\$300,000	\$0	\$0	\$0	\$0	\$0	\$300,000

<input type="checkbox"/> State Match Required	<input checked="" type="checkbox"/> One-Time Project	<input type="checkbox"/> Phased - new	<input type="checkbox"/> Phased - underway	<input type="checkbox"/> On-Going
0% = Minimum State Match % Required		<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Mental Health Bill	

Operating & Maintenance Costs:

	<u>Amount</u>	<u>Staff</u>
Project Development:	0	0
Ongoing Operating:	0	0
<u>One-Time Startup:</u>	0	
Totals:	0	0

Additional Information / Prior Funding History:

This project has not received previous funding.

Project Description/Justification:

Trust funds will pay for transitional housing units for people requiring safe and sober housing following treatment completion. Where possible, Trust funds will leverage federal, AHFC, and Indian Housing capital funds, and Native Association and Division of Alcoholism and Drug Abuse operating funds. Housing will be located in hub communities. Individuals and families will be eligible to stay in the housing units for up to 24 months.

Substance abuse treatment services continue to be available in urban and hub communities. Individuals returning to smaller communities from out-of-town treatment programs are at risk of losing their sobriety without adequate supports. This funding will permit individuals to reunite with their families more quickly and to practice their new recovery skills in their old, familiar environments before returning home without supports.

No additional operating funds will be needed to subsidize this housing. Resources from clients will be used to pay rent. Treatment and services will be delivered based on current programs and the eligibility status of clients.

Performance Measures:

- Number of units created under the grant fund;
- Number of communities served by transitional housing project;
- Dollar amount of non-state operating and capital funds leveraged against the fund.
- Number of Trust beneficiaries living in transitional supportive housing following primary substance abuse treatment.

Transitional Housing for Recovering Substance Abusers**FY2001 Request:****\$300,000****Reference No:****32456**

If this project is delayed, than residents of rural and hub communities who have completed primary treatment will not have transitional housing at their disposal. Research based data show recidivism of persons early in recovery is frequently linked to lack of sober housing and supports. Rural residents repeatedly report difficulties maintaining sobriety following treatment due to lack of sober housing and supports, and request sober housing. This project is a critical piece of the recovery continuum for many and would allow residents, including women with children, to remain in or near home in this critical phase of recovery, and increase the likelihood of achieving a sober lifestyle. If this project is not funded now, this critical phase of recovery will not be provided and persons in rural and hub communities in the recovery process will most likely relapse, thus providing an additional cost to the state.