



## Affordable and Stable Housing: Contextual Issues

**T**he challenge of gaining access to affordable and stable housing is not unique to young adults with mental health needs. The overarching problem of insufficient and expensive housing affects anyone in this country who is unemployed or working for wages that are insufficient to cover basic expenses. Young people, as a population, face some additional barriers to finding and maintaining housing, and those with mental health conditions are affected by even more hurdles.

The overlapping nature of the problems related to housing is summarized in Figure 1. The outer circle indicates the social, economic, and political factors that influence the housing environment for all citizens except the most fortunate. The two most prominent societal issues are the lack of affordable housing units and the lack of employment that pays a living wage. The lack of affordable housing is shaped by varied factors across the country including gentrification, governmental policies about investing in affordable housing, and lack of incentives for the private housing market to build affordable housing. Among young adults, the low wages and lack of benefits in many of the jobs available to them constitute critical contextual factors regarding their access to housing.

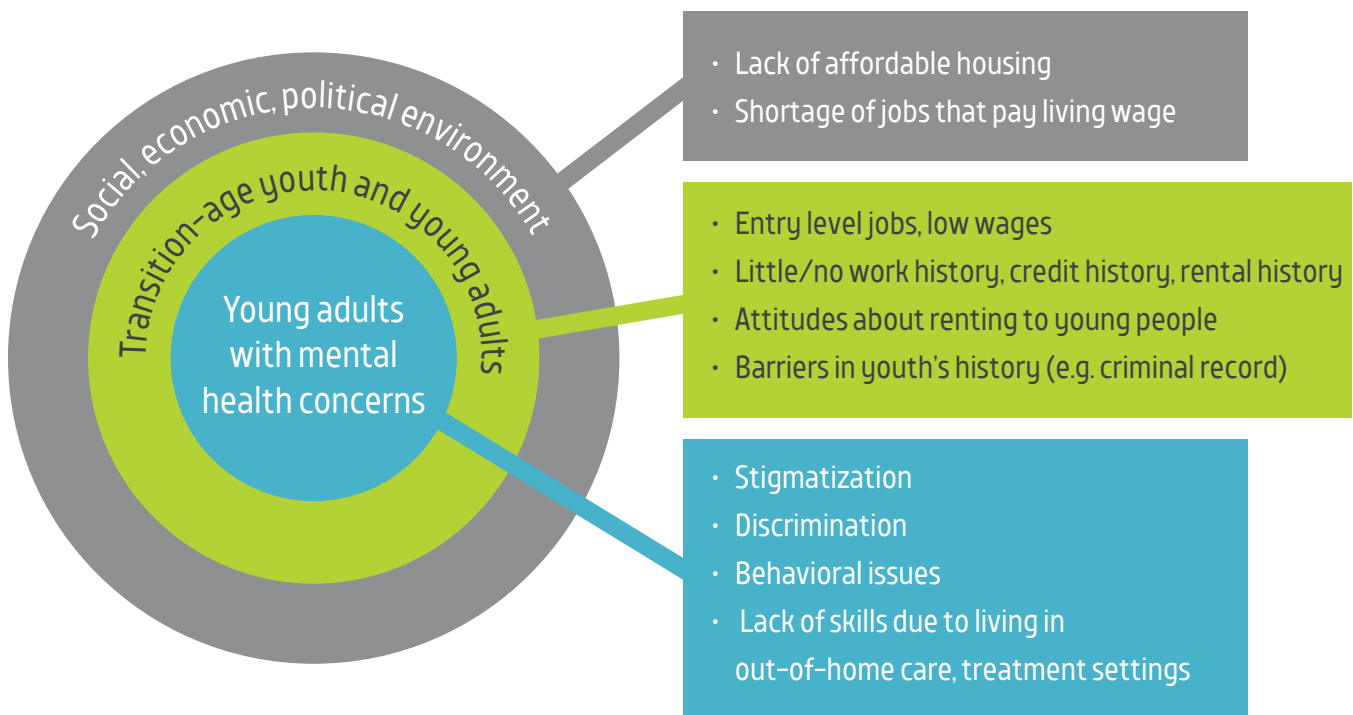
The second circle in Figure 1 represents barriers to housing common to all young people. Transitioning to adulthood is a period of instability for most young people, characterized by changes in living situations and relationships, and, according to Arnett,<sup>3</sup> higher rates of drug and alcohol use than at any other period, which can also interfere with brain development.<sup>133</sup> Most young people

of transition-age (usually ages 17 to 26) have little or no work history, poor or no credit history, and limited or no rental history. Many are still in college and have not had an opportunity to develop work, credit, or rental histories. Young adults may encounter landlords who have negative attitudes about renting to young people or who may discriminate based on race or sexual preference. Having a previous criminal conviction adds another barrier to a young adult's chances of finding a unit to rent. It should be noted that HUD issued

guidance in 2016 about the use of criminal records by housing providers, citing circumstances when denial of housing may violate the Fair Housing Act.<sup>32</sup>

The innermost circle of Figure 1 represents the additional challenges young adults with mental health issues may face in their search for stable and affordable housing. These challenges may include stigmatization or discrimination based on their mental health disability. Further, young people with mental health issues may have difficulty maintaining housing or may

**Figure 1. Affordable & Stable Housing Context**



Not enough affordable housing options for young adults with mental health conditions

develop a negative rental history because of behaviors related to their mental health condition. Aspects of the mental health condition itself may interfere with family and peer relationships and the extent to which the young person can, or is allowed to, take responsibility for making decisions and life choices. In addition, there is some evidence that psychotropic medications can have adverse effects on the growth and development of children and adolescents.<sup>25</sup>

Many youth and young adults who have spent part of their childhood living in out-of-home placements are less prepared to take on adult roles and responsibilities than the typically developing young person. Young people who have spent considerable time in mental health, child welfare, and/or juvenile justice settings may enter the transition period having had few opportunities to learn and practice making decisions, shoulder increased responsibilities, or learn the skills needed to successfully transition to adult life. It is estimated that 60–80% of children and youth in foster care have a diagnosable mental health condition.<sup>31,64,87</sup> Similarly, estimates of the rates of mental health conditions among young people in the juvenile justice system range from 50 to 90%<sup>18,74,151,156</sup> and even higher rates have been reported in statewide or local studies.<sup>58</sup> In interviews with program directors from mental health transition programs, the challenges of helping young people “catch up with development” or “undo institutionalization” were emphasized (Davis, G., telephone interview [April 6, 2017]; Young, S., telephone interview [April 5, 2017]). Stott comments, “When placement instability and restriction prevent youth from exploring and engaging in relationships, their relational, emotional, and social growth is limited.”<sup>144, p.226</sup>

## Cultural Considerations

Cultural differences (values, traditions, experiences, beliefs) may affect the transition needs and preferences of youth and young adults, and therefore, the transition goals of young people. It is important to note that “cultural differences” and “cultural diversity” are relative terms, and that diversity or difference is defined in relation to the larger context of the young person. In many cultural groups, “independence” may not be the primary goal of the transition process; rather, the development of interdependence may be more culturally congruent. For example, Friesen, et al.<sup>41</sup> note that because many American Indian/Alaska Native (AI/AN) groups are more collectivistic than individualistic, an emphasis on independent living may be at odds with the goals and preferences of AI/AN youth and their families. Leake, Black and Roberts<sup>82</sup> also point out that interdependence and residing with kin are often more culturally compatible transition goals for AI/AN young people than independent living. These values often apply in other cultures that are more group- rather than individually-oriented. Preferences for living with or near family may influence choices about employment and secondary education.<sup>14,57,66</sup> Cultural values about family relationships can also affect youths’ preferences and choices about transition goals. Fuligni and Pedersen<sup>42</sup> found variation in feelings of family obligation among young adults of various ethnic and racial backgrounds, with non-majority young adults placing the most importance on family obligation and direct contributions to the family household, especially in families that have recently immigrated.


A mixture of independence and interdependence as realistic and appropriate goals for youth and young adults is not, however, limited to those from non-European cultures. This idea is also proposed by many experts for young people with mental health conditions, substance abuse disorders, and young adults who have been in the foster care or juvenile justice systems.<sup>36,62,134</sup> Some authors suggest that success in adulthood for all people requires the development of interdependence (see, for example, Raeff<sup>118</sup> and Stroud, Mainero & Olson<sup>145</sup>).

## The Role of Family in Housing

The role of parents and other family members in supporting the housing needs of young adults often goes unnoticed. Many parents contribute financially to the support of their young adult children and may provide housing whether or not their children have mental health or other disabilities.<sup>4,126</sup> Developmentally, young adults are trying to establish their independence, and some may not want to live with their parents or relatives even when this option is a convenient way to avoid homelessness. Families may also want their sons or daughters to move out of the family home due to limited space and finances, behavioral issues, or concern that their children need to live on their own to become independent. The situation for each young person and each family is unique and must be viewed in terms of available resources and the preferences of the young adult and other family members.

Evidence suggests that parents and other relatives are a source of considerable support for young adults with mental health challenges. The national cross site evaluation for the comprehensive community mental

health services for children and their families program (CMHI) reported<sup>90</sup> that sixty-five percent of the 14–15-year-old youth, 52% of the young people 16–17 years of age, and 48% of the 18–22-year-olds had lived in their family home for the six months before intake into services. Braciszewski, Toro, & Stout<sup>13</sup> report that most homeless adolescents return to stable housing quickly (57% within 14 days) and two-thirds return



*Success in adulthood for all people requires the development of interdependence.*

to their parents' home. Further, the US Department of Housing and Urban Development (HUD) takes the position that returning to the parents' home is the first option, when appropriate, for young people who are homeless. "Family reunification should be a primary referral option for youth under 18, where only a small percentage may be most appropriately served by an independent, safe and stable housing situation...."<sup>150, p.12</sup>

## Current Approaches to Providing Housing Support

Ideas about the best way to work with adults who need housing due to mental health needs, substance abuse, or chronic homelessness have changed considerably since the 1980s. In the early years of deinstitutionalization of psychiatric hospitals, services were based

on the assumption that individuals needed structure and oversight in order to learn how to maintain stable housing.<sup>107,p.75</sup> Often referred to as “continuum of care” or “treatment first,” individuals moved through a series of levels of service and/or housing options with close supervision. The individual had to demonstrate readiness for independent housing and was required to abstain from drugs and alcohol, to participate in substance abuse and/or mental health treatment, to take medication regularly, and accept regular case management. Under this approach, individuals were housed in one location (e.g., group home or boarding home), housing was time-limited and staff were located in or close to the housing. Many current approaches to providing housing support operate according to at least some of these same principles.

A more recent approach to housing support is represented by housing first programs, also referred to as “supported housing” or “permanent supported housing.” These programs “focus first and foremost on moving individuals to appropriate and available housing and providing the ongoing supports necessary to

keep individuals housed.”<sup>39,p.97</sup> The following principles characterize a housing first approach: 1) immediate placement in housing that is considered permanent; 2) no requirement to abstain from drugs or alcohol or take psychiatric medication; 3) no requirement to participate in treatment programs, although options are offered; and 4) no requirement to work with a case manager, although those services are available.<sup>107</sup> Housing is most often located throughout the community in scattered sites, and staff support is located separately from participants’ housing.

Because the needs and preferences of young adults are varied, offering a range of housing support is optimal. Three approaches that provide different degrees of support and structure and can be tailored to meet young adults’ needs are supported housing, transitional living programs, and host homes. A description of the range of program options that are most commonly provided for young adults with mental health challenges and the research and evaluation studies associated with each option are presented in Section 4.