

## STATE OF CALIFORNIA HIGHLIGHT AB 2034

### **Background**

In 1999 the State Legislature passed Assembly Bill (AB) 34 which provided \$10 million for pilot programs to provide services for homeless individuals in Stanislaus, Los Angeles, and Sacramento counties. (Experiences 1). Future funding for similar programs was dependent on the success of the three pilot programs as measured by positive client and system outcomes including cost effectiveness within that first year. (Leg. Report 1). The pilot programs were very successful in reducing the number of homeless days, jail days, and psychiatric hospital days experienced by enrollees. As a result of this success the legislature passed AB 2034 which expanded the pilot programs and created additional programs statewide directed at serving homeless persons, parolees, and probationers with serious mental illness. (Leg. Report 1). At the height of the program, AB 2034 funds were serving over 4,500 mentally ill homeless or incarcerated individuals (AB34.org) through 53 programs operating in 34 counties throughout California. (Experiences 1).

AB 2034 funds allowed localities to provide comprehensive services “to adults who have serious mental illness and who are homeless, at risk of becoming homeless, recently released from a county jail or state prison, or others who are untreated, unstable, and at significant risk of incarceration or homelessness unless treatment is provided to them.” (Leg. Report 2). Due to the flexibility of funding provided under AB 2034, counties were able “to provide a comprehensive array of services including outreach, supportive housing and other housing assistance, employment, substance abuse, and mental and physical healthcare” to enrollees. (Leg. Report 2).

### **Effectiveness of AB 2034 Programs**

#### **What Worked**

The AB 2034 programs were very effective at serving a variety of consumer needs. The success of these programs can be seen by comparing pre-enrollment information to post-enrollment information (data current as of January 31, 2003). There was marked improvement in several categories including hospitalizations, incarcerations, levels of homelessness, income, and employment. (Leg. Report 9-12).

#### **Hospitalizations**

- Number of consumers hospitalized decreased 42.3%
- Number of hospital admissions decreased 28.4%
- Number of hospital days decreased 55.8%

(Leg. Report 9)

#### **Incarcerations**

- Number of consumers incarcerated decreased 58.3%
- Number of incarcerations decreased 45.9%
- Number of incarceration days decreased 72.1%

(Leg. Report 10)

## Income

- The number of SSI recipients increased by 93.1%
  - The number of people receiving wages from employment increased by 279.8%
- (Leg. Report 11)

## Housing

- There was a 73.5% reduction in the number of consumers who were homeless
  - The number of consumers who became homeless since enrollment compared to the number of consumers who were homeless prior to enrollment decreased 71.3%
  - The overall number of homeless days experienced by consumers decreased by 67.3%
- (Leg. Report 11)

## Employment

- There was a 19.6% increase in the number of consumers who were employed full time with a 65.4% increase in the number of days of employment
  - There was a 14.4% increase in the number of consumers who were employed part-time, with a 53.1% increase in the number of days of employment
  - As of January 31, 2003, 13.3% of all consumers enrolled in the program were employed
- (Leg. Report 11-12)

## What Needs Improvement

While AB 2034 programs were very effective in serving the needs of enrolled consumers, improvement was needed in the level of participant retention. 22.7% of all consumers ever enrolled in AB 2034 programs disappeared or dropped out. (Leg. Report 13). A further 1.75% of consumers were disenrolled due to their death. (Leg. Report 13). This data indicates a need for more emphasis on the physical healthcare needs of participants as well as strategies to increase retention rates.

The data also shows an under representation of Hispanic people relative to other racial/ethnic groups. Hispanic people represented only about 12% of the AB 2034 population. This lower representation suggests that AB 2034 programs may need to improve their outreach to the Hispanic community.

(Leg. Report 8)

## **Bibliography**

1. AB 34.org, [www.ab34.org](http://www.ab34.org)
2. AB 2034 Program Experiences in Housing Homeless People with Serious Mental Illness, Martha R. Burt, Jacquelyn Anderson. [www.csh.org/index.cfm?fuseaction=Page.viewPage&PageID=3621](http://www.csh.org/index.cfm?fuseaction=Page.viewPage&PageID=3621)
3. Effectiveness of Integrated Services for Homeless Adults with Serious Mental Illness, Report to the Legislature 2003. California Department of Mental Health, Stephen W. Mayberg, Ph.D. Director. May 2003. [www.dmh.cahwnet.gov/AOAPP/Int\\_Services/docs/Leg\\_Report\\_2003.pdf](http://www.dmh.cahwnet.gov/AOAPP/Int_Services/docs/Leg_Report_2003.pdf)