

Projects for Assistance in Transition from Homelessness Program

Funding:

FY 2002 Appropriation = \$40 million
FY 2003 Appropriation = \$43.073 million
FY 2004 Appropriation = \$49.760 million
FY 2005 Appropriation = \$54.809 million
FY 2006 Appropriation = \$54.261 million
FY 2007 Appropriation = \$54.261 million
FY 2008 Appropriation = \$ 54 million
FY 2009 President's Request = \$60 million

Our Request = at least \$75 million

Administered by: SAMHSA (HHS)

Background:

The Projects for Assistance in Transition from Homelessness (PATH) program funds outreach, behavioral health care, case management, and other support services for people with serious mental illnesses as well as individuals with co-occurring substance use disorders who are homeless or at risk of becoming homeless. PATH funds are distributed through a formula grant process from SAMHSA in HHS. Under the formula, each state (including D.C. and Puerto Rico) receives at least \$300,000 in PATH funds. Each U.S. territory receives a minimum of \$50,000. PATH was last authorized in FY2003 as part of SAMHSA reauthorization legislation.

PATH is administered at the state level; each state doles out PATH funds to local service providers. States must match every \$3 of federal funds with at least \$1 of state or local funds. Many PATH service providers are community mental health centers. A majority of PATH consumers are living either on the street or in an emergency shelter at the time that they receive PATH services. PATH served 82,000 people in FY 2005.

Talking points:

- The PATH program provides mental health services specifically for people experiencing homelessness. Insufficient funding for this program, however, precludes many individuals from obtaining these necessary services.
- In FY 2005, 463 local organizations in all 50 states, the District of Columbia, Puerto Rico, and the territories reported 82,000 enrollments for PATH-supported services.
- Under the PATH formula grant, only 30 states share in the program's annual appropriations increases. The remaining 26 states and territories have consistently received the minimum grant. To account for inflation, the minimum allocations should be raised to \$600,000 for state and \$100,000 for territories.

Recommendations:

- Strengthen the Projects for Assistance in Transition from Homelessness (PATH) program. Recognizing that homelessness restricts access to mainstream addiction and mental health services, Congress established the PATH (PHSA Title V, Part C) program to provide addiction and mental health services specifically for people experiencing homelessness. Insufficient funding for this program, however, prevents it from serving many people in need of treatment.
- We urge Congress to appropriate at least \$75 million for the PATH program.
- Congress must also affect statutory changes through SAMHSA reauthorization to improve this program. To end perpetual flat funding for rural and frontier populations, the minimum PATH allocations for States and territories must be doubled to \$600,000 and \$100,000 respectively.