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March 10, 2025

Re: LD 215, An Act to Establish a Program to Assist Residents of Large Recovery Residences

Senator Ingwersen, Representative Meyer, and members of the Health and Human Services Committee, my name is Cullen Ryan, and I am the Executive Director of Community Housing of Maine or CHOM. CHOM's small staff works collaboratively with service providers across Maine to house hundreds of people experiencing homelessness, particularly the longest stayers in homelessness, victims of domestic violence, and homeless Veterans – all of whom require supportive housing, including recovery residences.

I am testifying in strong support of LD 215, An Act to Establish a Program to Assist Residents of Large Recovery Residences. *This bill establishes a rental assistance program within the Department of Health and Human Services to support persons who are residing in certified recovery residences that have the capacity to serve 20 or more residents at one time. The rental assistance, equal to the monthly rent, is paid directly to the recovery residence for the eligible person. The person must be otherwise eligible for municipal general assistance. If the eligible person receives the rental assistance, the person is not eligible for housing assistance under the municipal general assistance program.*

In recent years, Maine's fatal drug overdose rate has been among the country's highest, and we have seen a continuing rise in homelessness among women, and families with children. According to 2023 state overdose data, 73 people died of overdoses within the homeless population versus 533 who died of overdoses within the 1.395 million population of Maine. That meant that a person was 32 times more likely to die of a fatal overdose if unhoused than if housed. Substance use disorder, poverty, and homelessness frequently interconnect and set the stage for generational barriers to healthy and productive lives.

Members of this population with long-term homelessness are up to 29 times more likely to be in the hospital, and up to 57 times more likely to be in jail when unhoused than when housed. Simply put, this population ricochets through our most expensive emergency systems when unhoused and all but stops once housed.

No one will get well without housing, and no one will be successful in recovery without housing and sufficient support. Stability in housing coupled with an adequate support network are foundational to success in recovery. Homelessness generally offers no structure or accountability; structural support and accountability framework are keys to success. It is nearly impossible to provide any such framework while a person has no place to live. This is why recovery residences work so well – they offer all of it.

However traditional rental subsidies such as Section 8 do not work well with recovery residence models. The paperwork and barriers are too much and take way too long to overcome for such a vulnerable population. When someone is ready to embark upon their recovery journey, they need to have an unimpeded and quick pathway to do so. Operational financial support for recovery residences is the ideal way in which these obstacles are surmounted.

A legislatively created two-year pilot program, in which CHOM participated with two of its low-barrier recovery residences, provided this important operational support with great success. Despite success, this pilot program ended and now Maine lacks this critical operational subsidy. This bill would help solve that.

There are some important considerations. Covering operational costs, rather than direct subsidy to individuals, is a particularly wise approach which accounts for the fact that people need quick access to and even quicker exits from recovery residences than a traditional lease will allow. Relapse is part of recovery, and is entirely predictable, and as such, operational support of reputable recovery residences is a great way to support low-barrier access for homeless populations while allowing for quick exits during periods of relapse.



Additionally, I would ask the Committee to consider amending this bill to allow recovery residences that have the capacity to serve fewer than 20 residents to have the same access to this important financial resource. It is quite rare and unusual to have a recovery residence that serves 20 or more people, especially in Maine. Beacon House and Patty's Place, CHOM's two recovery residences, individually house fewer than 20 people, but in total have the capacity to serve 20 or more people. As currently written, smaller successful recovery residences would be categorically excluded from accessing this financial assistance.

The positive impact of Patty's Place and Beacon House recovery residences cannot be overstated. During the pilot:

- 132 people were housed in these two particular recovery residences.
- 76 people reunited with their families (including their children).
- 76 people completely sustained from opioid use.
- 57 people moved on to attain permanent housing in the community.

Beacon House is now on a third "generation" of residents who have been successful in the recovery residence and have been hired to work as peer support specialists and recovery coaches at CommonSpace, CHOM's service provider partner. Seven (7) women who had been residents are now CommonSpace staff, supporting women in early recovery. Five (5) of the women have been employed for over a year, and currently all seven (7) are in independent housing in the community.

Good things happen when people have housing and the support they need for success. People recover, reunite with family, pursue further education, secure gainful employment, and participate positively in society. Please support this legislation that will allow financial pathways for recovery residences in Maine to accomplish all of this and more.

Thank you for the opportunity to comment.