

Serving Albuquerque's Unhoused

Health Equity Council

Executive statement

Homelessness in Albuquerque was on a sharp rise just as the pandemic hit, reaching a 7 year high in 2019 according to the Albuquerque Point in Time Report. In a recent report from the U.S. Department of Housing and Urban Development (HUD), New Mexico's chronic homelessness numbers went up by 57.6% from 2019. The report also notes Albuquerque's homeless population rose by 15%.

With the ongoing pandemic and potential for continued increase in numbers of homeless individuals and families, there is an urgency to address the needs of the unhoused community.

Background

There is a sense of urgency to address the rapid uptake in unhoused people and families in Albuquerque and Bernalillo county. Serving the unhoused community is polarized and politicized in the broader community by various levels of decision making bodies. While most of us believe that the basic needs to survive such as food, healthcare (including physical and mental) and housing are essential for a good quality of life and potentially provide a path to self-sufficiency, often there is disagreement and tension in community when a plan to provide services to the unhoused community is proposed. The reality is that in order to make an impact on day to day survival for the unhoused community, we must practice compassion and understanding of the importance of centralizing community programs and services. There is an incredible amount of resources expended in current attempts to address our unhoused neighbors. The proposed centralized 24/7 universal triage center would serve as a medical hub with a diverse set of services providing a space where people's needs are met in a dignified manner. In the year(s), post pandemic, it is predicted that the unhoused community will continue to increase. The priorities within the unhoused population must be addressed immediately.

Recommendations

Recommendation 1: Maximize the potential of the public facility while maintaining high quality services and reducing infrastructure costs.

Create a centralized 24/7 universal triage center to support a diversity of services (or smaller centers).

Recommendation 2: Create a plan utilizing equity tools- including centering leadership and input from unhoused community members directly impacted.

Consider utilizing health equity tools (<https://humanimpact.org/hiprojects/ensuring-equity-in-covid-19-planning-response-and-recovery-decision-making/?strategy=all>) in plans, projects, policies and budgets.

Recommendation 3: Continue to monitor, evaluate and make adjustments to the plan based on the needs of the community most impacted.

Adapt services as evaluations assess most effective practices.