THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health, substance use, and homelessness are parts of a puzzle that cannot be solved without looking at all the issues collectively. It’s important to address these conditions together because they typically overlap and impact each other. Addressing all three conditions together creates the best opportunities for prevention and resolution.

Mental health issues may lead to substance use, including the abuse of prescription drugs. This can lead to finding other ways to medicate and increases dependency on substance use. As an example, we have students who try to harm themselves. Without help and support this can lead to drug use. Parents may also be using substances, which leads to a lack of support at home and the inability to raise their children to be healthy and productive. Mental health issues may cause an individual to have issues that will not allow them to work or obtain any source of income, which may cause homelessness. Substance use is similar; if the issue is not addressed, it can cause homelessness. Substance use can also lead to mental health issues which can then lead to homelessness.

When someone is experiencing a mental illness, they are unable to maintain the life and coping skills needed to function properly in society and maintain housing. Very commonly, mental illness and substance use are interrelated because substances are used to self-medicate after mental illness goes without proper treatment. Homelessness results, and the person is unable to regain stability without treatment and resources.

The three areas relate to each other in many cases, but not all. It is important to address mental illnesses as they are often the beginning stages to the other two problems. Educating parents and the community on how to address these areas is critical.

Unsheltered individuals may be dealing with mental health issues or substance use. They need help to be diagnosed and assisted. Underlying trauma may also link to mental health, substance use, and homelessness. There is no wrong door, and we need to cross-train agency staff.

Because these conditions are often co-occurring, systems need to coalesce to wrap services around individuals to address multifaceted needs. In addition, these systems must be designed to address the impact of trauma.

Individuals are the only ones who know their trauma. Mental health and substance use issues do not make them less of a person and we can make a difference by working together to help them. Each condition exponentially increases the risk of becoming a victim of each of the other conditions or issues.

It is a vicious cycle. There are not enough resources for mental health. We have overworked and underpaid case managers. Drug use can induce psychosis. We have no homeless shelters, and very limited low-income housing or rent control for the disabled. We need to revamp mental hospitals and behavioral health agencies and provide more help for people who come out of prison. Without addressing all these things, we create incomplete solutions that set people up to fail.

The conditions of mental health, substance use, and homelessness can be viewed as different stages of the same social disease and people can suffer quicker and more painful stages. It is critical to attack the disease and work to relieve its symptoms.

We need greater collaboration of services, the right resources for the right need, more treatment programs strategically placed around the county with easy access to resources, a toolbox, and trauma-informed care. It’s also important to remember that all it takes is one person to stop the cycle. If we stop the cause, we can prevent the problems.
ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

There are multiple factors contributing to the rise in substance use, mental health, and homelessness and the problem is continuing to get worse.

We need to find programs and solutions that work to take people from homelessness to self-sufficiency and implement a plan. The answer is among us – the people who care about the community. These are all community issues, and we cannot rely on the government to take care of them. It takes different groups with expertise to fill in the pieces. Non-profits, faith-based, and other organizations need to support one another and work together to train their staff and community members. The buck stops with us and we have the responsibility to help those in need.

We as a community can address these challenges by being aware of efforts within the community. We need resources to be able to talk more about these opportunities to strengthen our community. For example, the Pinal County Coalition to End Homelessness has multisystemic membership to reduce recidivism to homelessness, including strengthening the already existing groups of domestic violence and sexual violence survivors and those with lived experience. We need to generate more funding to support these efforts and other needs.

Across the board, we need to increase resources to address these issues. Resources to end homelessness need to be available, including a homeless shelter and homes for people to begin to build their lives free of drugs and to get mentally well. We also need less anti-homeless architecture, more safe dose clinics, transportation to access resources like the food pantry and additional resources to Horizon for counseling and services to people in need.

We should create one place, a “one stop shop” with many stops and hubs that care for the individual. Transitions are hard to work through and people need to be walked through each process and feel supported as they go through each step to be self-sufficient. We need to utilize methods that support people throughout the process and that do not leave them on their own to return to the same cycle.

Money is not the only answer. We need to reduce the stigma associated with receiving help. People should be able to ask for help without guilt or shame. The community needs to be more willing to help those in need and find ways to make receiving help easy and painless. We need to educate the community and work with parents and teachers on identifying and treating people in the schools as well as those families who are related to those schools. It is also important for cities to be involved and stay involved, especially the police department.

We should encourage others not to give up on people. It is important not to hand off, but to continue to work on the issues and help people receive the proper services to be able to function daily.

Systems should be better aligned. There is potential for alliance approaches that leverage interdisciplinary efforts working in sync rather than individually. These systems also include uniform approaches to the treatment planning for patients. There should be patient management software for recording and sharing for all clinicians, including social workers and doctors.

We need increased support from the government and non-profit leadership to come together to create long-term policy and solutions.

Trauma informed interventions are necessary to treat conditions that create mental illness and substance use disorders. These interventions include more resources for seriously mentally ill (SMI) housing, crisis stabilized unit shelters, and a revolving shelter system. Dialectical Behavior (DBT) groups are needed along with more incentives for people to become therapists.

We need to center and promote evidence-based and non-carceral forms of intervention and treatment. We need to educate the community better on the benefits of these programs. Courts can mandate substance use programs instead of jail time. More programs inside of jails and prisons will help those incarcerated and allow them to connect to organizations when they get out, like Celebrate Recovery.
Collaborating between multiple groups can provide deeper and more wide-ranging resources to better help people get the help they need and break cycles.

We can expand opportunities by opening more facilities, rehabs, group homes, and centers for people in need. More facilities for the community will help create positive impact. Walk-in clinics or a van that goes to people where they are would provide those experiencing homelessness with more accessible options for services. This would aid people in feeling welcomed and change their feelings about getting help.

People need housing and we need to ensure they have a place to live and are safe from outside elements. If a home is given, then drug testing can be completed, and substance use services provided along with mental health services. The iHelp model a good example.

The issues of mental health, substance use, and homelessness will get better. The issues may never go away, but they will get better.

**SETTING PRIORITIES**

We need to:

1. Look at what community resources we have and find what is missing.
2. Be realistic in what we can achieve to find realistic results.
3. Walk through with them, not just tell them what is available and have them go there on their own.
4. Support programs that already work (like CHIP).
5. Work with stakeholders and the police department.
6. Stop causing barriers and instead build affordable housing and family shelters.
7. Have great case management and advocacy that works with and refers to other service providers to provide whole person care and a “warm handoff.”
8. Have a resource manual, programs that build trust, and culturally responsive services.
9. Provide people experiencing homelessness with food, shelter, and clothing, and opportunities to learn skills to support themselves.
10. Update youth education to teach empathy for people experiencing these conditions and teach people to not to be judgmental about these topics.
11. Make help easy to access. Release the stigma of mental health so that people are willing to receive help.
12. Align efforts, funding, and regulations.
13. Involve family and have a patient management system.
14. Work together to meet the needs.
15. Educate teachers to notice signs and symptoms in children so they will have the tools to nip problems in the bud.
16. Have diversion and treatment programs to stop over incarceration, access to resources, and treatment that takes all factors into account.
17. Eliminate legal barriers that perpetuate the system and bar people from offering aid.
18. Have more resources for mental health and substance use and safe living conditions with help, such as iHelp homeless shelter.
19. Have education, cultural humility, model-case study, peer support, housing, and safety. Intervention and education are needed to progress and grow.
20. Provide better pay for individuals who work with mental health, substance use, and homelessness because there is high turnover. Because there is high turnover, there is no trust. People have to start over when they get a new case manager, or they get lost in the cracks.

21. Have better communication between agencies. Doctors, probation officers, attorneys, case managers all need to talk and work together to find solutions to these problems.

If people are experiencing substance use and mental health issues and one is treated but not the other, they will not achieve long-term recovery. We need to share information on what programs and treatments have shown the best results and talk to the afflicted who have succeeded.

The most important action we should take in this situation is to listen. Hear people out to win their trust. Without trust and communication, we cannot establish a plan together. No matter the situation people are in, we still must give out information on what will happen and what they can do to prevent it again. The key is having the knowledge to provide what we learn to better our community and increase the knowledge in others.

WHAT ARIZONA’S ELECTED LEADERS NEED TO KNOW

- We need an increase of funding and prevention.
- Fund programs who are currently doing the work like CHIP.
- Help by providing prevention. Students need help and do not have a lot of support to receive that help.
- We cannot depend on just the leaders. We have the opportunity to lead, we just need to be realistic at what the barriers are.
- Stop looking at the issue, look at the person. Find a way to gain trust, do something, not just say something.
- We need more resources to address the problem. Support and strengthen coalitions and their activities. Recognize there are different levels of resources in rural vs urban Arizona.
- Lead by example.
- Fund, fund, fund.
- Stop arresting so many people and help them. We need more funding in programs that help with substance use, mental health, and homelessness.
- Provide better training and education on what to look for to recognize issues early on. Be accountable. Involve all agencies and organizations. Provide and gather funding. Continue to get educated on the needs of our community and then inform us about what has been learned.
- Provide more focus on trauma prevention for children and recognize its lasting effects. Provide more funding for services for the SMI population. Continue working for new solutions while collaborating with other agencies and organizations.
- Dedicate and gather resources.
- Tell the ones making the laws and providing funding to spend a week in a behavioral health facility and have them get paid what they make. We need low-income housing and shelters with peer support staff.
- HELP! We need more education and training for teachers, case managers, all staff at agencies, police, parole, and probation officers.
- Continue to pray and help. We cannot arrest and imprison our way out of this problem.
• We need to start young and get more help in the schools. We need more facilities to house mental health patients instead of incarceration and we need substance abuse recovery programs in jails and prisons.

• Housing, resources, funding, and leading by example are all great ways to help support these three issues. We need to start with prevention. Do not arrest and incarcerate. We need to find ways to help people with their problems instead of sending them to jail.

• Stop criminalizing mental health and understand its effect on homelessness and substance use. Time would be better spent looking at all three not just one issue at a time.

• One of the best ways to address all of this information is to have events in the community, schools, prisons etc.

• Create more housing options for those with low or no income and who have records that prevent them from getting into houses. We could ensure that there are rules to getting housing such as, random drug test and housing searches for those who need it, along with getting members into mental health agencies and active in their care.

• Provide easy access to help, healthcare, and resources. We spend too much on inappropriate programs that are nowhere near enough help for those who want and need it.

INDIVIDUAL COMMITMENTS TO ACTION

Recognizing that the power to change the future begins with each individual, participants committed to take personal actions based on their experience and discussions during the Casa Grande Community Town Hall. Below are individual actions that were shared.

I WILL...

• Lead by example.

• Help rural schools.

• Try to get more help for our students.

• Fund the nonprofit organizations that are there to end homelessness.

• Take on whatever is needed to end homelessness.

• Fund organizations that are doing the work.

• Continue to talk with and learn from stakeholders in Casa Grande.

• Help us by creating a homeless shelter and providing people to staff it.

• Look at Pinal County and not compare it to Maricopa.

• Support organizations that need financial assistance. Look at the service, see where it is lacking, support the cause.

• Work towards assisting my community.

• Be a volunteer to help the community.

• Continue to chair Pinal Coalition to End Homelessness and the Child Abuse Prevention Council.

• Continue to work at Against Abuse.

• Share our discussion with elected officials to help create policy that resolves this issue and promotes health and wellness.

• Continue to work to integrate and connect school-based resources.
• Commit to treatment and resources over carceral responses.
• Celebrate Recovery in all prisons. The results where Celebrate Recovery is inside are amazing!
• Fund.
• Make connections with folks in Pinal County to see in which way the organization I work for can better serve the populations we work with in Pinal County.
• Amplify my voice to county and state officials.
• Work with the county to get help inside to work with the new transition home in Florence.
• Work together across county lines. Work with and listen to people on the ground and assist them with the fight they are facing.
• Create more helping programs.
• Open facilities for each topic such as mental health, homelessness, rehabs, group homes and shelters. Provide information for parents, teachers, officers, etc., that will help educate the community and prevent problems from occurring or prevent them from turning back to these problems when they just need more help.
• As a supervisor in the mental health field, I will ensure that my staff are trained and part of the solution not the problem.
• Help those who I can and put them in touch with programs I know that will help.
• Work with agencies to connect the mental health, substance use, and homeless people as they come out of prison and ensure continuity of care.
• Spread the word and keep getting knowledge out. I know I can make a change.