

MENTAL HEALTH,
SUBSTANCE
USE, AND
HOMELESSNESS
2022 COMMUNITY
TOWN HALL REPORTS

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General "Mental Health, Substance Use, and Homelessness" Sponsors

23rd Annual Summer Institute for Behavioral Health

Wednesday, July 13, 2022 Flagstaff, AZ



23rd Annual Summer Institute for Behavioral Health July 13, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health, substance use, and homelessness intersect and are indisputably interconnected. These issues are all complex and cannot be looked at individually. Homelessness is always complex with multiple factors at play. Substance use and mental health issues are often only the tip of the iceberg

A mental disorder which goes untreated can lead to substance use and substance use may lead to homelessness Mental health is an underlying issue for many problems like substance use and homelessness.

If you give someone a home and do not address mental health or substance use, they may end up homeless again. Successful, long-term treatment and recovery is impacted by all three of these areas, so it is important to consider these three areas together to see long term success.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS AND WORKFORCE

There are a wide range of actions and approaches that can address mental health, substance use, and homelessness in a holistic and integrated way. They include partnerships between first responders and mental health providers and a person-centered approach to help individuals prioritize needs. It's important to meet people where they are and to consider the environment, social determinants of health and how systems impact or perpetuate problems.

It's important to have the right workforce to address these issues. We need a greater investment in education to fix our lack of workers, and to empower individuals so they know how and when to how to ask for help.

Accessibility is something that is unfair in our state, and varies depending on the zip code that an individual lives in. This is also tied to the lack of equity for already underserved populations in our community. We need greater equity in terms of access to healthcare, transportation, and even necessities like food and shelter. The level of resources varies across so many communities including LGBTQ, people of color, age, and zip code.

Our population is aging and often do not have the economic resources to effectively meet their housing needs. Systematically we are not positioned to address this adequately. A growing aging population cannot be ignored, and Arizona is not in a position to adequately address this issue. We need more support to give this population what they need, including affordable housing. We also must face the fact that as populations age, we do not have a way to replace these individuals in our workforce.

SETTING PRIORITIES

- Education. People need to be educated on the resources available and we need to address bias and often
 incorrect stigmas surrounding the homeless population. All segments of our community need to be better
 educated on this issue, including law enforcement.
- 2. **Community.** The community needs to come together as a whole to address these issues. This is a community issue that requires a community solution. Human contact and connection are important.
- 3. Focus on Prevention. Be proactive. Prevention is key and a better more effective use of resources.

INDIVIDUAL ACTION

Individual action is important for solving these issues. Each of us can: advocate for services, promote legislation that is relevant and addresses the issues with compassion and best practice in mind, and participate in educational opportunities such as Arizona Town Hall discussions.

We can also lobby our legislators, work with local and state agencies to find solutions, help individuals get connected to resources, and create small successes. It's important for everyone to become aware of the systemic issues and support leaders who are committed to addressing the issues.

IN COLLABORATION WITH



New Freedom Community Town Hall

Tuesday, August 23, 2022 Phoenix, AZ







New Freedom Community Town Hall August 23, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

It is important to address mental health, substance use, and homelessness together because they are branches of the same tree and are interconnected with each other at the root.

It can be a chain reaction with all of them connected to each other and with one often leading to the other. Treating one without the other is like putting a band aid over a bullet hole. Addressing the issues together is the most efficient way to optimize success and to stop the revolving door.

If you don't have stable housing, it is difficult to get a job, to feel motivated and to deal with health issues, including mental illness. Conversely, substance use may lead to mental illness and homelessness.

It is important to address these issues together so that we can create more effecting, preventative, and supportive programs. Many people do not realize they have a mental health issue that can be addressed until they have an opportunity to see a therapist. For example, veterans may have PTSD and other mental health issues from their service that have never been addressed. People with mental health issues are given medication without addressing the cause of the problem or understanding its source. We should try to address these issues early, bring more awareness to those experiencing these challenges, and remove the stigma associated with mental illness so that people who face these challenges can find the resources they need.

When we support people who have mental illness, remove the stigma associated with mental illness, and educate people about why and what they are experiencing, we free people to have a chance to lead a fuller life for themselves and their family.

Transportation is also critical so that people can get to jobs and the services that help them to overcome these challenges.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

We need more places like New Freedom that cluster programs under one roof. The community and mental health support are critical to those they serve. However, we need funding and changes in policy that allow people to stay longer than 90 days.

We need to make resources more available and have outreach to people so they know where to get assistance. Using mentors who have navigated these challenges themselves can be a powerful tool because they do not come with the answers, they come with the right questions.

We can use mentors who have been there to light the path and inspire people to make change.

We need to meet people where they are, whether physically or culturally, and provide safe places for them to get the help they need, including basic needs like food and glasses.

Policy, business, and community leaders need to work better and more collaboratively to help address these challenges holistically and change policy in a way that creates better solutions.

Some of the other policy changes we need are decriminalizing mental illness, creating more programs for women and more diversion programs for substance use and mental illness. We need real changes to programs in prison, rather than just name changes and we need to provide compassion training to prison employees to change the culture.

Educating the public about why it is important to address these issues will help with needed policy and law changes. It will also help with general outreach and provide more support for much needed funding for navigation services, therapy, one-on-one treatment, transportation, and more programs like New Freedom.

SETTING PRIORITIES

- 1. Funding
 - a. Fund in a smart way with programs that are tried and true. Have funding accountability. Do not waste it on things that are not working
 - b. Fund one stop shops
 - c. Provide incentives for cooperation. A lot of people are not willing to share resources and information. Agencies and organizations should share resources and work together instead of competing with each other.
 - d. We need more shelters and beds, especially for couples and families.
 - e. All people who need it should receive services under AHCCCS and we need to bring more awareness to people that they have the ability to choose their access plan.
- 2. Educate, build awareness, and provide funding to support education
 - a. Use outreach and success stories with those who are out there struggling.
 - b. Start early, the younger, the better. Treat the entire family and have them address mental health and substance use as a family unit.
 - c. Have community publicity that shows the benefit to the community as a whole and why it is a community problem and a human problem.
 - i. Show them the cost of not doing anything. What does it cost the health care system? What is the cost to our communities and to families if we do not do anything?
 - ii. Make it relatable with personal stories. Show how the investment of resources now will reap benefits over time to everyone.
 - d. Educate to reduce the stigma of these conditions and show how we need to address it with compassion and empathy.
 - $e. \ \ Maximize the time people are in carcerated to provide education and support for mental illness or substance use while they are in prison.$
 - f. Maintain a grassroots approach to solutions, similar to New Freedom

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- Walk the three blocks to CASS from the legislature and experience the area. Spend a day on the streets, in tent city, or any of the shelters without them knowing who you are to see what it's like.
- Create more shelters that are ADA accessible.
- Invest in solutions or pay the cost of the problem.
- Policy is about people not punishment.
- Have a solid commitment to a generation and let New Freedom lead the way to show people how to change their lives.
- Stop locking people up.
- Take a risk on humanity. It is worth the investment.
- Talk about the cost of the problem versus the cost of the solution. If you look at the destruction to the community versus what it costs to help, it is well worth it. Be loving, compassionate, genuine, and wage war against the things that destroy.
- Listen to the people who have experience with these issues.
- Put supports in early on and invest in the whole person with holistic nurturing and opportunities.
- Give opportunities for people to have more safe spaces.
- Demand results. How many more people have to die?
- · Address what is not working. Be someone's champion and keep fighting for them when they can't fight.
- Build organizations with the clients in mind (similar to New Freedom).
- Have result based funding. What is really working? Crease more vocational training and other programs that are working and that reduce recidivism (like New Freedom).
- Locking people away into a cycle of incarceration doesn't work. Think about a restorative system that works.
- Stop medicating and start educating.
- Have mandatory educational guidelines instead of mandatory sentencing.

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 New Freedom Community Town Hall. Below are individual actions that were shared.

IWILL...

- Never give up and keep my best self in front always.
- Continue to share my story to the next person, so I can continue to live life free of addiction and be a living example to the next person in need.
- Continue my education, so I can affect change in me and my community.

- Continue my education, so I may be of better service to the community I live in, work in, and move on to in the future.
- Be a part of New Freedom.
- Get connected with resources that will help me to provide outreach services to women who are incarcerated.
- Lobby my elected officials.
- Be the change I want to see, work for New Freedom, and come back as a VA Rep to help veterans, combat veterans with PTSD, and those with substance abuse issues.
- Give back what was so freely given to me by being of service to others.
- Continue to send hope to those who are incarcerated.
- Continue to serve "the least of these" and walk in love.
- Continue to find and provide resources for those who cannot come to New Freedom.
- Help New Freedom grow and grow to rebuild lives and families.
- Outreach with an open heart and compassion.
- Continue to be a servant for those in need and help New Freedom grown to serve the community.
- Use my voice to educate and encourage people to get active about these very important issues and continue to do what I already am, which is being of service to others like me.
- Continue to advocate to increase understanding about these topics and how they are related with legislators, funders, and leaders who have resources to give toward these solutions.
- Take the skills and mindset I have not only built for myself, but also what I have gained at New Freedom, and put them to use by building a life beyond what I ever imagined and share what I have to offer for those in need.
- Spread awareness in my journey by sharing my story with mental health, substance use, and homelessness to show there is hope in order to normalize these things and stop the stigma.
- Help others based on what my experiences were.
- Make sure people know about the different resources available to them.
- Continue to volunteer at rehabilitation and re-entry centers.
- Continue to do the next right thing and service my community.
- Learn, listen, and reflect on the impact of substance use, mental health, and homelessness by talking to more people who have experienced these issues. The more awareness I have, the more I can share with other people.
- Continue to be an example of success and show those who want to change and do better that change is possible. I will help those who want and need it.
- Help lead folks out of the hold I once found myself in. Be a navigator.
- Continue to be active in my community by helping people in addiction and homelessness to be aware of resources, offer a hand up, and treat them with dignity and respect.
- Love God and love my neighbors.

- · Ask people to share their stories, so I can truly begin to see, hear, and have a better understanding of who they are, their journey, and how we can connect and support.
- Speak to policy makers about promoting human dignity for all.
- Use my voice. I will share my experience, strength, and hope to better educate and inform people that do not understand this mission or maybe don't know there even is a mission.
- Continue to promote and commit to the peer-to-peer program to impact the lives of those in need at New Freedom. Invest in the solution or pay the cost of the problem.
- · Take my lived experiences, strength, and hope along with the skills I've gained at New Freedom into my community to help others and change lives. Peer support = Peer love.

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Rural Arizona (Show Low) Community Town Hall

Monday, August 29, 2022 Show Low, AZ and Online Via Zoom









Rural Arizona (Show Low) Community Town Hall August 29, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

It is important to address mental health, substance use, and homelessness together because these issues often occur together. There is a vicious cycle with everything connected and reappearing together. For example, mental health issues can lead to substance use and homelessness. Likewise, homelessness can lead to mental health challenges and substance use. Education and job opportunities are also tied to and interconnected with these issues. To best solve these challenges, especially for our most vulnerable, we need to address these issues together and in a more coordinated way.

The stigma of experiencing issues with mental health, substance use, or homelessness is often tied to biases and misunderstandings, which keep those who need help or assistance from getting it and prevent those who can provide help from providing the best resources and approach.

We should address this stigma, provide more wrap around services, better coordination among services providers, more education of first responders and law enforcement, and more housing opportunities for those who are unhoused. We also need to better address cultural differences, trauma and other aspects that may impede services.

Finally, we should incorporate the wisdom of those with lived experiences and continue efforts to educate the community and provide opportunities for better collaboration.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

There is no cohesive response for addressing these issues and there are many gaps that create major problems.

We need to create better experiences for those seeking help. This includes addressing stigma and creating a more supportive environment that includes providing love and support to those experiencing these issues and addressing mandatory reporting requirements that may act as barriers to those seeking help. It also includes education to combat NIMBYism (not in my backyard), providing information to those who need to access resources, and working more closely with police and first responders as part of these educational efforts.

Each local community should do systems mapping to identify what is being offered, what is needed, and what their qualifiers are. We need to take another look at disqualifiers – some require sobriety, and some do not. We need to expand on the types of housing that are offered. We also need to look at the entry points – emergency department, policy, etc., and ensure that they know what other services are available, so that people are not just treated in a silo and discharged.

Turnover is often high making awareness of resources even more challenging. It is very difficult to keep resource lists current. Communication is a big issue, making people aware of what resources are available. Often, resources are there, but not used because of siloed service providers.

Peer support by people with lived experiences is critical. Yet, we lack the job opportunities for those who can provide peer support.

We also need to help families better understand these conditions and we need to address stigma that can be an obstacle to getting the resources they need. The Federal government is providing a lot of funding for opioids, but very little for other substances such as alcohol. Government funding needs to expand to all substance use.

It is often very difficult for people convicted of drug offenses to get employment and this can lead to homelessness and recidivism. Many people are losing their homes because the market is leading people to see their rental properties and the HUD fair market rents are too low in Arizona. There is no place to put people who need rental properties. Some people coming out of incarceration are sent to Maricopa County instead of receiving services in norther Arizona because of a lack of DOC approved re-entry housing.

We need to address legislative changes, such as the barriers to success for those with criminal backgrounds. We need to look at how to provide a warm hand off for those coming out of jail or prison. To ensure success, we should use more of a trauma informed approach that takes cultural and historical factors into account. We should also look at approaches that do not criminalize or "lock up" those who are experiencing homelessness.

While we have some wrap around services, we do not have enough. We need to increase the quality and the quality of wrap around services and communication efforts to those who need them. To accomplish these goals, we need more sustainable funding for much needed services and resources. One-time grants with strings attached are appreciated but are not the most beneficial for the best community response.

We need access equality to everyone, which includes transportation and access to broadband internet. We also need more prevention efforts such as diversion and education programs, as well as programs that address poverty and trauma while creating a safe space to meet people where they are.

Finally, it is important to have more gatherings like today to educate the community, break down barriers, and improve coordination.

SETTING PRIORITIES

The most important actions we need to take to address the conditions of mental health, substance use, and homelessness in an integrated way are as follows:

- Education is critical, both in schools and with families. We need to reduce the stigma in education systems with
 programs that are interactive, trauma informed, preventative and proactive. We also need to reintroduce
 basic life skills into our schools.
- Use integrated approaches including working together on health assessments, integrated family support and treatment, and decriminalization of those experiencing these issues. There should be "no wrong door" for accessing services.
- 3. Our system is crisis active and reactive instead of preventative and pro-active. We need to focus more on prevention and provide more funding and resources for prevention and treatment. We need to focus on root causes and address those issues.
- 4. We should incorporate more use of community centers for community gathering and art.

- 5. Funding: We need more funding for affordable housing, prevention, peer support, and mentorship programs. We need education that helps reduce stigma and combats the fallacy of NIMBYism (not in my backyard) because it already is in your backyard. We also need resources to improve communication and outreach about available resources. We need increase funding for mental health prevention and treatments as well as, affordable housing. We need to provide quality and equity in the provision of programs.
- 6. We need to have policy changes; allow recovery housing in different areas of our community.
- 7. We need to create facilities in this area for detoxification and for women. We also need more wrap around and transitional housing for those experience these issues.
- 8. There is a role for all of us to address these issues even if we are never able to completely solve them. This includes government, business, organizations, and others who can communicate resources available and provide resources.
- 9. There is a tremendous need to bring key stakeholders together (healthcare, businesses, first responders, police, tribal, schools, etc.) once a month at the beginning to do resource mapping and identify needs and gaps. This could be a great venue for addressing specific local ideas such as, having people cleared at the scene who need to go to a mental health facility versus a hospital or how to use more peer resources.
- 10. It would be good to include the Governor's office. To achieve this, we need to determine who should host and how do we get consistent participation. The Re Center suggested that after some new hires come on board, perhaps they can be the host and facilitator. This could start small and grow larger.

We need more mentorship programs and more volunteers willing to help in a non-office, one-on-one basis.

We simply do not have enough mental health professionals in this region. We need to find ways to attract more people through virtual visits being held. Perhaps, the government could offer loan forgiveness to providers willing to commit to practice in this region.

Stop focusing on prevention efforts and awareness campaigns! Start focusing on treatment and recovery resources along with affordable and accessible housing inventory. We need increased access to affordable housing opportunities for felons and individuals in recovery, so they have fewer obstacles to improving their life, maintaining sobriety, and/or managing mental health. It is critical to creating an environment where families can obtain mental health support, substance use services, and housing to learn how to build a quality of life for themselves and their children. To stop the cycle and significantly reduce childhood trauma, we must create a path parents can work to obtain for themselves and their children.

Finally, we need to change the public consciousness so that everyone feels responsible for people suffering from these conditions.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- Fund education and awareness programs.
- Connect to your local community. Come to the community and consider our input and what resources we
 have as you make laws. Step up to be involved in the solutions to these problems and consider the needs of
 rural Arizona as you do so. Apache and Navajo Counties need more detox facilities and residential programs
 that will accommodate families.

- Provide more funding to our schools, including programs about mental health, and SUD. Open up government funding with fewer restrictions to address these integrated needs (e.g., do not limit to just capital or just operating services).
- Consider legislation that mandates landlords to consider individual applications on a case-by-case basis and reduce regulations for sober living communities.
- Expand funding for affordable and transitional housing.
- Persuade people of all parties that this is not a partisan issue and that they need to work together as if our country were attacked by a foreign power.

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 Rural Arizona (Show Low) Community Town Hall. Below are individual actions that were shared.

IWILL...

- Continue to work toward improving resources and building relationships with community members to help provide the treatment necessary to get individuals back to being productive citizens in our community.
- Help more who are suffering.
- Seek out more resources, so I can address this topic.
- Provide the public with data and success stories in our community. More prevention.
- Receive brochures to disseminate to people who use my courtroom or in courthouse (public).
- Continue to reach, treat, and provide resources for and advocate for community members who are struggling
 with substance use disorder, mental illness, and homelessness.
- Send Melinda Navajo County substance use disorder resource cards.
- Work toward providing additional community information through social media.
- Attend future Town Hall meetings.
- Look into gathering resources and see if we could possibly create an app to share local resources with those that need it.
- Find out what we need to do to get community centers in our communities.
- Work hard to reduce stigma in my community.
- Offer support to educators in the areas of teaching student self-regulation and reducing further harm through education on adverse childhood experiences.
- Work on education in my community, starting in the elementary schools. Reach out to local groups and work on starting a community center to focus on education and family support.
- Continue the discussion with co-workers, identifying with them helpful, valuable stakeholders to include in the discussion to more recommendations to action.
- Listen to community experts and continue to work to be educated on solutions options.

- · Finance more affordable housing.
- Drug prevention efforts, community awareness through brochures, media outreach, and radio. Parent prevention, adversity workshops, Narcan Training Narcan Distribution, book clubs, Nexus Coalition.
- Take the needs discussed in this meeting to the general population.
- I will ensure that I will help where I can and share the information I have.
- Commit to becoming involved in community projects to spread support and awareness.
- Do my best to educate myself further on the topics discussed today.
- Continue to carry the message to the addict who still suffers.
- Inform the public there is help available in many forms.
- Continue to research and advocate for funding and services to address mental health, substance use, and homelessness!
- Discuss what we talked about with my peers, to open a way to help student in our school.
- Approach key stakeholders and educate them on these conditions and make it know what available resources
 we have in place.
- Talk to my teacher about having a peer mental health group at our school.
- I would like to help with culturally informed, trauma informed off reservation housing. Native American experience with homelessness, i.e., shelters can replicate boarding school trauma.
- Continue to go to school to work toward my degree in behavioral health and continue to help people suffering from substance abuse and mental health.
- I will communicate and share the ideas discussed today with a person of higher authority, such as city council members, school advisors, and peers.
- Help and talk about this topic, support, and educate people about this topic.
- Continue to share my experience, strength and hope while being loud about my recovery!
- Visit Re: Center.
- Build relationship with resources.
- Provide training for personnel and public.
- · Review and update policies.
- Refer individuals in need to some of the services I have become aware of.
- Search out and learn about available services in the area.
- Gather data on root causes and areas of need in our communities.
- Approach county administrators and BOS to commit funding and resources as well as to advocate for policy and ordinance changes.
- Encourage others to create trauma informed workplaces.
- Take action to share resources in my community and use this information to better my role in public health.
- Do my best to reduce stigma and increase the space for voices of those with lived experience.

- Continue to reach out to people who use drugs in order to end isolation and bring them back into community by meeting them where they are at without judgment and with compassionate resources.
- Give all the information I learned today back to my community to help give ideas or any ways to improve the conditions of mental health, substance use, and homelessness in my community.
- Bring voices of this community back to our health plan leadership.
- Advocate for change.
- Through my work, show grace and empath with all those I connect with. Always listening before judging. Connecting those to resources.
- · Give information about what I have learned and give ways I can help my community.
- Say why we should address mental health, substance use, and homelessness.

SPONSORED BY AND IN COLLABORATION WITH





Prescott Community Town Hall

Monday, September 12, 2022 Prescott, AZ and Online Via Zoom







Prescott Community Town Hall September 12, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

While everyone who is homeless does not have mental health or substance use issues and those who have mental health and substance issues may not be homeless, these areas are interconnected and often related to each other. For example, those with lower incomes have more trouble addressing and finding treatment for mental health challenges. Finding housing is also a major challenge for many and this can lead to challenges with mental health and substance use disorders. Recovery is extremely difficult if you are homeless. Furthermore, mental health issues can lead to substance use issues and then homelessness. Although all three of these issues are interconnected, correlation does not necessarily mean causation.

It is important to address these issues together because you have much better success with outcomes. We cannot focus on any one of the issues in isolation if we want to solve all three of them. We need to look at the issues holistically, as working on one area impacts the others and these areas exacerbate each other.

To effectively address these issues, it is important to address stigma. The stigma surrounding these challenges keeps people from seeking treatment and makes everything worse. At the point people are seeking recovery, they are often at rock bottom, which makes it more difficult for them to succeed. We need to look at how we can better support people when they are in need during their most difficult times, so we can stop the revolving door and solve all of the issues collectively and effectively.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

There is a negative cultural and social stigma attached to these issues. NIMBY ism (Not In My Backyard) is real and it is a challenge we must address. We can combat NIMBY ism and the negative stigma attached to these conditions by letting people realize that just because you cannot see it, does not mean it is not here. It is here. To combat NIMBY ism and negative stigma around these issues, we should have marketing and communication efforts, especially for children. They need to know that it is okay not to be okay.

Yavapai County has many good organizations, services, and resources available to address these issues; although, there is a shortage of health providers and affordable services for people going through these challenges.

We need to bring our resources together in a better more collaborative way to leverage the resources that are available. We also need to find ways to get people to these resources, and to help them to be ready to receive the resources that are available.

We should build comprehensive resource guides, better leverage resources that are available through collaboration and coordination, and work in a more integrated way with governments, faith-based organizations, law enforcement, service providers, and most importantly, community members.

We should consider creating a housing coalition for Yavapai County to address housing issues. The housing coalition should look at supportive housing options with wrap around services for those who need them and explore creative housing options like tiny homes.

We need to work together to better support people when they are in crisis. When people are in a crisis, having community support makes all the difference. Community case management is key, as is meeting people where they are. Accountability is also key, including individual, organizational, and community accountability. We also need resources to address these issues, whether through expansion of funds with fundraising events or better collaboration and coordination with those involved.

SETTING PRIORITIES

- 1. Support collaboration.
 - a. Incentivize collaboration through federal and state grant funding.
 - b. Bring all the organizations working on these issues together along with policymakers and others to have solution-based discussions for how best to take action.
 - c. Create a coalition to seek needed funding for recommended actions.
 - d. Have a centralized and coordinated intake process.
- 2. Make resources more centralized and available.
 - a. Provide and maintain a centralized source for resources.
 - b. Create a free one-stop shop for resources that provides access to resources and information.
 - c. Have a central information and education webpage or other source for information.
 - d. Train police and first responders about available resources.
 - e. Have a communication and marketing roll out of the information and how to access it.
- 3. Meet people where they are.
 - a. Sendoutpersonal caseworkers to disperse information to those who may not have access or understanding.
 - b. Provide neighborhood living and resources.
- 4. Housing.
 - a. Create stable affordable housing for providers and professionals.
 - b. Create stable affordable housing for those who are vulnerable and those experiencing these challenges.
 - c. Have affordable housing throughout the region and within the city limits.
 - d. Create a housing coalition to address how best to create affordable housing, including how to collaborate with builders and local leaders.
- 5. Transportation.
 - a. Create more public transportation.
 - b. Address the transportation challenges that prevent people from getting needed services.
- 6. Address workforce shortages.
 - a. Create flexible and alternate work schedules.
 - b. Create flexible payment options: sharing resources for a full-time employee who works for multiple organizations.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- Prioritize affordable housing throughout the spectrum (from professionals and paraprofessionals to the unhoused).
- Everyone is just one family member or friend away from someone who is experiencing these issues.
- It makes economic sense to invest up front as it saves on the back-end. Review existing studies that show
 how investing up front to address the crisis of housing, mental health and substance use will save our country
 money going forward.
- Create a renewable state fund that allows individuals and other organizations (such as corporations) to contribute to the fund so that grant money can be made available statewide to prioritize and address these issues, perhaps looking at First Things First as a model.
- We need education and outreach tiered to the needs of the individual.
- We need your time, talent and treasure devoted to addressing homelessness, substance use, and mental health.
- Create a one stop shop and central database.
- Support more caseworkers.

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 Prescott Community Town Hall. Below are individual actions that were shared.

IWILL...

- Urge my peers to better understand and engage with their community by amplifying the voices of those doing the work.
- Continue to work with youth and research community resources.
- Continue to remain engaged with community resource providers in order to advocate for positive Veteran outcomes.
- Keep in contact with the community partners. Report the information to elected representatives.
- Continue to work with HUSD to provide resources, gift cards, and support to reduce the amount of homeless students.
- Continue to work with MATFORCE on educating our kids on the dangers of drugs.
- Say "yes" in my backyard.
- Continue to attempt to get community stakeholders to meet to determine joint steps to help those affected become self-sustaining once again.
- Continue to reach out within my own home and backyard. I believe healthy behaviors and coping starts in youth within the home. My vow is to ensure my child is equipped with the tools of life.
- Communicate what I have learned.

- Work on pooling resource information.
- · As a leader, I will prioritize the issues of homelessness, mental health and substance use in order to create meaningful change and improvement in these areas across Yavapai County through collaboration and leveraging of resources.
- · Engage in community groups, workshops, collaborations, to develop coalitions focused on housing and mental health issues.
- Make the time to consistently attend our tri-city "Community Impact Coalition", which meets monthly at the Prescott Public Library, which addresses mental health, substance abuse, and housing and is attended by community stakeholders in public service and social service organizations.
- Be more mindful about these issues.
- Leverage my position and influence to work on these issues.
- Work toward helping build consensus.
- Contribute more time in finding effective solutions to our current topics rather than just talking about it.
- Continue providing integrated care one patient at a time.
- Share AZ Community Town Hall information with organizational leaders.
- Share what was talked about today and the needs within our community.

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Cave Creek-Carefree Community Town Hall

Friday, September 16, 2022 Scottsdale, AZ and Online Via Zoom



CaveCreek-CarefreeCommunityTownHall September 16, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND **HOMELESSNESS**

The conditions of mental health, substance use, and homelessness are all intertwined and can be seen as a Venn diagram with intersecting points. Substance use, such as alcohol and drug use, can result in homelessness, as can a general lack of resources or treatment for mental health issues. For example, veterans may self-medicate as a result of trauma relating to their service, which can lead to homelessness. Homelessness, likewise, can lead to mental health issues and substance use.

Our school systems, emergency responders, and justice systems need to come from an integrated holistic approach and address these issues together to have the best impact on all the problems.

These are big issues, and a great deal of work needs to be done, including early intervention in the schools with parents and students, which will result in a trickle up effect. We also need to address the heavy stigma that keeps those who need help from getting services, and to create networks of support systems.

Public health services, federal, state, and local governments can be a bridge to the community, acting as shepherds to guide people to needed resources and creating relationships between systems and communities.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND **HOMELESSNESS**

We need a proactive push to do outreach to communities about existing resources. Even with existing resources, there can be long wait times, involving months of waiting that discourages those who seek help. Not knowing what is available is a hindrance to those looking for assistance with substance use, mental health, and homelessness.

Having a one-stop facility available that provides housing, mental health, behavioral health, career assistance, governmental documentation needed for jobs, and follow-up with individuals, would be an integrated way to help those in need. These are lifelong challenges, and we need to address the challenges with that in mind.

We should start early with programs in schools that raise awareness of these challenges, including the fact that these issues are here in our community. Those with these challenges include our family, friends, and neighbors. We should support our overburdened teachers with ingenious programs and services that provide life skills to parents and students.

Expanding on successful models, we should provide better bridges to services, including transportation for people to get to needed services. We should work in collaboration with our faith-based organizations as part of a collaborative community wide effort.

Houston, Texas has provided an integrated tool kit that could be viewed as a best practice. St. Mary's Food Bank within our state has a great system setup.

As with any ideas, organizations, systems, individuals, and neighbors need to work together so that support can be provided. This includes financial support. Financial support should be brought together to fund opportunities and to strengthen the organizational groups already working in this space.

Follow-up care is essential, such as community navigators, mentors and others who can outreach and connect to the people who need resources.

We also need to address this issue with our elected officials by raising awareness and providing information for needed policy change.

Finally, we need to normalize mental health and get rid of the stigma associated with these challenges. People in need should not be stereotyped; empathy is crucial. Understanding why issues occur will help those who can assist to better help others and best address these challenges.

SETTING PRIORITIES

We need to address these issues collaboratively and proactively.

First, we need to raise awareness. Town halls that promote conversations about these conditions help people talk genuinely about issues and better address them. We should use the media, including social media, to raise awareness that these issues exist and are not going away. We should structure these communications in a way that helps to destigmatize these challenges and raises awareness that these conditions continue to exist and need to be addressed.

Prevention and early intervention are critical. We should increase awareness and understanding in schools with age-appropriate information about mental health issues and substance use. Adding these issues to the school curriculum can broaden the knowledge of students and their families.

Prevention also includes transitional housing and services, such as helping people to get IDs. We should get youth involved, including with social media.

Creating more partnerships with faith-based and non-profit organizations is important to have more of a holistic impact. Not knowing what other programs are offering creates silos and hinders helping people in need of resources. We need to reduce duplicative programs that compete with each other. Nonprofits and other organizations who receive funding should have more accountability and transparency. We need to continue to break down silos and encourage collaborations. We need to not only address basic needs, but also higher needs.

While addressing these issues, we should recognize mental health, substance use, and homelessness are linked, but not always.

We also need to remember that caregiver burnout and compassion fatigue are real. Raising salaries of state and service employees that provide services is crucial to be able to adequately staff resources.

Sharing success stories from other cities and towns enables communities to learn about best practices that are making a difference and enable social change.

It is important to vote. Voters can support through their vote those who can make a positive change. Public officials who promote building affordable housing and other needed services need to be actively supported.

Whether small or large, we as a community need to take whatever action we can. We need to be involved and stay involved and the message to other. We all can play a role in being proactive as heroes connecting resources and creating change.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- Communication between leaders about resources is important. Leaders in touch with other leaders can help by learning about resources that can support these conditions in an integrated way. It is not just a quick fix that can be solved by passing one bill; it is a multi-faceted problem. Individuals should not be stereotyped. Sharing best practices is crucial.
- Take a bipartisan approach and listen to your constituents so they can make the proper changes. They also need to share best practices across systems of care utilizing elected officials.
- We can do this by measuring outcomes and from elected officials being accountable and transparent to the public.
- Provide funding for non-political bipartisan community navigators that can create urgent awareness and
 offer solutions from local neighbors, faith-based organizations, scientific and technical communities in a
 timely manner.
- Make it a priority to organize and talk about the problem, as well as the solution.
- The Human Services Campus was built as a model for the nation. Use that model to build more.
- Shore up affordable housing. We are pushing people into homelessness because they cannot afford housing.
- Support a coalition to address homelessness.
- Create an advocacy or liaison group that can help motivate and get people to the services they need.
- Stop politicizing the issue and fund all communities; let them decide how the funds should be used and how best to promote community awareness.

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 Cave Creek-Carefree Community Town Hall. Below are individual actions that were shared.

IWILL...

- Support and vote for candidates for local, state, and national office that support expansion of programs
 to alleviate the housing shortage, provide more funding for affordable housing and programs to support
 the mental and physical health for the indigent and unhoused population. This includes local city council
 candidates that support increasing housing opportunities in all neighborhoods, regardless of affluence and
 demographics.
- Continue to expand my knowledge around the state of mental health in Arizona, so that I can take action that is effective and impactful within my community.
- Take time to listen and speak with members of my community who are making waves in mental health movements and learn from their experiences and knowledge.
- Create partnerships in the communities I serve, learn about their resources, and share those with others.
- Work with all the chaplains, board of directors, staff, and volunteers to better the chaplaincy for the homeless
- · Foster community awareness.

- Help local non-profits and faith-based organizations that assist others.
- Distribute cards directing homeless to services.
- Work harder to fight for homeless people to be helped in our community.
- Get involved and stay involved. Continually learn and improve skills.
- · Commit to being a volunteer.
- Carry water in my car to give away.
- Vote.
- Be kinder to street people. Smile more.
- Continue to vote and encourage unity.
- Be more proactive in inspiring, motivating and listening to those who are unhappy asking if I can help.
- Continue to promote connection in our community.
- Unplug. Things work better if we unplug it for a while.
- Prayer. Meditation. The opposite of addiction is connection.
- Continue helping my son who is SMI (serious mental illness).
- Be mindful that education about the issues is never done.
- Spread awareness of this event and parts of the discussion to educate those I know of the issues our community has with homelessness, substance use, and mental health.
- Continue working with the Association for the Chronically Mentally III (ACMI) on legislation for secure residential treatment facilities.
- Carry the messages I have learned and always act as soon as I can.
- Continue to employ youth and advocate a sober living lifestyle.
- Take lifestyle changes group to federal prison for women.
- · Maintain a sober lifestyle of my own.
- Organize education to elevate self-awareness.
- Not give up on being part of the solution.
- Identify retail outlets that sell vapes or alcohol to underage users.
- Volunteer, help organize, think tank, spread awareness, speak, and think diplomatically.
- Get in touch with community and organizational leaders.
- Become more involved and volunteer at shelters.
- Share what I've learned today with friends and family.
- Be a voice for mental health, substance use, and homeless people.
- · Have empathy for those who battle mental health, substance use, and homelessness.
- Keep telling my story about disability.
- Join Arizona Town Hall.
- Continue to seek quality organizations and people to be less isolated.

- Speak with Arizona Town Hall to include chronic pain.
- Work to equip and support our neighbors, agencies, and volunteers in mental health so they have a "tool kit" to help others.
- Work to create a Community Resource Center that brings organization under one roof to help our neighbors.
- Continue to advocate as a community navigator for those who are experiencing homelessness, mental health issues, and substance use.
- Try my best to cover and report the mental health crisis for the purpose of creating awareness for people to get involved and create a conversation on this issue.
- · Continue my path of presenting a new method that takes away the shame associated with a bad habit. I just published a book that gives hope to those who feel hopeless called The Plans He Has for Me.
- React and act no matter how big or small.
- Capacity build.
- Making strategic connections, awareness of existing systems of care and resources.
- Advocate for veterans and survivors of domestic and sexual violence (underserved populations)
- Seek out others within the Valley of the Sun.
- Become involved and look to connect or lead some groups family to family or peer to peer support.

IN COLLABORATION WITH





Cochise County Community Town Hall

Tuesday, September 20, 2022 Sierra Vista, AZ









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Cochise County Community Town Hall September 20, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health, substance use, and homelessness are linked, and we need to address them together. You can have one issue without have the others, but to solve these issues, you cannot address one without addressing all of them. Putting these issues in different silos has not worked well for solving them. Experiencing one of these challenges can create a domino effect with other issues. It is like a Venn diagram with all of them intersecting with each other, whether through adverse childhood experiences, lack of knowledge, financial challenges, losing a job, poverty, the inability to find housing or other resources, or mental health issues, including undiagnosed mental health challenges.

As we address these issues we should look at where there are gaps and how we can connect schools, community, and other organizations together. We need to fill these gaps and allow those who want and need services to access them. In addressing these issues, we need to work to remove the stigma that keeps many people from seeking help for their mental health challenges and utilize people who have lived experiences as advocates and connectors.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

These issues are all around us. It is not just the people sitting on the streets. It includes our neighbors, friends, and coworkers.

Education and awareness are important, both education about resources and educating people on how to help others. We also need to educate more educators.

We need to meet people where they are. There should be "no wrong door." Wherever someone goes for resources, they should be directed to the resources they need and not just turned away. Coming from a place of compassion and utilizing those who have shared experiences can help with connecting to those who need resources.

In addition to educating people about available resources, we need to ensure that resources are coordinated and do not overlap or compete with each other. We should explore existing resources to fill in the gaps of need and create a closed loop referral system following up on those who seek help to ensure they are traversing through the systems in a helpful way.

We need to look at how to improve "systems literacy," the knowledge of what systems are available and how to navigate them. We need to analyze the systems we have created and ensure the people we are trying to help have the knowledge and ability to get help.

Prevention is critical. We need to start young and increase awareness and education about mental health issues and adverse childhood experiences. Many have been conditioned to keep their issues quiet and to not reach out when they have problems. We need to reduce these barriers to help eliminate the stigma attached to these challenges and do our best to create safe opportunities for people to share and seek assistance.

Community conversations are important. We should put the right people in the right room together at the right time to look at these issues in a more coordinated and collaborative way.

We could establish a task force that creates a common vision and mission for organizations and others to work together. As part of these efforts, we need to include the voices of those who have lived experiences, including our youth, and recognize one size does not fit all.

Cochise County needs a crisis center, like the one in Yavapai County. We should partner with companies to support existing efforts to build a crisis center since it will help to create the future workforce they want.

Housing is also important to address. We should visit shelters to have a greater understanding of the issues, create more affordable housing, and support programs that give purpose and value to the unhoused, such as allowing them to have earned income.

SETTING PRIORITIES

- 1. 1. Education and the Media.
 - a. We should better utilize the media in an integrated way to spread the word locally, statewide, and federally.
 - b. Increase outreach include peer-to-peer outreach, the use of navigators and the use of those with lived experiences.
 - c. Educate family members who need assistance and provide more shelters that address the whole scope of the problem.
 - d. Survey those with lived experiences.

2. Funding.

- a. Understanding funding opportunities would help us take better data-based positions on solutions.
- b. Use funding for the education of first responders such as police, so they can respond more effectively to those in crisis.
- c. Spread the word about and support the crisis center that will soon be opening in Cochise County.
- 3. The best approaches.
 - $a. \ \ Understanding \ what each person is going through is important \ when \ addressing solutions.$
 - b. Utilize flexible approaches to get people on the right path including flexible work and housing options.
 - c. Increase coordination and collaboration to meet people where they are.
 - d. Create platforms that allow people to access resources and education more easily such as a county-wide behavioral dashboard that would help spread the word to the broader community.
 - e. Make it easier to get needed help including, "one stop shop" services that utilize collaborative and integrative approaches for assistance.
 - f. Utilize navigators more, the "no wrong door" approach and closed loop referral methods.
 - g. Use intervention instead of punishment for those who are experiencing challenges.
 - h. As a community, we all need to be more empathetic and compassionate to those facing challenges.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- Take the time to educate yourselves. Listen to the viewpoints and conversations of those experiencing these issues and participate in the conversations.
- Have less judgment and more compassion. Spend the day in the shoes of those with low self-esteem, limited resources and who are experiencing mental health, substance use, and homelessness.
- Accept that the issue is in our backyard.
- This is not about politics or political parties; this is about people.
- Avoid generalizing and making negative assumptions. Look at people individually.
- Make more resources available for those who need access to resources.
- The funding and timelines for existing programs are not working. Reassess and re-plan these programs. Create opportunities, like the bracelets that signify someone you can talk to, to guide people to services.
- Revamp the RBHA system and award the contracts based on needs and services.
- Utilize existing resources in the community.
- Educate law enforcement on how better to respond to those experiencing these issues.
- Provide funding to educate educators.
- Revamp funding and programs to reach people where they are at.
- Instead of funding homeless shelters, fund transition facilities.
- Take a holistic approach and be proactive instead of reactive.
- Have more compassion, be more trauma informed and realize that these issues impact all of us.
- Expand the low-income housing tax credits further into rural areas, which will better allow for needed resources, such as housing programs, qualified behavioral personnel, and related programs.
- Stop prioritizing spending on private prisons and redirect that to community integration.
- · Be more intentional on long lasting solutions as opposed to temporary short-term solutions and utilize all sources of communication in the same way you use those communication sources to campaign to get elected.

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 Cochise County Community Town Hall. Below are individual actions that were shared.

IWILL...

- Focus on connecting with the Cochise Coalition on Ending Chronic Homelessness.
- Help educate about mental health, substance abuse, and homelessness. Will take any training and opportunity to be educated to assist any individuals that need help.
- · Utilize information to navigate families to mental and behavioral services. Help restoring communities and families with hope. Provide awareness to bridge the gap between addiction and recovery.

- Focus on connection. Connection with students, families, and community resources. I will ask the students for their input on presentations/programs brought to the school.
- Focus on empowering my students by providing information and awareness.
- Restart SEAGO's Housing Program, including becoming a Community Housing Development Organization (CHDO).
- Try to stay with a good group. Guide people through the dark.
- Work to connect with organizations and individuals already engaging and providing services for people in our community.
- Learn more.
- Try and stop racism and help the Black community.
- Tell more people to be more open about having mental problems or use of substance. Try to find help or if help comes to you, take it.
- Strive to always consider mental health, substance abuse, and homelessness as interconnected.
- Work on being more involved with groups in my community to support services I believe are a benefit to my community.
- · Commit to empathy, not judgment.
- Be more understanding and not to judge so fast. I will engage with more people.
- Have a better understanding of the existing resources available in the county to better educate and connect those in need.
- Help spread awareness. Advocate. Be a voice for victims. Support.
- Focus on engaging the issues at hand. This is a world-wide problem and I feel like it has not been dealt with to the best of our abilities.
- Focus on outreach and getting the word out on the different resources that are available. Be the voice.
- Pray for those struggling. If I see someone or anyone going through something, I will reach out to them and give the help they might need. I will give them that push that they need. I will also give them some resources I learned today. Spread the word.
- Try to help as much as I can in any way I can.
- Recognize my own issues. It is okay not to be okay.
- Advocate for reducing barriers and increasing supports and resources for community members struggling
 with conditions of mental health, substance use, and homelessness. Programs that promote resilience. This
 includes returning citizens coming out of incarceration.
- Work with community leaders and peers in healthcare to help educate on Opioid Use Disorder (OUD) and Medication Assisted Treatment (MAT). There is a need and availability in our county.
- Continue to work on working with my community for my community. This is a team effort!

Florence Community Town Hall

Wednesday, September 28, 2022 Florence, AZ



Florence Community Town Hall September 28, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

The conditions of mental health, substance use, and homelessness are interrelated. They are circular, symbiotic, and successive. For example, if someone has a mental health disorder, they may have troubles interacting with others properly or holding down a job. This can lead to substance use and homelessness.

While not always connected, homelessness is often related to mental health issues. Similarly, homelessness can lead to substance use and mental health issues. While people can experience one of these issues without the other, they are generally connected and interrelated. Once you have one issue, it often begets the other in a circular path. Because these issues are so interrelated, to address one effectively, we need to address them together and systematically.

We are experiencing many difficult challenges in our efforts to assist the homeless. They include the lack of transportation, lack of services, insufficient counselors, and an increase in homeless seniors while at the same time there is less available housing for those who need it.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

We need to focus on education and prevention. It's better to start earlier than later, including building skills with our children so that they can better cope with stress. We also should seek to better identify and address mental health issues earlier through raising awareness about how best to identify and address challenges and through support for both children and their parents.

Beginning early, we should teach children how to identify emotions and how to manage challenges and emotions. It's also important to provide skills for addressing and managing stress and trauma. Teaching mindfulness techniques such as yoga should be as important as physical education.

These early prevention strategies would create much greater savings later and should be considered for training curriculum.

While parent education and involvement are important, it can be very challenging to accomplish effectively, even when resources are available. Implementing these early systems is increasingly challenging for schools because of legislation that prevents schools from asking students about some of the issues.

We need to frontload prevention and education, but we also need to address the problems that currently exist. We can create and expand opportunities to address these issues through collaboration and by everyone being more compassionate, knowledgeable and understanding about how best to assist people experiencing these challenges. We should not be turning people away who are asking for assistance.

Addressing transportation challenges so that people can access needed services is critical. We also need an emergency services shelter in Pinal County.

Eighty-five percent of people in the Department of Corrections have a substance use disorder at a cost of \$35,000 per year per person. This doesn't treat the underlying issue and it is a failure on a global scale of how best to allocate resources. The criminal justice system is the worst way to address this issue. We are simply creating a vicious cycle that impacts them for the rest of their life. Our current system is not set up for success. Instead, it creates a revolving door that hinders people from restarting their life.

SETTING PRIORITIES

Pinal County is growing at a rapid pace, and we need to proactively address these issues now.

As a state we need to better address how to support people coming out of prison so they can integrate more effectively back into the community.

Whether brick and mortar or online, we need a "one stop shop" for people to obtain the resources they need in a more effective and efficient way. 211 is great except not all agencies have their complete information in the system. A one stop shop concept should include personnel (or an informed point of contact) who have been trained to navigate people to needed resources and services.

There should be "no wrong door" for those seeking resources.

One of the greatest challenges for accomplishing these goals is effective collaboration. Instead, our systems are set up for people, organizations, and governments to compete against each other instead of working together. However, we can change this dynamic with dedication and grassroots efforts, working together in our community to create effective programs that we can then take to city and state leaders. We need a champion (or champions) from our community who will advocate on our behalf.

While there is funding available, it often comes with restrictions that prevent those who need it from getting assistance. We need more flexible funding that supports the programs we need most. A strong community that is connected and supportive is critical. Supportive community structures that include loving adults who provide supportive and positive support for all children make a big difference.

We need to take action to rebuild and strengthen our family relationships and our relationships with our neighbors so that we have a strong and supportive community that sets the example for our children of how to have strong, loving and supportive relationships.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

Increase prevention and decrease discipline. The criminal justice system is ill-equipped to handle this issue. Use money currently apportioned to the criminal justice system to instead address mental health, substance use, and homelessness.

 $It takes a {\it village} to support the growth of a child. Create an integrated system that incentives cooperation and collaboration and that has a vision big enough for everyone.$

We need a vision. We need to address the issues now and not wait for a better time.

Create programs that empower people to solve problems.

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 Florence Community Town Hall. Below are individual actions that were shared.

IWILL...

- Continue to speak the truth
- Say something positive always to anyone who is suffering with mental health, substance use, and/or homelessness.
- Make an effort to say hello to more strangers as I see them throughout my day. I may be the only positive light for them.
- Be the voice for those who need a champion to overcome mental health challenges and barriers and provide a path to healing growth and community support.
- Continue to pay attention to what is going on around me in my community.
- Continue to work with parents in the Eloy community regarding communication, prevention and other family issues through parent workshops.

IN COLLABORATION WITH





Public Health Services District







Compilation Statement Southwest Arizona Town Hall Forum "Mental Health, Substance Use, and Homelessness"

PROGRAMS HOSTED

Yuma County Home Consortium Virtual Town Hall Friday, February 25, 2022 Online Via Zoom

Mental Health in our Community Virtual Town Hall Friday, May 20, 2022 | Online Via Zoom

Substance Use in our Community Virtual Town Hall Friday, June 10, 2022 | Online Via Zoom

Designing a Community Approach to Mental Health, Substance Use, and Homelessness Friday, September 30, 2022 | Yuma, AZ









Mental Health, Substance Use, and Homelessness

SEPTEMBER 30, 2022





Southwest Arizona Town Hall Forum "Mental Health, Substance Use, and Homelessness" September 30, 2022

Mental Health, Substance Use, and Homelessness are intertwined with their impact on our population. The Southwest Arizona Town Hall (SWATH) held on September 30, 2022, at the Yuma Regional Medical Center Administration area focused on each area during breakout sessions and prioritized early action plans with leveraged partnerships.

MENTAL HEALTH

Mental health is not a situation where you can give a pill to someone, and the problem goes away. It is a continuum of care. There are many challenges that face mental health care in Yuma County:

- The stigma involved with admitting a need for these services
- A significant lack of services for the general population, which reaches a severe level when considering certain populations, such as veterans, teenagers, the elderly, and children
- Insurance coverage for mental health issues
- Mental health service outreach to our region's large minority population that is culturally and linguistically appropriate.

There is a stigma with our population in admitting a need for mental health services. Intensive public outreach campaigns to stop the stigma around mental health are required. This outreach and mental health programs need to consider cultural, generational, and linguistic considerations when preparing providers and determining types of providers necessary to work with our population.

Educating the community will help our community understand what is involved and what resources exist for all ages. Removing the stigma of mental health issues and developing the skills for individuals to self-evaluate or assist those around them is needed. Funding for these services is needed. It is important for families to have the education to recognize issues and the knowledge of what to do.

In the process of public outreach, both the stigma and education on available services needs to be addressed. Individuals do not want to be labeled. The emphasis needs to be on creating a safe space to discuss the issues big or small that everyone is facing. Developing a trust in system providers is essential. Recent legislation (HB2161) has made anonymity in the school system much more difficult. Teenagers are concerned that any problems they share will be communicated to their parents, which could make their living situations more difficult.

Covering mental health services for all ages is crucial. Mental health care can be very expensive. It is difficult to find coverage for different mental health populations in Yuma County, forcing families to travel out of town to search for needed services. Teenagers receiving out-of-town services have their lives disrupted, exacerbating their mental health condition, since they are taken out of their school and community. An expansion

of Level 2 services for teenagers in Yuma County would be optimal. The current situation sees teenage mental health issues tying into other issues, including those of dropping out of school and substance use. The elderly population represents a growing segment of the population, in desperate need for services, with families that do not know how to help them. There is a lack of services for the specific needs of veterans.

Insurance coverage for mental health is a difficult path that most users do not know how to navigate. The lack of insurance can prove to be a huge obstacle to obtaining service. There is a great need for more local resources that accept all the necessary forms of insurance and ensure access to individuals. Wrap-around programs need to be available to continue progress made during treatment.

Yuma County is located on the U.S./Mexico border and includes a population that is linguistically and culturally diverse. Family is the cornerstone of our area. Policies and programs need to take into consideration the whole family/community that the individual is part of to ensure the health and support for the entirety of the family unit.

We do have programs that are in place and ongoing in our Yuma community. There is a need to prioritize outreach and deeper information to the community about the services available. Crane Elementary School District is one example of a program with social workers who hold group therapy sessions at school to help young students learn how to deal with issues throughout their lives. There are also school-based resources at the high schools that are available at no charge, but parents do not always know of these services. Yuma Union High School District supports the Yellow Ribbon groups, which provide peer support for students and are present in each high school.

Specifically, information needs to be provided to general health/support providers as to where and what the available services are to more adequately provide the necessary referrals, such as a mental health navigator. Such referrals also need to be available in Spanish and in multiple formats – online as well as by phone and in person. Hotlines for mental health assistance have been successful. Early identification of mental health issues can help with early intervention to help people. Referral systems need to have follow-through to ensure continuity of services. There should be advocacy to our elected officials for the awareness and need of funding for these services.

When building these programs, we need to ensure that we are building the bridges necessary to care for those who need assistance now. Funding programs is always an issue. To make programs effective long-term, we need to consider retaining mental health professionals through competitive salaries and leveraging the benefits of becoming part of the Yuma community. Burn-out of health care professionals is of great concern and we need to look for ways to combat professionals leaving this field.

"Growing our own" services should be a priority. A welcomed program is the Yuma Regional Medical Center psychiatry residency program. As part of the development of this system and the education of new professionals, we need to look at our existing educational opportunities. By working with the universities, Arizona Western College, Yuma Union High School District, Southwest Technical Education District of Yuma (STEDY), Yuma Regional Medical Center and local agencies, we can develop the curriculum, programs and degrees needed to support the mental health system we create. It is also important to take advantage of the talent that already exists in our community, "Growing our Own" – creating and developing pipelines to the mental health profession. Scholarship opportunities are needed to provide interested individuals assistance to follow mental health careers. Expanding partnerships in education can be accomplished through career exploration and linking with companies in this field for job creation and systematic follow-up. Stackable credentials for students can ease their career path as could highlighting what mental health professions do.

Information sharing should be streamlined for more coordination and continuation of care and the ability to track care and follow-up. This relieves the stress and pressure that might be placed on the patient or their family. It also allows providers to understand needs and evaluate services provided.

Besides working with existing university and collegiate partners, we should look outside of the State of Arizona for best practices and programs that are effective in other areas. All populations, specifically minorities and age groups, need to be brought into the decision-making process. We should do a full inventory of what parts of the system are already in place and determine where gaps exist and how those gaps can be filled. A large part of that system evaluation will be talking to those directly impacted – patients and their families. It will also require meaningful discussion and coordination between AHCCCS, court systems, law enforcement, the medical community, and schools – preschool to college.

Agency cross-training can help with coordination of referrals, services, and care. Programs need to consider ways to spread training to the wider community with those who can assist with mental health issues beyond those who are specifically health providers/social workers. Education of individuals who might make that first contact is essential: parents, caretakers, teachers, general practice physicians, pediatricians, law enforcement, religious leaders, and local agency providers. Police coordination with social workers to assess mental health problems on the street could help. By educating first contacts (parents and caretakers, teachers, law enforcement, clergy, court systems), we would be able to identify those in crisis or need, capture needed and necessary information and direct them to the best services.

In particular, coordination of care with mental health services is crucial. A one-stop center would be helpful. There needs to be quality, availability, and accessibility of services for our population. Transportation to services in Yuma County is a prevailing issue and options to reach services need to be considered. Providing virtual as well as in-person care is needed, as is expansion of services that provide local services, evaluations for mental health needs and assisting the transition from in-patient to out-patient care. Evaluation of care through patient surveys is important.

We care about the needs of our population in Yuma County. By working together, we can help those in need and provide mental health services and education to all our population.

PRIORITIZATION OF MENTAL HEALTH

VISION (ACTION: YUMA REGIONAL MEDICAL CENTER/DR. MAGU)

- Engagement of members (80%)
- Reduced duplication of resources/services
- Communication news

ACTION PLAN

- Website central source of information and services by December 2023
- Host first meeting by November 30, 2022
 - Inventory of services/resources
- Create a set of standard metrics/database by June 2023
- Coordination of Care
- Access and Coordination of Behavioral Health

- Form an active coalition
- Awareness Education
- Increase pipeline for healthcare professionals

MENTAL HEALTH PRIORITIES FOR YUMA COUNTY

Preventive Outreach/Insurance Coverage for families and children

Service Outreach (make services known)

Community Education – one stop shop (bring resources together)

Expansion of Systems

Education (community, development of professionals)

Reduce stigma, normalize care

Health literacy

Funding

INFRASTRUCTURE

Expansion of high-level and mid-level treatment facilities

Recruitment of properly trained mental health professionals, and support workers with lived experience

Expansion of peer support groups

EDUCATION, SCHOOLS, AND COMMUNITY

Prioritize drug prevention

Early and regular screenings for mental health concerns

Integration between current support systems

Leverage and build partnerships in Yuma County (Information into the schools and community about costs, risks and avoiding substance use)

FINANCIAL SUPPORT FOR TREATMENT

Address financial barriers

Community funding and collaboration

Social media

Grants

Partnerships

Coalitions

Local multilingual intensive outreach and education program.

Expanding system that provides local services

Coordination of care through consortium for mental health services available in Yuma County

COORDINATION OF CARE

Addressing the people's needs

Quality and availability of service

Distribution of resources available to the community

Create an active consortium for mental health (set an action plan and do a community needs assessment)

Expansion of formal education for healthcare awareness

Partner with all levels of education

Partner with agencies and employers

SUBSTANCE USE

We are experiencing a crisis; a crisis that needs to be brought to the forefront. In general society, substance use has been desensitized. However, substances – readily available on the street, at home and at school – can cause death. The presence of fentanyl, which is accessible and affordable, is growing substantially higher in Yuma County since it is being laced within other drugs. Although fentanyl is currently receiving much public attention, Yuma County has an equally large problem with methamphetamine. Vaping substances on school campuses are present during the day in the restrooms. There is denial on the individual, parent, and caretaker level that a substance use problem exists.

Challenges involved with substance use share many issues that are also present with mental health: the stigma for individuals or their family members to admit problems with substance use; education of the community about substance use; individual trust levels in existing medical and assistance systems; insurance coverage of the cost associated with substance use issues; and community outreach on resources available to address substance use.

There is significant stigma with conversations about substance use. Parents are afraid to talk about substance use. However, substance use may be considered normal at home, so children don't see its use as being wrong. Pain management is an aspect of self-medication that is readily available and seen as normal. Media entertainment and social activities may present substance use as a fun and social activity to the general population. Youth are seeking meaningful connections and when they don't find it or seek peer acceptance, they may find or rely on substances.

Sharing information about resources on substance use is important. Preventive measures will help our population to help solve problems before they escalate to a higher level. However, there is still stigma affiliated with substance use issues. Methamphetamine and fentanyl use are very prevalent in our community. Unfortunately, this substance use can reach a level where it escalates and disrupts people's lives.

One of the most important and meaningful ways to address substance use is to focus on prevention – educating children and teenagers about the risks and impacts of substance abuse and also educating parents and caretakers on the signs of substance abuse and the resources that are available. Education needs to occur on a community-wide basis, not just in schools, and at all age levels. We can capitalize on existing education programs and curriculum to develop those resources for educators. We can also utilize students that are motivated to help educate others on substance use and prevention to help promote and facilitate such education.

There needs to be more sharing of lived life experience on substance use with our community so that everyone realizes how substance use affects everyone, from all walks of life.

A media campaign about the current risks and dangers would be impactful and would help educate adults about these issues. Such a campaign would help address parent and caretaker denial. The campaign could also be used to educate the public about resources available in our community.

Providing education on substance use may not have the results desired. Being around a particular environment can strongly influence someone to use substances. While education programs are beneficial, they have to overcome the barrier of being dismissed by those who are targeted for the program. These education programs must begin with the family because often aspects within home life lead to the introduction of substances.

By developing coping skills at an early age, individuals can feel prepared to not use substances. Prioritizing substance prevention education in schools, both in English and Spanish, can help. Nevertheless, there is peer pressure, very prevalent at certain ages that can influence people to use substances. There is also the presence of substances at family members' houses that are readily available. Previous programs, such as the DARE program, have not always had successful results. Peer groups, such as Smart Recovery and Al Anon, could also help with substance use since many times family members do not know how to support others with usage issues.

Often, substance use occurs in connection or correlation with trauma, grief and loss, or other mental health issues; it may even become the catalyst. Underlying issues should be studied since substance use may be a symptom of another issue. Services can assist individuals and need to continue to support those who do get clean and need assistance in continuing their sobriety path.

Insurance coverage is difficult to navigate. Without coverage, assistance with substance use can be expensive. For those who don't have AHCCCS, there should be services readily available that do not have a high cost. There are grants available that cover the commercial insurance side. However, many of these grants require that they be referred by the school system.

There are almost no adolescent drug treatment options in Yuma County. There is a great need for more local resources that accept all the necessary forms of insurance and ensure access to individuals. To improve the situation, we need to not only consider local residential treatment, but we also need to ensure there are wraparound programs to continue the progress made during treatment so that it can carry through. Even for adults there are limited and sporadic resources available.

Navigating the health care system is not easy. Helping individuals through a one-stop shop can integrate working with individuals who have both mental health and substance use since both issues tend to go together.

It takes a village, comprised of many organizations, to do outreach on preventive measures for substance use.

Social media has a high impact on people. Presentations that are given at school may not reach the target audience that needs to be reached about substance use. Smaller group discussions on drug prevention could have more of a relevant impact.

The crisis itself needs to be brought to the forefront. A media campaign about the current risks and dangers would be impactful and would help educate adults about these issues. Such a campaign would help address parent and caretaker denial. The campaign could also be used to educate the public about resources available in our community.

SYSTEM CHANGE

Criteria that require individuals to be clean for a period of time before they can benefit from resources need to change. People need to be helped right away.

There need to be confidential ways for individuals to reach out for assistance and help for a friend or family members. The Yellow Ribbon group is a way for high school students to help others.

We need to work on connecting medical providers to agencies that provide substance use services. Finding and training individuals to be outreach specialists would go far in helping create those connections and also educating the public about existing resources.

Our community needs detox or inpatient centers, outreach specialists that can help connect agencies and providers, and a resource communication platform. In addition, our drug court currently only assists those with felony charges – it should include a program for misdemeanor charges.

Just like mental health, we need to develop career pathways that lead to jobs in the field of substance use prevention and care. We can leverage the work that will be done in the mental health field. This will also help in addressing the impacts of staff turnover in local agencies.

Leveraging and building partnerships in Yuma County are essential. Partnerships with law enforcement and health care professionals with schools should be leveraged to get information into schools about the costs and risks of substance use.

To serve our community, it is necessary to fund and build needed infrastructure for rehabilitation and mental health that includes support for those with substance use disorders; in particular, help with navigating the health care system. There needs to be a holistic system in place instead of individuals treated on a piecemeal basis. Facilities with high-level in-patient and mid-level transitional treatment need to be expanded. There needs to be an expansion of treatment service facilities throughout the county, including pediatric support programs. Community members should meet with legislators to obtain funding for program support.

The recruitment and development of properly trained mental health professionals need to occur. Those individuals who have lived experience and have become clean and sober could be recruited to follow careers that help others with substance use disorders.

Financial barriers and insurance issues for coverage need to be addressed for substance use disorders. Communities could collaborate to obtain grants, non-traditional partnerships, and coalitions, to support work being done and the work that is still needed.

Drug prevention education in our schools and within our region needs to be prioritized, applied with cultural considerations of this area, and available in both English and Spanish.

Legislation must not prevent local school systems from educating students on substance use (HB2161). The focus should be on helping young people rather than disciplining them. Our community should instill understanding and compassion with issues and encourage community service, rather than only punitive measures.

We need integration between current support systems to serve our community, which will build rapport, and encourage services to complement each other and not duplicate efforts. Expanding coalitions within our community can assist with sharing ideas and providing resources. Town halls that are focused on substance use can provide opportunities for our community to engage in this issue and interact.

PRIORITIZATION FOR SUBSTANCE USE

VISION

ACTION: YUMA COUNTY ANTI-DRUG COALITION

- Reduced youth drug use in Yuma County (reduced school suspensions for drug use and reduced law enforcement incidences due to drug within 18 months)
- Train teachers and school staff on drug awareness
- Educate parents and caregivers
- Media campaign (all channels)
- Town hall meetings at schools and community settings

Community awareness/social media

Safe place/zone for confidential discussions

Leverage/coordinate resources and relationships

Community collaboration to gain more funding for high level treatment and long-term tradition programs

Prioritize drug prevention education in our schools and support families including funding for such programs

Continue to work on a holistic system instead of piecemeal for services provided

Fund and build necessary infrastructure for rehabilitation and mental health

Address financial barriers and insurance

Community collaboration to gain more funding for high-level treatment and long-term treatment programs

Prioritize drug prevention education in our schools and support families including funding for such programs

Continue to work on a holistic system instead of piecemeal for service provided

SWATH PERSONAL STATEMENTS OF ACTION

- Prioritize drug prevention education by informing students and parents at school campaigns, public events, and providing information.
- Prioritize drug education. Coordinate all organizations to increase community education, peer-to-peer education in work on awareness.
- Educate Yuma County on the perils of substance abuse from kindergarten through 12th grade. Community participation at school and small community grassroot teams/schools. Firsthand experience and testimonials and testimonial experience of lost loved ones.
- My goal is multi-level education programs directed at students and their parents on the hazards, identification, and consequences of drug use. Multi-level targeting of young adults and parents. Multimedia approach. Organize students against drug abuse in middle and high schools.
- Prioritize drug prevention education through young serving organizations who provides ervices to schools and community (CSF, YCHO, YMCA, Boys and Girls Club, coalitions, juvenile centers) to begin implementation of services with community support.

- Prioritize drug prevention education; to fund and build necessary infrastructure for rehab and mental health
 to address financial barriers and insurance. Create awareness presentations to parents in schools and/or
 public venues and provide them with statistics of drug use, overdoses, factors that contribute to substance
 use, and how to help their kids with resources in the community.
- Prioritize drug prevention education by using social media to spread information, having speakers go to schools, having conferences that parents can attend, and beginning to expose drug education to kids at youngerages.
- Prioritize drug prevention education by using billboards, guest speakers, using social media, and organizing a citywide rally.
- Prioritize drug prevention education by getting students involved in awareness.
- Prevent the use/misuse of substances through education to both adults and youth by collaborating with agencies that offer education.
- Educate and raise awareness on substance abuse through social media, parenting education, youth education and partnership with local agencies.
- Prioritize drug prevention education by passing information to the schools, going into agencies to promote recovery, providing information to the community, partnering with agencies, having communication meetings, and educating myself to educate others.
- My goal is prevention and education in schools and the community through social media campaigns, bridges
 resources into the schools, developing training for faculty, expanding billboard campaigns, getting literature
 posters out in the community, and developing a youth coalition.
- My goal is drug prevention education through speaking to schools and parents.
- To increase education and awareness surrounding us, stigma, treatment and resources to schools and community through partnering with schools to provide education, partnering with agencies to provide community training, and utilizing support groups and education facilities to carry out this message.
- Prioritize drug prevention education through college level prevention and strategy sessions for education students.
- Prioritize substance abuse/use prevention education through developing afterschool programs for children, integrating educational seminars and assessing the community and educating.

HOMELESSNESS

Homelessness in Yuma County affects everyone. There is no particular population nor age group that does not experience homelessness. Yuma County has initiatives to help with housing. However, housing inventory and funding is very limited. People may have vouchers for housing but cannot find housing. Housing vouchers may not cover the current cost of housing.

There are many buckets for housing for different groups: the mentally ill, substance users, etc. Difficulties arise for coordination of care and continuing to have housing provided. Keeping people housed is difficult.

Housing overall is hard to come by in Yuma County which means that those who do qualify for services or at risk for homelessness can't find the necessary housing to prevent homelessness. We are currently failing to adequately support those coming off services and transitioning them to self-sustainment.

Homelessness affects our students. Situations such as foster care can move students to another school, which is disruptive. The lack of inventory of housing also escalates this situation. These situations can also lead to issues regarding mental health and substance use. While the school system is designed to be a safe place for students, the lack of resources in their lives can disrupt their environment and lead to problems in their lives.

High school students in Yuma County may live with family members or friends, but without a permanent home address. College students may have federal financial aid, but the funds received would not cover housing as well. There may be an opportunity for students to talk with other students to help them with housing issues and do outreach with resources. It is essential to be approachable for students to feel confident and safe to speak with someone in authority. If private information is shared, it could worsen a student's life at home.

The elderly population has a big issue with affordable housing. Those on a fixed income are in shelters because they cannot afford the cost of housing at its current rate in Yuma County.

Transitional houses are utilized for the population that have transitioned from incarceration. These places are regularly full and cannot admit anyone else.

H2A workers require employers to provide housing and properties that used to be rental properties for families are no longer available since they have been acquired for these workers. During the produce season, it is very difficult to find housing. Since Yuma County is on the border, there is housing for H2A workers that may not be occupied due to federal law. This housing could be utilized for other individuals in need.

STAKEHOLDERS

Crossroads Mission is a presence in our area for those experiencing homelessness and provides help with resources. Building partnerships to create move living spaces is needed in Yuma County. Western Arizona Council of Governments (WACOG) is a possibility for partnership since they work with a population that needs housing. Transitional Living Center Recovery also provides housing. Arizona Community Foundation is present in rural areas and can partner on this topic. Yuma Regional Medical Center is another potential partner. There are elderly patients who have been dropped off by their family and the hospital is told their family can no longer care for them. There are also those who do self-harm who are housed in the hospital. Homeless in our area also are housed in prison. The Arizona Long Term Care program is another partner that helps those in need of housing.

Other partners Yuma works with to combat homelessness include shelters, rapid rehousing, and programs through the Housing Coalition of Yuma. The need is to work toward better identifying underlying issues causing homelessness for individuals, specifically mental health, and substance use. We need to include services to combat these underlying issues and support family members before these issues create homelessness. Once individuals suffering from mental illness are homeless, we need to attempt to meet them where they are. Mobile mental health services are needed.

Obtaining a list of the organizations participating in this SWATH forum and what they provide would be very helpful to move forward with knowing who provides what in Yuma County, such as a resource guide for services provided. First Things First provides a resource guide for Yuma County for needed resources for children 0-5 years old.

INITIATIVES

Tackling homelessness should be a coordinated effort led by a coalition of entities that already provide some source of housing assistance. The Yuma Coalition to End Homelessness already exists, but it may need to be supported and propped up by those local entities so that we can address overall needs of the community. In addition to strengthening or restructuring the Coalition, we can expand on existing housing assistance programs through local agencies. Depending on the Coalition's mission and/or resources, a separate coalition may need to be created to fully address the needs of the community.

We need more job training opportunities for our homeless community. Organizations such as Arizona@Work, Regional Center for Border Health, and Crossroads Mission are currently offering these services. We need to get higher education involved to offer more certifications.

Partnerships should be developed between Crossroads Mission, city government, county government, Safe House, school districts, Yuma Regional Medical Center, Yuma County Intergovernmental Public Transportation (YCAT), Western Arizona Council of Governments (WACOG), Salvation Army, Regional Center for Border Health, and churches. The business community should also be involved, possibly through the Chamber of Commerce. Yuma Coalition to End Homelessness, ACHIEVE Human Services, Yuma Community Food Bank, Amberley's Place, Catholic Charities, Transitional Living Center Recovery, Oxford House, HOPE Center, Union Pacific, Victory Outreach, and National Community Health Partners also represent potential partners. Homeowners with multiple properties could increase rental availability. Investors are needed to build properties to fill federal assistance housing programs.

The homeless population is a part of our community and should be provided the opportunities and resources that are needed to increase quality of life. Individuals and families should be able to go to one place for all of their needs - a central access point to support services. Housing assistance should use the "Housing First Model" and provide wrap around services. Supporting homeless requires a holistic support system that includes housing, case management, life skills training, and more.

We need to expand our understanding of who is classified as homeless, specifically needing to consider those who simply stay with different sets of family and friends. Limiting access to services to only those who are actually sleeping on the street, prevents services to those in need. Definitions of "homeless" are compounded by the stigma of homelessness, which prevent families and individuals from seeking services out that are available.

Our regional approach to homelessness is strained. Crossroads Mission has taken on a big role in supporting our local homeless population, but they are filling up and not able to fully support at their current capacity.

Homeless find public spaces appealing because they can just be. For example, local parks have had to close earlier, and drug use is happening in public bathrooms, while families are in close proximity. Local police have had to do more monitoring of these public spaces.

The easing of panhandling laws and restrictions has made it more lucrative for homeless residents to stay homeless and not seek local support services.

We have a real need for affordable housing throughout Yuma County. Finding a rental has become difficult. There is a lack of available affordable homes and apartments, and rent is increasing while family income (payroll, public assistance, Social Security) stays the same. This is leading families to become homeless if they do not have the resources to afford or find a rental.

PRIORITIZATION FOR HOMELESSNESS

VISION (ACTION: YUMA COALITION TO END HOMELESSNESS)

- Central Access Center planning and development
- Grant and resource development
- Communication plan/completion of website
- Larger community meeting (SWATH to assist)

Prioritized rug prevention through community education in messaging and campaigning to assist with unblocking federal and state of Arizona restrictions through District representatives and legislators involved.

Integration of current support system

Coalition within the community to form the group to provide resources – town halls focused on the issue and action items

Role modeling concept to allow visitors to share their clean and sober

Meet with legislators to help fund and continue organization

Fund and build the NEC infrastructure and program

Collaborations with law enforcement, church, healthcare, and academics to advocate to state and federal entities

Build on Yuma's Coalition to End Homelessness (all agencies involved)

Create central access location facility under one roof

Create one place where people can go for services

Build awareness

Affordable housing

Assistance Programs (rental)

Regulate fentanyl increases

Rapid re-housing

Redefine homelessness beyond those living on the street to include those in unstable housing.

Identify the population and underlying reasons including mental health issues

Provide services where the homeless are location to treat underlying issues

Yuma County is known for its collaboration. We can work together to provide solutions to these issues.

Mental Health in our Community Virtual Town Hall (SWATH) May 20, 2022

WHAT BARRIERS DO PEOPLE FACE IN ADDRESSING MENTAL HEALTH NEEDS IN OUR COMMUNITY COMMUNITY (IES)? FOR EACH BARRIER – WHAT SOLUTIONS COME TO MIND?

There are many barriers that people face in the Yuma County area. The core barriers to those addressing mental health needs in Yuma County are a lack of local services, both direct and supporting. Services such as transportation, the cost of services and dealing with insurance/referral requirements, plus the stigma around mental illness are challenging. Key populations that face barriers in the Yuma community are young people and senior populations.

The first hurdle facing those addressing mental health needs is overcoming the stigma of mental illness and needing mental health services. Unfortunately, many individuals who are suffering are afraid to reach out since they don't have anyone to talk with about their issues and they don't want to go through this trauma alone. In particular, it is important to overcome the stigma before acute inpatient services are needed. To assist in overcoming this, programs such as the Yellow Ribbon program and other programs within our schools provide the safe space necessary to acknowledge the need for mental health services. This type of outreach should be supported by the public and could potentially help as an evaluation program, as schools are understaffed and need support in their efforts. This support and outreach should include formal educational programs on mental health, public forums and presentations attached to professional organizations. There should be more opportunity for people who are affected by mental health to tell their stories so that others in the same situation can relation and are inspired to get help.

Once the stigma is overcome, individuals and families in Yuma County then are faced with knowing where to go and how to deal with access to professionals and services. This occurs both in the realm of direct services and obtaining and working through the insurance process. For families of those dealing with mental health needs, the lack of local services greatly impacts families compounding the issues their loved ones are facing with having to take time from work to travel to Phoenix or elsewhere. This increases the difficulty since there is a lack of a standard referral system and insufficient coordination of services for individuals who are in need of services. Additionally, there exists a disparity of services for individuals depending on their type of insurance coverage. The best solutions for bringing those services back to the local community is to begin to grow our own services, and retain professionals already located in our community. For the issues of disparity, it would be helpful to have a public evaluation program that would allow individuals to determine what types of services they may need and qualify for.

Many constituents do not know where to go to address mental health needs. A designated, one stop site where people can go for information and resources on mental health and providers is needed. Individuals that need help may not know that they need help. Knowledge of how to obtain guardianship and resources for families to have voice in this situation is crucial. Some individuals do not have the resources nor insurance to help guide them to needed assistance. Providers in Yuma County are being inundated by the numbers of patients.

Family physicians are often the first place that patients go to for help; however, they may not be adequately prepared for diagnoses for mental health. There is concern that mental health issues may be misdiagnosed or discounted as "just a kid thing" for young people.

There are providers in Yuma County, but often not those who are specialized in younger ages, which limits what can be provided to that age group. There has been a recent increase in teenagers who need assistance, particularly for depression. If service cannot be provided in one location, patients are referred to other providers in other locations. There is a concern about the waiting time for patients to see providers.

The cost of services for mental health is very expensive. Some therapy may not be covered by medical insurance. The lack of pediatric mental health services is of great concern. While there are medications for various mental health issues, medications in this area were underdeveloped for many years. Many current medications for mental health issues are not generic and can be costly.

Waitlists to receive services can be very long, making the patient feel that they are forgotten. Including a bridge so that patients can obtain assistance while they are waiting and focusing on better working relationships with outside facilities would help patients transition to care.

There is a lack of specialized mental health care, particularly for young people and the elderly. The high school system has seen a definite increase in mental health issues with students. There have been issues with how to access funds to pay for services needed. The high school district has a social worker on site for each high school and has partnered with other agencies to provide services to students without students and their families needing to be concerned about how these services are paid for. It is necessary to be proactive on how services are provided to young people.

For seniors there is concern on accurate diagnosis of the patient and for elders, the additional issue of dealing with technology based or supported services as many of them lack access or knowledge on how to use those technologies.

There are challenges for individuals with mental health issues who go through the court system. The paperwork to obtain access is difficult, especially for the homeless. There is a cycle of homeless individuals not receiving timely assistance, which may cause them to walk away from help. To better understand what these individuals go through, it is recommended that residents attend a mental health court to see what happens during this process and learn more about this service to the community.

The psychiatry group has adapted to the ongoing crisis in mental health. These personnel are on call at the hospital to focus on meeting the needs of individuals who need help. Family doctors also help patients who require assistance. There are opportunities for family members to learn about the paperwork needed for patients and how to advocate for the patient. Workshops for general practice physicians would help those who first see patients with mental health issues.

This all leads to the largest barrier faced by those looking to address mental health in the Yuma Community, the lack of local services. While there are telehealth mental health services provided to students at the college, having local services would provide more coverage. This barrier encapsulates not only a lack of inpatient and outpatient services directly, but the lack of transport to such services and support for those who are trying to care for family members dealing with mental illness. The central solution to the lack of local services is to "grow our own", that is to provide an educational program locally, that educates and creates the necessary mental health professionals and support staff that are needed to provide the level of service that is lacking in the Yuma Community.

THINK ABOUT OUR VISION TO DEVELOP EXPANDED BEHAVIORAL HEALTH IN OUR REGION FOR GENERATIONS TO COME. WHAT SPECIFIC NEEDS / SERVICES WOULD YOU LIKE TO SEE DEVELOPED/ PRIORITIZED IN THE NEXT 5 YEARS?

In the next five years, Yuma County would benefit from a local hotline that could provide services to individuals in need of assistance. Strengthening and expanding the crisis team and preparing them to work with youth would benefit our area and lessen the wait time. Coordination of care between the providers, families, and schools is crucial. It is important that the psychiatry group at the hospital grow to be able to meet the needs of the community, including more therapists and therapists who are prepared to help young people. A caseworker who helps patients navigate the system would help those who need assistance. Overall, people in the community need to know what steps are involved in providing assistance to individuals with mental health issues.

Over the next five years the Yuma Community would be best served in expanding systems that provide local services, evaluations for mental health needs and assisting the transition from inpatient to outpatient care. While the current psychiatry services provides needed assistance to our county, specifically, an expansion to the educational opportunities in mental health services locally, would allow for the growth of local services and in recruiting mental health providers and case managers. Yuma County would be greatly impacted by the institution and expansion of a formal education program in mental healthcare as it would establish the providers so desperately needed. In this expansion we need to look not just to the quantity but also the quality of those services.

A future benefit to Yuma County would be creating a psychiatry residency program so that this service could be expanded locally. A beneficial goal would be to grow current systems in place while working toward the "grow our own" idea of ensuring there exists in the Yuma community the professionals, staff, and facilities for inpatient and outpatient services. To get there we can begin with building direct services through in-person and virtual services, then move towards growing and retaining locally the professionals and staff for Inpatient and Intensive Outpatient. Once those systems are in place, we can grow the reach and quality of the services by bringing in non-profit and for-profit agencies, schools, and the public. The continued availability and funding for services in the school setting during this growing process has already been shown to be invaluable for the wellbeing of adolescents in the community. In particular, Yuma County needs to consider transportation options for different age groups to be able to access care.

It is crucial to provide mental health services to all age groups. There are currently only two facilities within the state who accept teens. It is necessary to augment these facilities to help families with teenagers who need these services and including one in the Yuma County area would help. Sending their children away for an unspecified amount of time is very difficult for families. The geri-psych group represents a population that is challenging to find assistance for as guardianship can take months to process in certain cases and appropriate diagnosis can be difficult.

Doing a survey for patients requiring mental health assistance would benefit our community assessing the quality of service provided. This could be a critical next step to improve the quality of care in Yuma County. A centralized database would also help provide needed care to patients.

Above all, the vision for the future needs to be centered on the concept of a "safe place" where all individuals can have somewhere or someone individuals can go to in order to talk and feel safe.

WHAT ARE THE OPPORTUNITIES TO LEVERAGE AND BUILD PARTNERSHIPS THAT WOULD ENHANCE ACCESS TO MENTAL HEALTH SERVICES AND SUPPORT?

Leverage and partnerships need to be based on trust and individuals need to be able to give that feeling of trust in return.

A consortium for mental health services could benefit Yuma County so that all could benefit from across-the-board service. The Portland, Oregon, area has created a one stop mental health center through partnerships. The Yuma County Health Department would be a strong resource to get people to the appropriate location for mental health. This department has started to receive grants to fund this initiative.

Partnering within education is important. The education system is one that has been partnering to provide services to our county. Northern Arizona University – Yuma and Arizona State University provide social work interns who provide services within area schools. Increasing awareness through partnering with local schools is an opportunity. Schools, the college, and universities, churches and non-profits could host events and increase social engagement on this topic as well as engage in partnerships for training. Sharing resources to help our community is crucial.

It is important to advocate for Yuma County to our elected officials. Access to funding and services for mental health is essential. Building relationships with the school districts would help our community augment needed relationships. Binational collaboration would assist in helping our border area population.

A key facet of leveraging those services currently available and the experts in Yuma County is to somehow spread the information in a comprehensive manner. With this type of information partnership, individuals and organizations can discover and leverage the availability of services, programs, and funding to expand services so that best practice information to those looking to address mental health in our community is available. Some services currently present or arriving online include the 988 services for mental health emergencies which will include a texting option for adolescents and those who do not feel comfortable speaking on the phone; 741741 which is a national hotline; and First Things First, which has a Yuma Region Resource Connection Guide. Once these services have been identified looking towards expanding programs that are in existence, like the high school Yellow Ribbon program, could be expanding outreach to the Jr. High School level. A lack of resources is always a concern when considering expansion.

WHAT WILL BE MY ACTION TO IMPACT CHANGE?

- I commit to continue supporting those on the front lines who do the hard work in ways that I can.
- Sharing mystory with helping those I love and myself to get services and evaluations. Working with nonprofits to build solutions.
- I plan to continue to support the leadership of YRMC and their commitment to addressing the needs in Yuma.

We are committed to continue working with all available resources and learn from the experts. With the additional knowledge, the doors open a little more. We want to make this right and to meet our community needs.

- Continue to educate and advocate on the stigma around mental health. Talk about it! Let's get rid of the stigma.
- Form a group to hold providers accountable.

- Be the voice for the individuals who cannot speak up for themselves. Partner with the courts and the justice system.
- Connect the field of substance abuse more with the mental health agencies we have in town.
- Investigate putting up mental health education tools in the waiting room of our clinic or in the rooms; help expand our resource list.
- Educate our community about omental/social health; advocate for our youth to get more resources in Yuma County after they get referred.
- Provide a safe place for a spiritual component.
- Implement a substance abuse teaching curriculum in our residency program. Help with the development of the psychiatric residency.
- Reach out to community partners to create a community referral guide. Get that information out to student's families.
- Create internal staff mental health program, and whatever I can do.
- Continue to work towards bringing voices forward of those who have faced mental health issues.

Substance Use in our Community Virtual Town Hall (SWATH) June 10, 2022

WHAT ARE THE UNDERLYING CAUSES OF SUBSTANCE USE DISORDER AND THE INCREASE USE OF FENTANYL IN OUR COMMUNITY? WHAT ARE THE BARRIERS OR LACK OF SUPPORT FOR TREATMENT AND SUPPORT FOR THOSE EXPERIENCING SUBSTANCE USE DISORDER IN OUR COMMUNITY (IES)?

The underlying causes of substance use disorder in the Yuma community are mental health issues, environmental factors, familial factors, and societal factors. Often drugs are being used to change the way an individual feels emotionally. Substance users may not intend or know the repercussions of the road they are following. Additionally, particularly with minors, the lack of familial and peer support causes individuals to seek the use of substances to deal with emotions and thoughts they are struggling to cope with.

Yuma County's proximity to the US/Mexico border creates more accessibility to and availability of drugs. Some young adults participate in drug trafficking because it is an enticing opportunity to make more money than in a traditional job. For those selling fentanyl, it is inexpensive to buy and then mark up.

It has also taken a long time to get the word out about the severity of fentanyl. Fentanyl is very potent, even when compared to other drugs, which makes it very dangerous. This drug is highly addictive, inexpensive, and easy to get, which is a very dangerous combination.

Drugs have long been a form of self-medication for those dealing with mental health issues, such as anxiety and depression, and fentanyl is no different. The Yuma County community is dealing with a lack of resources for mental health which deepens the problem. There are also many young children exposed to fentanyl, which means we need to begin drug education much earlier.

There are many barriers, lack of support for treatment, and missed opportunities to provide support for those experiencing substance use disorder in our community. To start, careers in treatment support and rehabilitation are not well-paid for the amount of work and stress involved. Caseloads are large, time intensive, and stressful to manage. Yuma County lacks the necessary mental health facilities and providers in our region and needs more funding and resources to make this happen.

Pathways to recovery need to be more accessible. Insurance coverage for mental health is difficult to navigate, such as understanding what is covered, what is not, or how to get access to financial support.

The Yuma community faces barriers such as the cost of treatments, access to treatments, delay of care and support to community members. These barriers often overlap through the stigma and shame that families and individuals facing substance use issues. This can be seen in requests of families seeking treatments on Sunday afternoons or other times they anticipate others not being in the facility. The judicial system can be a solution to the barrier, and local expanded treatment options making access to treatment easier and more affordable both for patients and families would help to dismantle many of the barriers to treatments.

Family issues can also be a barrier to treatment. Those who need substance abuse treatment don't always want to be helped. To support the treatment, family members need to be prepared to give a lot of time and attention to help the one in need.

Solutions to these barriers include the need to empower young people to feel better about their choices and their future. Drug prevention should not be approached from a place of fear and darkness. We need to show young people that they are in control of their future.

Parents need to be empowered to support their children through more education opportunities, offering more Spanish language resources, and by bringing all healthcare providers together - one stop where all elements of health can be addressed – physical and mental.

THINK ABOUT OUR VISION TO DEVELOP EXPANDED SUBSTANCE USE DISORDER TREATMENT AND AWARENESS IN OUR REGION FOR GENERATIONS TO COME. WHAT SPECIFIC NEEDS / SERVICES WOULD YOU LIKE TO SEE DEVELOPED / PRIORITIZED IN THE NEXT 5 YEARS?

In Yuma County the greatest need is the expansion of high-level treatment facilities in the County as patients and families struggle with having to travel to receive in-patient treatment and support those family members trying to support those individuals. Critically, the Yuma community needs a Level 1- Inpatient treatment facility. A key aspect in these expansions is to ensure that it includes availability across economic strata, specifically those not on ACCESS or other government support. Additionally, as these services are being expanded, the expansion needs to include services for families and caregivers.

Another service that would be helpful in preventing substance use are early and regular screenings for mental health concerns before such mental health issues lead to drug use. This would be accomplished through expansion to primary care providers.

We must fund and build the necessary infrastructure for rehabilitation and mental health to include: support for those with substance use disorder navigating the healthcare system; building of more facilities; and recruitment of properly trained mental health professionals. As part of this infrastructure, we must focus on growing our own mental health and rehabilitation professionals. We could encourage those who want to get clean and sober to follow careers that support and guide others who want to get clean and sober. Peer support is beneficial and powerful.

When thinking of our vision to develop expanded substance use disorder treatment and awareness in our region today and in the next five years, we must prioritize drug prevention education in our schools (all ages) and within our region. Educational resources need to be more readily available, in both English and Spanish.

Finally, a prioritization of the integration between current support systems to ensure individuals do not fallthrough the cracks or repeat treatment is critical to lowering the overall substance use in the Yuma community. This could be done by a holistic system instead of piecemeal for the services that organizations provide directly to individuals. This would ensure that any service provider would have the ability to tailor treatment to an individual's specific needs.

WHAT ARE THE OPPORTUNITIES TO LEVERAGE AND BUILD PARTNERSHIPS THAT WOULD ENHANCE ACCESS TO TREATMENT, AWARENESS, AND INTERVENTION SERVICES AND SUPPORT?

There are many opportunities to enhance access to treatment, awareness, and intervention support and services by leveraging and building partnerships in Yuma County. We already do well working together and currently have many agencies working toward addressing drug prevention, mental health, and rehabilitation.

We must use this community collaboration to gain more funding, such as grants, non-traditional partnerships, and coalitions, to support the work being done and the work that is still needed. We can better utilize social media for community outreach and peer support.

The Yuma community can leverage its relationships with the University of Arizona and other higher education facilities, the hyper-local drug prevention and treatment organizations throughout the county to blanket the entire county in information and partnerships between law enforcement and health care professionals to educate the community, particularly students, on the risks of substance use, and peer support groups.

The partnerships that the community has with higher education facilities can be leveraged to encourage the expansion of mental healthcare provider education, particularly mental health providers, that can catch the co-morbidities before these issues arise and lead to substance use. While the partnerships between the hyperlocal drug deterrence and treatment programs that are already doing great work within the communities of Yuma County can provide coverage across the county, providing clearer information as to the process for seeking help and the dangers of overdoses. This would also include cross border programs for those families that are living on both sides of the border.

Additionally, the partnerships between law enforcement and health care professionals with schools can be leveraged to get information into schools about the costs, risks, and avoiding substance use to begin with. The creation and expansion of peer support groups creating grassroots support for individuals, again particularly students, to reach out and discuss their issues without the stigma associated with going to professional care initially.

WHAT WILL BE MY ACTION TO IMPACT CHANGE?

- · Continue to lobby for Federal and State Funding and get more involved in community actions.
- Continue to be available to my community on the front line continue to educate all people on these crises.
- Continue to listen to the experts in the field, families and community that are impacted in order to develop strategies that are community driven.

Casa Grande Community Town Hall

Tuesday, October 4, 2022 Casa Grande, AZ



Casa Grande Community Town Hall October 4, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health, substance use, and homelessness are parts of a puzzle that cannot be completed without looking at the solution.

Mental health leads to substance use, and then the chance to become homeless with the loss of faith and vision for their future.

Mental health, substance use, and homelessness are related since they start with substance abuse, which can lead to mental health illness or vice versa, which then leads to homelessness. We have five students who tried to harm themselves. Without help and support this leads them to drug use. Parents are also using substances, which leads to a lack of support at home and the inability to raise their children to be healthy and productive.

Sometimes prescription drugs are used and abused. This can lead to finding other ways to medicate and increases their dependency on substance use.

All 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 also critical.

Because there is not one reason for homelessness, it is not a choice. Mental 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 could also cause homelessness.

Unsheltered individuals may be dealing with mental health issues or substance use. They need help to be diagnosed and assisted. The three conditions can be addressed together. 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. These systems must be designed to address the impact of trauma.

Each condition exponentially increases the risk of becoming a victim of each of the other conditions or issues. It is important to address these conditions together because they typically overlap each other and compound the problem, further reducing their chances to resolve the problem.

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.

It is a vicious cycle. There are not enough resources for mental health. We have overworked and underpaid case managers. Drug use induces psychosis. We have no homeless shelters, very limited low-income housing and 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 relate to each other because they are a social disease. They 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.

Collaboration of services, right resources for right need, more treatment programs need to be strategically placed around the county with easy access to resources, trauma-informed care, and a toolbox.

All it takes is for one to stop the cycle. If we stop the cause, we can possibly stop it all.

Mental health, substance use, and homelessness relate to each other and affect the person no matter what their individual needs. An action needs to be taken and they need to get help. They are human beings, and their mental health and substance use does not make them less of a person. They are the only ones that know their trauma, and this is why we can make a difference by working together to help. It is important to address all three conditions even if they do not affect them, because it is always good to have knowledge and information about the consequences and help with prevention to stop the problem altogether.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Resources to end homelessness need to be available. People need a home to begin to build their lives free of drugs and help get mentally well. These are all community issues, and we cannot rely on the government to take care of them. Money is not the only answer. It takes different groups with expertise to fill in the pieces. Non-profits, faith-based, and other organizations do not need to be competitive with each other, but instead support one another and work together.

The support needs to be somewhere that really helps and not just let clients go out on their own. This leads them to return to the same cycle. We need to support them through the process.

There are multiple factors contributing to substance use, mental health, and homelessness more and more as time goes on. The problem is continuing to get worse.

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 find programs (like CHIP) that work to take folks from homelessness to self-sufficiency and find solutions and implement the plan. The buck stops with us and we have the responsibility to help those in need. The answer is among us – the people in this room that care about the community.

We need to educate the community and work with parents and teachers on identifying and treating people in the schools and families that are related to those schools. It is important for cities to be involved and stay involved, especially the police department.

We should encourage others not to give up on the person if they are not willing to find the resources for the person to receive the proper services to be able to function daily. It is important not to hand off, but to continue to work on the issue to avoid continued mental health issues, substance use, and homelessness.

Agencies must work together to train their staff, continue training, assure first responders are trained, and to keep presenting and educating to communities. Create one place, a one stop with many stops and hubs that care for the individual.

We as a community can expand to address these opportunities by being aware of things within the community. We need more 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.

We need a homeless shelter in our community. Horizon needs more money and resources to provide counseling and services to people in need in our community. We need to increase our homeless resources across the board in our community.

Transportation needs to be available in rural and tribal communities to access resources like the food pantry. We need less anti-homeless architecture, and more safe dose clinics.

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.

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 SMI housing, crisis stabilized unit shelters, and a revolving shelter system. 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 and how these things are related. Collaborating between multiple groups can provide deeper and more wide-ranging resources to better help people get the help they need and break cycles.

The iHelp model is favorable. We are looking forward to opening churches to house those who are experiencing homelessness. 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.

We can expand opportunities by opening more facilities, rehabs, groups homes, and centers for people in need. More facilities for the community will help to see a huge impact rather than sending them away. Walk-in clinics on a van that goes some place each, so homeless individuals can go talk, get medications all of them the opportunity to get help being close to their home or community. This would aid in people 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 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 look at what community resources we have and find what is missing.

We need to be realistic in what we can achieve to find realistic results.

We need to walk through with them, not just tell them what is available and have them go there on their own.

We need to support programs that already work (like CHIP).

We need to work with stakeholders and the police department.

We need to stop causing barriers by building affordable housing and family shelters in general.

Great case management and advocacy that works with and refers to other services providers to provide whole person care. "Warm handoff". There needs to be a resource manual, programs that build trust, and culturally responsive services.

People experiencing homelessness need to have food, shelter, and clothing, and to learn skills to support themselves.

We should update youth education to teach empathy for people experiencing these conditions and teach people to not to be judgmental about these topics.

The community needs to make help easy to access. Release the stigma of mental health so that people are willing to receive help.

We need an alignment of efforts, funding, and regulations.

Family involvement, patient management system.

Work together to meet the needs.

If someone is experiencing substance use and mental health issues and one is treated but not the other, they will not achieve long-term recovery. Share information on what programs and treatments have shown the best results. Talk to the afflicted that have succeeded.

Educate teachers to notice signs and symptoms of children so they will have the tools to nip problems t in the bud.

Diversion and treatment programs to stop over incarceration, access to resources, and treatment that takes all factors into account.

Eliminate legal barriers that perpetuate the system and bar people from offering aid.

More resources for mental health and substance use. Safe living conditions with help, such as iHelp homeless shelter.

We need education, cultural humility, model-case study, peer support, housing, and safety.

The most important actions we should take in this situation is to listen. Hear them out to win their trust. Without trust and communication, we cannot establish a plan together. No matter the situation they 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.

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 not trust. People have to start over when they get a new case manager, or they get lost in the cracks. Better communication between agencies is needed. Doctors, probation officers, attorney's, case managers all need to talk and work together to find solutions to these problems.

Intervention and education are needed to progress and grow.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- We need an increase of funding and prevention.
- Fund programs like CHIP who are currently doing the work.
- 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.
- Rural vs urban. More funding.
- 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 AZ.
- 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.
- Better training, education on what to look for to recognize early on. Be accountable. Bring all agencies/ organizations. Provide and gather funding. Continue to get educated on the needs of our community and inform what has been learned.
- Provide more focus to trauma prevention for children and recognize its lasting effects. Provide more funding
 for services for the SMF 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! More education and training for teachers, case managers, all staff at agencies, police, parole, and probation officers. Juveniles in general.
- 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 and do not arrest and incarcerate. We need to find ways to help with their problems instead of sending them to jail.
- Stop criminalizing mental health and understand its effect on homeless 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 school, community events, prisons etc.

- Creating 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 that need it, along with getting members into mental health agencies and active
 in their care.
- 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.

IWILL...

- 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 to Maricopa.
- Support organizations that need financial assistance. Look at the service, see where it is lacking, support the cause. Affordable housing is needed, MS, SA, and homelessness is not a choice people with these issues don't have the necessary tools to get what they need.
- Work towards assisting my community.
- Be a volunteer to help the community.
- Continue to; chair Pinal Coalition to End Homelessness, chair 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 promote health and wellness.
- Continue to work to integrate and connect school-based resources.
- Commit to treatment and resources over carceral responses would be a great start.
- Celebrate Recovery in all prisons. The results where Celebrate Recovery is inside have amazing results!
- 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.
- Do not just address it one by one, address it as a whole.
- 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 my word and keep getting knowledge out. I know I can make a change.

IN COLLABORATION WITH





Public Health Services District

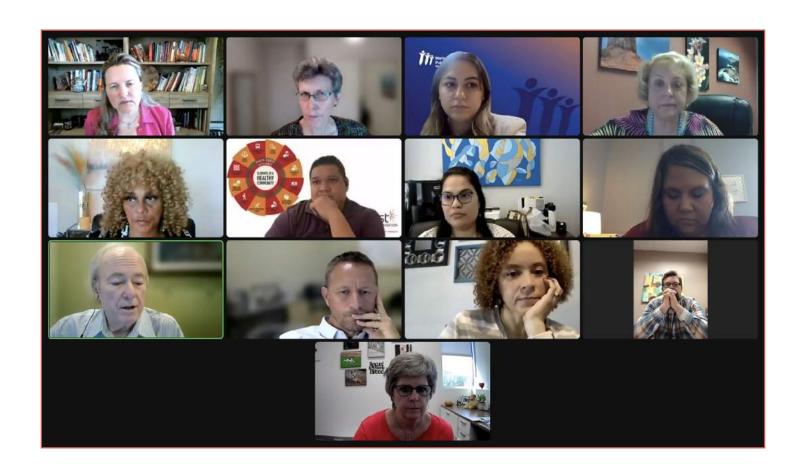






Homelessness to Housing Committee Community Town Hall

Tuesday, October 4, 2022 **Online Via Zoom**



Homelessness to Housing Committee Community Town Hall October 4, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Often those who are unhoused have substance use or mental health issues and this is one reason why it is so important to address them together. While these can be connected, many are now experiencing homelessness for the first time because of the dramatic rise in housing costs. We need to keep this factor in mind as we look at how best to address homelessness. Homelessness caused by rising housing costs can lead to substance use from the depression and anxiety that come from being homeless.

While some are now homeless because of rising housing costs, we know that those experiencing homelessness have often gone through several recent traumatic events and the very act of seeking shelter can be a traumatic or triggering event. This can prevent people from seeking out shelter. It may also be traumatic to bring children into a building with lots of people versus staying in a car or a park.

Many who are homeless struggle with mental health and substance use, but not everyone. Homelessness is often a symptom of other things happening in their lives. People with any serious mental illness (SMI) can find their SMI crippling to deal with. Housing is important, but housing alone will not solve the issue. They also need assistance with their mental health issues, so they do not wind up back on the streets. They need additional resources, including transportation to services and housing.

People who have any form of SMI, such as schizophrenia, bipolar disorder, anxiety, or depression, may have a limited ability to live independently. Housing first is important, but it is not a catch-all solution. Often, when people are put into shelters, they are not able to sustain an independent living situation. Homelessness can be the result of someone who is struggling with these things. We need to look at the root cause, not just the housing.

Wraparound services are key when providing a housing first approach. It can make a substantial difference to have a housing provider that is sympathetic and a clinical team that is fluent in treating mental health to avoid further homelessness experiences and to help people achieve independence.

Homelessness can be a revolving door, or a vicious cycle. It is also important for there to be another narrative. There are many people who are experiencing homelessness for the first time because of COVID. They can no longer afford their housing under current market conditions, especially when rents are being hiked and they lack adequate financial resources or social support (e.g., family nearby). It is important to acknowledge how mental health impacts homelessness, but we cannot ignore that there is a rapidly growing population who simply cannot afford housing.

One perpetuates the other with homelessness. Stress can turn into depression and substance use can become a coping mechanism to deal with the stress. Once you become substance use dependent, you are no longer thinking about how to get out, it becomes about how to cope with these feelings.

It is an affordable housing problem at its core, but we cannot afford to wait or subsidize the solutions. Homelessness is often the effect of trauma, mental health issues, or substance use. Housing first is important but wrap around services are critical to keep them housed.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Affordable housing is an important part of the issues to address, and poverty is one of the causes of homelessness. Colocation of services, such as affordable and attainable housing on city properties, is on way to reduce NIMBYism and address housing challenges. Housing helps create stability to address other issues, but housing alone is not always the answer.

We also need to address how people can remain stable in housing. Services that address mental health and substance use are critical. There is a need for lots of support and wrap around services, including working with landlords and adding in support services for those who need it. Without these additional services, we house people and within a year they may be evicted.

We should also leverage AHCCCS changes that have happened at the federal level that allow supportive services to be combined with housing.

We need a paradigm shift in how we address these issues, and it is important that we address these topics collaborative and cooperatively, especially in a challenging political climate.

Chronically homeless individuals often have mental health issues that become a barrier to services. If there is substance use as well, it is challenging to help manage the situation. We should consider making assessments about "readiness" to change and prioritize providing services to those who have a higher readiness factor.

We may also want to consider moving to smaller regionalized shelters, creating specialized shelters for different populations.

Co-location services are key, like housing near schools, libraries etc. Cities should be looking at how we incorporate housing on their properties. What if there was workforce housing with mixed income housing near fire stations? We should leverage grant money from the federal government and use it for a combination of supportive services and housing.

COVID has exacerbated homelessness and now the increase is visible in the streets. It is impacting our communities and our businesses. We have to address affordable housing, but also how people can remain stable, so they avoid eviction, incarceration and relapses into homelessness. There are lots of people living in the community with Serious Mental Illnesses (SMIs). For example, if you take someone with schizophrenia, there are a lot of resources needed to get them set up to be housed in the first place (furniture, tools, etc.) and it is something we overlook and take for granted. It is unreasonable to expect them to have to do all of this on their own. We need to develop the capacity to house people who need support with wraparound services to avoid eviction. It is not just a behavioral health issue, but also physical health issues as well for people with health complications such as diabetes. It is going to take years to recover from the economic impacts that COVID has had on our communities. A lot of poor health outcomes are a direct result of poverty, so if we do not get our economy back on track, then we will not see rapid improvement in the homeless realm.

There is a need for a paradigm shift for the way we are managing our homeless population. With service resistant clients, there are multiple individuals that fit into that category, but that does not always mean they want to be homeless. There are chronically homeless individuals struggling with mental health who lack insight into their issues. Compounded with substance use, the question becomes, how do you manage them when you have a client who does not want to make progress and only stays the night. Some also have comorbid issues like diabetes with mental illness and it is very complex. We have had no choice but to work and collaborate with each other as COVID funding begins to fade out, and now we have more municipalities that want to remove the

problem, rather than actively work with those individuals with lived experience to mitigate these issues in their community. When we assess them for readiness to change, we have individuals who are not getting services who are ready to make those changes. Instead, we are giving more attention to people who are not. There is no "one size fits all" solution and throwing money at the problem is not going to work. We need to incorporate compassion into our work at the ground level and treat everyone with respect and dignity, so they know that we are here to help.

Partnerships are they key success for housing individuals with mental health or substance use. Let the experts do what they do best. It is just a matter of ensuring that we are working together because ultimately, we have the same goal.

Moving to small, regionalized shelters (200 beds or less) is key to meeting people where they are. Shelters may need to be specialized at some level to reach different populations. Shelter agencies and partners may have to offer constant community engagement with a 24/7 phone line that shelter neighbors can use to report concerns, which may help reduce NIMBYism as would consistent, transparent data (maybe dashboard-style) about results from the shelter. Emergency shelters are important, but we struggle with long-term engagement and follow-up.

SETTING PRIORITIES

The time is now. We need to act. Civic engagement is important from those who work in these fields and from those we serve. We need to help inform our elected leaders about the best solutions to address these issues and we need to include neighborhoods in the solution, not just providers. Single family neighborhoods have a lot of political power to help make needed changes.

Outreach and education are critical, whether it is attending neighborhood meetings or conversation like we are having today that help to dispel myths and share best practices.

Flexible funding to providers is important. We should let the experts do their jobs without having to create unnecessary and burdensome reports.

We also need to work towards engaging as many landlords as possible to support the use of vouchers and to not allow discrimination based on income source. There should be a broader choice of neighborhoods to live in with the use of vouchers as some neighborhoods can be triggering.

We should apply a racial equity lens when addressing the issues and the systems that provide services. How are we making sure to best serve populations that experience these challenges at a higher rate?

We need to care for the entire family, including cats and dogs.

Employment is low with opportunities high for employment. What is the root cause of this? We need to look at how best to work on the preventative aspect of these issues with education and other programs. We could consider approaching those who are unable to get employment with opportunities for jobs (such as in the correction institutions). We also need to create opportunities for livable wages, including in the social services sector, which has a high rate of burn-out.

Engage as many landlords as possible to increase inventory of rapid rehousing and affordable housing for voucher holders. With mental health and substance use, we want to give people a wider geographic net to choose where they want to live. We want them to live in a neighborhood that is not triggering and that supports their recovery. We need to look at this problem through a race equity lens. Black and Native population experience

homelessness, substance use and mental health at an increased rate. How are we making sure that we are these overrepresented populations?

Civic engagement is very important for everyone. Make sure that they have a voice and can exercise their right to vote in their perceived interests. People in power have plenty of information to inform decisions and as people in that position, we need to spread that knowledge. Many jobs do not provide a living wage for workers. Organizations need to pay people what they are worth. Not all pay grades should be based on degrees, but professional experience is very important, and we need to reward that financially, especially in a field that experiences high burnout.

Sometimes providers will criticize neighborhoods and use the word NIMBY as an insult. It is important to recognize that much of the political power resides in single family households. We need to include neighborhoods in the solution, not just providers. Neighborhoods supported the Cicero bill and providers opposed it—both entities need to work together to get on the same page to resolve this issue. We need to include them in decision making so we are not just talking to ourselves. From the lens of the Cicero bill, it was lacking the provider viewpoint, which has its own respective value. More of these conversations need to happen together, not separately.

We need to bring realities to light. Busting myths from the communities will go a long way to creating a solution for communities. In a lot of cases, direct outreach is required. At a high level, there is a perception that there are a lot of jobs available, but many are still experiencing homelessness and evictions.

We need more flexible funding. Let the expert providers do their jobs without an absurd amount of red tape and requiring huge reports that sit on a shelf.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- Housing first!
- Provide flexible spending to providers.
- Require new housing developments to provide affordable housing.
- Do not be afraid of using harm reduction practices when addressing substance use. Using drugs is not a moral failing.
- The governor should release at least \$500 million from his ARPA funds to provide wraparound housing services.
- Promote an interdepartmental task force with police, fire, libraries and social services to leverage services and responses to meet people where they are.
- Keep the Housing Trust Fund funded.
- Bring people to the table with the lived experience to provide feedback and capture answers that we are missing as providers.
- System changes are needed to truly end homelessness. Livable wages, more affordable workforce housing, access to trauma-informed care, eviction reforms.

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 Homelessness to Housing Community Town Hall. Below are individual actions that were shared.

IWILL...

- Strive to empower the voices of those with lived experiences by bringing them to the table where decisions are being made.
- Complete the broadband whitepaper and include PPP management opportunities.
- Continue to engage our local community on this topic and join the hard discussions.
- Prioritize the issues of housing, mental health, and substance use in public health strategies at the local level.
- Stay connected to my city council rep and other elected officials (as a constituent).
- Use my knowledge to inform AHCCCS policies and contracts to make it as easy as possible to deliver high quality services.
- Do my part to help steer funding to agencies who have or want to build more collaborative care models.
- Help build leadership for social change among our younger generations.
- Continue to attend and participate in meetings like this. Collaboration is vital to ensure clients receive ALL services the community can offer. 25+ years in the field and we have not moved the bar very far. Educate the public and take a deep look into systems.
- Get connected with my city council and keep the conversation going within my network and within my community.



UA Health Sciences Community Town Hall

Wednesday, October 5, 2022 Phoenix, AZ





UA Health Sciences Community Town Hall October 5, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

The interconnected problems of mental health, substance use, and homelessness are circular, and best conceived as a Venn diagram. As we look at individuals struggling with these three conditions, we should look at the different parts of the Venn diagram to see who is in each part and treat different populations differently. Further, if each condition can be a trigger or cause for the others, they should be addressed together. Each of these conditions impacts motivation and critical thinking. They are almost always trauma related. If the conditions are not addressed simultaneously solutions are ineffective. There should be customized care with experts in each field in the room together to bring solutions.

In addressing these issues there are several challenges. People struggling with the conditions often lack education or coping strategies for illness and treatment. Staff working in these areas are very siloed. We need to evaluate policies and funding to assure that they flow between the different silos. There is also a lack of social capital. We need more and better education about these issues, and we need to start early and repeat the message often to be sure the messaging is not lost.

Finally, housing should be integrated in diverse communities.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Effective solutions require that we address the problem of stigma associated with these three conditions through education. We should deconstruct myths and misconceptions about people who are suffering from these conditions. We need to recognize that the media often presents a sensationalized version of the story for its own purposes, and that its depictions are sometimes exaggerated or inaccurate. We need to promote compassion and empathy by finding some common ground with people in these groups and reducing the tendency to divide into "us" and "them."

Addressing these problems is stymied to some extent by NIMBYism. Educational efforts to dispel misconceptions would be helpful to reduce NIMBYism. It might also be reduced if we reduce the physical footprint of the programs that address these problems, breaking facilities into smaller parts so that they do not seem so intrusive to neighborhoods.

There are considerable resources available in our community to address these issues, but many people, including providers, do not know about them. We should do a better job of educating providers and others about the issues and the resources that address them. Having all the resources under one roof would be very helpful. There is also a lack of providers and problems securing appropriate referrals. Because of the need for individualized solutions, a lot of hard work is required to address these conditions. Perhaps a patient broker, someone who can match the patient with the provider, and provide all relevant information upon referral, would be helpful. We need more group therapy and licensed peer support programs, and greater awareness of such programs. We need better data to know who we are serving and how we are serving them. That should include data from the criminal justice system. Data lockers, integration of data systems, and HIE systems, are addressing the issues related to sharing of data, and such efforts should be supported and continued.

SETTING PRIORITIES

We need more inventory for people who qualify for subsidized housing. Perhaps we could establish an Air B&B or Match.com system to match tenants with landlords.

We should engage with people at a much smaller scale. For example, use HOAs to come up with solutions. In this way, we will expose more people to the issues and engage more people in developing solutions. We should also make smaller communities aware of volunteer opportunities that might be available in their neighborhood.

Medical systems should use telehealth better to address adverse childhood experiences and bring preventive health care to the schools. We should integrate the community better.

We need more and better data.

We should prioritize funding for providers. Funding should be unrestricted and from a diverse donor base, so that providers can use it where it is most needed.

We should find a convening agency to oversee all the preventative work that is ongoing in the myriad of agencies and organizations that are working in this space.

Education is key, and it should be employed effectively. Too often public education is viewed as delivery of information to consumers (students). In higher education settings, people are expected to question and challenge the status quo, to ask why and how, but in K-12 education and many other educational settings (e.g., at Department of Corrections) that kind of questioning is seen as combative or defiant behavior. To understand the root causes of these problems, we should embrace real education rather than the more passive model that prevails. For example, substance use is not just the use of illegal recreational drugs. Substances may be used for many other purposes. Smoking is a legal substance use that may have physical consequences (e.g., breathing impairment) that will interfere with the ability of people to perform certain jobs. Active education would encourage people to drill down and consider these kinds of issues.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- Zoning regulations should be revised to reduce barriers to the development of affordable housing and encourage better use of empty lots.
- Thereshould be nowrong door to access care. This concept should be emphasized across the board, particularly
 with legislators. People working in the separate fields should be educated about how the systems work at a
 macro level so that when they interact with those systems they can do so more effectively. We should look at
 the different systems and map them to better understand how they work. We need to understand the steps
 individuals must take to get care and services, to eliminate duplicate steps and integrate the systems more
 effectively.
- We should increase the number of trauma informed schools, government agencies, and service providers.
- We should regulate, monitor housing providers, and prioritize and incentivize permanent supportive housing overfor-profit group homes and require licensed mental health services and case management to be available at all public supportive housing projects.
- Looking at income eligibility, it would be good to increase the eligibility threshold for services from 80% of Area Median Income to 100% of Area Median Income.

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 UA Health Sciences Community Town Hall. Below are individual actions that were shared.

IWILL...

- Continue the conversation.
- Stay informed, listen when I can, and support where I can.
- Release an RFP or NOFO for mental health pilots in Goodyear this fiscal year (hopefully this calendar year).
- Take ideas from today's discussion and use them to better inform donors and/or spur thoughtful conversations.
- Continue to incorporate opportunities for medical trainees to gain experiences to help them understand resources and have more compassion for the people they serve.
- Engage city leadership on causes of homelessness, affordable housing, and permanent supportive housing.
- Advocate for bringing PSH and/or affordable housing to my neighborhood.
- Encourage the Phoenix Community Alliance to invite Arizona Town Hall to present on the Town Hall's findings at a PCA meeting that also include other major business groups like Greater Phoenix Leadership (GPL), Greater Phoenix Economic Council (GPEC), and the Chamber of Commerce!
- Be a vocal advocate with my family, neighbors, and co-workers for the dignity and needs of those dealing with homelessness, mental illness, and substance abuse.
- Encourage creative ideas and discussion about small and large solutions.
- Promote better understanding of the need for and level of commitment to community land trust rollout and rapid scaling.

IN COLLABORATION WITH



Mohave County Community Town Hall

Thursday, October 6, 2022 Kingman, AZ







Mohave County Community Town Hall October 6, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health, substance use, and homelessness are interconnected and often can be a vicious circle with one leading to the other. While not always connected, mental health issues can lead to substance use and substance use can lead to mental health issues. Likewise, homelessness can lead to substance use and mental health challenges.

To address one issue, we need to address them all—treating the mind, body, and soul together and creating one stop shops that address all of these challenges and make it much easier to get services. When someone is ready to get help, we need to give them the help they need immediately.

We also should look at prevention. This includes looking at the root causes, such as childhood trauma, poverty, adverse childhood experiences, undiagnosed mental health issues, and the normalization of substance abuse or mental health issues in families. We also need to address the impact of being in the criminal justice system. Prevention also means creating personal connections and support systems; reducing barriers to housing and transportation needs; creating more transitional housing and services for those who need it; and addressing the stigma and shame that often gets in the way of people seeking needed help.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

While our county is doing great work in many areas, we still need more awareness of available resources, and more resources in general. We need more affordable housing and more sober living and residential living. As an example, in a lot of our inpatient units, we mix in those detoxing with those with mental health issues, and there are no level one inpatient services for children.

We need to stop working in silos and work together. We need to come together to apply for grants and get additional funding to obtain the services and resources we need—including a one stop shop with resources, and a resource fair for professionals that allows for connection and collaboration.

There should be no wrong door when someone is looking for assistance. We should all help them find the services they need. Community Connections is an example of an effective closed loop referral system funded by AHCCCS that will help address these issues in a more integrated way.

Integrated health care is essential—we need to address the whole person and yet we are all short staffed. We need to incentivize people to come to our community to serve in these much-needed roles, including school counselors.

We should expand our efforts with prevention and education and explore what systemic issues can be addressed. This can include raising awareness of and access to the county's resource guide and finding more ways to get people to these resources, including those who are being released from prison. It also can include having alternatives to imprisonment that open doors for detox and other services.

We need to work more collectively and collaboratively together, getting rid of the red tape and hurdles that can get in the way of organizational coordination and necessary follow up.

We also should make an effort to build more community cohesiveness with community events that connect people and have better communication to everyone about what resources are available.

We need to figure out how to get more boots on the ground to bring needed services with those who need help and to reduce the time for receiving services. Programs like this help to connect people to each other and to available resources and we should have more of them.

SETTING PRIORITIES

- 1. Have grant writers or other personnel to search and apply for funding for behavioral health homes.
- 2. Reduce the roadblocks and silos caused by competition with providers and insurance coverage.
- 3. Create connections between people. We're dealing with the symptoms of forgetting how to be connected as humans and as a community. Find a friend and be a friend.
- 4. Treat this as a problem of the entire community, not an individual problem.
- 5. Educate the people we serve about their conditions in a way they can understand. We need to teach just as much as we need to treat.
- 6. Increase mobile crisis units and response services better to meet people where they are.
- 7. Increase local access to mental health services after detox—build a local continuum of care in the community.
- 8. Find ways to increase the local talent pool for needed services.
- 9. Expand on existing resources with greater collaboration and teamwork. We are short staffed and can address this with greater collaboration.
- 10. Remember to listen and focus on the individual, not just the need.
- 11. Make efforts to expand knowledge about resources and create easy reference and access to these resources.
- 12. Provide care when someone is ready to receive it.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- 1. Communicate and collaborate with those who provide resources.
- 2. Get informed and invest in the solution. Be open minded and listen to community concerns.
- 3. Create an entity like Arizona Department of Housing for Behavioral Health in order to provide direction and to obtain and distribute funding.
- 4. Increase release funding.
- 5. Provide more housing options. Create more affordable housing.
- 6. Invest in affordable housing with access to case managers and resources that provide the resources to heal and get stronger. Create more permanent supportive housing funds.
- 7. Create more mental health and substance use shelters and funding for behavioral health services and programs that address community needs.

- 8. Increase local talent. Expand funding for programming and pay to case managers. Incentivize and retain qualified staff.
- 9. Increase services all around in Mohave County.
- 10. We are managing the symptoms and need to address the problem which includes loneliness and soul care.
- 11. The need may be the same, but each individual is different.
- 12. Take the politics out of it and look at the person.
- 13. Start at an early age and make children aware of their entire being, mind body and spirit.
- 14. Everyone needs to work together, regardless of agency and background and whether they provide or need services.
- 15. Increase public/private partnerships.
- 16. Mandate every first responder to take a first air mental health class show understanding in action. Team up these workers with a mental health professional.
- 17. Instead of arresting addicts, rehabilitate them.
- 18. Lobby for more funding for housing, services, and qualified and passionate "fixers."
- 19. Educate the community about these issues and increase assistance for housing and transportation.

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 Mohave County Community Town Hall. Below are individual actions that were shared.

IWILL...

- · Commit to being more informed about available resources in our community and share that in-formation.
- Educate myself about all of the resources available and inform others.
- Volunteer more and never create a wrong door.
- Continue working with the nonprofit I started to help medically fragile homeless and others to access resources and support.
- Continue to self-care so as not to lose my passion to help those suffering from these issues. Reach out to team members to check-in on mental health, burn out and self-care.
- Continue to be an advocate of collaboration with other organizations to help people become in-formed about resources and to help the homeless and people in need.
- Build a strong foundation for the inclusiveness we need.
- Continue to go to meetings and teach.
- · Listen and meet people where they are to help them reach the services they need.
- Research successful programs to see what works.
- Be available.
- · Become more available to new member of the community and collaborate with my best effort.

- · Volunteer my time, knowledge, and connections to help organizations I would not normally be working with.
- Stay in the game and help my community.
- Remember why I do what I do.
- Help to make sure frontline officers are aware and willing to share available resources with potential clients during interactions, whether law enforcement related or consensual contact.
- Continue to do the best I can as an inmate re-entry coordinator at Mohave County Jail.
- Continue developing the Sheriff's re-entry program.
- · Continue to work hard to overcome outstanding community issues and work harder to connect with other mental health workers and families to include the "no wrong door" policy.
- Continue to help my community.
- Attend more local government meetings to advocate for high density housing and keeping housing affordable, starting at the grassroot levels.
- Continue to partner with my community!
- Learn more.
- Show integrity.
- Work on bringing agencies together to find a way for homeless and sober living.
- Be non-judgmental, open minded, empathetic.
- Make it less about money.
- Be the voice of those in need to be able to help those in need.
- Give more to my community.
- Advocate! Participate! Engage! Empower!
- Continue to reach out in the community to connect and find ways to better our community together.
- Ask to enforce local laws—educate early on personal responsibility, community involvement.
- Continue to work on the front lines beside individuals experiencing mental health challenges, substance abuse, mental health challenges, substance abuse, and homelessness as well as educating community members of our local issues and resources.
- Commit to work at bringing the key leaders back to the table.

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Flagstaff Community Town Hall

Monday, October 10, 2022 Flagstaff, AZ



Flagstaff Community Town Hall October 10, 2022 - Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND **HOMELESSNESS**

Mentalhealth, substance use, and homelessness, while not always present together, are often correlated, intersect, and interconnected.

Housing programs can be essential for allowing the opportunity for other services. When an individual is moved out of homelessness and into housing, and then surrounded with services where the agencies come to the individuals instead of the individual having to seek out services, there is more overall success in addressing all issues.

For recovery and sustainability, we should make recovery more accessible and flexible. Reducing isolation helps with recovery success. Some people may not be ready for treatment. It is important to build relationships, destigmatize conditions, and address prevention and early trauma or genetic predispositions.

It is also important for communities to work together, to have warm handoffs, and to ensure housing is readily available for those who need it.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND **HOMELESSNESS**

We should make it easier to access mental health services. We can do this by embedding mental health services into other service programs and bringing programs and information to our schools.

We need to normalize mental health like how we discuss physical health. We should rebrand mental health issues to wellness, like physical fitness. All populations and all organizations should work together to address these issues in a coordinated and integrated manner.

It is important to tailor treatment to the individual and to create opportunities for a buffet of different options for those seeking services.

Flexible funding to meet the needs of the community and different cultures, specifically our Native American communities, is critical.

We have many good programs or programs being launched that provide inspiration for effective approaches, such as the SHIFT program and Pathways to Community.

SETTING PRIORITIES

We need a cultural shift with rebranding, reframing, and destigmatizing mental health.

We can do this by sharing stories respectfully, prioritizing the time to make these changes, and utilizing peer support as part of an integrated approach.

We need to increase funding and reduce restrictions, affording providers more flexible funding.

Taking care of those who provide services is essential. We need more workforce reinforcement, both in recruiting additional people to enter these fields and supporting those who already serve. To do this, we could use additional support, funding, and on the job training programs.

Our relationships are our connections to those we serve. We should develop plans with a team approach, providing client navigation and warm handoffs.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- We need to tell Arizona leaders the stories of crisis to better inform them on why it is important to address trauma and housing issues and why flexible funding is critical.
- We should tell Arizona's elected leaders to get out and talk to people doing this work. Listen with an open mind and believe what the community says – everything else will follow once you see what is happening firsthand.
- We need to make mental health mainstream, reframe the challenge, and invite everyone in.

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 Flagstaff Community Town Hall. Below are individual actions that were shared.

IWILL...

- Continue to be an advocate to our social services partners and community.
- Join into the Verde Valley Town Hall to help promote future town hall events.
- Connect with programs to have meaningful conversations and connection around these issues, and vote.
- Contact the Guidance Center to coordinate housing.
- Continue to work with the local recovery community.
- Share the knowledge I learned with my constituent group.
- Create be a part of creating a more empathetic society.
- Vote to support social safety net programs.
- Feel more empowered to talk about the issues and propose solutions when talking with Arizona's leaders.
- Become a board member to support a vital non-profit serving this critical need.
- Continue to work with OWWA to develop capacity and resources for its NEAZ chapter.
- Lobby at the local, state, and federal level for increased human services funding, spread the word about program availability, and services provided.
- Continue to be a part of this community, learning and growing from it daily.
- Continue to educate myself and others on the importance of integrative care for issues surrounding mental health, substance use, and homelessness.

- Speak up about mental health, substance use and homelessness in our community, and redirect the conversation about people in our community.
- Continue doing the badass work I and my teams do.
- Build better relationships with community partners.
- · Continue to actively support future leaders in the Verde Valley and connect with NAU and Flagstaff area high schools to expand future leaders in the region.
- · Continue to contribute financially to Arizona Town Hall and recruit others to do likewise.

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Human Services Campus Client Community Town Hall

Tuesday, October 11, 2022 Phoenix, AZ



Human Services Campus Client Community Town Hall October 11, 2022 - Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND **HOMELESSNESS**

Mental health, substance use, and homelessness are often connected. A job loss or other circumstances can cause homelessness which then leads to mental health or substance use. Likewise, substance use can lead to mental illness which can then lead to homelessness. Undiagnosed mental illness, like post-traumatic stress disorder (PTSD), can lead to substance use and then homelessness.

Whenever possible, it is important to try to prevent these crises before they occur.

All of these issues need to be addressed together with all entities working together to keep people on the right path. Relationships and respectful treatment of those experiencing homelessness are important. For those experiencing homelessness, it is important to have consistent rules and guidance on services. It is also important to have consistent housing.

It would be helpful to have life coaches and other support to help people get out of the cycle. Just knowing who to talk to and where to go can make a big difference, as can destigmatizing mental health issues.

If we do not address the homelessness, it is hard to address the other issues. They are all related and interconnected. If you are homeless for too long, it becomes even more challenging to break out of the cycle, especially if housing does not include other services that provide connections, job opportunities, or mental health services.

SETTING PRIORITIES

It is critical to have compassionate staff with proper training to serve people at the Human Services Campus. Someone who is burned out does not provide the same level of care, which creates roadblocks and can bring down the spirit of those being served.

Consistency is very important, both in rules and in the treatment of people. Consider having printed guidelines (similar to what is in the dining area), so everyone knows what to expect of staff. This would lead to greater consistency.

Work to move those with serious mental illness (SMI) to different areas to minimize the impact on others.

Consider drug testing the staff.

We need to look at how to provide training and support to staff so they can provide more training on different types of jobs to those being served (including seasonal jobs).

Create more programs that can accessed during the down time – specifically programs that provide hope and opportunities for a way out of the cycle.

The longer someone stays on campus the more difficult it is to transition out. Create more programs that make good use of idle time and that incentivize and encourage people to get out of the cycle. As an example: create a survey asking "What are five things you have done this week to help yourself? Change programs and policies that do not incentivize making or saving money.

Create more housing that is affordable for those trying to transition out of homelessness. Minimum wage is simply not enough to cover the cost of rent for most apartments. Explore different housing solutions.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- Empathize, engage and walk in other people's shoes.
- Provide more resources for reporting abuse of power or mismanagement. Have an advocate or call line.
- Focus on prevention and prioritize resources to prevention.
- There needs to be better communication between those providing services and those being served. Provide a progress report to those being served so they have more knowledge of their own circumstances, including the status of available housing.
- Explore how to collaborate better between different services so they are more integrated.
- Come from a place of ethical values and doing what is best for people instead of how to get elected.
- Come down to the Human Services Campus and just observe so that you can better understand the challenges people are dealing with, which will allow you to make better decisions at a leadership level.

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Southeast Arizona Community Town Hall

Friday, October 14, 2022 Thatcher, AZ







IN COLLABORATION WITH



Southeast Arizona Community Town Hall October 14, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health, substance use, and homelessness are intertwined and relate to each other. Having one of these challenges often exacerbates or leads to the others. Too often we separate these issues and do not consider them together as contributing factors to each other.

Mental health issues, including trauma or Adverse Childhood Experiences (ACEs), can lead to substance use and mental health challenges. Mental health challenges are too often stigmatized, causing people to self-medicate with substance use. These challenges can, in turn, cause homelessness, making homelessness the symptom or result of substance use or mental health issues.

Similarly, if someone does not have their basic needs met, such as housing and food, they will not be able to address mental health challenges.

Solving these issues is a marathon and not a sprint. The stigma and challenges involved require sustained effort.

In rural communities there are few resources for addressing mental health challenges. This can then cause people to use substances to cope, which leads to additional challenges.

Addressing all of these problems together will provide better outcomes in addressing each individual area. These issues do not happen in a vacuum and the entire community is impacted. It is not "their problem," it is everyone's problem.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

In Southeastern Arizona we have some behavioral health and mental health facilities and services such as Community Partner Integrated Healthcare (CPIH), Southeastern Arizona Behavioral Health Services (SEABHS), Easter Seals, Blake Foundation, and others. There are substance use programs for children, and some limited facilities for people working on recovery. We also have parenting, mentoring and life skills classes. Our community works hard to collaborate and work together.

There is much room for improvement. First, there is simply not enough funding. Some of the services available are based on grants which may be limited in time and scope. There are not enough residential facilities to stabilize people and we have a shortage of mental health counselors and services. To get providers to come to a rural area, we need to have salaries and housing competitive with urban areas. In addition, services that are available are often limited only to those with AHCCCS coverage, which leaves many without the ability to get needed treatment.

We simply do not have enough funding to support our community's needs. We are spending money on probation, jails, and the court system and 97-98% of these costs are related to substance use. If we want to make a difference, we should consider focusing more on prevention and being proactive instead of reactive.

We are working hard with prevention efforts in the schools. We might have even greater success if we can figure out how to bring these prevention efforts into the home. We could improve success with greater collaboration and coordination between service providers, faith-based organization, families, and others.

To find the best solutions to these issues, we should bring in the perspectives and lived wisdom of those currently experiencing mental health, substance use, or homelessness. With their perspective and insights in mine, we should create the services and programs that best help to remove or address the barriers to success that they identify. We should also look at way to follow up with people to encourage entering or continuing treatment.

We should consider how better to connect people with needed services. This could include more individual advocates to physically navigate people to the services they need, and a centralized place that lists all resources available or connects people to resources (such as the 211 line). We need a local Assessment and Intervention Center (AIC) and Behavioral Health Residential Facility (BHRF) so that families do not have to be separated and people are not dropped at emergency rooms where they have waited up to twelve days to get needed treatment. We desperately need these services in our county; funding and staffing are the major roadblocks for making this happen.

SETTING PRIORITIES

- 1. More networking with other agencies and organizations is critical so that we can share knowledge and resources.
- 2. We should encourage more integrated responses. As an example, medical clinics should do more whole assessments with those they serve and have resources available for mental health issues.
- 3. Having the people to provide services is essential. We need more support for service providers and caregivers so that they are more resilient to burnout. This can include resiliency and vicarious trauma training (some of which is already available for a reasonable cost).

4. Communication

- a. Sit down with and inform elected leaders about these issues and the real costs to the community and invite them to spend a day "in the trenches" to get a better understanding of the issues.
- b. Training to the community about the impact on people's mental capacity when they are using substances or if they are addicted.
- c. Increase the visibility of services that are available, perhaps with having local businesses, government organizations, and others providing resources at their locations. Ensure that resources are available in bilingual and alternative formats to ensure a broader reach for those who may have challenges reading.
- d. Better communication about what the true cost is to the county of these issues may help raise awareness of how best to move forward.
- 5. Funding: we need more to support all of these actions.
- 6. We should think about how we can best measure success and plan programs and services with this in mind.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

Find ways to fund needed programs.

- 1. Provide more funding to rural communities to attract and retain mental health professionals. Consider a loan reimbursement program, salary incentives, or programs focused on "growing our own."
- 2. Analyze how we are spending money on the criminal justice system and consider whether this would be better spent with prevention and intervention services.
- 3. Find ways to create internships with university students to bring them here.
- 4. Work with behavioral health agencies to create training programs, including on the job training programs.
- 5. Use national and other resources to create programs that support peer training and peer support to augment other services. Educate leaders on why and how it can make a difference to remove barriers to employment for those with criminal backgrounds.

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 Southeast Arizona Community Town Hall. Below are individual actions that were shared.

IWILL...

- Educate more people in the community.
- Do more to educate our community about mental health and destigmatize mental health disorders.
- I will work to organize a resource guide for professionals in Graham County.
- I will be an advocate for resources in my community. These issues affect all aspects of our community.
- Educate my community about the importance of integrated care. Mental health care is health care.
- Continue to feed information back to leadership and company partners.
- Try and help more
- Educate more people in the community on substance use, medically assisted treatment, and harm reduction.
- Try to get more involved with different community resources.
- · Learn about all the resources, that the community has and how to get the help for those who need it.
- Continue to advocate for special population in need and attend more Town Hall meetings.
- Incorporate what has been shared today into our health focus area for our organization.
- Continue to educate myself on needs in the community and to serve.
- Share the tremendous cost to the Graham County taxpayer as a result of substance use and the opportunities lost as a result.
- Get out and volunteer my services to organizations that are working to address these issues.
- Do my best to help join others to improve the needs of our community. Also, encourage others to speak up about ideas for helping the community.

Native American Connections Community Town Hall

Tuesday, October 18, 2022 Phoenix, AZ



Native American Connections Community Town Hall October 18, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health substance use, and homelessness are connected and interrelated with one challenge often, but not always, leading to or causing the others.

For example, when someone loses a job, they and their family might then lose their home. The stress of being homeless can lead some people to self-medicate with alcohol or other substances. The stress and trauma of being homeless can also create mental health issues, especially for children. Substance abuse can also be the cause of someone losing their job and becoming homeless. Likewise, mental health challenges may lead to the use of substances and create challenges with maintaining relationships which can then cause someone to be without a home.

To solve these issues, we need to address them all together with an emphasis on programs like Native Connections that provide integrated services which address all of the issues together.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

One of the biggest barriers to addressing the conjunction of homelessness, mental health and substance use is the stigma associated with these conditions. Although these issues have been with us for a long time, we cover them up to hide our shame and embarrassment. Law enforcement personnel want to help people experiencing these conditions but are less successful because they categorize and judge them based on their behavior. Shame and embarrassment also deter people from seeking the help they need.

People in the treatment and helping professions should be welcoming and trusting, making it clear that there is nothing wrong with needing help and that healing is a good thing. Their first contact with people seeking help is very important. Clients should be welcomed, treated as adults, given information about available resources, and allowed to make their own choices. They should feel they are trusted. Staff should ask what the clients want to do with their lives, and how they can help.

Those who suffer from mental illness or substance use disorder must learn how to change their behavior, to act differently in response to difficult life situations. Clients need encouragement, and it is important for them to build self-esteem.

Some populations face additional barriers to success. Those with felony records have difficulty finding housing. It can be impossible to find needed resources when you are homeless, especially if you are also working and caring for your family. Even under the best of circumstances it is difficult to find transitional and supportive housing because demand so far outstrips supply. On the Reservation, where there are limited opportunities for well-paid supervisory positions, role-playing may be an important tool to prepare clients for success.

SETTING PRIORITIES

The population experiencing homelessness presents an overwhelming challenge. This challenge is even greater when mental health and substance use issues are also involved. In addressing the needs of this population, it is important to recognize the special conditions that must be addressed if these needs are to be met and the condition of this population improved.

Many people are reluctant to seek help. We must let them know that it is OK to ask for help, and to be vulnerable. It is useful to share what we have in common with them and help them to share how they feel.

Most people in these circumstances have experienced trauma. Sometimes there is generational trauma, with the individual coming from a family where one or both parents were homeless, mentally ill, or abusing substances. It is important to address that trauma so that they can heal and move forward.

These clients need somewhere safe to be. Sometimes shelters enable drug use, and other unsafe behaviors. Some people may feel safer on the streets.

It is also important to teach life skills. Clients need to learn to live life on life's terms. Many people experiencing homelessness, mental illness or substance use disorder do not know how to access the resources they need, or the help that would be available for them.

It can be difficult to find the motivation that is needed to change harmful behavior patterns. Those people need hope—hope that they can be successful in changing their lives, or that their circumstances will change. Hope is like a spark that ignites a fire. With hope we can see what the human spirit can accomplish.

Many persons suffering homelessness or substance use disorder are seriously mentally ill, with no reasonable prospect of that condition changing. These people will need services over the long term.

Unfortunately, all too often when members of this population finally ask for help, it is not available. Transitional housing should be in areas where it is easy to access services and jobs. We should consider doing away with the restrictions on the number of times an individual can obtain help. Sometimes people are not ready to change, or cannot find the motivation to succeed, but that does not mean they will never be ready.

Family support can be extremely helpful, but often people lack family support. In Native American communities there is a cultural value to help those in need, but there are fewer resources with which to do so. Some families have limited resources, and others must devote their resources to providing support for themselves and other family members. When families live far away from the person who is struggling it can be very challenging for them to help.

To meet the challenges presented by people suffering the conditions of homelessness, mental illness, and substance use, we as a community must open our eyes and hearts.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

Vote. Elections can make a big difference in people's lives.

Adopt the Housing First model. Add wrap-around services after people are sheltered.

For some people we need to provide permanent supportive housing. The only fault in the system is that people must be required to get their lives together.

House everyone. Homelessness affects everyone, the entire society. It costs more to have people on the street than to house them. Housing is a basic right, like food and water. It is necessary to life. We could fix this problem by spending more money.

We should focus more energy on people transporting drugs. Fentanyl is killing us.

People who have overcome obstacles working in recovery are very important people, as they provide hope and encouragement to others. Sharing their stories is important. We should promote the sharing of success stories.

Funders should recognize that the three conditions (homelessness, mental illness, and substance use) go together, and provide treatment programs that address all three conditions. Often people are self-medicating because of overwhelming anxieties about life issues. They are in basic survival mode. Too many health plans do not recognize the importance of housing to health. An effective recovery plan requires housing, employment, a sponsor, and community resources.

Leaders should speak to businesses like those that have established employee transitional housing programs to help people recover from their conditions and move out as they stabilize and accumulate enough money to support themselves in permanent housing.

We should look at the number of young people who are plagued by drug use and homelessness, those who are aging out of foster care, and the impacts of the pandemic.

We should embrace harm avoidance programs, such as needle exchange programs, suboxone distribution to help revive people who have overdosed, Fentanyl test kits, and the like.

We should destigmatize and decriminalize addiction. It makes addicts turn to desperate measures and fails to address the problems of addiction. Inmates can get drugs and use in jail.

We should create awareness of these issues and of the prospect of recovery, to give addicts hope of a good life after addiction. Native American Connections is a great model of dealing with these issues in an integrated way. It has affordable and transitional housing, treats behavioral health and substance use issues, has youth and adult programs, and offers a comprehensive treatment model.

Prevention works. Give more money to harm reduction programs and entities. They need help.

We need more boots on the ground to deal with people affected by these conditions.

Fentanyl is a huge problem. Criminalization does not help. Addicts deteriorate over time, as they build up tolerance to the drugs. We need treatment facilities for Fentanyl addiction, and we need to get people into treatment as early as possible.

IN COLLABORATION WITH



Payson Community Town Hall

Wednesday, October 19, 2022 Payson, AZ





Photo Credit: Payson RoundUp

Payson Community Town Hall October 19, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health, substance use, and homelessness are interrelated, but they do not always occur together. Similar to a Venn diagram, there are instances when all three are involved or one can lead to the other. For example, someone can have financial challenges that cause them to become homeless. The anxiety and trauma of being homeless and losing hope can cause people to self-medicate with substance use. Similarly, alcohol or drug use can lead to homelessness. Having one of these challenges can create a vicious cycle with all three being experienced.

While one condition may lead to the other, someone can experience just one of the conditions without experiencing the other. The more proactive we can be to address these issues with programs and resources, and by reducing the stigma associated with experiencing these issues, the more we will be able to decrease the number of people who find themselves with these conditions.

There is a critical problem with the system which has so many roadblocks for needed treatment when someone is ready to seek help. This includes a lack of local resources and challenges with using the resources that are available. For example, there might be a location for treatment but no ability to transport someone to the treatment place, or a family cannot go to a shelter because children are not allowed. Reducing these roadblocks and streamlining treatment is essential to address and correct, as are prevention efforts that begin early with our children. The more we can provide a system with warm handoffs and people who are trained with local resources, the more successful we will be in addressing these challenges. While systemic issues are important to address, we can also have a positive impact simply by reaching out and connecting with those going through these challenges.

There are many doors into homelessness, but only a few narrow ones that allow people to get out. We need to create more doors out of homelessness. This includes education of professionals and of each other so that we reduce the stigma associated with those experiencing challenges, creating more affordable and transitional housing, having more peer supported programs, and raising awareness and knowledge of mental health issues.

We need to specifically address and include the perspective and needs of veterans.

We need to address stigma and the challenges that food issues (both quantity and quality) create.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

It is important to remove barriers and maximize resources. Collaborations across business and professional sectors (such as using MOUS, referral networks, or standardized forms) are impactful and should be supported. Reducing and eliminating red tape from state and federal resources would also make a big difference in creating the best programs for our community.

A team approach is best: bring teams together to provide food, housing, services for mental health and addiction challenges, and programs and support for children. We should be providing a hand up, going the

extra mile with consistency and constant encouragement. We should change systemic incentives so that they encourage providers to better help those being served instead of just having them "pass through".

Education is critical. This includes educating our community about the scope of the problem. We need to reduce the NIMBYism (Not In My Back Yard) and show that these issues are in our community and must be addressed. We should start early with prevention and education in our schools. We should also expand programs that reduce harm and create solutions by having an intervention team that responds with or prior to law enforcement arriving. We need to empower our first responders with resources and information that allow them to best respond to those experiencing crisis. We should consider having advocates who can help those experiencing these issues navigate to needed services.

Overall, we should consider a centralized location for information and services that people can go to for information and to learn how to navigate needed services. It could also be a place where organizations experiencing success could share best practices and resources and where the community (including the tribal community) could meet regularly to continue these discussions and to keep working on solutions.

Finally, we need to keep harnessing the power for good by looking for creative solutions that reduce roadblocks to success by relying on our community's unique strengths and resources to move forward together.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

Create a consolidated, consistent team effort that is incentivized to success. It would be best if this was a state or federal level program with local offices that has consistent forms, best practices, programs, and advocates who can help navigate people to services needed. However, we do not need to wait for the state or federal government; we can begin local efforts now.

We should be sure to get the input and knowledge of those with lived experiences as we develop action plans. Peer support and resource navigators are essential to these efforts.

Building on the resources we have is a start.

We need to either find additional funding or redirect the available funding in a better way. We should explore creative and new resources for programs, housing, and integrated care. Funding should be more flexible so that we can use it in the way that works best for our community. When developing funding models for providers, we should look at how to set up incentives for providers, including outcome measures.

We should have ongoing town hall discussions to monitor current efforts, maintain community involvement, and reduce the silos that exist with providers and services.

Better communication and follow-up are essential for success. This might include a regular column or space in the Payson Roundup or attending the homeless task force meetings.

We need a more robust and impactful HMIS resource that connects all of Arizona, which may allow us to better provide services to those receiving them.

We need a Certified Community Behavioral Health Clinic CCBHC, which includes certified peer support employees. We also need to get programs in our area to help certify peer support professionals.

If we really want to solve these issues, we should walk in the shoes of those experiencing these challenges. We should also support educators and social workers by paying them a living wage.

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 Payson Community Town Hall. Below are individual actions that were shared.

IWILL...

- Take my own medication every day. Do everything I can to stay on the right track and help others stay on the right track.
- Committo continuing my commitment to helping solve the current problems associated with homelessness, mental health, and substance abuse.
- Learn more about CCBHC & the committee/taskforce that is already in place.
- Pledge to invite our legislature and ask for a commitment and legislation passed to address a protective program to reduce homelessness, starvation, substance abuse and mental health. Raise teachers' pay and social workers pay.
- Make a positive difference in my community every day.
- Discuss the topics of "mental health, substance abuse, and homelessness" with my children. Ask their thoughts and encourage discussion of solutions.
- Listen to individuals experiencing homelessness and be their voice!
- · Get the word out about intercommunity meetings and the homelessness task force.
- Follow up and work with others in the community to continue to bring this issue to light.
- Start using ACES in assessment work with other agencies to support relapse prevention pro-grams.
- Connect with the organizations that provide resources and support to those who are dealing with mental health, substance abuse, homelessness (specifically NAMI & The Warming Center).
- Communicate with town personnel to get information on the town website.
- Volunteer for veterans and reach out the homeless with resources and real help.
- Start becoming more a part of my community.
- Continue to increase integration of mental health care into primary care clinics.
- · Continue to discuss the initiatives shared here and follow up with the homeless committee.
- Reach out to local contacts discussing potential options with NCHC, and personally volunteer.
- Lobby at the local, state, and federal level for increased human services funding, spread the word about program availability and services provided.
- Be more aware of the needs of the community.
- Reach out to see how we can help as my business. Come to a future follow up town hall.
- Be ready, willing, forgiving, and nonjudgmental of homeless.
- Continue to be a part of this community, learning and growing from it daily.
- Continue to advocate for myself and others on the importance of integrative care for issues surrounding mental health, substance use & homelessness.

- Stop and listen. Be kind-don't judge. Show someone cares.
- Become better informed about the resources that are available within our community, so that I can better provide information to the homeless who frequent my library.
- Advocate for more resources that are greatly needed.
- Find out if we can hold meetings at HES.
- Could our team help with food?
- Crisis plan for our hospital
- · Resources on our BPMC website.
- Continue to voice the need to help other interested parties come together to address the issue of substance use, mental health, and homelessness.
- Schedule another meeting in a month here.
- I will continue doing the awesome work I, and my teams do.
- Continue to plant trees that I will never sit in the shade of.
- Help veterans in crisis.
- Bring hope and connection by sharing music with people over free dinner at The Warming Center on Fridays.
- Work with the mayor to get the town council involved with solutions.
- Feel more empowered to talk about the issues and propose solutions when talking with Arizona's leaders.
- Keep moving forward.
- Try to increase my knowledge of what I can do as an individual.
- Increase the participation of my faith-based community, and all faiths in the community. Educate the community.



Alliance of Arizona Nonprofits Community Town Hall

Monday, October 24, 2022 Online Via Zoom



Alliance of Arizona Nonprofits Community Town Hall October 24, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Housing is one of the social determinants of health and the social determinants of health are all interrelated. The pandemic and the conditions it created has resulted in the creation of a new profile of families and family characteristics. The pandemic helped us to realize how interconnected these issues are. In this context, housing is medicine.

It is important to address mental health, substance use, and homelessness together because one may be the gateway to another. In addition, the systems relate to each other, and the systems do not work well. Instead of having people run around to find the services they need in different systems and places, there should be streaming services that work together. Instead of having people graduate to housing, they should be housed first. We need to aggressively assist them.

Although these three conditions can be related, often they are not. Not everyone who is homeless is mentally ill. Sometimes they are just without a home. Sometimes age is a factor that contributes to the status of being unhoused. In Phoenix, we have an affordable housing crisis and people may be unhoused simply because they do not make enough income to afford a place to live. When addressing these issues, we need to factor in the actual cause of the condition that is being addressed and treat the individual situation based on the specific factors at work.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

To some degree we expect law enforcement to address all social issues, even though they are not necessarily trained for this task. It would be helpful to bring in the experts and support systems that are equipped to address these issues. Phoenix Rescue Mission's workforce program launched last year in Glendale, AZ shows a lot of promise and should be scaled up to serve more people.

To be effective in addressing these conditions we should focus more on prevention services. Families need stability, a living wage, affordable childcare, and other support to prevent or address emergencies and crises. Programs should be trauma responsive. We should provide housing first and other services once the person has shelter. A great example of a supportive program is First Things First's Skycare Services for airport employees. The Skycare Services program provides childcare services so that employees can come to work. Several Arizona communities have adopted the Texas based model developed by Ernie and Joe, called Crisis Cops.

Unfortunately, our government seems to be more inclined to provide funding for criminal enforcement activities than prevention services. One reason is that results may not be immediately visible, and funders want to see results within an 18-month window. Law enforcement needs to be at the table discussing community health issues, rather than keeping law enforcement issues and funding separate from those issues. Everyone in the system should be at the table, including the persons who need services, and they all should have access to the data. We need to meet people where they are.

SETTING PRIORITIES

There is no single action or entity that will solve this problem. Collaboration does not occur naturally. Those working in these areas often end up working in silos, not by intention, but because they are working so hard to accomplish the tasks they are assigned. Opportunities for collaboration do not happen on their own; they require intentional action and hard work. Millennials seem to be very much inclined toward collaboration and as they move into the workforce may do more to promote collaborative efforts.

Community based projects such as the Blue Zone projects that are happening across the United States are an intriguing model that bear watching and may be suitable for expansion to more locations. The concept that AHCCCS money should be made available for house is also promising, but we should avoid the temptation for health care systems to get into the business of providing housing.

There is a lot of analysis paralysis in this arena. We should pick a priority population so that we have a model that can be developed, applied, and expanded if it works.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

Whatever they do, do it with urgency. In the 1-1/2 years since the Town Hall research report was written, conditions have gotten worse. The people doing the work and the people on the street know it is urgent, but the people in power do not seem to realize it. We are mired in the world of RFPs and the quest for a more perfect solution, instead of getting the money out to help save the people who need help now. We could have fixed this problem a long time ago if we had made it a priority.

In Sunnyslope, a neighborhood revitalization effort is underway that is like the one that Habitat for Humanity launched in the community adjacent to Grand Canyon University. Such efforts should be encouraged. The GCU initiative brought together state tax credit dollars, homeowners and businesses in the community, and student volunteers to revitalize the community. This public-private partnership is an example of the sort of collaborative effort that is needed to address conditions. Policymakers should look at such efforts and pay attention to the positive impact such programs can have. They should realize that no one is immune from the effects of these issues, and it will take the combined efforts of the entire community to address them successfully.

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 Alliance of Arizona Nonprofits Community Town Hall. Below are individual actions that were shared.

IWILL...

- Continue to draw upon the amazing experience of our Alliance members like those who participated in today's conversation.
- Continue to work to connect capacity to need, striving to fill gaps in resources and outcomes via collaboration between people, place, and policy.
- · Continue to encourage those we encounter to "hold on" until systems become more compassionate and functional.

SPONSORED BY AND IN COLLABORATION WITH





Verde Valley Community Town Hall

Wednesday, October 26, 2022 Clarkdale, AZ and Online Via Zoom







Verde Valley Community Town Hall October 26, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health substance use, and homelessness are connected and need to be addressed together. While not always cooccurring, they are often related, with one leading to the other. Many individuals may have mental health issues that may then lead to substance use and homelessness. Or, someone can experience homelessness which then leads to substance use through self-medication. These issues create many personal, family, and societal issues that impact core issues within our society and need to be addressed together.

In Yavapai County, there is a significant segment of the population that show this interconnection of all these issues. For example, public law enforcement records show an increasing number of trespassing on property due to homelessness. A number of these issues are referrals to Spectrum, due to behavioral issues. The number of issues has been increasing in recent years. Outreach collaborative programs have seen intersectionality among these three issues, creating a vicious cycle.

There is an increased level of housing insecurity in Yavapai County, due in part to a higher level of short-term rental inventory. More affordable housing needs to be addressed. The lack of affordable housing is a contributor to homelessness. Working people are homeless in our county; they live in campers or vans due to the lack of affordable housing. This particular population may not have mental health or substance use issues. Programs are trying to house families with young children to give family units some sort of stability. Housing instability affects children's learning and mental health, and it has an impact on those who already have mental health issues.

These issues should be addressed together, and they should be addressed early on before the cycle starts, using as many preventative programs as possible, especially with our children. We should come from a place of compassion in reaching out to those who need assistance. Interactions with those who are unhoused need to be sensitive to trauma they may have experienced, and with the knowledge that they are worried about meeting their most basic needs. Medications can also assist helping homeless people who have mental health issues.

We should also support programs that allow formerly incarcerated people to transition effectively into the community. A Yavapai program, Yavapai Re-entry Project, that addresses all three issues together for those individuals who have transitioned from incarceration to community, has met with increased levels of success. People looking for support have many levels of concern that should be addressed for them to live independently and regain a sense of community. The Veterans Administration also addresses all levels of care instead of one issue at a time.

We should also continue to have events like this that bring the community together and connect resources, people, and organizations.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Yavapai County shines in working together on issues and more collective work is needed. Community Health Improvement Plan (CHIP), the Mental Health Justice Coalition, MATFORCE, the Yavapai County

Substance Abuse Coalition and Collective impact partners are examples of collaboration. In addition, Manzanita Outreach focuses on resource sharing as many people do not know of the resources that exist. All of these groups are open to others joining them in working together on mental health, substance use, and homelessness.

In the Verde Valley, we have resources available, but they don't focus enough on housing or having a place to sleep. Once Maslow's basic needs are taken care of, other issues can be better addressed.

Unfortunately, funding can be silved with a patchwork of services that are in place but not working effectively together to stop the revolving door for those who have multiple needs. A more integrated approach, perhaps led by a governmental entity, could help.

The Verde Valley is looking at a more regional approach to addressing these issues, with different organizations taking turns on providing resources and services. By collaborating with others, we learn more about difficult situations that exist, on an individual and system basis. Northern Arizona Interfaith groups have worked together to learn more about what has happened and is happening with housing inventory that affects residents. Housing option opportunities are offered with the caveat that people do not use substances. This restriction could eliminate some individuals in need. We also need to look at certain populations and their individualized needs. For example, people who are widowed or separated who need socialization as well as people who may come from different cultures or have language barriers.

NIMBYism (Not In My Backyard) is a huge challenge for solving issues with mental health, substance use, and homelessness. These issues are in our backyard. We need to address NIMBYism with more community conversations and through high level policy changes.

Various organizations have come forward with applications to provide housing for the homeless. Staffing issues have caused issues with continuity of providing affordable housing to those in need who may bring in critical problems, such as drug overdoses. It is difficult to find the answer to this complicated problem.

Bringing together people from diverse backgrounds can help in finding ways to approach these complicated challenges. We should bring everyone into this conversation and raise awareness and understanding about the underlying causes and how best to assist those in need.

We need early prevention efforts, including education in the schools that helps to reduce the stigma. We should make it easier to talk about these issues so that people know they are not alone and can be connected to available resources. We need multiple entry points that accept people where they are when they are seeking assistance. We should prioritize individuals and individual approaches that will assist with recovery and support. And we need to normalize the discussion about mental health substance use and homelessness.

The criminal justice system should be an opportunity to identify those with needs and to then connect people to available resources. To prevent people from entering the criminal justice system, we should expand coresponse models with first responders and law enforcement. We should also expand and support peer support which can be very beneficial.

Finally, we need to ask the federal government for more funds for housing support. We also need to address short-term rentals, specifically we need to have the state change the laws that do not currently allow local communities to regulate short term housing, because this is creating a lack of housing affordability.

SETTING PRIORITIES

The following actions are critical to address the conditions of mental health, substance use, and homelessness in an integrated way.

Conversation and dialogue among all community-based groups and circles of influence need to acknowledge that we're in a crisis. We need to bring our resources together by collaborating among different organizations, especially those comprised of our diverse populations. All people need to be involved to consider possible solutions and they need to learn more about these three issues to make educated decisions. There needs to be more education on the complexity of this integrated challenge.

This affects people of every age group, and, in particular, new residents who have moved into our region and are not aware of available local resources.

We also need to enhance the capacity to work with individuals on an individualized or case by case basis.

Funding for additional support is always needed to support existing programs, including housing.

Education is critical as is having people who are willing and open to listening. We can use social media and other outlets to raise awareness about these issues which helps to reduce the stigma and connect those who need assistance to different programs and resources. Having a general educational program that raises understanding, such as teacher prep programs would help support students better. However, we need even more: we need a local, state, and national effort, similar to what was done with breast cancer, that raises awareness, reduces stigma, and provides a QR code or other link with resources for education and assistance. This widespread marketing campaign could include bumper stickers and other media promotions accomplished through both individual and organizational efforts.

We need to make resources more available to those who are suffering from these challenges and talk more to reduce the stigma and educate those who need help with resources, including medications.

We need a Verde Valley crisis stabilization unit.

Using our voice and the resources that already exist—including the right to vote—are important. We need to vote and share our opinions at programs like this.

We need to reevaluate high level policies that prevent communities from taking integrated actions, including educating judges, addressing issues such as zoning, and establishing a local housing authority/land trust to take advantage of federal funds.

We also need to work with the legislature on short term housing so that more affordable housing options can exist. NIMBYism has pushed back on creating or sustaining multi-family housing, further exacerbating housing issues in certain areas.

In other countries they have a mind set of working to live instead of living to work. We could take inspiration from these other countries which would help address stresses that underlie some mental health challenges.

Mental health challenges should be treated like physical or body health issues.

Finally, we need more town halls like this.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

Reform the financial platform of Arizona's Governor Homeless Committee to filter this money accountably to local governments who can then implement these Town Hall recommendations at a grassroots level with oversight.

Open your eyes to the opportunities we have. These problems are happening as we speak. Change needs to happen and starting now is better than never. We as a community should be standing as one.

Remove political labels and govern for all constituencies.

Attend a town hall in a different area or with a different culture from your own.

Create an Arizona interagency council on homelessness to establish and support community-based teams made of a mix of psychiatrists, social workers, and law enforcement to address these issues on a case-by-case basis.

Increase education with younger generations and schools to educate them before these problems begin to give the next generations resources at a young age which would help with the bad stigma that follows it and so that they are more comfortable talking about their problems when they need help. The kids can go home and talk to their parents about it. That would most likely be an eye opener for the parents.

Show up, actively listen, and represent the people to remove the obstacles for solving these issues.

One size does not fit all. Each community is unique. It is important for us to collaborate on all different levels of government and come together with public and private partnerships. Sufficient resources need to be gathered to address this integrated challenge. The state legislature places its will on local governments. State level bills have a tendency to re-appear; one proposed bill, in particular, would override local zoning ordinances, in which case, the state legislature would decide on local density. Communities know their local situation, what resources are needed and what works best for them. The current state budget surplus should be distributed for needed local services determined by local governments.

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 Valley Verde Community Town Hall. Below are individual actions that were shared.

IWILL...

- Worktogether with Northern Arizona Interfaith Council to build awareness about local and state government
 issues, especially with housing, mental health, and substance use. The faith-based organizations are
 aware of these issues and could address them through legislative actions. Currently, these situations are
 being addressed downstream with temporary solutions to major problems that need to be addressed more
 comprehensively through systemic legislative actions.
- Continue to work with my colleagues within the Verde Valley and through our state lobbyists to educate legislators and to testify before committees.
- Arrange a field trip to Yavapai (VV) College for my Rotary Club.
- Arrange a town hall for our Senior High Interact kids with our Senior Rotary Club.
- Not just pass by an individual, but I will stop and reach out for their specific need and advocate for the homeless, mentally ill, and drug addicted.
- Advocate for the mental health of my students through compassionate, open education on social and emotional supports and lessons.
- Be an advocate for all of this, I am a peer and have started a grassroots program that addresses all of these issues. I will connect, collaborate, and stand for what I believe in! There is hope.
- · Collaborate with cities across the Verde Valley to help solve homelessness, mental health, and drug use.

- Share about non-profit organizations and share about mental health and substance use, especially among my classes and schoolmates.
- Help people who need it. I would like to be able to show them the way before the consequences are too important for their future life, especially amongst young people.
- Help in my community, talk about it, and make other people be inspired by our ideas and us.
- Continue to reach out to young participants in future leaders to explore ways to improve and sustain their engagement with AZ Town Hall, as well as with community-based organizations addressing these issues.
- Continue to participate in my community, but not be afraid to say "no" and feel good about take care of
 myself.
- Continue to support Resident Council Hope House.
- Vote.
- Stay informed.
- Read town hall reports in library and actions.
- Connect with local homeless at St. Andrew dinners.
- Be socially active and contact legislators.
- Use my voice to make a difference and publicize resources available.



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Pima County Community Town Hall

Thursday, October 27, 2022 Tucson, AZ



Pima County Community Town Hall October 27, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health substance use, and homelessness all go together. They are interrelated, correlated, and exacerbate each other. Substance use and mental health can be the drivers or triggers for homelessness. Similarly, homelessness can be the driver or trigger for mental health issues and substance use. None of these issues occurs in a vacuum--experiencing one can lead to the other which may perpetuate the revolving door for those experiencing these challenges. Accessing the help to get out of this cycle can be extremely challenging, especially when people are in survival mode.

We need to have a comprehensive way to address these issues together in order to remove barriers for success and we need to engage people where they are. As part of addressing these challenges, stable housing is foundational as is reducing stigma, education, and early intervention and prevention (which includes reducing access to street drugs). We also need to take into account historical trauma for specific groups (e.g., LGBTQ+, Tribal and people of color) and other individualized issues that best match needs with support.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

The system is very complex. We need to work together to see how we can better contribute together to a more integrated system.

There are still many gaps between systems. We need more integration with organizations who provide services. Specifically, we need to improve "warm handoffs," closed loop systems, transportation to and between services, and more opportunities for services outside of standard work hours,

We need a top down, bottom-up approach that creates integrated care (perhaps we should consider having this required by the government).

We need a better mechanism for coordination, and we need to make receiving services easier, more accessible, and convenient—perhaps with an integrated facility and trained staff.

The workforce in behavioral health has dwindled with lots of staff turnover. Many agencies are without the workers they had pre-COVID. We need more people on the ground doing more outreach and connecting more with those experiences these systems. We should consider using more peer support systems and those with lived experiences. Having a highly trained peer workforce will create more of a community feel and allow people to leave the revolving door of experiencing these conditions more easily.

It's also important to bring those experiencing these issues into the conversation; we need to involve them in creating the solutions. We should increase outreach services to the populations experiencing these challenges while taking into account the need for those doing outreach to feel safe.

Funding is simply insufficient, can be conditional or restricted, and is not always equal for these three interrelated areas.

We need more unrestricted funding for housing. Housing first is important. We need a plethora of low barrier housing with intensive wrap around services specific to individual needs. It would be good to leverage public and private resources to create needed housing.

Early intervention is key, and literacy has a big impact. Education in schools is important, with emphasis on special populations who have experienced historical trauma or discrimination. Stigma and lack of education or knowledge in the community prevents people from getting needed services and prevents services providers from maximizing effectiveness.

We should focus on social determinants of health in an upstream effort, perhaps using primary care doctors to assist with education and screening of potential issues. It's also important for systems that have been historically punitive (such as the criminal justice system) to be more restorative through education and other resources.

Along those lines, we need to look at older policies that may have created negative impacts on certain populations and create harm reduction services and safe spaces for those impacted.

We should assist communities historically marginalized or discriminated against, so they can more easily break out of cycles of service.

Having an alternative response team is a better way to address those who are experiencing mental health issues than sending the police.

Finally, we need to increase community awareness of how people find themselves in these situations, and what resources are available. We need to train all members of the community, including teachers, organizational leaders, and others on how to best deal with those experiencing these challenges.

SETTING PRIORITIES

The most important actions that need to be taken to address mental health substance use and in an integrated way include:

- Interaction and listening for understanding is critical. We should create more town halls like this where we can
 have these conversations, share ideas, and create new connections solutions. We need to advocate to elected
 authorities to create more gatherings like this to build coalitions and understanding. We also need to advocate
 for unrestricted funding that can better and more effectively reached those experiencing these conditions.
- 2. We need to have judgment free advocacy on behalf of individuals experiencing these challenges.
- 3. Bring the office to the people. It's much more challenging for people to get to providers for services.
- 4. Prioritize funding for low barrier housing with wraparound support
- 5. Strengthen connections and collaborations with agencies. We need to increase delivery of care without creating silos and work to unify services for marginalized communities.
- 6. We need to enhance programs in jail and prison and incorporate the justice system into these...Do not turn off AHCCCS while they are in jail.
- 7. Have a mandate to create a community strategic mission with funding tied to measurable outcomes.
- 8. Create a public information campaign to educate the public on the issues and reduce NIMBYism, this should include stories humanizing those experiencing these challenges and it should be sensitive to cultural differences and language. As part of this campaign, we need to acknowledge systemic harm and make efforts

to reduce negative stigmas. We also need more education on available resources and the need for the private sector to be a part of the solution, whether through volunteering or sponsoring specific families experiencing homelessness.

- 9. Have more peer support systems. Bring in people with lived experiences and pay them what they are worth.
- 10. We need stronger trauma informed responses.
- 11. Have a resource hub that includes support with how to navigate and connect to needed resources and consistent follow-up with those served.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- 1. Pass laws to support state or federally funded transitional housing as a part of mental health substance use with wrap around services that are medication and family friendly.
- 2. Housing is a basic human right. We need to stop using us vs. them language. We are them.
- 3. Why are we competing for funding to serve patients? We need to create a system that encourages collaboration, not competition.
- 4. Get more informed and involved. Be a part of the solution. Attend Town Hall. Speak to those experience homelessness and find out what works.
- 5. Come and see the problem firsthand. Instead of seeing a problem, see a person with a problem.
- 6. Safe housing is a priority for funding and important for providing other services.
- 7. Implement and fund policies that address the social determinants of health.
- 8. Control and fund affordable housing (zoning, rent control, etc.)
- 9. Provide Narcan to inmates.
- 10. Community engagement and education: reach out to neighbors and other to learn about what brings people to these situations. Work with the community to support solutions.
- 11. Divert homeless individuals being charged with nonviolent crimes and use funding for housing instead of incarceration.
- 12. Have a state approach that: is informed by and recognizes human experiences; allows for local communities to take the necessary steps or actions that prioritize low-barrier approaches with wrap around services to interrupt and end the crisis cycle our neighbors are facing.
- 13. Come to our community discussions and create a town hall for discussion of these topics.
- 14. Pass legislation that allows support systems to be involved in treatment (such as families).
- 15. Sit down and listen. Become educated.

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 Pima County Community Town Hall. The following are individual actions that were shared.

IWILL...

- Identify existing resources in Pima County working to address issues surrounding homelessness, be prepared to share this information with anyone who I encounter that is open to receiving it. Work toward putting a face on homelessness in our community.
- Always serve my community.
- · Stay involved! Carry Narcan.
- Continue to serve and assist and educate my community.
- Ask for more mental health resources.
- Share what I have learned.
- Reach out and help my community!
- See you at Speedway and Craycroft.
- Go to my local political leaders!
- Educate myself. Collaborate with other providers. Incorporate those affected in plans for change. Contact policy makers and to promote change.
- Spread the word!
- Continue to provide awareness of the issues in our community and work to dispel false narratives
- Continue to be a resource for our community in connecting the vulnerable to services (resources)!
- Advocate for affordable housing for older adults, many who are experiencing loss of shelter for the first time.
- Participate in outreach to connect unhoused individuals to resources.
- Be committed to partnering and community partners and stakeholders to finding and establishing resources/ services to decrease homelessness, and substance use, while improving mental health.
- Stay tuned for the report prepared from the town hall held with people experiencing homelessness. I want to hear their perspectives as much if not more than I do providers.
- Commit to support educating everyone on Tribal Culture Identity Crisis. Traditional Community outlets. Historical and generational traumas.
- Report back what I experienced here to my tribe. I need to feel like I represented the needs of my tribe, so I will continue to attend these types of events and I will reach out to Town Hall staff.
- Reach out to housing and mental health providers to form a collaborative network of services dedicated to supporting women experiencing homelessness at our center-Sister Jose's.
- Bring awareness to the issue of homelessness in Tucson.
- Fully support an integrated effort that engages the homeless where they are and properly manages resources to affect the most good.
- Be intentional about the use of language relating to all marginalized populations; connect with and humanize.
- Put others first. Put an action plan together.
- Ensure programs developed, funded, or implemented by my department will address the whole person and the social determinates of health.

- Continue to help others heal. #cantgetwellinacell #cantpunishawaythepain #theinvest difference
- Keep loving humanity.
- Start to educate my health and wellness coalition.
- I will work on connecting systems around homelessness with the City of Tucson.
- Raise awareness to my community.
- Advocate for a sponsorship program. [For example,] private companies like T-Mobile sponsors homeless families with housing care and job opportunities.
- Continue to figure out how I can help do more at my organization to address homelessness and those affected by mental health and substance use issues while being house-less.
- Meet people where they are. Share my knowledge of resources with others, transparency.
- Educate to reduce stigma. Network. Humanity!
- Continue to advocate for those in my community struggling with mental health, substance use, and homelessness and provide trauma informed, culturally proficient care.
- Continue to bridge matters together to better serve the community. Advocate and have the difficult conversations with decision makers.
- Continue to view my community with an empathetic lens.
- Be a conduit of purpose and passion to create and evolve a community of people who uplift and support each other.
- Continue my organization's efforts to increase our collaboration with other service organizations to better the needs of our community
- Publicize resources through my office.
- Research and support policy to help connect people with housing and services.
- Continue to be an evangelist for mental health, and substance use in Pima County.
- Be better tomorrow, [more] than I was today for those I serve.
- Treat every person with respect and show kindness, empathy, and sympathy.
- Continue to provide resources to the best of my ability.
- Empower those who want recovery to know its 100% possible.
- Continue to be part of helping figure out solutions for individuals who need help with substance abuse and homelessness through my peer support.

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ASU Future Leaders Town Hall

Thursday, October 27, 2022 Phoenix, AZ







ASU Future Leaders Town Hall October 27, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

People use substances to cope with difficult situations, which leads to poor mental health and homelessness. Like COVID, homelessness can cause mental health and substance use issues to worsen. Substance abuse can impair mental health and cause impoverishment as people spend their resources on substances. People with mental health and/or substance use issues can have difficulty getting and keeping jobs, which can lead to homelessness, which also makes it harder to get and keep a job, and each of these conditions contributes to one big cycle of misery. Being homeless impacts physical and mental health. When people have a roof over their heads they can focus on other conditions. People experiencing homelessness or mental health issues are more likely to self-medicate by turning to substances. The use of substances separates people from their communities and support systems. We should recognize that the environment influences people, and that the environment includes other people. If behavioral problems are not addressed, they can lead to intergenerational problems, and a continuing downward spiral.

It is important to address these three conditions together because one contributes or leads to the other. It is like the domino theory. It is important to apply the Housing First model because when people are more vulnerable, they need more support.

We need to meet people where they are. We should recognize that not everyone suffers all three conditions simultaneously but treating them together brings more resources to the table and assures that when they are coextensive, they will be addressed together.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Education is a big part of the solution. We need more teachers, psychiatrists, and social workers. We should get the community involved and informed, so that they will be more motivated to solve the problems. If they understand that mental health problems are real and common, and that there are solutions, they may be more willing to help. Education of older people about substance use could create greater understanding of the nature of the problem and the solutions that may be effective.

We need more shelters. We need professionals in those shelters to provide resources and evaluate people using the services. We need backup for nonprofits to assure that there is sufficient infrastructure to provide care. We should keep records to track what has helped people to make changes in behavior. We need better transportation options, so that people can access needed services.

We should remove financial barriers. These are expensive problems to have. We should consider changes to regulations and laws, and make substance use and mental health counseling more affordable. We need more affordable housing. Instead of dispatching police to mental health crises, we should send mental health crisis intervention teams. We should make it easier for marginalized communities to create intergenerational wealth through home ownership. We should take steps to de-stigmatize all three conditions. People may not seek help because they are afraid of being judged.

We need to coordinate services. We should develop more affordable housing in communities like Scottsdale where there is land available. Adopt the Housing First model. Vote for candidates who are committed to addressing these issues.

SETTING PRIORITIES

Raise awareness of these conditions

Focus on prevention of crises for people facing these conditions

Make housing more affordable.

Know where the money is going.

Education to find the root of the problem to stop it from growing.

Invest in programs that stabilizes people rather than just giving them a place to stay for the night. To do this, redirect funds from other programs that are less useful.

Focus on preventative measures: direct approach to fix the problems, community education to reduce stigma, early intervention to address mental health issues in the young, more program funding.

Elect politicians who are more engaged in dealing with these problems.

Be more collaborative and stop working in silos.

Educate people working in the field to be less intimidating and educate people generally to be less intimidated and to seek out resources on their own. Also, to focus on the present instead of looking back.

Preventative measures: establish a database for responders so that they would know about past mental health incidents at a particular address; emphasize education to de-stigmatize these issues and promote compassion; have nurse and social worker at public schools, to support students and reduce financial barriers to treatment, provide in-school treatment.

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 ASU Future Leaders Town Hall. Below are individual actions that were shared.

IWILL...

- Continue to look for effective solutions to combat homelessness by providing resources and mitigating further crippling factors that cause any of these issues.
- Focus on the now, not the how.
- Share the information that I have learned and contributed to and from this session with my family and friends.
- Continue efforts to integrate healthcare/homeless systems data in order to more effectively understand and assist individuals experiencing homelessness, mental health, and substance use.
- Discuss the issues of homelessness more often; Arizona has a huge problem, and it will not go away anytime soon.

- Talk to other Arizona Residents about these issues and I will share my experience with others.
- Use my knowledge and connections to spread awareness for those who are less represented. I hope my future career also helps me advocate for them as well.
- Continue to spread awareness of this issue to the people around me and start to discuss it in my assignments if given the chance.
- Tell other people about AZ Town Hall.
- Spread awareness by informing those who need it on resources available to them that could help better their situation.
- Go out and help homeless rather than relying on government processes to do the hard work.
- Spread the word to all my peers and close family members.
- Spread awareness across my community about ways to help improve current ongoing issues
- Tell other people and spread awareness for those people and vote for people who care about these issues.
- Continue to volunteer at non-profits who are helping the community. I will continue to read and educate myself on issues & attempt to discuss these matters with any and all individuals willing to engage on different social topics.
- Share what I learned with my family, friends, and peers and continue to educate myself on these complex topics.
- Educate those around me of issues that are happening through social media and in my classes.
- Share what me and my table talked about with my family and friends.
- I will use this to complete my ASU 101 assignment and reflect.
- Learn more about it in order to find a solution to make a positive impact in our future as a society.
- Take more knowledge to these companies that take part of our everyday lives.
- Learn about other non-profit organizations that address mental health, substance use, and homelessness issues.
- Spread information and awareness about the topic I learned today with my peers in my classes
- Look for more community service opportunities and discuss what I learned with my family and friends.
- Spread awareness by informing those who need it on resources available to them that could help better their situation.
- Share what I learned with my family, friends, and peers and continue to educate myself on these complex topics.
- Inform myself of the statistical data of these issues and motivate my peers to do the same to spread awareness.
- Apply this information discussed to my internship and when working with clients who are experiencing these
 issues.
- Do my own research and educate myself more about the issues at hand.
- I will also talk about what I learned today with others because it was a topic I found interesting and important to know about.

- Educate those around me of issues that are happening through social media and in my classes.
- Raise my voice more and inspire others to create a change. Also, attend more events where I can help with mental health, substance use, and homelessness.
- Share the information that I learned with my friends and family. I would also vote for those in office who will make a difference in our state. I will educate myself more in mental illness.
- Share what me and my table talked about with my family and friends.

IN COLLABORATION WITH



Bullhead City Community Town Hall

Tuesday, November 1, 2022 **Bullhead City, AZ**









Bullhead City Community Town Hall November 1, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

Mental health, substance use, and homelessness are connected and interrelated with one challenge often, but not always, leading to, exacerbating, or causing the others.

For example, when someone experiences mental health challenges or abuses substances, they often will end up experiencing homelessness. Likewise, individual substance use, including dependency on prescribed meds, may cause mental health problems which may then cause a breakdown of familial and other support systems and lead to homelessness. Similarly, those with mental health issues may turn to substance use to cope which may then lead to homelessness. Or someone may lose their job, creating homelessness or mental health challenges.

Early challenges and trauma can also create mental health challenges which may lead to substance use as a coping mechanism.

We can stop this cycle by reducing the stigma around those experiencing these challenges, preventing the causes before they occur, and through early diagnosis and treatment, which includes teaching coping mechanisms to help people overcome these challenges.

To solve these issues, we need to address them all together looking at: mechanisms to treat special populations such as juveniles and veterans; how to better assist first responders and law enforcement in responding to mental health issues; educating providers on how best to listen to the needs of those served; and providing more mechanisms for coordinated collaboration and access to resources.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

While we can always use more resources, our community resources have vastly improved over recent years. We have many community resources, but people don't know about them or how to access them. We need to bridge communication, increase collaboration around these common issues, reduce duplicative services, and eliminate the revolving door.

We need a complete and regularly updated resource guide so that everyone knows what is available—one that includes who does what, where, and when they provide the services as well as contact information that anyone can use and access. We should also make efforts to bring resources to people where they are and reduce the barriers to people getting services (such as bringing services physical to them where they are or providing transportation to services). We also need to explore how to create systems that reduce competition among providers.

The Homeless Task Force could be used more to share information, connect different stakeholders and to bring in community volunteers and other organizations for coordinated services that reduce competition and improve services to those in need.

Peer resources are important for getting people to services they need and helping people to have consistent and regular support. We should use those with lived experience to build rapport with those in need, to lower barriers to services and to provide additional support for police, first responders, hospitals, and other providers.

Quality of life or treatment court has been a useful tool for those who deny or refuse services. It can be the impetus to begin counseling and to get services which then allows people to learn life skills, get a job and get on the right track.

To reach a broad swath of children and families in need, we need to involve our school systems. Truancy is related to many of these issues and places children at a greater risk for later experiencing mental health issue, substance use and homelessness. Working with our schools and educators can help to prevent or address these challenges at an earlier stage (including recognizing undiagnosed mental health conditions). It will also help to reduce the stigma that keeps many from seeking needed services.

We need education not only to inform educators and service providers about resources but to inform community members so that they better understand best practices and what resources may be available to assist those they encounter. This type of education and communication may also reduce issues of NIMBYism, stigma, and other barriers. Overall, we all need to listen more to each other and to those who are facing these challenges.

SETTING PRIORITIES

Six Steps to Success:

- 1. We need better communication, cooperation, and consistency.
- 2. We need better coordination of services, benefits, and resources. This includes a collective and easily accessed resource guide. It may also mean having one person who oversees updates to this resource guide and who takes other efforts to effectively coordinate collaboration. It may also come through increasing use of existing resources to better coordinate existing physical space into a hub, such as more use of the homeless shelter for related services and agencies.
- 3. Communication
 - a. To those who need services.
 - b. To reduce stigma in the community and to raise community awareness around existing resources and efforts.
 - c. To reduce silos, improve coordination and integration among providers and stakeholders.
- 4. Advocacy to our legislators to make these issues a priority at all levels which includes additional funding for needed services.
- 5. Expand the homeless task force to include mental health, substance use and domestic violence.
- 6. Improve screening within our medical community and hospitals to raise awareness to address these issues early on.
- 7. Develop our volunteer base.
- 8. Attract and retain more treatment professionals. One way to help address these needs could be to use innovations such as telehealth. We should also create more pathways and opportunities for peer support services for all ages, from youth through seniors.

- 9. Create and support more affordable housing.
- 10. Workforce integration: assistance with clothes, education, transportation, and other resources to connect people to employers.
- 11. Meet people where they are, not where we want them to be, with consistent peer support that comes to them.
- 12. Create a 10-year plan on how to address these priorities and monitor progress.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

- We want our legislators and leaders at all levels to be aware of these events and to show up with an open mind to listen and to then provide resources as needed (funding, legislation, changes to rules et) to help Be open to new and innovative ideas and allow local communities to use funding as they think best.
- Ensure resources are allocated fairly to rural areas. Provide services to veterans.
- · Reduce barriers to available grant funding.
- Expandincentives for working in rural areas (for social workers, health care workers (such as loan for giveness, etc.).
- Require training for mental health issues to teachers and others.
- Clarify and see if limitations can be place on the use or possession of marijuana on school grounds.
- Have more localized government involvement-regional funding for a hub that would house representatives of organizations who serve in these areas (akin to an emergency operations center).
- Expand the use and branding of the Homeless Task Force to other issues.
- Invest and support a shelter model for the city and then fund the integrated services under one roof to maximize effectiveness. This should include related services that connect people and reduce barriers to services, such as shelter space for animals.

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 Bullhead City Community Town Hall. Below are individual actions that were shared.

IWILL...

- Volunteer at the shelter monthly to assist with nursing tasks.
- Continue to collaborate with other agencies to upgrade resource guide.
- Continue to be the front door to services to navigate to area resources.
- Provide medical consultations at the shelter and coordinate services with local pharmacies for affordable medications to homeless clients.
- Promote adult care center.
- Support education on homelessness, drug addiction, and senior welfare issues.

- Assist local agencies getting publicized.
- Continue to be the be the "feet on the ground" for Talas Harbor Behavioral Health Hospital and other community services.
- Continue building the reentry program.
- Educate the community about social issues and community resources.
- Make sure that I am able to help whoever comes to me get the help they need.
- Volunteer where I can at the shelter and task force.
- Advocate the continuous efforts to find solutions and overcome mental health, substance use, and homelessness.
- Be part of the homeless task force and be a part of potential rebranding to address more of the issues facing us today
- Stay consistent in the reaching out of services among our communities in Mohave County.
- Retire soon but be available whenever needed!
- Do more to help!
- Talk with Jeff about attending homeless task force meetings.
- Continue to establish greater collaboration with the resource community to heighten effective responses for community need.
- Take the information other agencies shared today and share it with coworkers and others in my community to best help individuals, youths, and families in our area.
- Ask for more paper handouts for homeless teens.
- Partner up with the resources that is in our city for homeless teens.
- Work with homeless shelters through therapy and a "back to work" program for the homeless.
- Advocate for our youth and families to have red tape barriers removed so services are available to all.
- Reach out to state legislators to utilize food wisely and reasonably.
- Spread awareness though business websites about this town hall meeting and the goals for the community.
- Be a part of the solution not the problem.
- Share resource on my platforms and encourage people to share at the city council.
- Create and innovative resource list that is digital and easy to share.
- Focus on marketing to the public to educate everyone on the great resources in our community.
- Support and continue working with all community members.
- Continue to be part of the conversation.
- Continue to contact our local representatives and senator to address and fund these issues
- Urge local officials to obtain a four-year university so we can obtain local professionals for counseling, law enforcement and teachers.
- Contact: Leo Biasiucci, Sonny Borelli, Mark Kelly.

- Share information with others to spread word of available resources.
- Contact local legislators to encourage funding the homeless issue.
- Maybe become more active at a local level
- Compassionate law enforcement that connects with the community and partners with them to address the needs within a law enforcement context.
- Urge AZ leadership with help fund programs.
- Work to keep focus on local issues at state.
- · Bring resources to the community.
- Focus on local needs reality.
- Be an advocate for the programs we have and let the community know the benefits that these services provide.
- Be open to ideas and resources.
- Continue to educate myself on issues, concerns, and resources to assist with homeless, mental health, substance abuse issues, and concerns.
- Continue to work with and engage local service providers to enhance the services we provide to our community to build and support the homeless engagement system we are building within the tri-state area.
- Help inform the local community of the difference within the homeless community.
- Help change the outlook on substance abuse and mental health.
- Research more on House Bill 1376 and find curriculum on the subject.
- Commit to actively participate in the development of a digital platform for community resources, data exchange, and information exchange.
- Commit to continue to advocate to have barriers broken down to have access to grant funding and resources to be able to continue to make positive changes and behavioral health services in our rural community.
- Develop a resource guide for Mohave County with community partners.
- Help those in need, join homeless committee.
- Pass along information from this meeting.
- Volunteer at other agencies to know better what is out there.
- Put myself out there to learn more.
- Continue to educate myself and community.
- Get engaged!
- Educate others and improve our community.
- Educate service clubs.
- Ask for more volunteers and donations.
- Work with local legislators for state funding.
- Invite legislators to see how we run the coalition to show our needs and funding.

- Make sure to communicate with other local agencies and nonprofits to coordinate our efforts to work together on community projects.
- Follow up to see ow BHHS Legacy Foundation can help with the resource guide.
- Help find ways to staff clinic at Catholic Charities.
- Make sure our agency participates in the Homeless Task Force and work with the community partners in a meaningful way.
- Continue to go to the Homeless Task Force and be a voice for the residents who are tired of not being able to use the local services and dodging homeless drug addicts in the middle of the streets.

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"Exploring Solutions: Mental Health, Substance Use, and Homelessness" Presented by Arizona Town Hall and Mel & Enid Zuckerman College of Public Health

Wednesday, November 9, 2022 Tucson, AZ and Online Via Zoom







"Exploring Solutions: Mental Health, Substance Use, and Homelessness" Presented by Arizona Town Hall and Mel & Enid Zuckerman

College of Public Health
November 9, 2022 – Report of Recommendations

THE INTERSECTION OF MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

The conditions of mental health, substance use, and homelessness relate to each other in various ways. It is important to address these conditions together since they are syndemic and one cannot be solved without treating the others. As well, conditions may start in one area and lead into another. A substance use problem can cause struggling for employment, which may lead to homelessness. Mental health issues may be addressed through substance use, which then exacerbates the problem. Sustainable treatment should be holistic; otherwise, adverse trauma can snowball into poverty and affect someone throughout their life.

Having shelter is a baseline condition that must be addressed first to make it possible to address the other conditions effectively. All the conditions must be addressed comprehensively for any of them to be addressed effectively.

ADDRESSING MENTAL HEALTH, SUBSTANCE USE, AND HOMELESSNESS

There are several challenges in serving this population. Stigma attaches to mental health, substance use, and homelessness on their own. Someone suffering from all three conditions faces an insurmountable amount of stigma. The relationship between people living with these three problems has a lot do with how they interface with providers. Continuity of care is a problem. How we prepare providers to deal with this population is very important.

Foster children disproportionately end up suffering from these conditions, and we should prepare families to help foster children and children aging out of foster care. NIMBY is a factor. Many people say they want to help and may even volunteer to help, but often they do not want to have the solution in their backyard.

It may be helpful to think in terms of bite-sized solutions, instead of tossing all possible solutions at people and expecting them to navigate the system. It can be overwhelming to address multiple tasks at once when recovering from trauma and multiple issues. We should recognize that many people struggling with these conditions are reacting to the stresses of living in a complex society. We need to help people become their best selves.

Inaddressing the homeless population, we should recognize that some encampments are like communities. They should be kept together not broken up. On the other hand, people experiencing these conditions should be addressed as individuals, not as a monolithic group. We should avoid othering people when they seek treatment.

Culture is important. Homelessness in the elderly population is heartbreaking. The book Being Moral, addresses how many elderly people struggle in the U.S., whereas in other countries they would be cared for by their families. We should focus on the cultural factors behind these problems to address the causes that contribute to the problems.

In dealing with people struggling with these conditions we need to build a sense of community, trust, and self-worth. It is preferable that people want to seek help for their own purposes rather than just being handed a solution that someone else has decided upon. One program did this by offering art projects, assistance with pets, and other programs that reinforced a sense of connection and community. To address NIMBY sentiments, it might be useful to upgrade their backyard, providing nicer areas for homeless encampments, with bathroom and shower facilities, food-growing vegetation, and other amenities.

Housing should be more integrated. We need a better approach to working with tribal nations, and to address jurisdictional conflicts cooperatively. People experiencing these conditions can share their knowledge and lived experience. We should establish a one stop shop to gather resources together in one place and make it easier for people suffering these conditions, and their families, to access them.

We should bear in mind Maslow's hierarchy of needs. His pyramid indicates that basic needs must be addressed before people can hope to achieve self-actualization. We should address basic needs first, leading to community engagement, and then higher order needs.

We should use trauma-informed care techniques and treat people as individual human beings. We should also build trust through community engagement and engage them in their own recovery, for example, asking them where they would like to start in addressing their issues. We should cultivate services that communicate with each other. We need to do more to retain employees in service agencies, because high turnover disrupts the ability to serve this population and achieve warm handoffs. The "services without walls" model, with mobile officers and services, can be very effective.

SETTING PRIORITIES

To address the conditions of mental health, substance use and homelessness in an integrated way we need to learn from our mistakes and be willing to change.

We cannot criminalize our way out of homelessness. Instead, we should decriminalize homelessness. People experiencing homelessness often face trespassing charges, which may prevent them from getting housing down the road, and thus perpetuate the cycle of homelessness. The criminal justice system should be reformed to remove barriers for people who have difficulty because of these conditions and take their special circumstances into account. People respond well to kindness and empathy. People should not be punished for their status by being overcharged with multiple crimes. We should establish a consolidated misdemeanor processing system and provide for expungement of misdemeanors.

We cannot fight our way out of homelessness. More social workers and other staff are needed to provide services. This requires more funding. To attract and retain staff we need to pay them a decent wage, give them time off, and provide other employee benefits.

It is necessary to know where to go for required resources. Unfortunately, those in need first think of going to the emergency department, which may not be the best avenue to help them. We should help people struggling with these conditions and their family members to understand what resources are available.

The ethic in the US is that people should pull themselves up by their bootstraps. We need to rethink this. Instead, we should start young, building a safety net. We should emphasize prevention and early intervention. Children in schools should receive early diagnosis, and be taught coping strategies, and how to find the resources they need. There should be more access to nutritional food. Providing reimbursement to for family members that assist with care of the homeless is another way to address the problem.

We should focus more on the fact that addressing these issues is a foundation of economic development. We need more vocations training programs. Models like Homeboy Industries, a bakery that employs former gang members, and Café 54 in Tucson, which employs people with mental health conditions, are example of how companies could help this population by employing them.

We should target the stigma through education. Programs could hire ex-clients who have lived experience to work in providing treatment. We should create resource navigators, people who specialize in finding resources and bringing them back to the community.

We should remember that media is powerful. Thought provoking public service announcements could help shift the general public's concerns or fears around co-existing with various groups.

It is important that we are each an individual human being that should receive respect and empathy together with a holistic array of resources. Foster children may be homeless; providing resources such as housing, clothing, and food can help them immeasurably.

WHAT ARIZONA'S ELECTED LEADERS NEED TO KNOW

Safety and security are very important. We should establish a program with three pillars: safety and security, health care, and livelihood generation. We could possibly retrofit unused governmental properties. Give people a chance to build their own community, work to earn income, have a place to live, a place to receive treatment.

We need to approach these issues more holistically and coordinate resources and care. Communication between resources and services is a good way to start. Separate silos of resources may only be able to provide certain solutions; together, these resources can provide more holistic coverage. Several large, bureaucratic federal agencies fund and address pieces of this issue. We should rethink and retool how these agencies work together. We should mandate integrated treatment models for substance use and mental health disorders (I.e., a dual diagnosis program model).

Talking with elected officials and presenting them with actions that need to be taken is essential. Services provided for transportation may now be used for shelter. Profound strategy changes could be had through informed and engaged trainings that support respect and active listening. De-stigmatizing these conditions can help attitudes towards those in need.

The availability of housing is critical. This population needs Housing First. We should establish protected funding for Housing First, so that it is not subject to political whims and does not change. Universal health care should be a right. We should build public spaces that are more welcoming to unsheltered people. We need an environment that is not so landlord friendly. We should consider establishing rent control. There should be limitations on vacations rental, short term rentals, and the number of luxury apartments. Development should be conditions on the construction of a minimum amount of affordable housing.

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 "Exploring Solutions: Mental Health, Substance Use, and Homelessness" Community Town Hall. Below are individual actions that were shared.

IWILL...

- Not pass those that are unhoused without smiling, greeting them, and "seeing" them. I do not like the idea of folks in the community feeling invisible.
- Talk with my friends and spouse about this town hall and share some ideas I have heard.
- Address stigma and talk about these issues more openly.
- Talk to local homeless family members.
- Continue to advocate at the state and local level.
- Continue to seek design solutions within the built environment that will address these issues.
- Keep teaching classes about substance abuse.
- · Continue working in this field.
- Continue to provide outreach to individuals experiencing homelessness, mental illness, and substance use disorder by offering resources, helping them to advocate for themselves, as well as advocating for a better system to help those experiencing any of these things.
- Spread my knowledge and connect with other organizations.
- Continue to teach undergraduate students about substance use & related issues.
- Keep advocating for making this world a better place, especially for a vulnerable population.
- Continue to keep all marginalized groups in discussion. I will not stop fighting for all marginalized groups, especially those with no roof over their head.
- Continue to have conversations on these topics.
- Continue to educate others about the complexity of substance use, homelessness, and mental health.
- Share the ideas I heard today with others providing direct services in the field; always strive toward building new connections & collaborations with community partners.
- Continue to work to center the voices of people with lived experiences at the tables that I sit at.

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