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 to 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. NIMBYism 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.

In addressing 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.

**I WILL...**

- 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.