

# ***Mental Health, Substance Use, and Homelessness***

**Pima County Community Town Hall**

**October 27, 2022 – Tucson, AZ**

## **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:

1. 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. Below are individual actions that were shared.

#### ***I WILL...***

- 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.