

Behavioral Health Reform: Key Elements of Success

April 2016

Reforming the behavioral health system to ensure accessible and effective treatment is important for all Americans, to include many of those experiencing homelessness. Behavioral health problems – addictions and mental illnesses – are both a cause and a result of homelessness. Inadequate and fragmented community services, too few psychiatric hospitals and long-term addiction treatment capacity, lack of stable housing and support services, and widespread stigma surrounding these issues are common barriers for those living with these conditions. Untreated addictions and mental illnesses present serious barriers to employment, education, and housing, and perpetuate a costly cycle of incarceration, poverty, poor physical health, and continued homelessness.

A successful reform of the behavioral health care system must address the following elements:

1. Reduce Barriers to Care

- Increase community capacity for treatment by investing in greater numbers of health care providers, community health workers and peer-support specialists;
- Tie insurance reimbursements to evidence-based practices, such as Assertive Community Treatment, housing tenancy supports, trauma-informed care, and integrated care models;
- Make greater investments in existing grant-funded programs through HRSA and SAMHSA to fill gaps in insurance-based systems;
- Support a patient's right to privacy, and focus treatments on models that use harm reduction and motivational interviewing approaches rather than forced or involuntary treatment;
- Decrease barriers for providers in prescribing Medication Assisted Treatment (MAT) for substance use disorders.

2. Treat Addiction and Mental Illness as a Disease, not a Crime

- Train law enforcement and first responders to recognize behavioral health problems and de-escalate situations verbally rather than use force or violence;
- Provide Crisis Intervention Team (CIT) training to all law enforcement personnel;
- Divert people with mental health or substance use disorders to treatment rather than jail;
- Invest in evidence based practice treatment programs such as crisis and detoxification centers rather than jail or prison;

- Include mental health professionals as part of mental health crisis response teams;
- Ensure continuity of behavioral health care (including medications) throughout the processes of incarceration and discharge from jails and prisons.

3. Link Services to Housing

- Recognize that stable housing is essential for recovery and engagement in care, invest in a wide continuum of housing programs, to include Permanent Supportive Housing (PSH) and Recovery Housing;
- Ensure the availability of affordable housing by investing in production programs like the National Housing Trust Fund;
- Ensure housing support services, case management and care coordination services are consistently available as part of standard support packages;
- Discharge patients directly to housing when they leave hospitals, jails/prisons, treatment centers, and other institutions;
- Increase funding for evidence-based support programs, including SSI/SSDI Outreach, Access, and Recovery (SOAR) and supported employment.

4. Eliminate Stigma

- Dispel the myth that those with mental illnesses are violent;
- Teach the public that addiction is a disease, not a personal failing;
- Educate the community to appropriately respond when family, friends and neighbors are struggling with behavioral health issues.

"Inadequate treatment of serious mental illness and/or chemical dependency often precipitates and perpetuates homelessness." -Matias Vega, MD

For more information, contact Matt Warfield, Health Policy Organizer, at 443/703-1337 or at mwarfield@nhchc.org.