HOMELESSNESS, HEALTH CARE, & PUBLIC SAFETY

WHEN EVERYONE BENEFITS
Exploring the Roles of Health Care Providers in Law Enforcement Reform, Crisis Assistance, and Public Policy on Unsheltered Homelessness

A VIRTUAL SYMPOSIUM | APRIL 6, 2022
Why we are here

When Everyone Benefits: Exploring the Roles of Health Care Providers in Law Enforcement Reform, Crisis Assistance, and Public Policy on Unsheltered Homelessness is an admittedly loquacious title (concision was never my strength). It reflects the reality that the solutions we seek exist at the intersection of many, complex crises, including: the rise in unsheltered homelessness and proliferation of encampments; the heightened attention to police violence amid movements for racial justice; an opioid epidemic and failed war on drugs; the propensity of jurisdictions to criminalize life-sustaining activities for people without homes; and the persistence of suicidality and the systems change on the horizon with 988.

Despite the enormity of these crises, some programs do benefit all systems alluded to in the previous list, namely CAHOOTS: Crisis Assistance Helping Out on the Streets. CAHOOTS is operated by White Bird Clinic, a Health Care for the Homeless health center in Lane County, Oregon. While thirty years old, the 2020 uprisings put CAHOOTS in the spotlight, garnering the attention of media from Health Affairs to The Daily Show. White Bird Clinic also spoke at the 2021 National Health Care for the Homeless Conference, an extremely popular session. We want more CAHOOTS in the world.

We also know that this issue necessarily affects multiple institutions and systems in any community, and we must convey the diversity of perspectives, so we brought in two key partners: the Street Medicine Institute, which is a global force for medical outreach to unsheltered people, and the National Homelessness Law Center, the experts on the criminalization of homelessness. Through our collaboration, and within the confines of a half-day event comprising eight workshops, we hope to address a variety of sectors in pursuit of non-punitve responses to homelessness. However contentious this issue may be, we believe solutions exist that truly benefit everyone in our journey toward a world that is just and without homelessness. Thank you for joining us.

In solidarity,

Michael Durham
Community Engagement Manager
National Health Care for the Homeless Council
# AGENDA

<table>
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<tr>
<th>Time (All Times Eastern)</th>
<th>Session</th>
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<tr>
<td>12:00-12:30 (30 mins.)</td>
<td>Opening Plenary with Remarks by:</td>
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<td>• Bobby Watts</td>
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<td>• Antonia Fasanelli</td>
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<td>• Jim Withers</td>
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<td>Concurrent Workshops 1</td>
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<td>1:45-1:50 (5 mins.)</td>
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<td>1:50-3:05 (75 mins.)</td>
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<td>3:05-3:20 (15 mins.)</td>
<td>“Open Mic”</td>
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<td>3:20-3:30 (10 mins.)</td>
<td>Closing Plenary</td>
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## ZOOM ETIQUETTE

This Symposium is a Zoom meeting, just like the dozens of meetings you have likely attended this month, except it is large. We welcome the interaction Zoom meetings enable, but recognize their drawbacks. To help ensure a smooth experience for all, please actively and respectfully engage in the chat box during all sessions, but limit your time unmuted to specified moments in the agenda. You have the power to unmute, but event staff will re-mute you if necessary. A single link (the one emailed to you when you registered) will be used for the whole event.

Workshops will take place via Zoom breakout rooms, so please familiarize yourself with those and ensure you have installed the latest updates.

Since we span all US time zones, the agenda has no extended break for mealtimes and just one five-minute intermission. Please take care of your bodies as needed.
**WORKSHOP DESCRIPTIONS**

**1A: CRISIS ASSISTANCE + HOMELESSNESS: LESSONS FROM DENVER’S STAR PROGRAM**

Inspired by the well-known CAHOOTS program in Oregon, Support Team Assisted Response (STAR) deploys teams of behavioral health clinicians and emergency medical technicians without police presence to respond to people experiencing homelessness related to behavioral health crises. Routed through 911, STAR is situated in Denver’s Community and Behavioral Health department, working closely with Denver PD and community partners. Join this session to learn from a successful non-police crisis response model.

- Chris Richardson | Mental Health Center of Denver | Denver, CO
- Roshan Bliss | Organizer and Consultant | Denver, CO

**1B: COPING WITH MORAL INJURY AMID SYSTEMIC INJUSTICE**

More often than not, street medicine and Health Care for the Homeless providers are driven by compassion and justice for people without homes. We recognize the humanity in people society has discarded. In the wake of the murder of George Floyd—who had experienced homelessness himself and had worked for the local Salvation Army—communities reflected on how movements to divest in law enforcement affected the homelessness response sector, including how institutional racism permeates our organizations. In some case, we also witnessed dehumanization of people in law enforcement. Join this session for an interactive discussion on the weight of serving people without homes as we struggle with systemic injustice and increasing polarization.

- Corinne Feldman | USC Keck School of Medicine | Los Angeles, CA

**1C: HEALTH CARE PROVIDERS AS EXPERT WITNESSES**

A key tool in the movement to end homelessness is litigation, challenging the laws that criminalize homelessness in the first place. Health care providers can support these efforts as expert witnesses. Join this session to explore the role of health care organizations and professionals in litigation.

- Tristia Bauman | National Homelessness Law Center | Washington, DC
- Liz Frye | Allegheny Health Network, Street Medicine Institute | Pittsburgh, PA

**1D: SOBERING CENTERS AT THE INTERSECTION OF HOMELESSNESS AND POLICING**

Sobering centers address a common reason people experiencing homelessness interact with law enforcement: public intoxication. Join this session to learn how sobering centers can and do provide an alternative to incarceration for those experiencing acute intoxication.

- Shannon Smith-Bernardin | National Sobering Collaborative | San Francisco, CA
- Suzanne Jarvis | Houston Recovery Center | Houston, TX
- James Dunford, Marcos Estrada | San Diego McAlister Sobering Services Center | San Diego, CA
2A: CRISIS ASSISTANCE + HOMELESSNESS II: ALTERNATIVE RESPONSE MODELS
A co-responder model, Chicago’s CARE pilot (Crisis Assistance Response and Engagement) is embedded in the Public Health department serving two districts, for now. Response teams include a CIT-trained officer, paramedic, and clinician. In Pittsburgh, a new alternative to police response called ROOTS exists in a private health system and has promising outcomes so far. Join this session to learn more about these options for crisis assistance and how they interact with local health centers, street medicine providers, and other homeless services nonprofits. Bring your own experience with crisis assistance programs to the discussion.

- TIFFANY PATTON-BURNSIDE | CHICAGO DEPARTMENT OF PUBLIC HEALTH | CHICAGO, IL
- DANIEL PALKA | ALLEGHENY HEALTH NETWORK | PITTSBURGH, PA

2B: CRIMINALIZATION OF YOUTH: THE DISTINCT EXPERIENCES OF UNHOUSED YOUNG PEOPLE
The criminalization of homelessness harms anyone who lives without housing, but distinct laws punish youth, such as laws against running away, breaking curfew, or truancy. In interview style, Erika and Gabriela will share the plight of youth experiencing homelessness, trauma, and policing. They will share findings from the annual State Index on Youth Homelessness and provide examples of how folks can advocate and hold people accountable to prevent unnecessary trauma for homeless youth.

- GABRIELA SEVILLA | NATIONAL HOMELESSNESS LAW CENTER | BALTIMORE, MD
- ERIKA ENDRES | NATIONAL HOMELESSNESS LAW CENTER | TROY, NY

2C: STREET MEDICINE + LAW ENFORCEMENT PARTNERSHIPS: LESSONS ON IMPROVING SERVICES FOR PEOPLE LIVING UNSHELTERED
Street medicine programs “go to the people,” providing care outside the walls of the clinic directly where clients reside. These environments, in turn, are also where people living outdoors often interact with the police. Coordination with these agencies, then, is crucial. Join this session to learn from two communities—Madison, Wisconsin and Los Angeles, CA—on how their local street medicine programs are navigating relationships with law enforcement, including the perspective of someone who endured difficult interactions with police while experiencing homelessness who now partners with them as a community health worker.

- BRETT FELDMAN, JOSEPH BECERRA | USC KECK SCHOOL OF MEDICINE | LOS ANGELES, CA
- DAVID DECI, DOUG KIRK: MADISON STREET MEDICINE | MEG HAMILTON, TOM COYNE, MATT TYE: MADISON POLICE DEPARTMENT | MADISON, WI

2D: A PUBLIC HEALTH APPROACH TO ENCAMPMENTS
As with homelessness in general, encampments proliferate across the U.S. These camps can be a safer alternative to living isolated on the streets and even in crowded shelters. The CDC recognized the harms of clearing encampments during the pandemic, and some communities are moving from merely permitting encampments to explicitly sanctioning them. But it is far from straightforward. Join this session to dive into the nuance, including the dangers of “sweeps,” the risks of authorized camps, and pursuing the healthiest options.

- JADE ARELLANO | WESTERN REGIONAL ADVOCACY PROJECT | SAN FRANCISCO, CA
- JESSIE GAETA, MELANIE RACINE | BOSTON HEALTH CARE FOR THE HOMELESS PROGRAM | BOSTON, MA
Attend the National Health Care for the Homeless Conference + Policy Symposium: 

Register here

Join a learning collaborative on developing CAHOOTS-like programs:

Apply here

Save the date for the 2022 International Street Medicine Symposium

September 21-24 in Toronto, Canada

HCH 2022
Toward Health & Belonging

Seattle, WA
May 10-13
RECOMMENDED READING

NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL RESOURCE PAGES

• Outreach resource page
• Racial equity resource page
• Incarceration and homelessness resource page

CRISIS RESPONSE MODELS AND ALTERNATIVES TO POLICING

• CAHOOTS article in Health Affairs
• CAHOOTS Media guide
• Cops, Clinicians, or Both? Collaborative Approaches to Responding to Behavioral Health Emergencies
• Alternative Mobile Services Association
• Defundthepolice.org
• Behavioral Health Crises Alternatives
• Community Responder Model
• Interrupting Criminalization
• SAMHSA report on safe policing
• Mapping Police Violence
• Beyond Jails: Community-Based Strategies for Public Safety
• A Model for Defunding: An Evidence-Based Statute for Behavioral Health Crisis Response
• Crisis Intervention Team (CIT) Programs: A Best Practice Guide for Transforming Community Responses to Mental Health Crises
• How Should Street Medicine Clinicians Interact with Law Enforcement?

CRIMINALIZATION

• Housing Not Handcuffs
• Policing- and Punishment-based Approaches: A really expensive way to make homelessness worse
• Sanctioned Encampments Position Paper by WRAP
• Homeless Bill of Rights

THANK YOU!

Cover photo by Metin Ozer

HRSA DISCLAIMER

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Continuing Education Information

Learner Notification

National Health Care for the Homeless Council (NHCHC)
When Everyone Benefits: Exploring the Roles of Health Care Providers in Law Enforcement Reform, Crisis Assistance, and Public Policy on Unsheltered Homelessness
April 6, 2022
Online

Acknowledgement of Financial Commercial Support
No financial commercial support was received for this educational activity.

Acknowledgement of In-Kind Commercial Support
No in-kind commercial support was received for this educational activity.

Satisfactory Completion
Learners must complete an evaluation form to receive a certificate of completion. Your chosen sessions must be attended in their entirety. Partial credit of individual sessions is not available. If you are seeking continuing education credit for a specialty not listed below, it is your responsibility to contact your licensing/certification board to determine course eligibility for your licensing/certification requirement.

Accreditation Statement
In support of improving patient care, this activity has been planned and implemented by Amedco LLC and National Health Care for the Homeless Council. Amedco LLC is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

Physicians (ACCME) Credit Designation
Amedco LLC designates this live activity for a maximum of 2.50 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Nurses (ANCC) Credit Designation
Amedco LLC designates this activity for a maximum of 2.50 ANCC contact hours.

Social Workers (ASWB) Credit Designation
As a Jointly Accredited Organization, Amedco is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. Amedco maintains responsibility for this course. Social Workers completing this course receive 2.50 GENERAL continuing education credits.

The following state boards accept courses offering ASWB ACE credit for Social Workers: AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NC, ND, NE, NH, NM, NV, OH, OK*, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WI, WV*, WY
* WV accepts ASWB ACE unless activity is live in West Virginia, an application is required.

The following state boards accept courses offering ASWB ACE credit for Counselors: AK, AR, AZ, CA, CO, CT, DC, FL, GA, IA, ID, IL, IN, KS, MA, MD, ME, MO, ND, NE, NM, NH, NV, OK*, OR, PA, TN, TX, UT, VA, WI, WY

AL/Counselors: Activities not providing NBCC approval may be approved by the Board for individual licensees upon receipt of acceptable documentation prior to the activity. Please send course details to your licensing board for approval BEFORE the event. No approvals afterward by the board.

MI: No CE requirement

The following state boards accept courses offering ASWB ACE credit for MFTs: AK, AR, AZ, CA, CO, FL, IA, ID, IN, KS, MD, ME, MO, NC, NE, NH, NM, NV, OK*, OR, PA, RI, TN, TX, UT, VA, WI, WY

MA / MFTs: Participants can self-submit courses not approved by the MAMFT board for review.

MI: No CE requirement

* OK accepts ASWB ACE for live, in-person activities. For all ethics and/or online courses, an application is required.

The following state boards accept courses offering ASWB ACE credit for Addictions Professionals: AK, CA, CO, CT, GA, IA, IN, KS, LA, MO, MT, ND, NM, NV, OK, OR, SC, WA, WI, WV, WY
Continuing Education Information

New York Board for Social Workers (NY SW)
Amedco SW CPE is recognized by the New York State Education Department’s State Board for Social Work as an approved provider of continuing education for licensed social workers #0115. 2.50 hours.

Objectives - After Attending This Program You Should Be Able To

- Understand the criminalization of homelessness and how it relates to health care providers.
- Describe non-police crisis assistance models.
- Describe the most important aspects of street medicine partnerships with law enforcement.

Disclosure of Conflict of Interest

The following table of disclosure information is provided to learners and contains the relevant financial relationships that each individual in a position to control the content disclosed to Amedco. All of these relationships were treated as a conflict of interest, and have been resolved. (C7 SCS 6.1-6.2, 6.5)

All individuals in a position to control the content of CE are listed below.

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