

Treatment of Individuals who are experiencing Mental Health, Chemical Dependency, and Homelessness:

Nationally recognized Behavioral Health Continuum of Care. This consists of different kinds of supports to help people at different stages of their mental health journey.

Men, women, youth, and families living with mental health, or substance use challenges may need treatment, case management, stabilization, various housing options and discharge planning in addition to financial support (e.g., employment assistance, Housing First programs, targeted rental/housing subsidies) to avoid or escape perpetuating cycles. Being homeless, suffering from chronic mental illness, or chemical dependency, no matter how long it lasts, are life-altering traumatic events that creates major stress in any person's life, regardless of age. Housing and shelter programs can help address the root causes of homelessness through a range of essential recovery support services, including mental health and substance use disorder treatment, employment, and mainstream benefits. Types of housing and shelter programs include:

- **Emergency shelters** are often where people experiencing economic shock first turn for support through a wide range of services.
- **Transitional housing** typically involves a temporary residence of up to 24 months with wrap-around services to help people stabilize their lives.
- **Permanent supportive housing** offers safe and stable housing environments with voluntary and flexible supports and services to help people manage serious, chronic issue such as mental and substance use disorders.

Providing permanent supportive housing on a housing first basis—without requiring transitional steps or demonstrated sobriety—is effective for people experiencing chronic homelessness. People with a serious mental illness, substance use disorder, or co-occurring mental and substance use disorder have demonstrated similar or better housing stability and substance use, compared to those placed in housing with pre-requisites.

- **Discharge planning** for people released from institutional care (e.g., hospitals, psychiatric care, substance abuse treatment centers, foster care, military service, jail, prison).
- **Case management** that focuses on determining clients' needs for housing assistance, mental health, or chemical dependency supports. Helping them find and get housing, and securing other resources needed to maintain housing stability (e.g., health insurance, childcare services, medical treatment, psychological services, food, clothing).
- **Stabilization** means a place where psychiatric evaluations can be administered, and medication can be prescribed to bring an individual out of crisis and into a stabilized state. This includes discharge planning after sufficient monitoring anywhere from a week to 90 days, depending on the need. The discharge planning includes adequate housing options as mentioned above and follow ups with providers (ease of access so all transportation has been addressed) such as psychiatrist who will continue the care that helps maintain the stabilization.