

How do you talk in the community about the issues of substance use and mental health challenges regarding our homelessness crisis?

Group Discussion Summary • Tacoma Pierce County Coalition to End Homelessness • 5.20.22

"It's a credibility issue. The community sees mental health and substance abuse stuff on the street, and we don't want to talk about that because its stigmatizing, so we say the solution is housing, housing, housing, and they're looking at us like, 'How can they be so close to this and so out of touch with the obvious.'"

On working with people in distress

- We don't know what to say to those who are in obvious mental distress, and we don't know how to address the problem.
- It takes time to build trust with people. Don't go in talking first – feed them, clothe them, try to house them first before talking about substance use. You have to give people what they need first before you can talk to them.
- Our work is to put people in the position of entertaining the choices that they have. Really listening is at the core of effectively helping.
- Use trauma informed care approach and honor autonomy when speaking to clients.
- Use motivational interviewing techniques and harm reduction practices. Also utilize outreach information sheets.
- Patience and understanding when dealing with homeless that may have mental health issues. Build trust. They may not even recognize they have mental health issues.

Frustration with damaging stereotypes and approaches that create harm

- Issues with the sweeps – those impacted lose everything in the sweeps (ID, SS card, etc.) – which then takes them longer to be housed. Adds more harm.
- There is an assumption that unhoused are on drugs or mentally ill, but not actually as high a percentage as people think (lots of reasons people are unhoused).
- What happened to do no harm? Sweeps create more trauma, increasing likelihood of drug use.
- Relationship between healthcare and homeless – 48 years life expectancy for homeless individual. "If I were in their place, I would be getting high too."
- Housing first – people deserve housing! Homeless dogs are housed and fed! Need to see more permanent housing – not just shelter.
- More transitional housing, more money for tiny homes/ADUs. As homelessness increases (individuals and families) – we cannot keep moving them every few days. Rent control!

Thoughts on public communication

- Need to inform people who don't have an understanding of how challenging homelessness is (thinking they are just lazy).

- We have a societal expectation that homeless people engage in self-improvement and quit drugs cold turkey. It's not a reasonable expectation. These people are concerned about getting enough food and water, staying safe, shelter, etc.
- There's a chicken and egg problem with regard to homelessness and mental health issues. A lot of people assume drug abuse and mental health issues are the cause of homelessness, but in many cases, drug abuse and mental health are just a symptom.
- We need to address the issues of homelessness and mental health issues instead of shaming or blaming people for it.
- People needs and stories are complicated and can't be reduced to simple categories. Need to share stories and get better at crafting messages so as to better control the narrative.
- Need to get better at enlisting support of broader community to help.
- Should communicate that stability is required to address addiction. Addiction is just a piece of the "cascade of problems" people are dealing with.
- An ounce of prevention is worth a pound of cure. It seems like most resources go to trying to help those who are already addicted. We're perhaps not focusing enough on prevention. If we provide people with more opportunities, more education, and more support in the first place, they may never resort to drugs or experience mental health issues in the first place. Lack of support is, perhaps the root cause of both homelessness and drug abuse.
- Need more training and education about mental health issues! For example, how it affects the brain and how typical conclusions about behavior and motivations are not appropriate or helpful.
- Support for Housing First. People need to be stable enough to benefit from mental health services, and this can be "a very long walk."

Recommended Books

***The Least of Us: True Tales of America and Hope in the Time of Fentanyl and Meth*, by Sam Quinones.** Guardian interview: <https://www.theguardian.com/society/2022/jan/22/fentanyl-methamphetamine-drugs-epidemic-us>

***I Am Not Sick, I Don't Need Help: How to Help Someone with Mental Illness Accept Treatment*, by Xavier Amador.** PDF available on NAMI website, https://www.nami.org/getattachment/Learn-More/Mental-Health-Conditions/Related-Conditions/Anosognosia/I_am_not_sick_excerpt.pdf?lang=en-US