

Behavioral Health and Homelessness County Survey Data

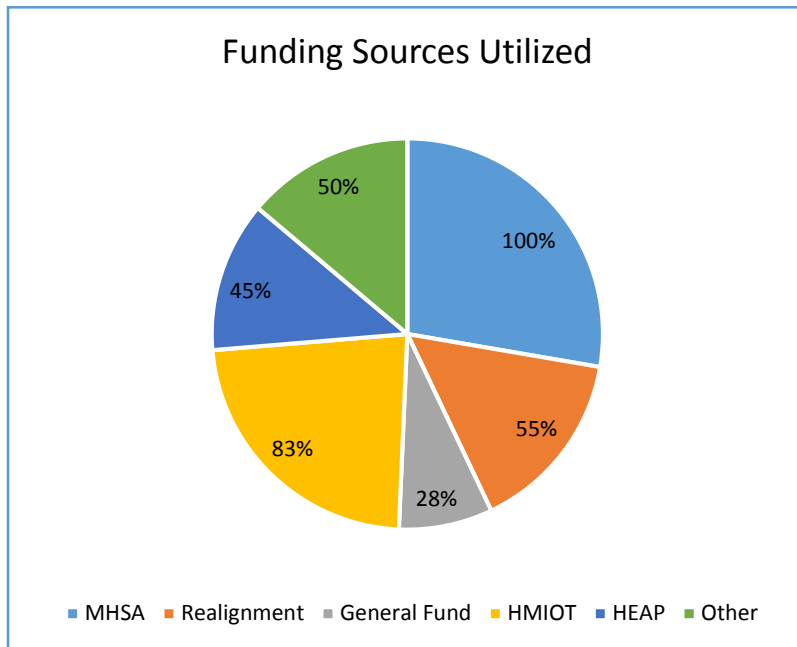
Background: Behavioral Health Directors from 17 counties responded to a survey in August 2019 from the California Behavioral Health Directors Association (CBHDA). The survey was designed to help understand where counties stand with behavioral health services for homeless individuals, funding, and policy recommendations. The following summarizes survey results.

1. What programs or services do you currently offer for individuals experiencing homelessness with serious mental health conditions?

- 72% Provide Full Service Partnership/Assertive Community Treatment
- 94% Offer outreach services
- 39% Offer street medicine

Other services provided by county behavioral health include: Permanent supportive housing, emergency housing intensive case management, peer navigation, crisis intervention team, field assessments, psychiatric evaluation center, Home Safe Program, Assisted Outpatient Treatment (AOT), Homeless and Mentally Ill Outreach and Treatment (HMIOT).

2. How are these programs or services funded (multiple responses allowed)?



Other: Mental Health Block Grant, SAMHSA's Projects for Assistance in Transition from Homelessness (PATH), General Assistance, Proposition 47, AB 109, California Emergency Solutions and Housing (CESH), Veterans Affairs funding, Housing authority funding, Family Stabilization, No Child Left Unsheltered, No Place Like Home, Housing Vouchers (Section 8), Substance Abuse Prevention and Treatment Block Grant (SAPT), Whole Person Care.

3. Are there funding gaps that make it difficult to provide effective services for individuals experiencing homelessness with serious mental illness?

- Unbillable services to Medi-Cal
- Lack of funding for housing
- Limited funding for outreach
- Limited funding for case management
- Funding does not braid well for services and housing
- Lack of affordable housing

4. Recommended policy solutions for individuals experiencing homelessness and struggling with behavioral health issues specifically related to housing:

- Reducing regulatory barriers in funding streams for physical, mental health, and substance use disorder services to reduce siloed funding.
- Requiring cities to obtain a certain percentage of housing locally as mixed affordable housing.
- Increasing Social Security Income rates for individuals.
- Incentivizing landlords to offer more no/low barrier affordable housing.
- Additional funds for permanent supportive housing units.
- Flexibility for development of shared housing.
- Less arduous documentation requirements for services.
- Article 34 of the California Constitution.