

MHDCJS Housing Subcommittee Policy and Legislative Platform

Vision

There is no aspect of a community more ever changing than housing, and no more fundamental in addressing inequity than housing. To have and ensure whole-person care, housing is critical to the wellbeing of individuals and/or family. In order to successfully have and to treat behavioral health, safe, stable, and secure housing with supportive services MUST be part of the entire process and approach in light of all social determinants.

Subcommittee Composition: The Housing Subcommittee is a group cross-sector and interdisciplinary stakeholders committed to understanding the challenges at the intersection of behavioral health, criminal justice, and housing and to developing policy and legislative solutions for communities experiencing these challenges across Colorado. The Subcommittee is a part of the broader Taskforce Concerning Treatment of Persons with Mental Health Disorders in the Criminal & Juvenile Justice Systems (MHDCJS) Task Force and ultimately reports to and advises its legislative MHDCJS Oversight Committee.

Policy and Legislative Platform: In order to address challenges at the intersection of behavioral health, criminal justice, and housing, the Subcommittee advocates for the following tenets and activities that are consistent with evidence-based research when developing relevant policy and legislative solutions:

1. Behavioral health whole person care starts through a lens of housing first in light of the person's social determinants;
2. Broaden the continuum of housing options from step down hospital care, to highly structured therapeutic communities, to bridge housing, to family re-integration, to rapid rehousing, to permanent supportive housing;
3. Provide and improve supportive services along the entire housing continuum, matching needs that meets the specific acuity allowing for a longer period of time for recovery to then transition into permanent supportive housing;
4. Develop and improve cross-systems data sharing and assessment tools that effectively and holistically identify needs, remove bias and discrimination, and ensure appropriate placement and access to the whole housing continuum;
5. Increase provider capacity for supportive housing and supportive services across the state; and
6. Develop measurable outcomes that are informed by local and national evidence and that help guide resource and funding allocation across the aforementioned recommendations.

Value Statements: The Subcommittee's policy and legislative platform was developed based on the following value assumptions and statements:

1. Homelessness is intrinsically linked to sustained deterioration of wellbeing, specifically behavioral health.
2. The criminal justice system should not be the default system for individuals living with behavioral health issues.

3. Housing interventions and solutions must be holistic, culturally responsive, and person specific with the elimination of bias and discrimination, must delivered at the right time and the right place, and must foster community strengths.
4. Housing interventions and solutions often require a combination of housing, supportive services, and tenancy supportive services.
5. Housing must match the need that meets the specific acuity including long term therapeutic model that then transitions into permanent supportive housing.
6. Interventions and solutions for with people experiencing crises must occur before they show up at shelter doors or institutions.
7. Cross-system data, particularly on the lived experience of different racial groups, is essential to developing and implementing effective and scalable housing solutions.

Definitions: Below are critical terms and respective definitions when the Subcommittee discusses the challenges and solutions at the intersection of behavioral health, criminal justice, and housing.

1. **Housing:** Any stable physical building that provides shelter to individuals at risk to homelessness or housing instability. Housing consists of a continuum from hospitals to bridge housing to permanent supportive housing.
2. **Supportive services:** Any behavioral or physical health services that help ensure an individual can remained housing by helping treat an individuals' underlining health concerns. These can include but are not limited assertive community treatment, intensive case management, vocational supports, peer supports, and rehabilitative services. Provider capacity and reimbursement to address these services is essential.
3. **Tenancy supportive services:** Any service that helps coordinate the logistics of an individual's housing arrangement and, thus, ensures they are able to secure and retain stable housing. These include but are not limited to in-reach, outreach, housing search, counseling, engagement, landlord education, and other ongoing supports.