

Mental illness, substance use, unstable housing and healthcare

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A photograph of a medical team in an operating room. Several healthcare providers, including nurses and doctors, are gathered around a patient on an operating table. The room is equipped with medical monitors, a large overhead light, and various pieces of medical equipment. The providers are dressed in blue scrubs and caps, with some wearing blue gowns and gloves. The scene depicts a typical high-stakes medical procedure.

No Disclosures

What do you
see in this
picture?



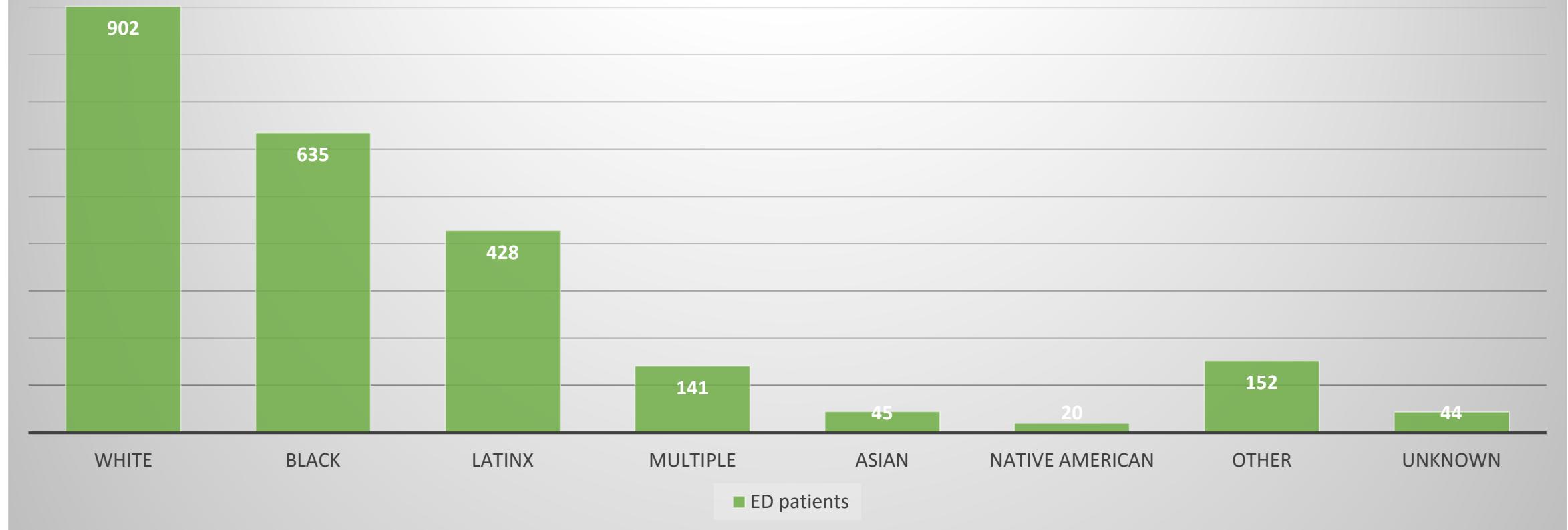
What we are going to focus on today...

- Population of people with unmet healthcare and social needs
- How the current system is designed to fail
- Finding a way out.

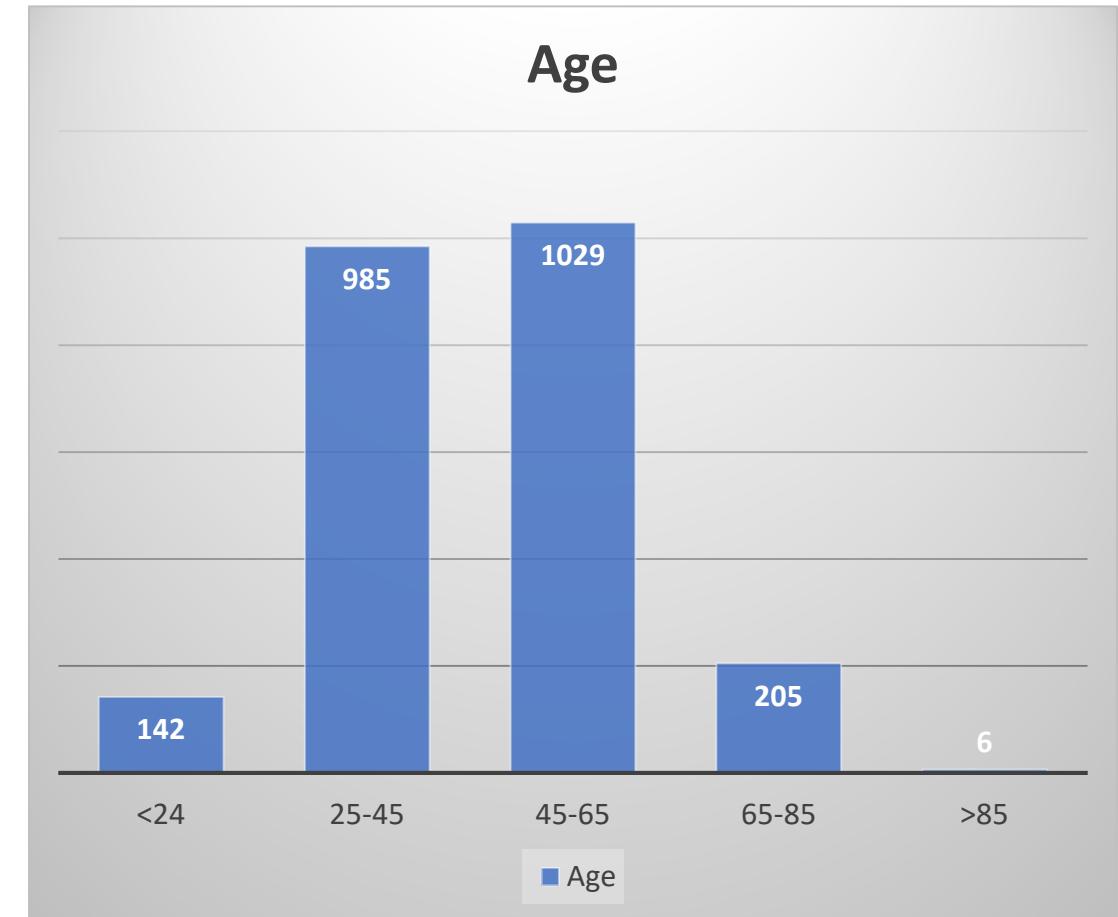
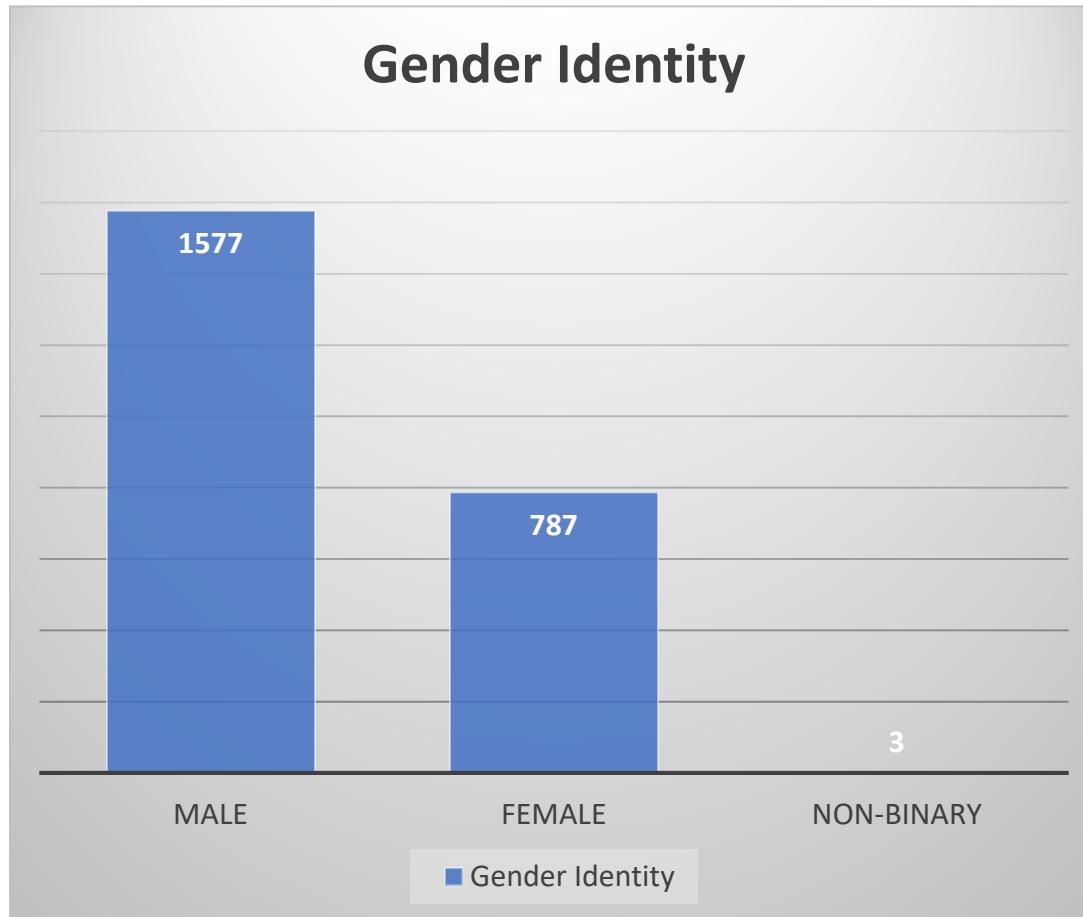


Self-Identified Un-Housed Race/Ethnicity

UC Davis Emergency Department 2022

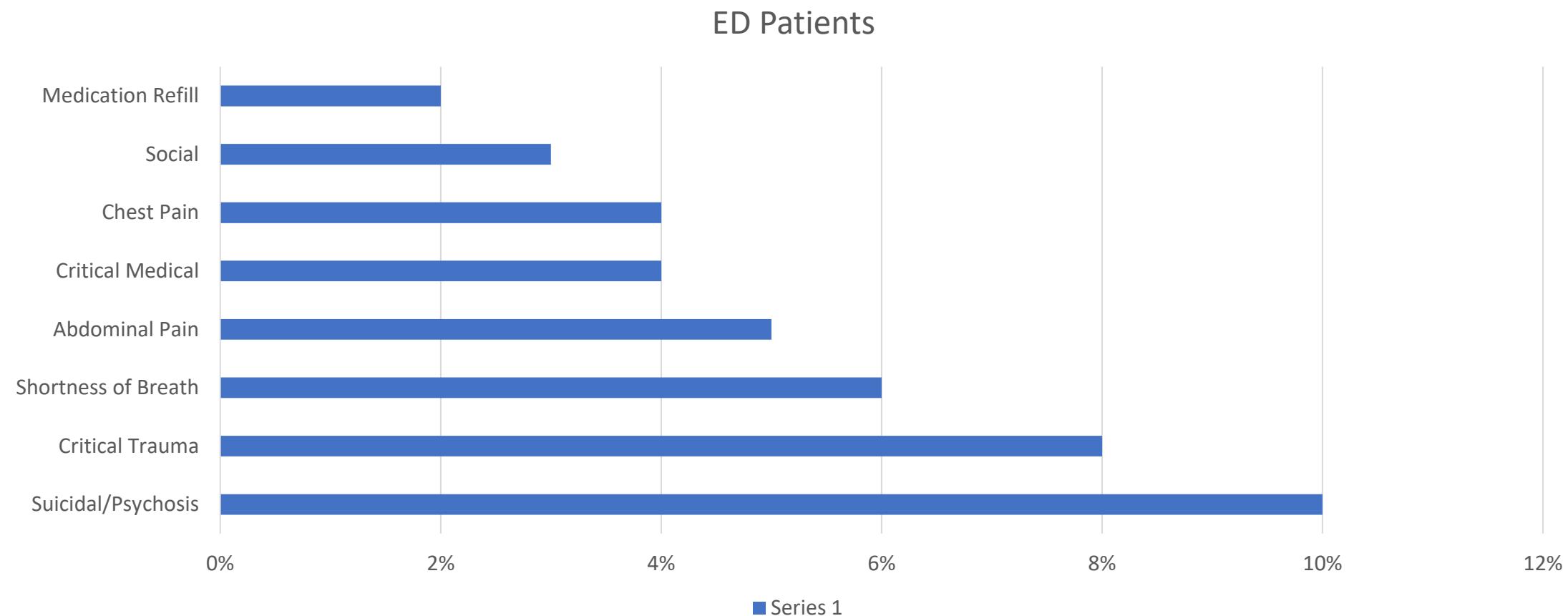


Self-Identified Un-Housed Age & Gender





Top Ten Chief Complaints



Unstable housing and healthcare needs

- 49% Substance use
- 38% Depression
- 36% Alcohol use
- 29% Psychosis
- 28% Hypertension

- Madigan et al. Healthcare Utilization of Individuals Affected by Homelessness II 2011-2018 Med Care 2022



Overdose is the leading cause of death

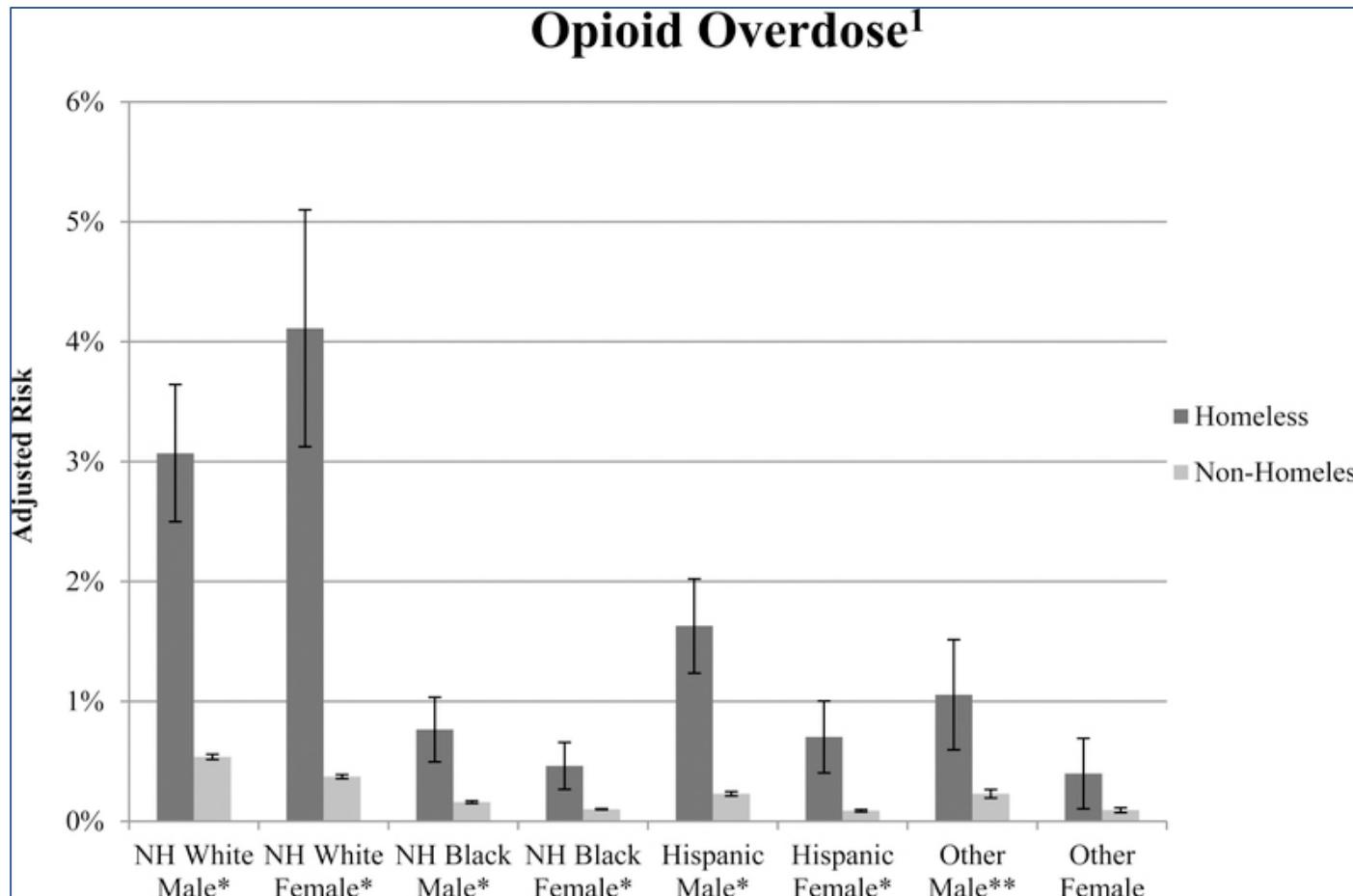


Figure 1. Adjusted risk of opioid overdose for homeless compared to low-income housed patients, by Sex and Race/ethnicity *NH* = Non-Hispanic

Yamamoto A, et al Association Between Homelessness and Opioid OD and Opioid-Related Hospital admissions/ED visits Soc Sci Med Dec 2019

Multi-visit patients 4+ visits in three months

- 10% of un-housed patients vs 1% of housed patients
- 19% of un-housed patients with mental illness
- 39% of un-housed patients with substance use

Substances Used

- Stimulants 61%
- Alcohol 46%
- Opioids 20%



Does the discharge plan work here?



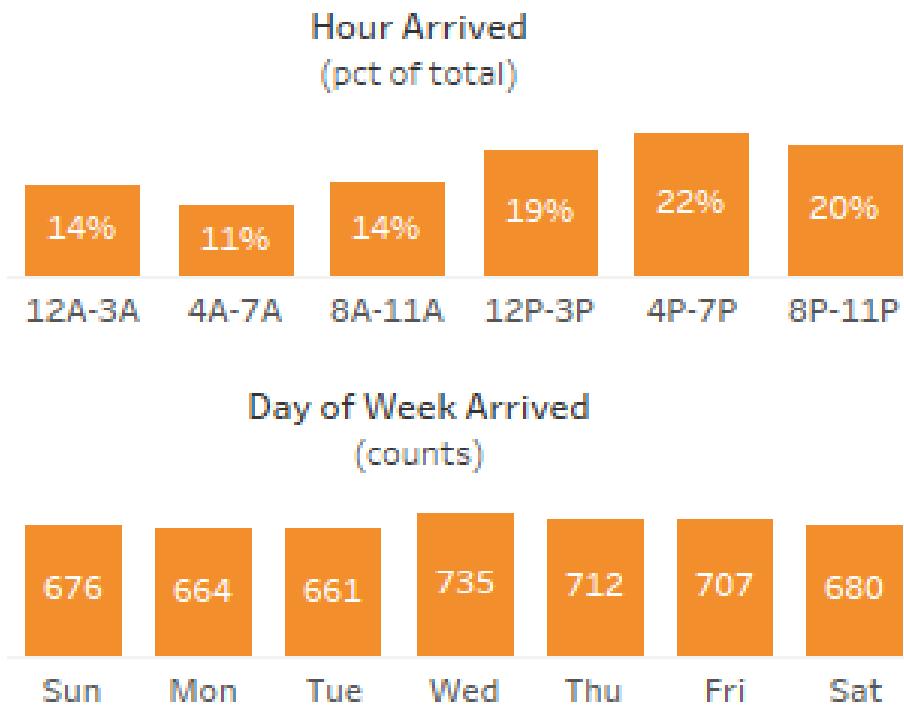
The current system is designed to fail....

- Long wait times
- Transportation barriers
- Insurance authorization
- Restrictive paternalistic treatment models
- Dis-jointed, siloed care



Logistics...

67% after-hours, 28% weekends



Substance Use Navigators: OPENING DOORS TO TREATMENT

Support patients transition to treatment

Assist patients with treatment resources, help with housing/placement and transportation

Harm Reduction

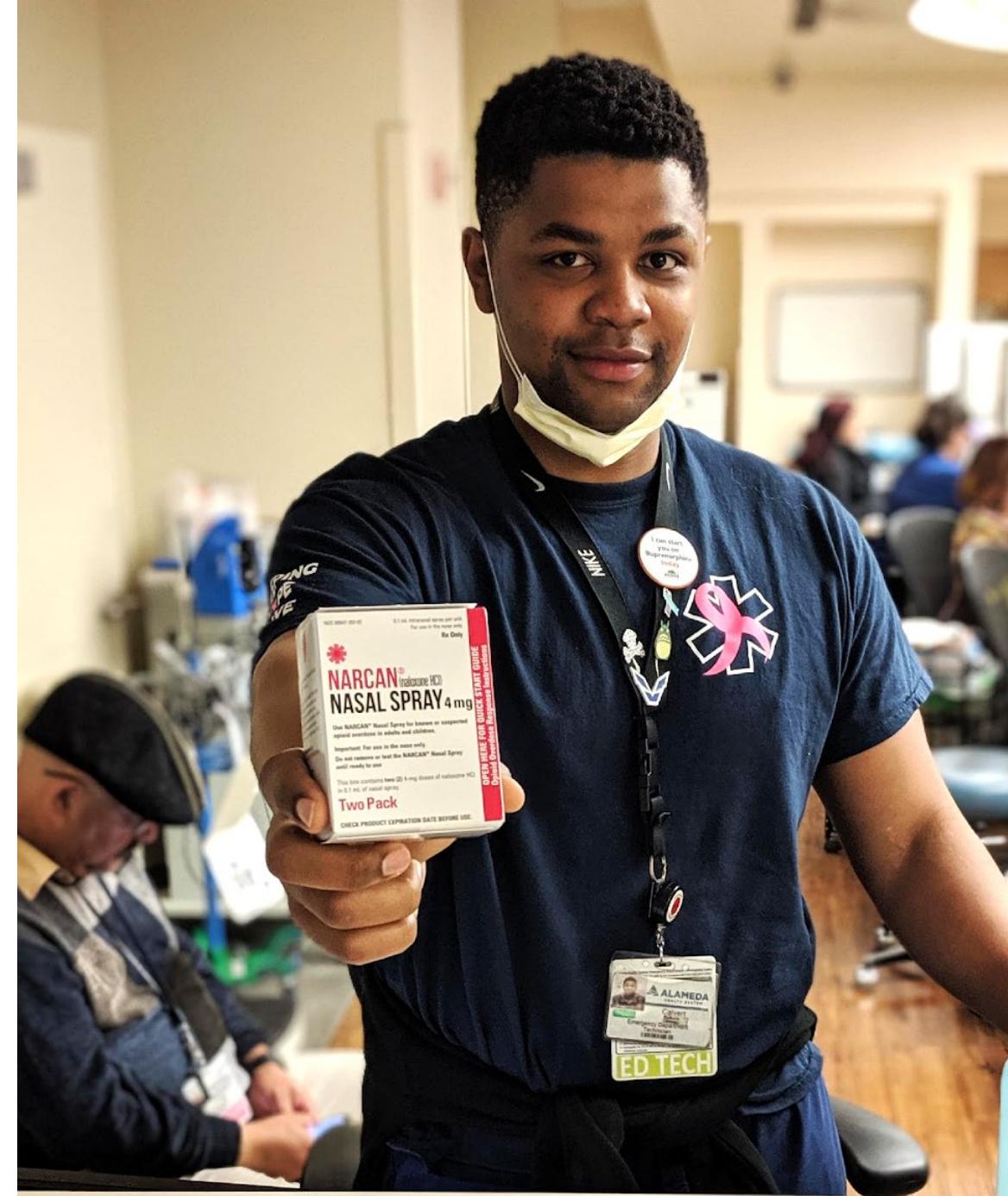




No wrong door

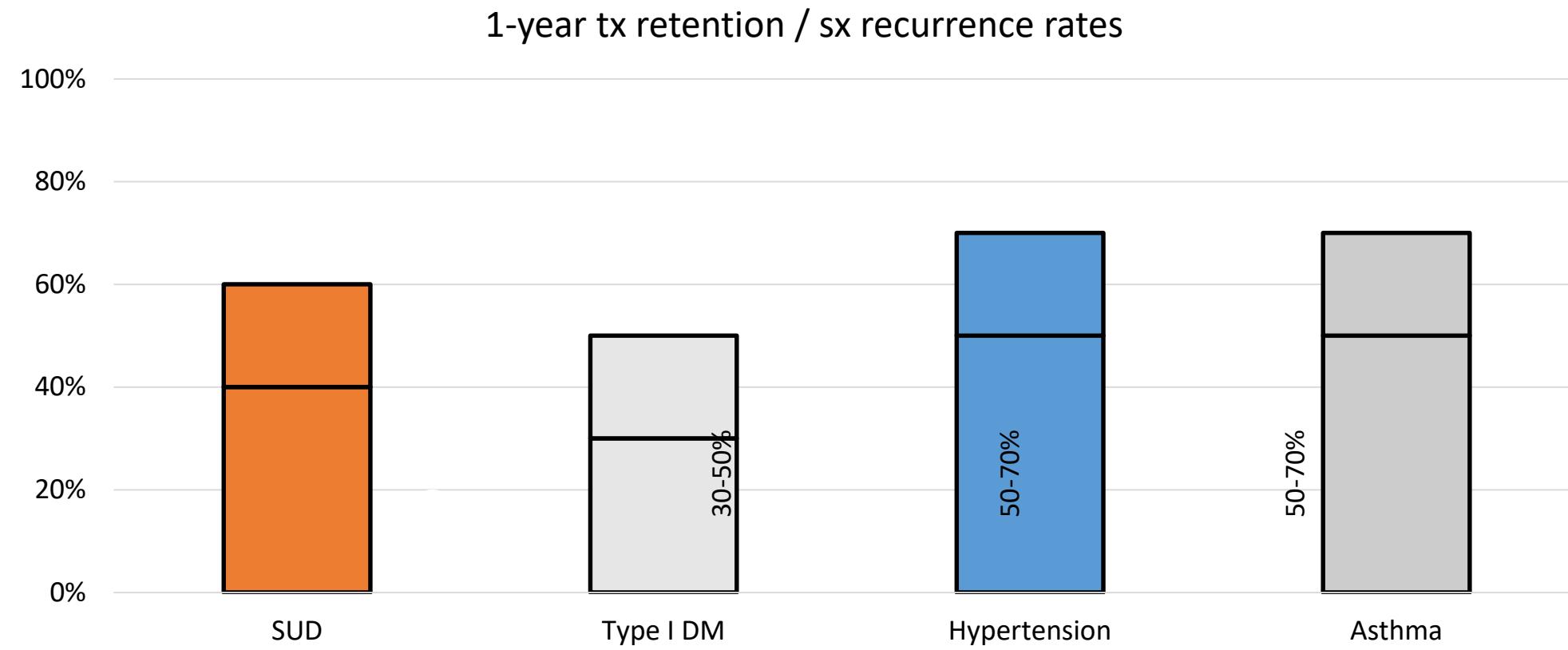
Low Barrier Treatment on Demand

- Start MAT
- Risk reduction with take-home or prescription Naloxone
- Link to ongoing treatment





Treatment outcomes



McLellan et al. JAMA 2000



Myth of treatment resistance...

67%

Focus on the needs of the individual

- Integrated treatment for substance use and mental illness
- Navigation and logistics





CRISIS TEAM