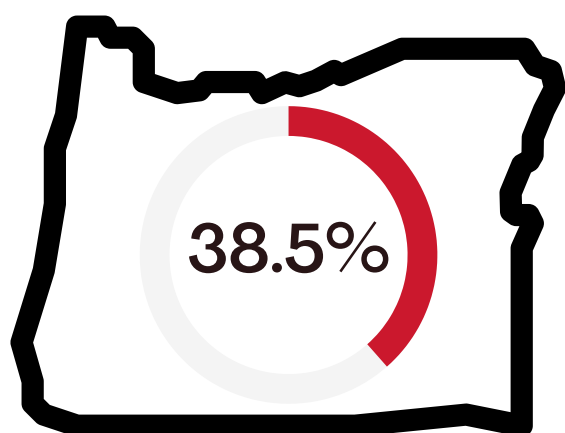


HOMELESSNESS: AND MENTAL ILLNESS



(Arden, 2021; SAMHSA, 2021; Showers, 2020; USICH, n.d.)

In 2019, **38.5%** of people who experienced homelessness in Portland said they were suffering from a mental illness.

An estimated 4,015 people experienced homelessness in Portland in 2019, which accounted for nearly 25% of the population statewide (15,876).

4,339 Oregonians were **chronically homeless**, a condition that disproportionately affects single men, veterans, African Americans, and individuals living with mental illness and/or substance use disorders (SUDs).

What is chronic homelessness?

Individuals who have been homeless for more than 1 year **or** experienced at least 4 episodes of homelessness in the past 3 years. These individuals are most likely to stay overnight on the streets versus in shelters. (Helfrich & Synovec, 2019)



What causes it?

Environmental Risk Factors: poverty, high housing costs, few job options, removal of institutional supports for mental illness and/or SUDs.

Individual Risk Factors: cognitive impairment, preexisting medical conditions, unemployment, family instability, trauma. (SAMHSA, 2021)

Chronically homeless individuals who present with psychiatric disabilities in the U.S.

30-60
%

Mental illness impacts an individual's ability to participate in everyday activities, socially engage, and manage individual and community responsibilities. Mental illness may also present with cognitive impairments (e.g., traumatic brain injury) that limit brain function and impact an individual's ability to learn new skills. As such, managing personal health and well-being can be difficult at times without external supports.

(Helfrich & Synovec, 2019; SAMHSA 2021)

Chronically homeless individuals who have co-occurring mental illness and SUDs in the U.S.

50-80
%

Mental illness often accompanies substance use disorders (SUDs), termed 'dual diagnosis'. As many as 76% of those who are both homeless and in treatment for SUDs report having experienced trauma-related events. Individuals living with dual diagnoses who are homeless often experience disrupted sleep, decreased participation in life and leisure, and increased exposure to risky environments.

(Plach & Stoffel, 2019; SAMHSA, 2021)



What can Occupational Therapy do?

- Use a holistic approach: mental illnesses and SUDs are chronic conditions that need a range of recovery and supports.
- Promote and use evidence-based practices.
- Use a person-centered, trauma-informed practice: incorporate an individual's environment (both social and physical), culture, background, needs, and personal goals into treatment.
- Address both health and housing needs at the same time to provide effective care. (Plach & Stoffel, 2019; SAMHSA, 2021).
- Help clients identify available housing resources.

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