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Breaking the Cycle: Housing Strategies for Justice- Involved Individuals

Paul Boston, Technical Assistance Coordinator

Liz Conville, Technical Assistance Coordinator

Office of Forensic Coordination, Texas Health and Human Services

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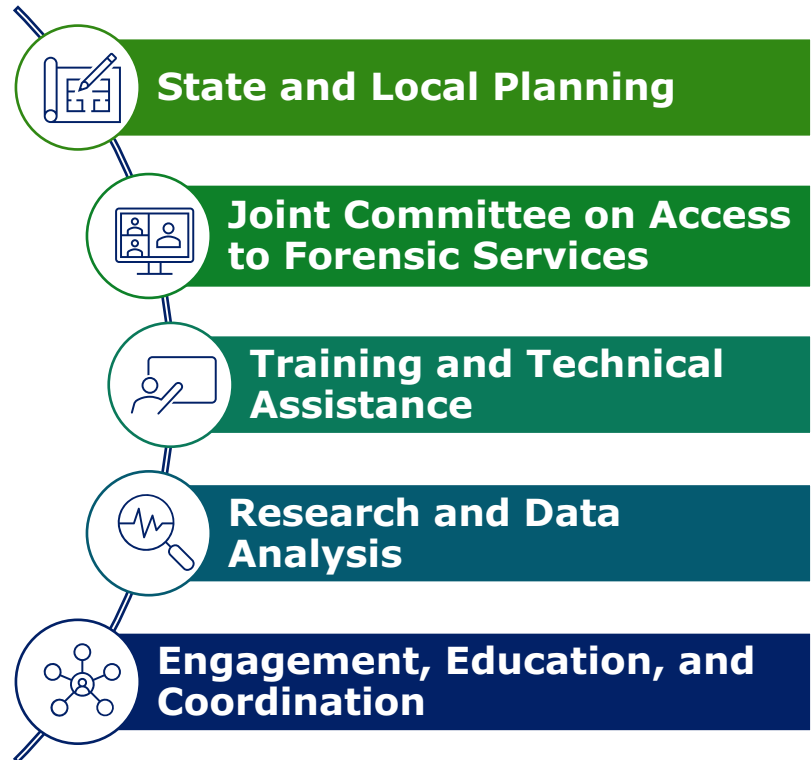
Office of Forensic Coordination

Mission:

Improve forensic service coordination and prevent and reduce justice involvement for people with mental illness (MI) and substance use disorders (SUD) through statewide and cross-agency initiatives that improve collaboration among state and local leaders.



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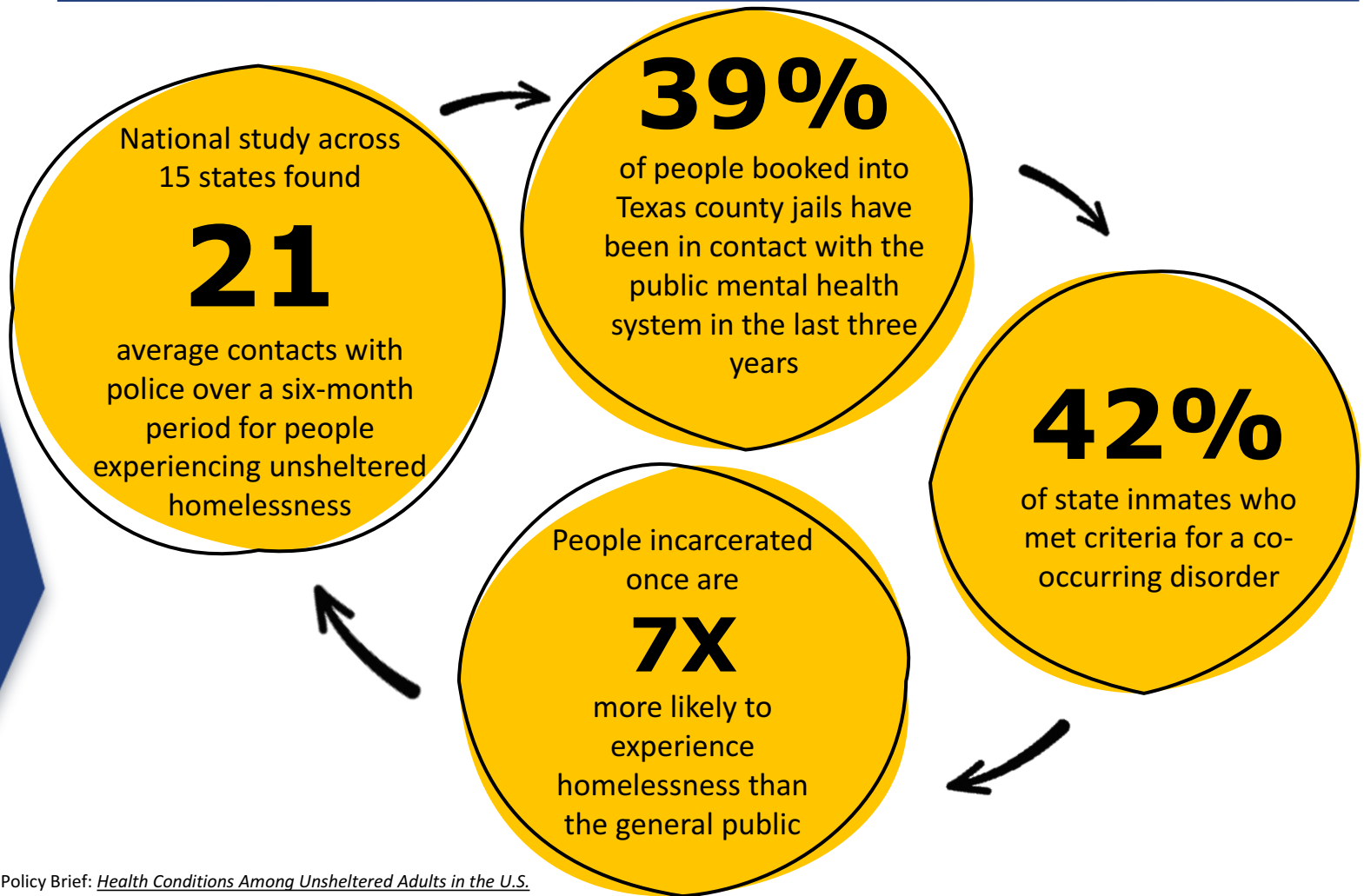


Presentation Overview

1. Barriers to housing people with justice involvement, housing instability and behavioral health needs
2. Criminal justice system 101
3. Intro to the Sequential Intercept Model framework
4. Strategies and resources to support people with justice involvement, housing instability and behavioral health needs
5. Case example
6. Q & A



Cycle of Behavioral Health Needs, Homelessness and Incarceration



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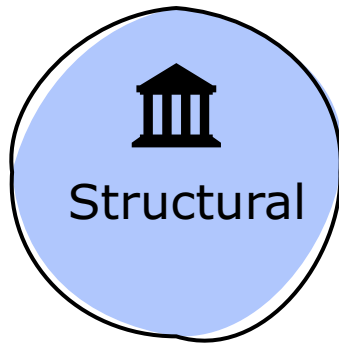
CPL Lab. Policy Brief: [Health Conditions Among Unsheltered Adults in the U.S.](#)

Texas Law Enforcement Telecommunications System Continuity of Care Query, 2021

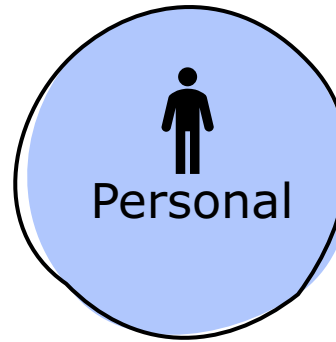
Prison Policy Initiative. Report: Nowhere to Go: [Homelessness among Formerly Incarcerated People](#).

Source: Corrections Today. [Co-occurring disorders in the incarcerated population: Treatment needs](#), 2021.

Barriers to Housing People with Justice Involvement and Behavioral Health Needs



- Public housing lifetime bans
- Public housing authority blanket bans
- Camping bans
- Private landlord practices



- Application fees and background checks
- Difficulty qualifying for programs
- Program waitlists
- Transportation

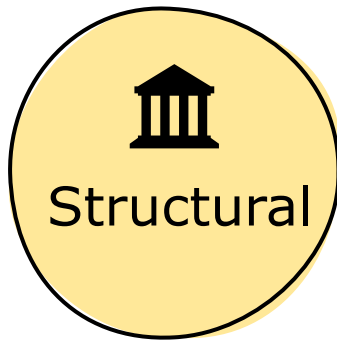


- Competition for few spots
- Communication with clients

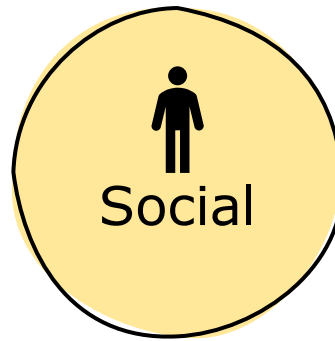


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Unseen Barriers to Housing People with Justice Involvement and Behavioral Health Needs



- Dual stigma of mental health condition and criminal background



- Institutionalization (lack of structure)
- Life skills to navigate systems and independent living



- Lack of community connections
- Isolation when newly housed



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Understanding the Criminal Justice System (CJS) (1 of 3)

Many people who are CJS-impacted lack formal education about the legal system

- This can result in people making plea bargains or legal decisions they regret.

The process is inherently stressful

- People with charges are required to make complex decisions with far-reaching consequences during a stressful and traumatic period.

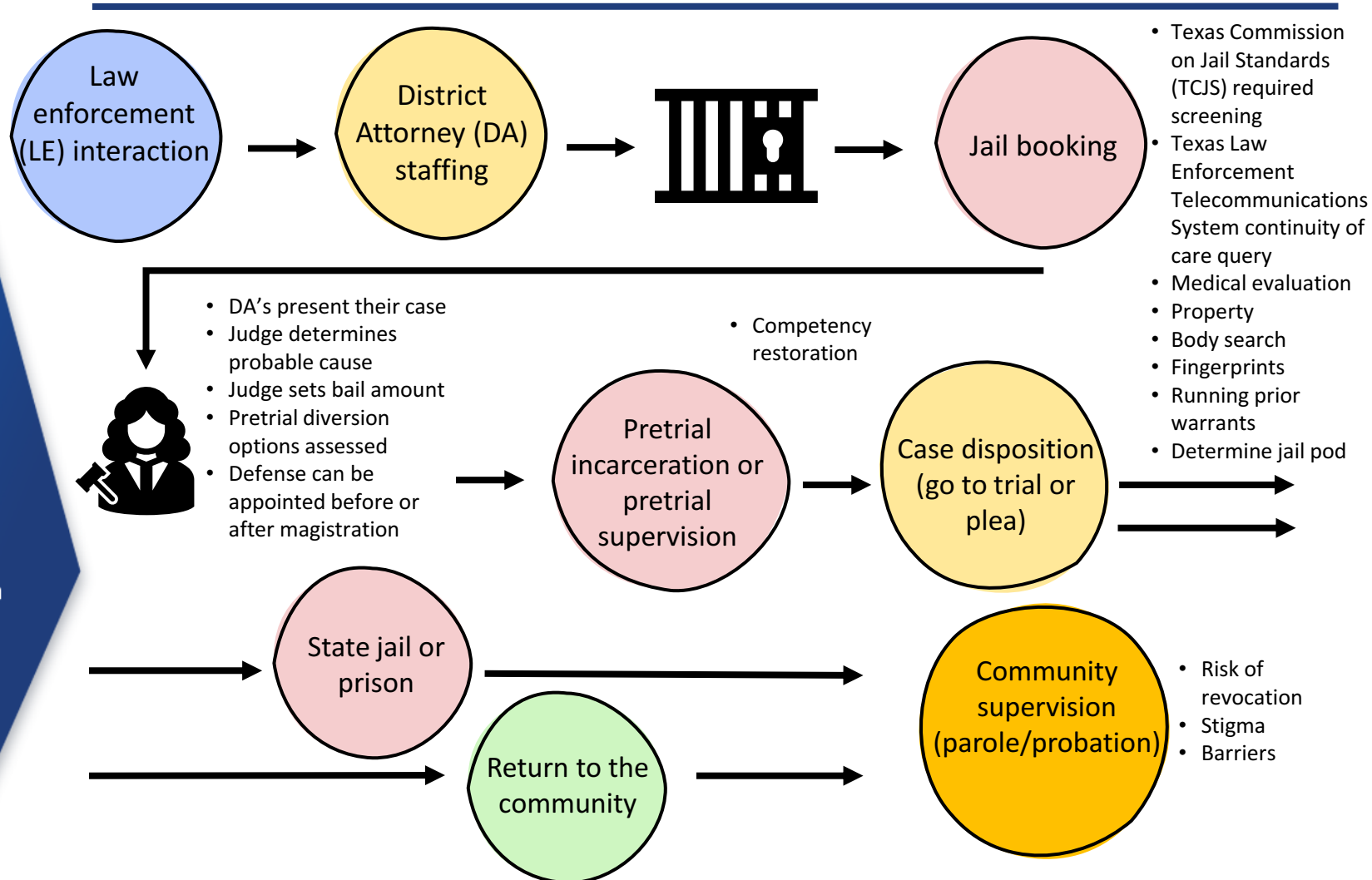


90-95% of cases result in plea bargaining



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Understanding the Criminal Justice System (CJS) (2 of 3)



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Understanding the Criminal Justice System (CJS) (3 of 3)

People decide to take plea deals based on a variety of factors:

- Pretrial detention
- Family and work obligations
- Fear of incarceration
- An experience of taking a plea
- Past CJS history
- Potential for harsher penalties for defendants who exercise their right to a trial rather than take a plea

People in pretrial detention plead guilty 2.86 times faster than people released pretrial



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The Sequential Intercept Model (SIM)

People move through the criminal justice system in predictable ways.

The SIM intercepts illustrate:

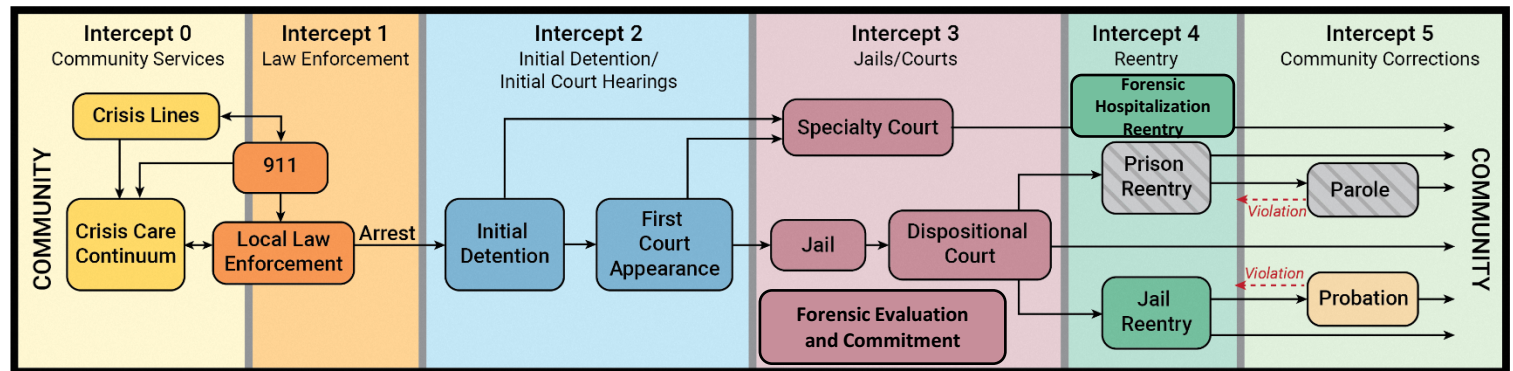
- Opportunities for diversion
- Opportunities for treatment
- System efficiency
- Community partnerships



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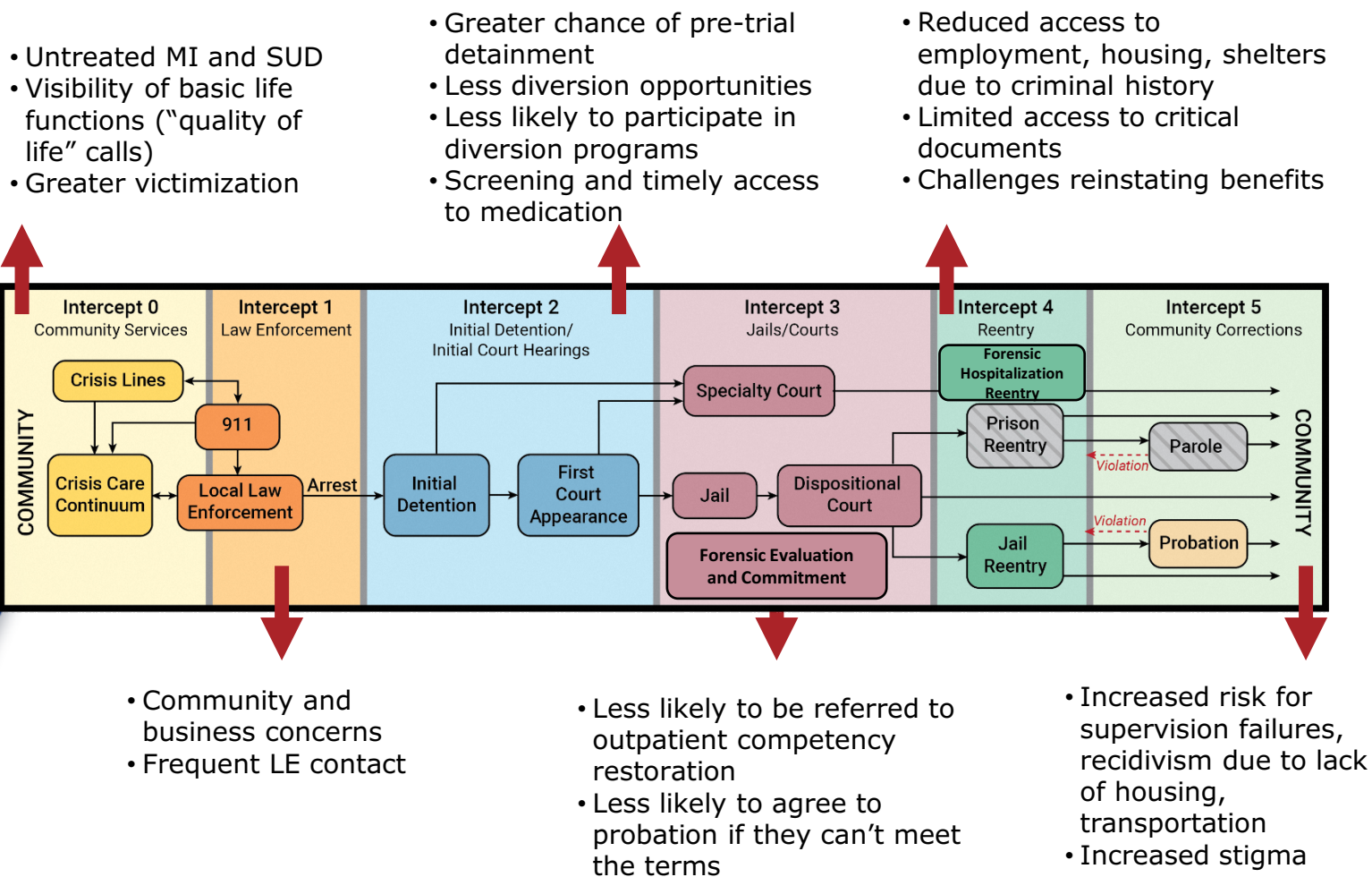


The Sequential Intercept Model (SIM) Framework



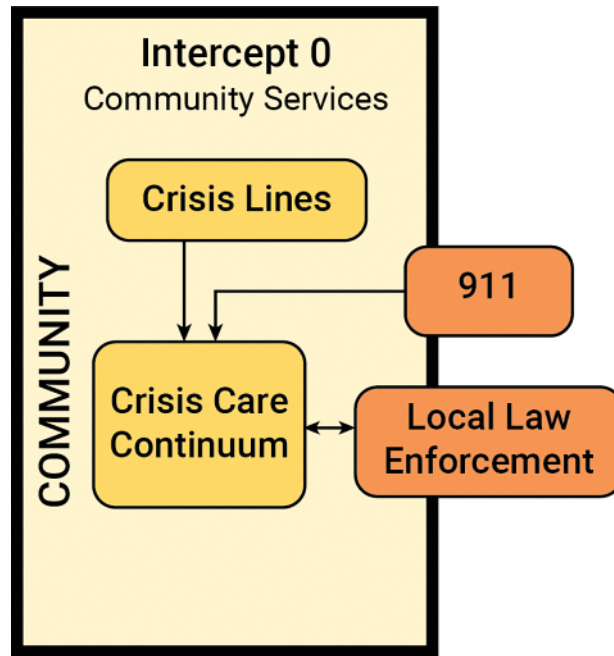
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Housing Instability and Behavioral Health Needs Across the SIM



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Intercept 0: Community Services



Key Features

Connects people who have MI, SUD, and intellectual or development disabilities (IDD) with services before they encounter the criminal justice system.

Supports law enforcement in responding to both public safety emergencies and mental health crises.

Enables diversion to treatment before an arrest.

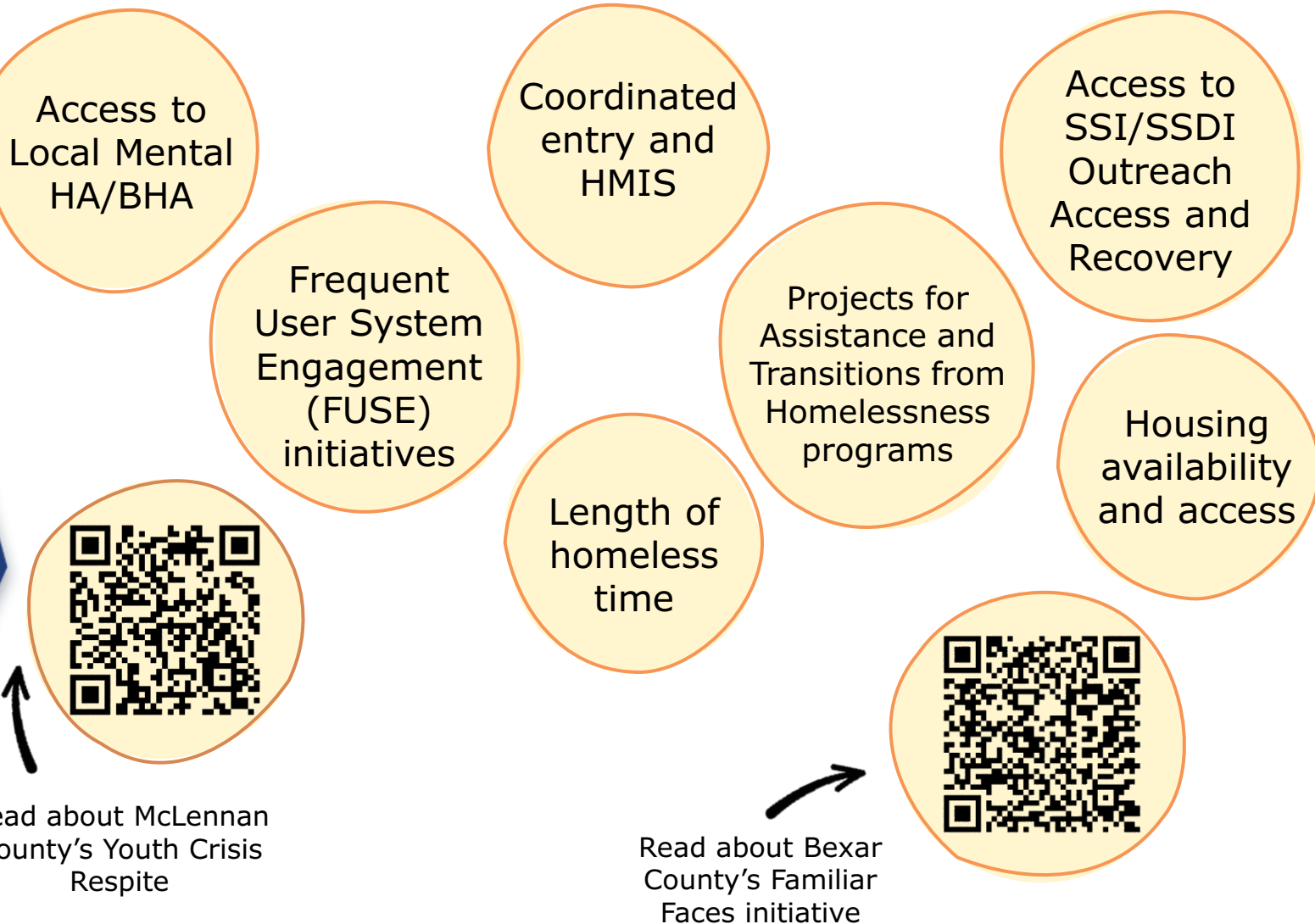
Reduces pressure on resources at local emergency departments and inpatient psychiatric beds for urgent but less acute mental health needs.

- **Street outreach teams**
- **Access to harm mitigation**
- **Mobile crisis outreach teams**
- **Mental health centers**
- **Warm lines**
- **Community paramedics**
- **Supportive housing**
- **IDD/MH respite**
- **Coordinated Entry**

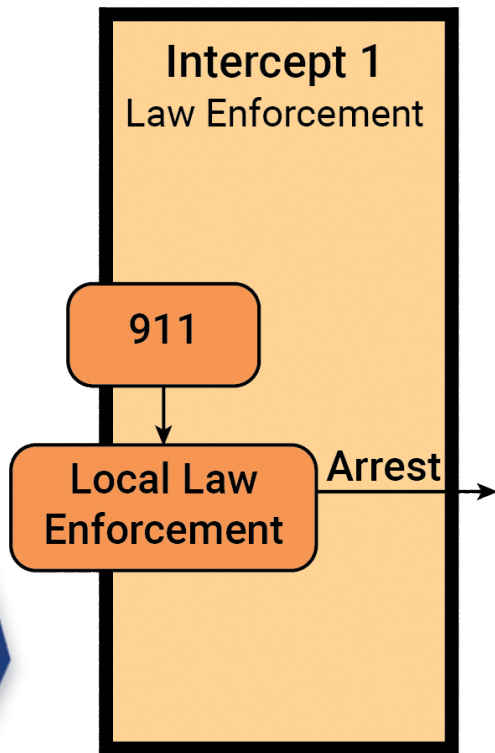


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Intercept 0: Housing Considerations



Intercept 1: Law Enforcement (Pre-Arrest)



Key Features

Begins when law enforcement responds to a person with a MI, SUD, or IDD who is in crisis.

Ends when the person is arrested or diverted into treatment.

Trainings, programs, and policies help behavioral health providers and law enforcement work together.

- **LE co-response**
- **Dispatch training**
- **Remote MH assessment**
- **LE-friendly diversion options**
- **Call coding for behavioral health**
- **Homeless response teams**

Intercept 1: Housing Considerations

Diversion,
crisis and
sobering
centers

Homeless
outreach
teams

Encampment
sweeps and
camping bans

Coordinated
entry and
HMIS

Housing
availability
and access

Read about Howard
County's Diversion
Center



Read about El Paso's
Homeless Outreach
Street Team



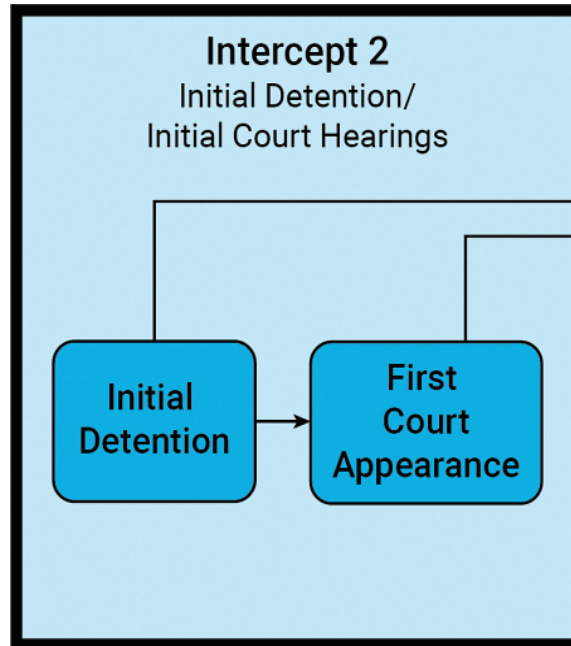
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Audience Poll

Does your organization implement programs at early intercepts that support diversion and access to care?

If yes, consider sharing a bit of background on the program, keys to success, and outcomes to date!

Intercept 2: Initial Detention/Initial Court Hearings



Key Features

Supports early identification and screening to inform decision making around a person's care, treatment continuation, and pretrial orders.

Supports policies that allow bonds to be set to enable diversion to community-based treatment and services.

Includes post-booking release programs that route people into community-based programs.

Represents the moment when the question of competence is first raised.

- **Opportunities for diversion at booking**
- **TCJS required screenings**
- **TLETS continuity of care query**
- **Coordination with LMHA/LBHA**
- **Assessing competency**
- **Access to medications and medical supplies**
- **Safety and specialized units**



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Intercept 2: Housing Considerations

Navigating
the jail

Pretrial
Services

Bond and bail

Eligibility for
permanent
supportive
housing
after long
periods of
incarceration

Read about Harris County's
(Healthcare for the Homeless)
Jail Inreach Project



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Navigating the Jail

Who can answer the big questions?

Can the
incarcerated
person sign
anything?

How do
you access
the jail
census?

How can you
alert the jail
to an urgent
concern?

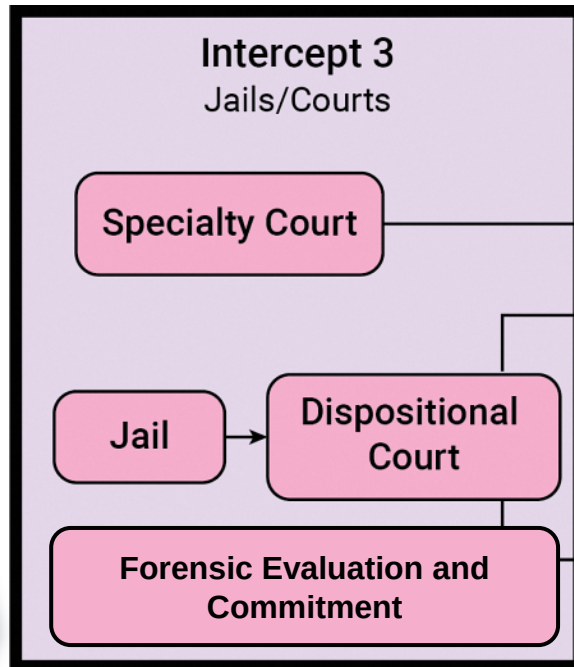
How do you
request jail
medical and
mental health
(MH) records?

Who
provides jail
medical and
MH services?

What can I
bring in to
the jail when
visiting a
client?

What are
visiting
hours?

Intercept 3: Courts



Key Features

Includes court-based diversion programs that allow the criminal charge to be resolved while taking care of the defendant's behavioral health needs in the community.

Includes constitutional protections such as the right to due process and representation by a defense attorney at no cost if indigent.

Includes services that prevent the worsening of a person's mental health or substance use symptoms during their incarceration.

Can include using criminal charges as treatment leverage.

- **Specialty courts**
- **Distributing Bench Book**
- **Assisted outpatient treatment**
- **Holistic defense**
- **Pre-trial supervision**
- **FACT/ specialized caseloads**



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Intercept 3: Housing Considerations



Knowledge of the
legal system and
working with
someone with
pending charges

Collaboration
with Specialty
Courts



Read about Travis County's
community court



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Navigating the Courts

**Who can
answer the
big
questions?**

What consent
forms do I
need to talk
to the
attorney?

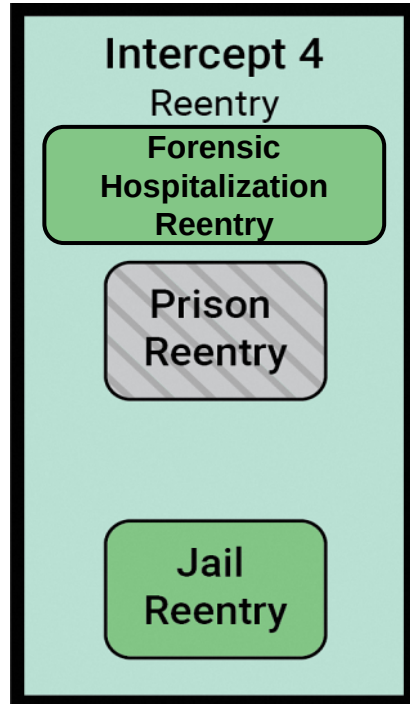
How do I
locate a
person in
jail?

Who is the
defense
attorney?

Is the public
defender's office
or assigned
counsel part of
HMIS?

How can I
advocate for
the person to
avoid
relocation?

Intercept 4: Reentry



Key Features

Ensures people have workable plans in place to provide seamless access to medication, treatment, housing, health care coverage, and services from the moment of release and throughout their reentry.

Should be well-planned, intentional, and individual-centric to help set people up for success and avoid lapses in recidivism.

- **Peers**
- **Discharge planning**
- **Warm handoffs**
- **Access to job readiness/employment**
- **Recovery supports**
- **Access to naloxone**
- **Eligibility or reinstatement of benefits**
- **Work with LMHA**

Intercept 4: Housing Considerations

Jail in-reach
programs

Barrier-
busting funds

Critical
documents

Access to
recovery
housing

State hospital
reentry

Psychosocial
rehabilitation

Benefits
reinstatement

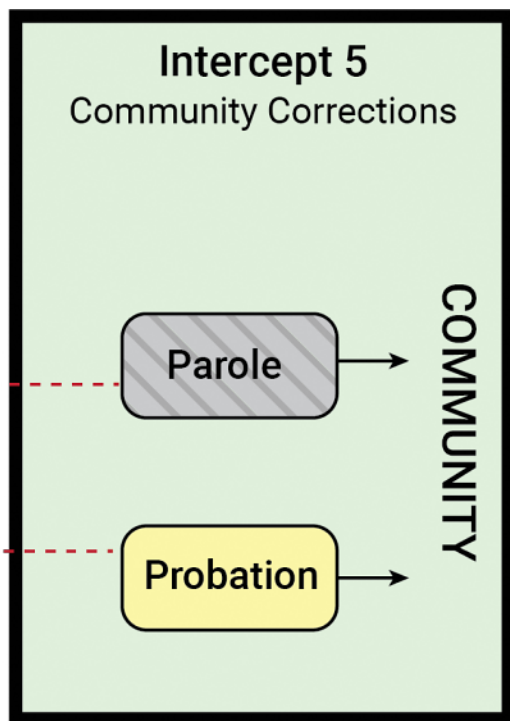


Read about multi-county mental health
peer support re-entry pilot program



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Intercept 5: Community Corrections



Key Features

Strengthens knowledge and ability of community corrections officers to serve people with MI, SUD, and/or IDD.

Addresses the persons' risks and needs.

Supports partnerships between criminal justice agencies and community-based behavioral health, mental health, or social service programs.

- **Training for community corrections staff**
- **Specialized caseloads**
- **Multidisciplinary stakeholder coordination groups**
- **Connection to recovery supports**
- **Peers**



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Intercept 5: Housing Considerations

Aging, ability
and
accessibility

Criminal
history
barriers

Coordination
services for
higher levels
of care

Belonging
and
community

Transportation

Avoiding
revocation



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Audience Perspective

What is working well within your community to support people reentering?

Are there things your organization could be doing to better support this population?



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Important Themes

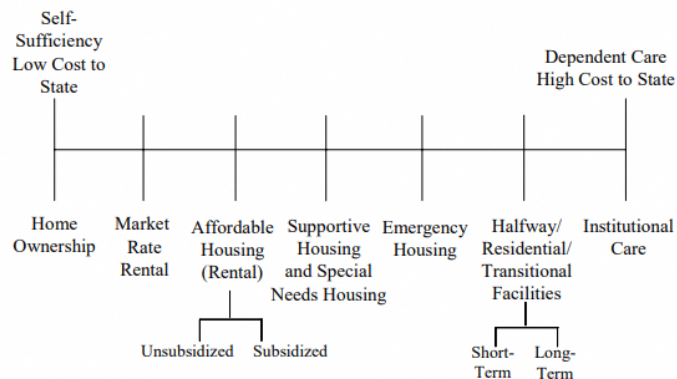
- Making the Financial Case
- Data Collection
- Coordinated Entry



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Making the Financial Case

Figure 2. Continuum of Housing Options for Persons with Mental Illness Who Have Had Contact with the Justice System



Source: Modified from "Safe Homes, Safe Communities." 2001. Minnesota Department of Corrections.

Median Daily Costs

Shelters: **\$25.48**

Supportive Housing: **\$30.48**

Prison: **\$59.43**

Jail: **\$70**

Psychiatric Hospital: **\$451**

Hospital: **\$1,590**

All Texas Access Dashboard Data

Incarceration

- Estimated incarcerations of persons with mental illness
- Estimated costs of incarcerations of persons with mental illness

Mental Illness

- Adolescents with serious emotional disturbance
- Adults with serious mental illness

Estimated Emergency Department

- Events
- Charges



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Data and Information Sharing

Do housing resources meet the housing need for people with mental health or substance use disorders and justice involvement?

Recommended Variables and Measures:

- Number of units available by type
- Average wait time on housing program lists
- Number of persons experiencing homelessness with self-reported or confirmed MI or SUD
- Number of persons under criminal justice supervision who are experiencing homelessness
- Number of persons housed by payment type
- Average tenure in public housing for persons with MI or SUD versus those without

Increase
access to
HMIS for
greater data
sourcing and
care
coordination



Coordinated Entry

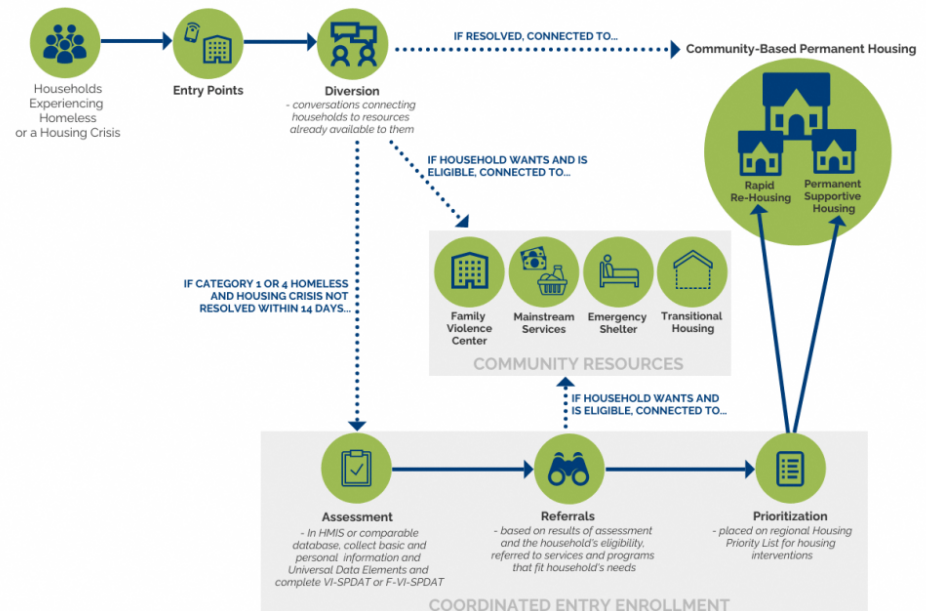


Identify opportunities to embed entry points to Continuum of Care (CoC) Coordinated Entry (CE) systems within key justice system touch points such as jails, prisons, courts, diversion, and parole or probation programs



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TX BoS CoC Coordinated Entry Overview



Case Example: Jeremiah

Behavioral Health History

- Diagnosed with schizophrenia as a teen.
- Periods of medication compliance and non-compliance.
- Period of mental health decompensation and poly-substance use.
- Referred to forensic assertive community treatment (FACT) services through LMHA.
- Eventually participates in OCR.
- Receives long-acting injectables from LMHA.

Housing History

- Death of a family member and instability with other family precipitated homelessness.
- Began experiencing homelessness, living in encampments around Houston.
- Declines offer to stay in respite facility for competency restoration.
- HMIS assessment score/history qualifies him for PSH.
- While engaged with MH court, his number comes up for housing.

CJS History

- Frequent encounters with law enforcement.
- Low level charges, short jails stays.
- Eventually, charged with state jail felony for possession.
- Jail identifies mental health history, assigns a specialty public defender at magistration. FACT referral and outpatient competency restoration (OCR), on mental health bond.
- Found competent to stand trial and receives one year deferred adjudication.
- Successfully completes probation.



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Success After 19 Years Chronic Unsheltered Homelessness

- Since December 2023, Jeremiah has been successfully housed in permanent supportive housing.
- He is Medicaid/Medicare enrolled and receives SSDI and SSI benefits.
- Is in a relationship with a person who's never experienced homelessness.

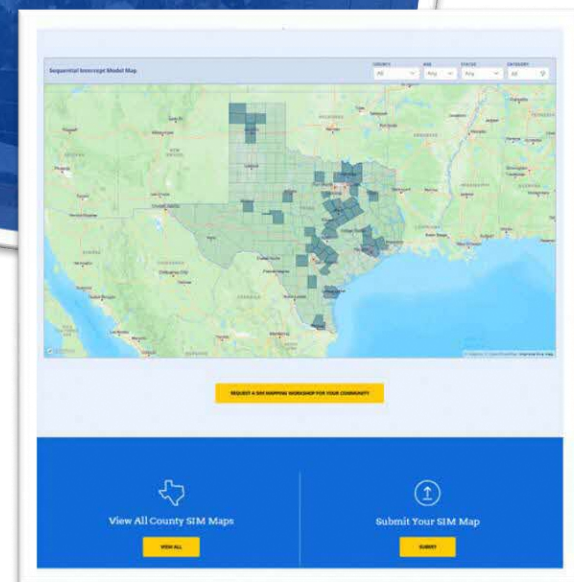
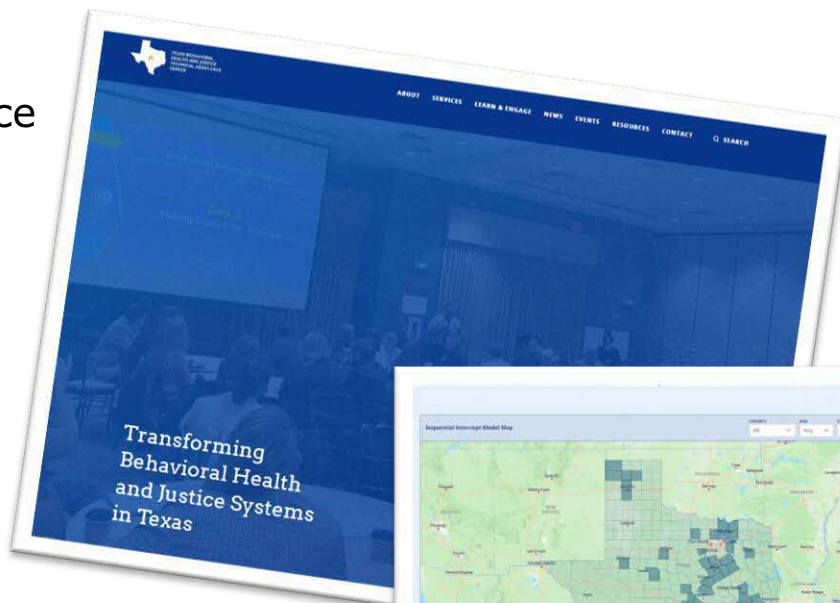


“I’m tired of being on the streets. I’m too old for this”

Texas Behavioral Health and Justice Technical Assistance Center

Key Features

- Free technical assistance and support
- Webinar series
- Original publications
- Innovative spotlights
- Connections to other Texas communities
- National research highlights



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Thank you!

Liz Conville
elizabeth.conville@hhs.texas.gov

Paul Boston
paul.boston@hhs.texas.gov