CMHS/CSAT Collaborative Demonstration Program for Homeless Individuals

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The Collaborative Demonstration Program for Homeless Individuals is providing an opportunity for several community agencies in the United States to explore innovative intervention and treatment strategies to address the needs of homeless people with co-occurring (mental illness and substance abuse) disorders. This cooperative agreement, funded jointly by the Center for Mental Health Services (CMHS) and the Center for Substance Abuse Treatment (CSAT), is a $3 million project supporting programs in various community...
agencies to develop, document, and evaluate programs for persons who are homeless with co-occurring disorders to be used as models in other communities. The program models include: Assertive Community Treatment, Psychosocial Rehabilitation, Therapeutic Community, and an integrated treatment model. The first phase of the two-phase project funded 16 programs in the U.S. to develop manuals within their primary treatment modalities for homeless people with co-occurring disorders. For Phase II of the project, six of the 16 model programs were competitively selected to demonstrate program impact through formal program evaluation efforts. The data derived from the various projects will be compiled into a compendium of information for state agencies and community service providers throughout the U.S.

KEY WORDS: co-occurring disorders; Collaborative Demonstration Project; dual diagnosis; homelessness.

INTRODUCTION

One of the most complex national health problems in the past decade has been the appropriate delivery of services to treat persons who have a mental illness concurrent with a substance abuse disorder. This population, known as persons with co-occurring disorders or the dually diagnosed, has grown substantially in recent years. Although survey populations and locations vary, a commonly accepted estimate of persons who are homeless with co-occurring serious mental illnesses and substance use disorders is approximately 10–20% of the overall homeless population (Drake, Osher, & Wallach, 1991; Tessler & Dennis, 1989). The National Comorbidity Survey, a large general population survey conducted from 1990 to 1992, estimates 7.6–9.9 million Americans suffer from co-occurring mental health and substance abuse disorders in a given year. When persons who are institutionalized or homeless and have co-occurring disorders are added to these numbers, the population of persons with co-occurring disorders is estimated at 8.3–10.8 million (DHHS, 1995).

People with co-occurring disorders frequently become homeless because their substance abuse and noncompliance with treatment often lead to a loss of social supports, unmanageable behaviors, and housing instability (Drake & Wallach, 1989). A study of patients discharged from a state hospital (Belcher, 1989) suggested the use of alcohol and other drugs strongly predicted subsequent homelessness, as 36% of persons who abused substances became homeless within 6 months of discharge.