

# Housing, health care, and chronic mental illness

**“As parents of an adult with chronic mental illness, we have seen how permanent supportive housing has improved our son’s quality of life. We wish more Arizonans had the opportunity to access the housing and treatment they need to stabilize and recover from mental illness.”**

— Dr. Charles and Laurie Goldstein,  
founding board members of the Association  
for the Chronically Mentally Ill (ACMI)

In Maricopa County over the past six years, more than 34,000 people enrolled in the Arizona Health Care Cost Containment System were determined to have a serious mental illness.

Of those, 18.5%—about 6,300 county residents—were identified as having chronic mental illness, characterized by recurrent crisis episodes and repeated cycling through the behavioral health system, emergency rooms, and the justice system. Many experience homelessness. Their frequent use of high-cost services often exacerbates their symptoms and incurs great public expense.

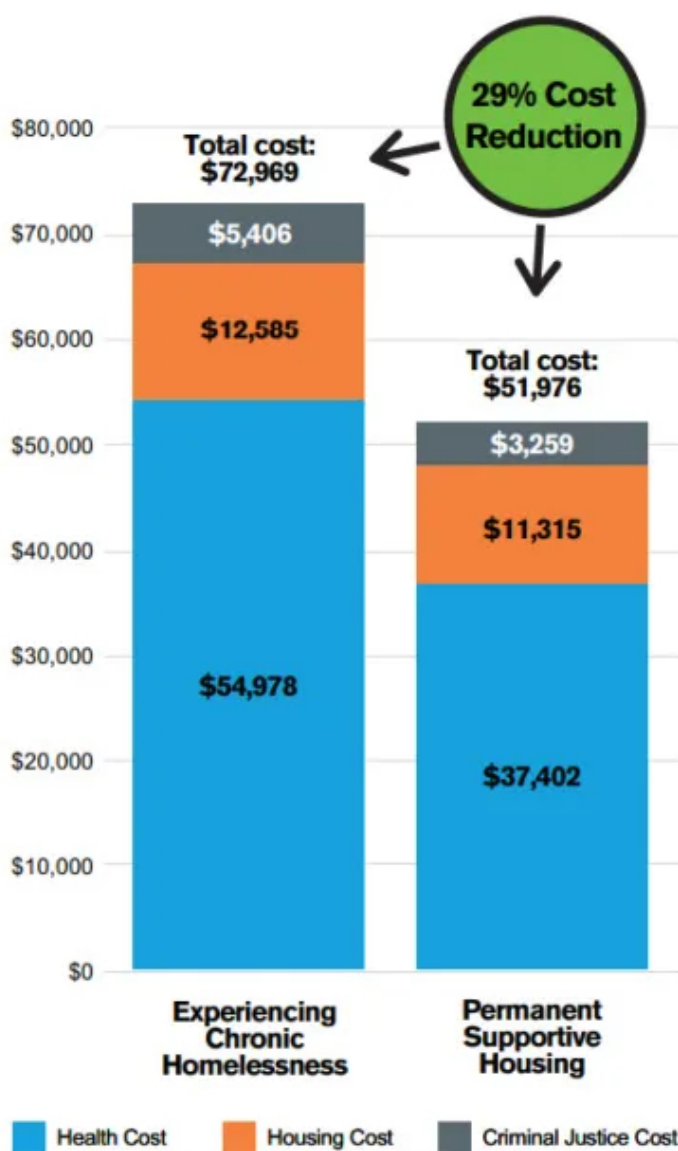
ASU’s Morrison Institute for Public Policy interviewed dozens of experts who care for people with chronic mental illness.

**Interview participants saw stable, affordable housing as an essential part of care that can reduce interactions with crisis, justice, and homeless systems, as well as costs.**

**To be successful, however, housing must be coupled with appropriate long-term treatment and support.**

Investment in quality housing, treatment, and supports can yield significant savings overall, according to an analysis of 2014-19 data from the Arizona Health Care Cost Containment System and the Homeless Management Information System. This analysis was conducted by ASU’s Center for Health Information & Research.

The graph below shows the average total costs of individuals with chronic mental illness in Maricopa County, per person per year, by housing setting.



Source: ASU’s Center for Health Information & Research processed all cost data (2014-19).

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# Experts agree that safe housing and appropriate treatment are key to cost-effective, positive outcomes

**“Housing is health care. And that means mental health and physical health.**

**... There’s a cost savings of having supportive services and a safe place to live versus that person being on our streets and hitting all of our crisis systems.”**

— The perspective of a homeless services provider interviewed by Morrison Institute for Public Policy



Tenants of a Copa Health Lighthouse Group Home, a form of permanent supportive housing, in Maricopa County. (Photo by Jeff Bayer/Copa Health)

Dozens of interview participants who care for people with chronic mental illness offered ideas for improving care and reducing costs that center on increasing access to safe, stable housing with appropriate levels of support.

## **Provide higher levels of support.**

Interview participants recommend providing higher levels of support to individuals with chronic mental illness. This includes residential treatment, such as secure residential or treatment for co-occurring substance use disorders, as well as 24/7 in-home support in independent living and congregate settings.

## **Meet long-term support needs.**

Several participants compare chronic mental illness to other chronic conditions like Alzheimer’s disease: it requires intensive care over the long term. Participants recommend offering more long-term housing options with appropriate levels of support, such as 24/7 professional support staff, life-skills training, and recreation. Occasional crisis episodes should be expected, and met with treatment, not eviction.

## **Center on recovery outcomes.**

Interview participants—particularly family members, advocates, and legal experts—see an opportunity for aligning system incentives with recovery outcomes to ensure that even patients who are difficult to treat, such as those with chronic mental illness, receive the care they need.

## **Increase the supply of appropriate housing.**

Participants identified several ways to increase the supply of appropriate housing for individuals with chronic and serious mental illness, such as expanding the budget of the Arizona Housing Trust Fund, increasing the number of housing vouchers, and reallocating funds from other parts of the behavioral health system toward housing that provides higher levels of support.