

Courts should OK care for homeless

OUR VIEW

MENTAL HEALTH

At first glance, a new initiative focusing on Oahu's most severe, chronically homeless people seems underwhelming, given the scope of the problem. A closer look, though, reveals the potential.

The city is allotting \$500,000 for the Institute for Human Services to help mentally ill homeless people, via court orders, to receive treatment on a monthly basis if deemed a danger to himself or herself. IHS is preparing up to 10 cases, initially, to test a state law improved by legislators this year; the previous legal threshold said the danger had to extend to others.

How the court rules on these test cases will be crucial. Success of this Outreach Navigation program would open up an array of potential positives, among them: more cost-effective treatment and services, instead of draining resources at high-cost venues such as emergency rooms; getting addled people off the streets to reduce risk of harm to themselves and others; and ideally, improving damaged lives via sustained medication and housing.

The court enforcement of monthly treatment would enable use of anti-psychotic drugs such as Invega, which has shown success in treating mental illness. That encouraging component would be key in the law's assisted community treatment (ACT) orders intended to help severely, chronically homeless off the streets.

In 2018, the Point in Time Count found that about 1,000 of Oahu's 4,500 homeless suffered from serious mental illness, with many of them lacking the rational ability to take steps toward treatment. This places them and the community at risk of becoming perpetrators or victims of physical or sex assault, property damage and/or other crimes, testified the Honolulu Police Department in supporting the improved ACT law.

Lack of treatment for this population, so impaired by mental illness that they're unable to recognize their own need for help, results in high use of hospital emergency rooms, ambulance, fire, police, inpatient

treatment, arrest and court time — all very costly to the community at large. IT'S A COST that can drop significantly if the Outreach Navigation program, using the improved ACT law, succeeds.

In data cited from the University of Hawaii Center on the Family, an impaired homeless person receiving mental health treatment via Housing First programs resulted in savings of \$6,197 monthly, an estimated 76% decrease in costs. About \$140 million yearly in medical expenses could be saved by treating the impaired chronic homeless, according to one estimate.

Even under the best of circumstances, though, it will be a slow and arduous path. The Outreach Navigation effort would be the mere start of a continuum of care to help these most service-resistant, chronically homeless people with mental health issues. First comes the petition for court approval for ACT-ordered treatment; then sustaining of medical and support services; then getting the client well enough for housing of some sort.

Still, it's a path worth starting. The state Department of Health noted the critical need to coordinate a comprehensive continuum of care that includes leveraging assisted community treatment, and ranging to civil commitment. To that latter option, construction is now underway to expand beds and capacity at the Hawaii State Hospital, a long-awaited and necessary development.

In the nearer term, there's a community stake for the Outreach Navigation test cases to go well, with few snags or impediments that would only slow help for those who so badly need it. Allowing the improved ACT law to help more people — many more than the 10 over five years aided by the old law — would be an important step toward more cost- and drug-effective treatment for the mentally ill chronic homeless.