



June 2022

Service Provider and Community Member Survey Results

City of Albuquerque and Bernalillo County



The City of Albuquerque in partnership with Bernalillo County are developing a joint strategic plan based on research process that includes 1) System Gap Analysis, 2) Service Gap Data Analysis Addendum, 3), Survey of Service Providers and Community Members, and 4) Facilitated Community Meetings.

The documents that comprise this research are found at

<https://www.cabq.gov/family/news/city-of-albuquerque-bernalillo-county-system-gap-analysis>

What follows is a summary of the feedback collected through the Survey of Service Providers and Community Members. Within this summary, references are included in red font to highlight where these service needs have been integrated into the draft joint strategic plan.

This work builds on public involvement efforts including the convening of community partners and stakeholders as well as surveying residents to learn more about the key issues facing the health and safety of our neighborhoods.

Information and updates are available at <https://www.cabq.gov/family/news/city-of-albuquerque-bernalillo-county-system-gap-analysis>

For continued feedback and questions, please email bh-strategicplan@cabq.gov.

CITY OF ALBUQUERQUE / BERNALLIO COUNTY

Survey: Community Perspective of Behavioral Health Priorities

As part of the public input efforts for the Behavioral Health Joint Strategic Plan, the City of Albuquerque and Bernalillo County collaborated on issuing a survey to collect feedback to identify priorities from the perspectives of community members and service providers.

The survey was open between December 20, 2021 and February 28, 2022. Surveys were distributed to listservs and posted online. Preliminary results were presented to the community input sessions held online in January and February. A summary of key results follows.

In total, there were 384 responses from two surveys: 264 surveys submitted by people identifying as community members and 120 survey responses by people who identified as service providers.

<p>Survey Results</p> <p>Shared Priority Recommendations</p>	<p>264 Community Members</p> <p>120 Service Providers</p> <p>384 Survey Responses</p>
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Top 4 Strategies

- Crisis Intervention BH Services (2.1,2.3)
- Substance Use Treatment Options (2.2, 3.3)
- Supportive Housing (1.1)
- Prevention/Harm Reduction (3.1, 3.4)

Responses Ranked as Top Priority

Community Members	Service Providers
69%	55%
40%	40%
40%	47%
40%	37%

Top 3 Investments

- BH Crisis Triage Center (2.1, 2.3)
- BH Service Center / Hub (5.1)
- Permanent Supportive Housing (1.1)

Responses Ranked as Top Priority

Community Members	Service Providers
65%	69%
57%	57%
49%	62%

Top 3 Communication Methods

- Email Notifications (5.1)
- Friends, Family, Co-Workers (5.1)
- Internet Search (5.1)
- TV (5.1)
- Social Media (5.1)

Responses Ranked as Top Priority

Community Members	Service Providers
47%	62%
29%	61%
64%	60%
44%	15%
42%	36%

Numbers shown in red refer to where service needs have been integrated in the Joint Strategic Plan Draft.

Section 1:

Behavioral Health Strategic Plan Survey Results from Service Providers

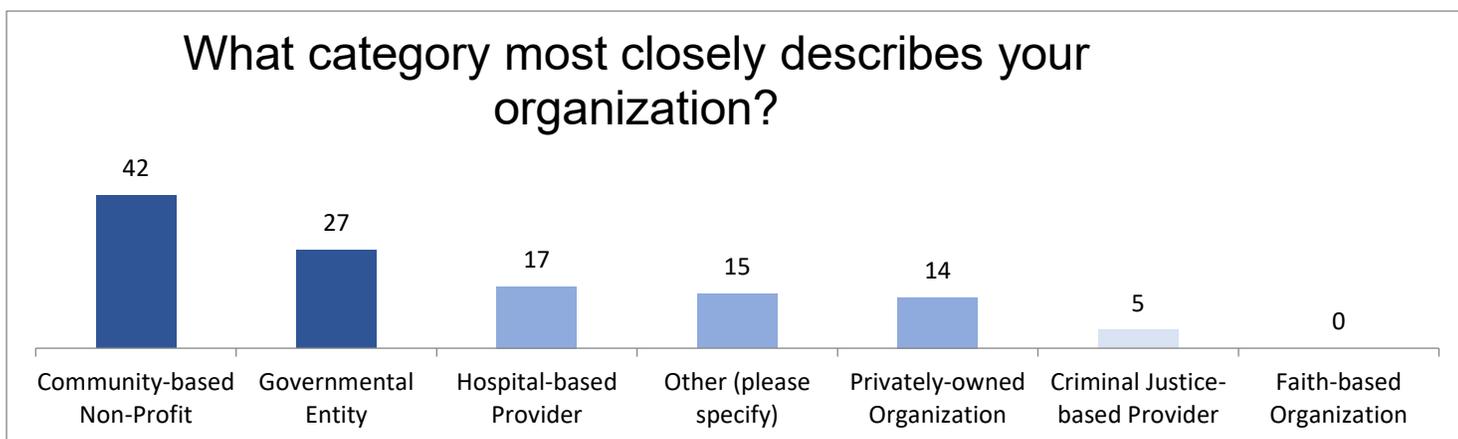
120 survey responses were received between December 20, 2021 and February 28, 2022 by people who identified as service providers.

Service Providers: Question 1

What category of provider most closely describes your organization?

Answered: 120 Skipped: 0

The 15 responses specifying “other” are found in the Appendix.

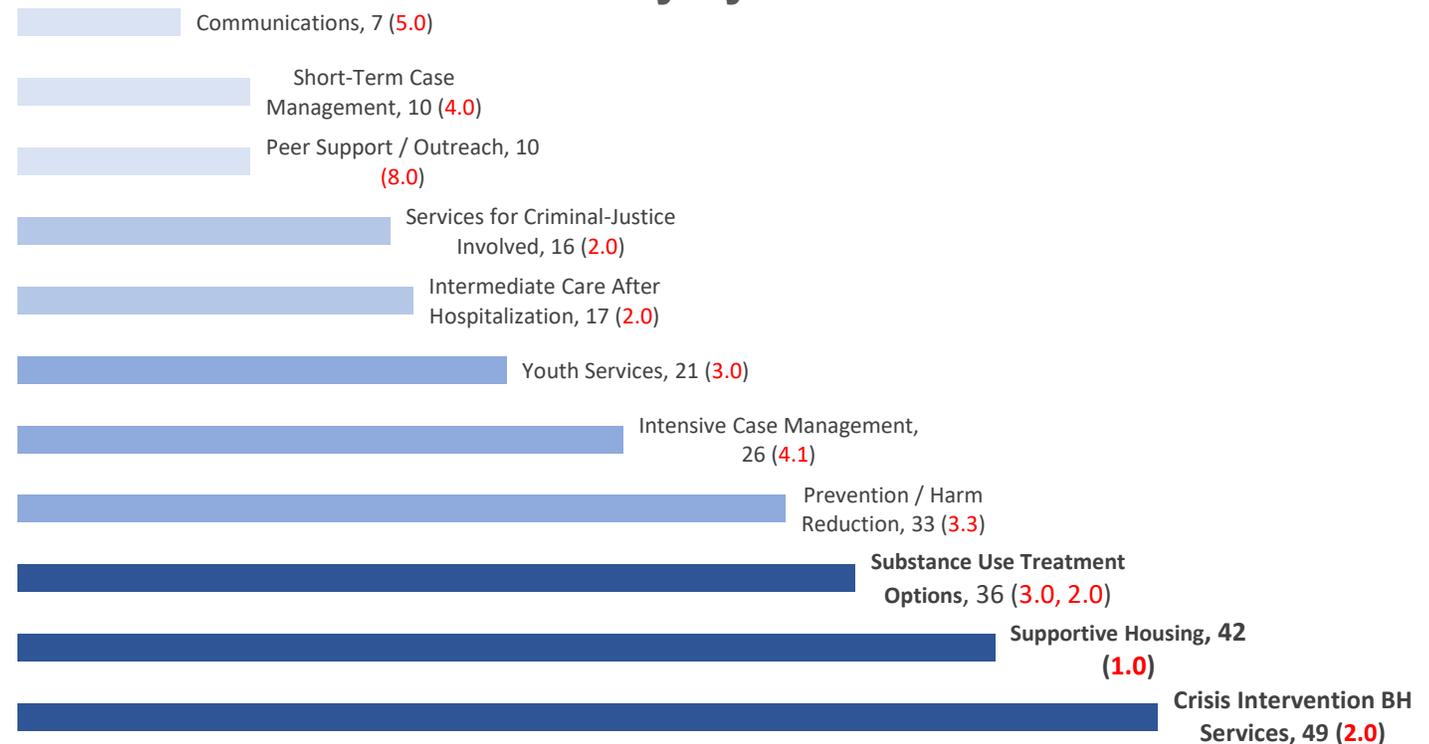


Service Providers Question 2:

Please rank the following service strategies in the order you think the County and City should prioritize them in the joint strategic plan. Where 1st represents the highest priority and 11th is lowest, please indicate how you recommend these service strategies be ranked.

Answered: 89 Skipped: 31

Service Strategies Ranked as 1st, 2nd or 3rd Priority by Service Providers

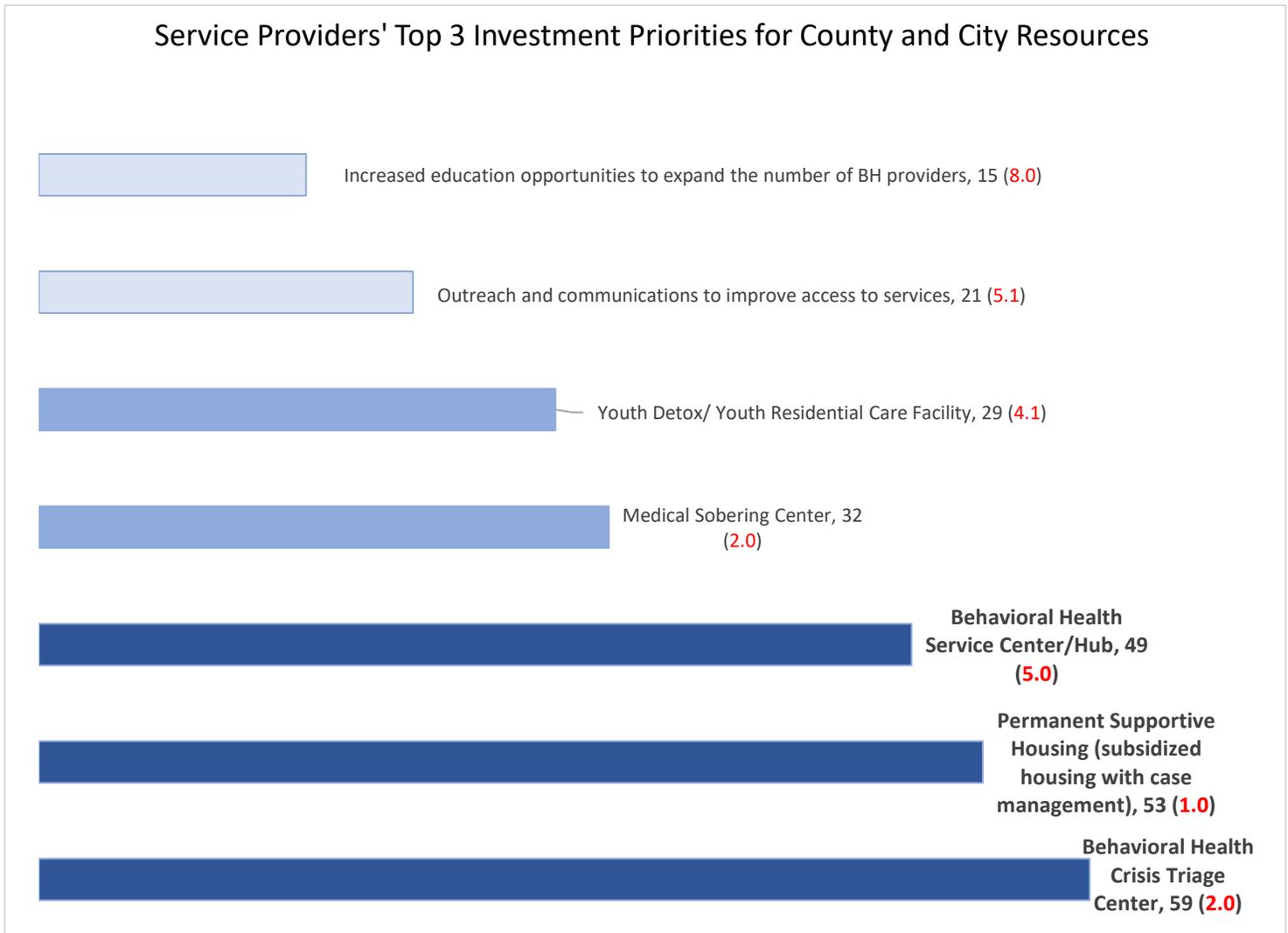


Numbers shown in red refer to where service needs have been integrated in the Joint Strategic Plan Draft.

Service Providers Q3:

The Gap Analysis report identified behavioral health system gaps in our community. How would you prioritize County and City resources to the identified service gaps?

Answered: 86 Skipped: 34



Numbers shown in red refer to where service needs have been integrated in the Joint Strategic Plan Draft.

Service Providers Q4:

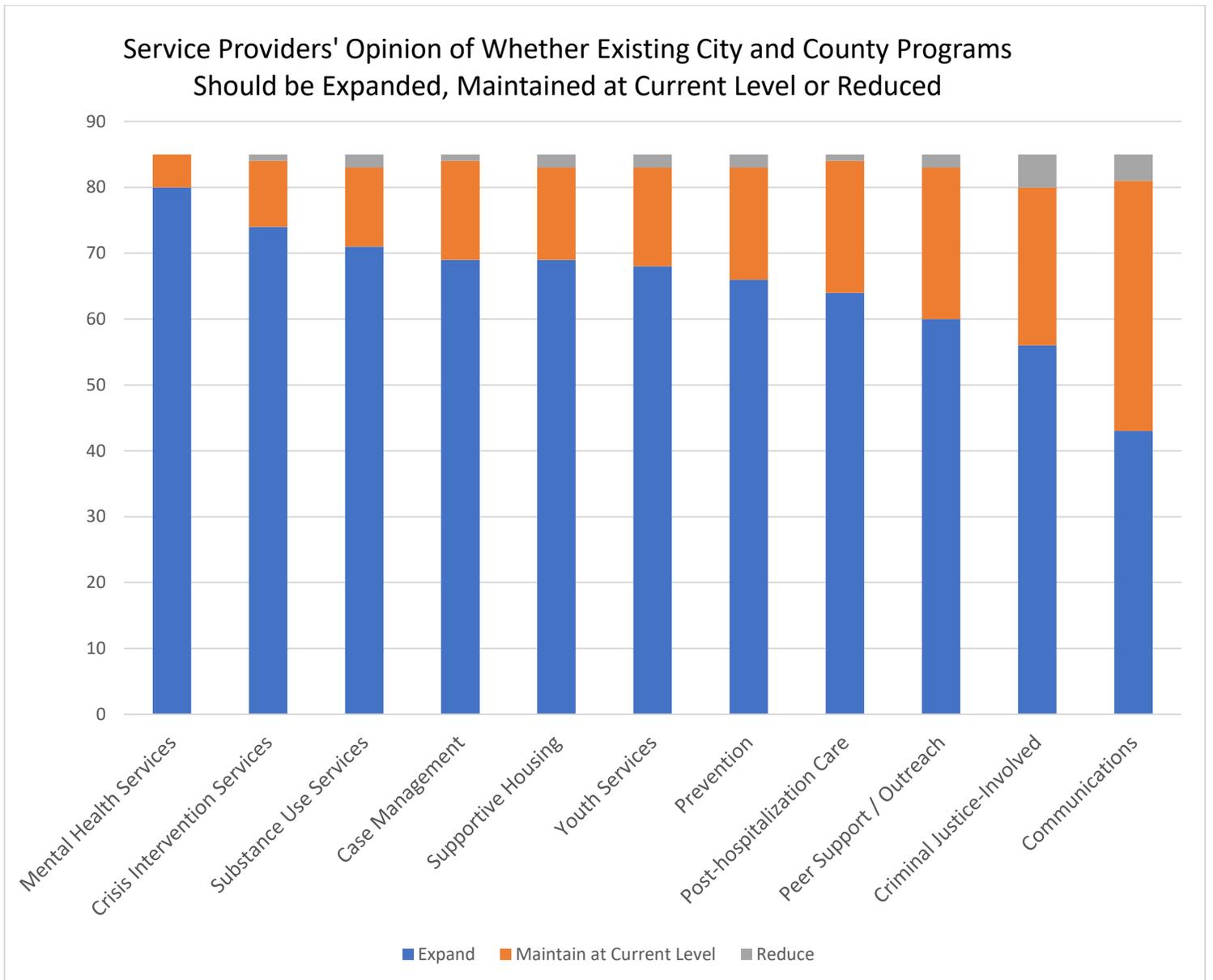
Is there an important service that is needed in our community that is not listed in Question 3?

See Appendix for the 39 responses to this question

Service Providers Q5:

The County and City currently invest in a wide variety of behavioral health services and programs. Please indicate whether you think these existing City and County programs should be expanded, maintained at current level or reduced.

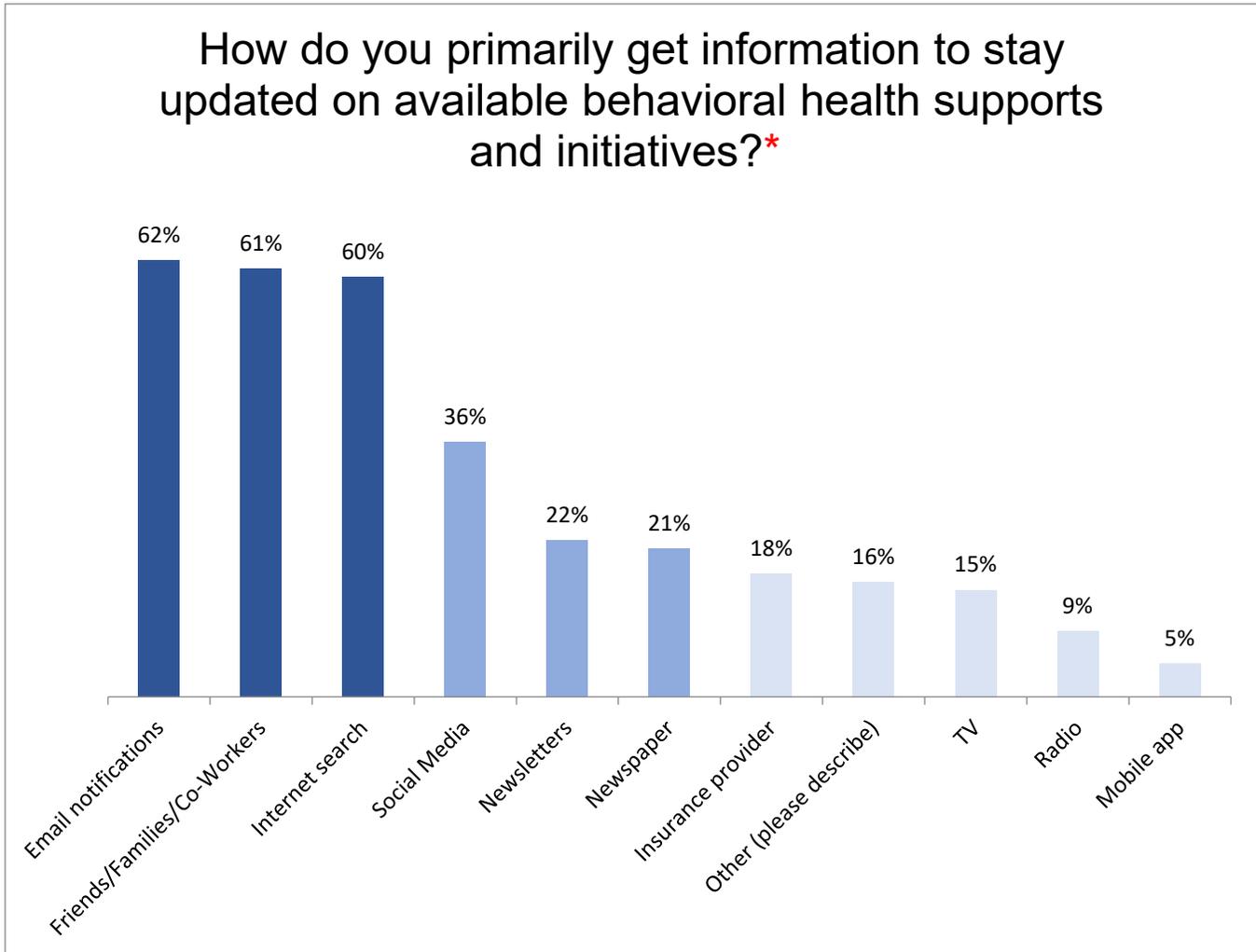
Answered: 85 Skipped: 35



Service Providers Q6:

How do you primarily get information to stay updated on available behavioral health supports and initiatives? Please check all info sources you rely on:

Answered: 85 Skipped: 35



* - Cross referenced in section 5.0 in the Joint Strategic Plan Draft..

The 13 responses specifying "other" are found in the Appendix.

Service Providers Q7:

Additional suggestions for the County/City behavioral health strategic plan may be added here. Answered: 33 Skipped 87

The 33 responses specifying suggestions are found in the Appendix.

Section 2:

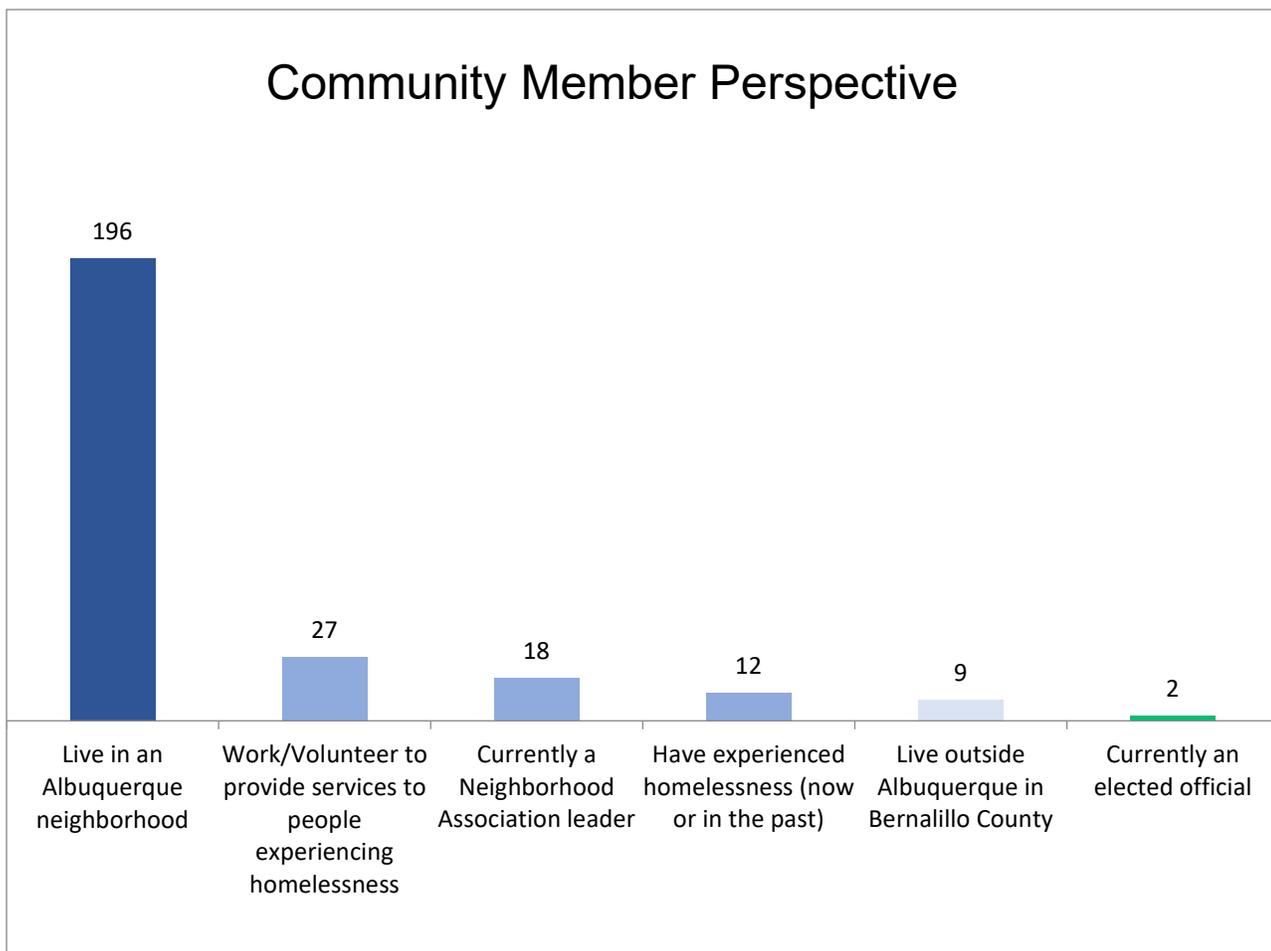
Behavioral Health Strategic Plan Survey Results from Community Members

264 survey responses were received between December 20, 2021 and February 28, 2022 by people who identified as community Members.

Community Members Question 1:

Which of the following most closely describes your perspective?

Answered: 264 Skipped: 0



Community Members Q2:

Please rank the following service strategies in the order you think the County and City should prioritize them in the joint strategic plan. Where 1st represents the highest priority and 11th is lowest, please indicate how you recommend these service strategies be ranked. Either drag and drop strategies to your preferred order, or select a number in each box.

Answered: 213 Skipped: 51



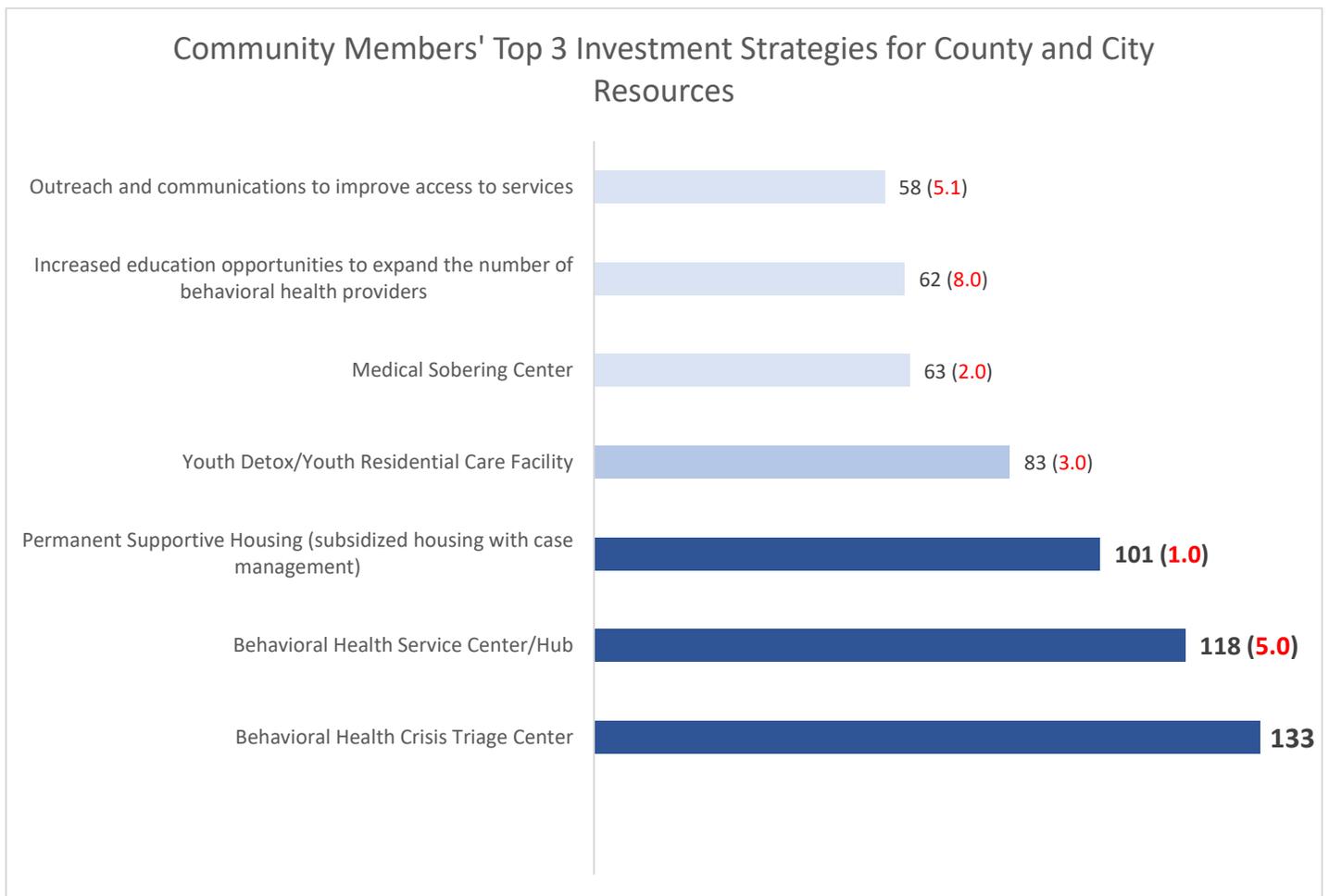
* Crisis Intervention BH Services can be cross referenced in section 2.0 of the Joint Strategic Plan Draft.

Other numbers shown in red refer to where service needs have been integrated in the Joint Strategic Plan Draft.

Community Members Q3:

The Gap Analysis report identified behavioral health system gaps in our community. How would you prioritize County and City resources to the identified service gaps? Where 1st is highest priority and 7th is lowest, please indicate how you recommend these services be ranked. Either drag and drop into your preferred order, or select a number in each box.

Answered 206 Skipped: 58



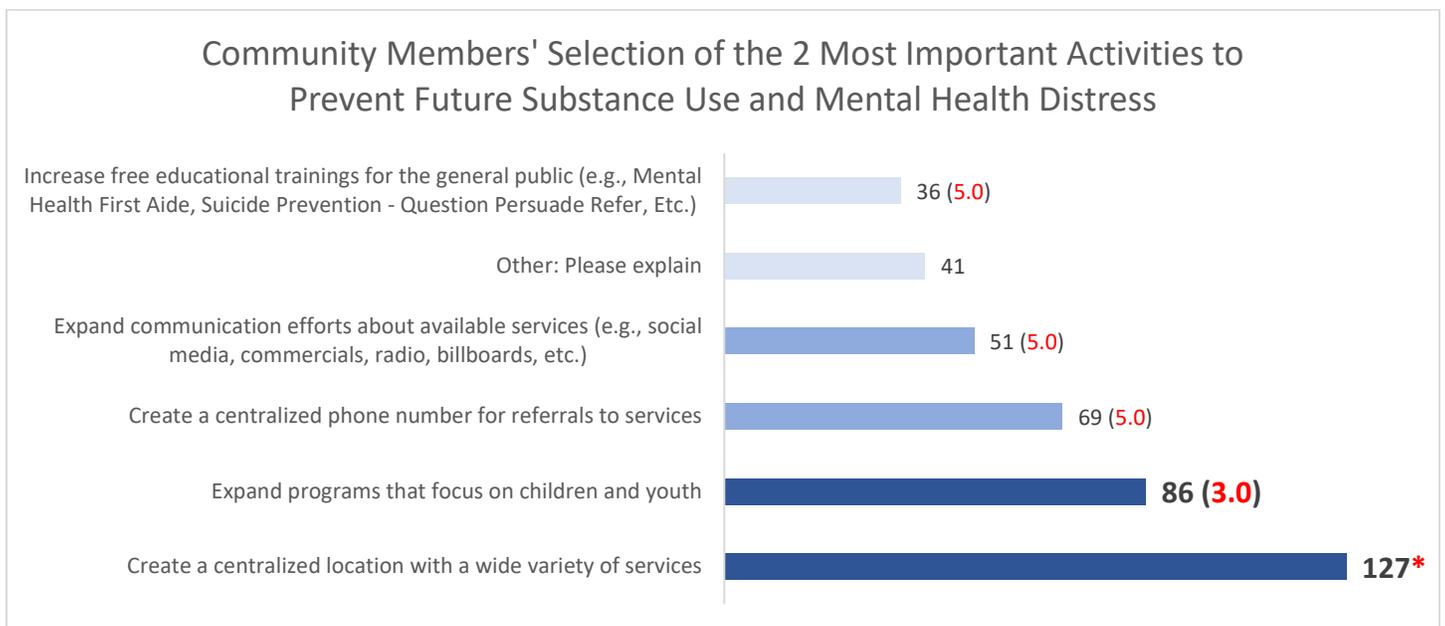
*** Crisis Intervention BH Services can be cross referenced in section 2.0 of the of the Joint Strategic Plan Draft.**

Other numbers shown in red refer to where service needs have been integrated in the Joint Strategic Plan Draft.

Community Members Q4:

Please select the top two activities that you think will best prevent future substance use and mental health distress. Check the box next to the two areas you view as most important.

Answered 205 Skipped: 59



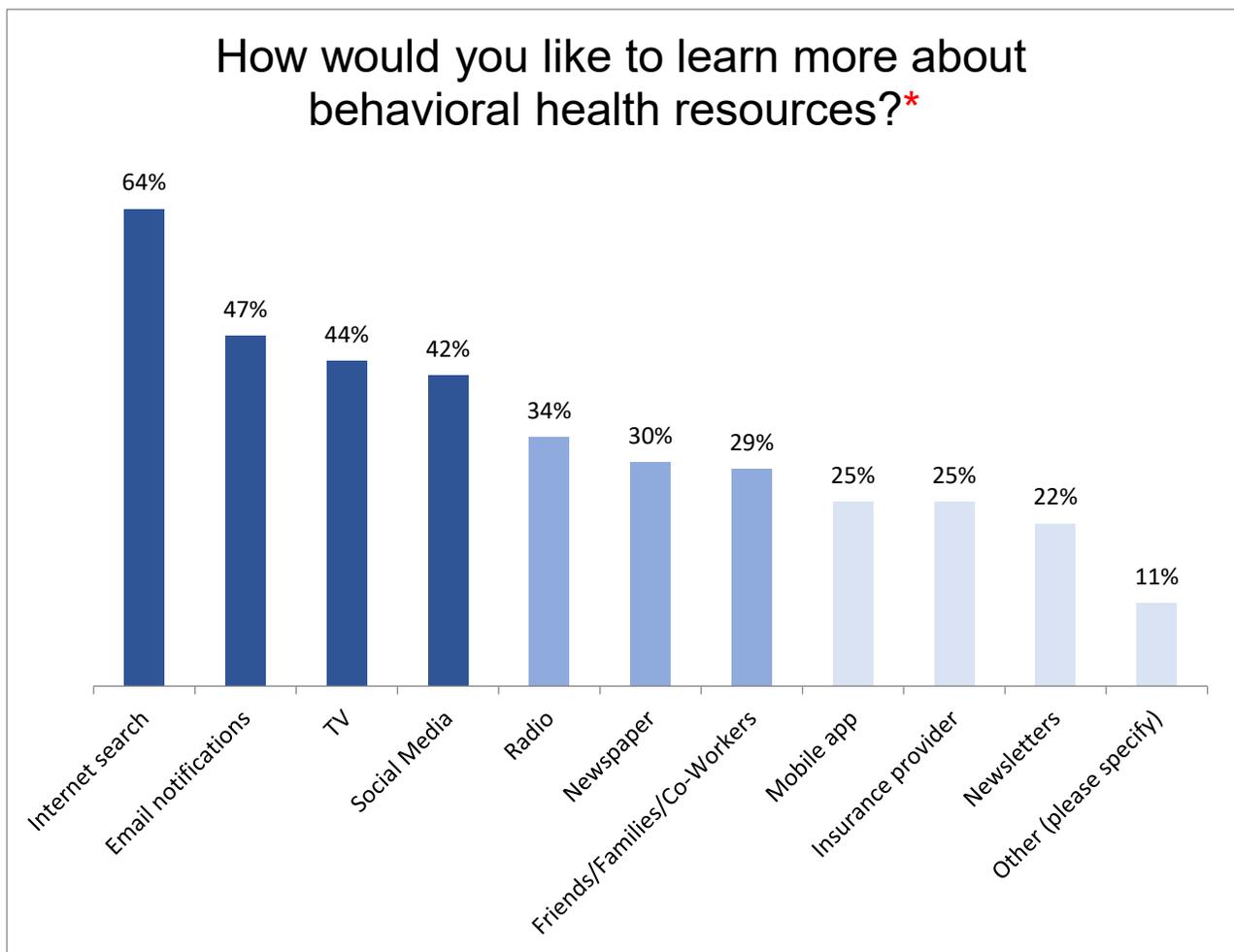
* Centralized location for service information can be cross referenced in section 5.0 of the Joint Strategic Plan Draft.

Other numbers shown in red refer to where service needs have been integrated in the Joint Strategic Plan Draft.

Community Members Q5:

**How would you like to learn more about behavioral health resources?
Please check all info sources you rely on:**

Answered 205 Skipped: 59



* - Cross referenced in section 5.0 in the Draft Joint Strategic Plan.

Appendix: Responses to Open-Ended Questions

Section 1: Service Providers Survey

Written Comments provided in Survey Responses for Questions 1, 4, 6, and 7.

Q1 What category of provider most closely describes your organization? Other (please specify)

Other affiliation as specified:
Bemer Company
Charter School
Community Health in Healthcare consultant
District Court
Educational Institution Health Center
Educational Organization
higher education
Independent Contractor
Managed Healthcare Organization
Private Practice
Psychologist in Private Practice
Statewide nonprofit association
University/Education
We're a collaborative of churches

Q4: Is there an important service that is needed in our community that is not listed in Question 3?

Open-Ended Responses:
24/7/365 free bus services and improved routes throughout the entire county
A Clubhouse like Santa Fe offers: http://www.thelifelink.org/the-clubhouse
A Holistic Center that will focus on BH PH and all social determinants of Health.
ADA accessibility to all public and Private services. Real supportive housing like The Villages in Long Beach, CA, not the SHCNM version.
After-school sports for children 12+
Alternative Resources like Hypnotherapy.
Alternatives to police response to behavioral health crisis situations
Building an interface system for homeless and community members though the advancement and fortification and development of neighborhoods and HOAs.
can't think of any
Certified Peer Support Services and diversion from emergency departments
Child focused behavioral health services
Counseling services for youth
Crisis triage and care center for women
dv
HOUSING

In-Patient co-occurring services
job training and development
Legal support for clients who are involved with the criminal justice system.
Lgbtqia population
Long term in-patient treatment for people with co-occurring disorders.
Long Term or Permanent Mental Health Facilities.
More general case management for help with access to food and other basic needs
More services to address the youth needs to prevent them from becoming more intense adults.
No
parenting support to prevent Adverse Childhood Experience and support parents in need
PEER SUPPORT
Real Housing first (no property manager or city/county involvement. Zero Police emergency response for Substance use and mental health.
RE-ENTRY FOR FORENSIC POPULATION
Safe injection sites
Services for youths leaving foster care.
There are a lot of services out there, but people don't know how to get to them. Having a central hub or Peer Navigator to help with this would make a world of difference.
Transportation and I also think that some of these folks who need services in behavioral health have comorbidity; diabetes, are not ambulatory, (wheelchair or blind) and traumatic brain injuries and had no treatment, and so forth
Transportation from MDC to treatment centers
Transitional living with case management
We would have plenty of BH providers if they were paid better.
wrap around homeless services;
youth and adolescent support/peer groups for those living in households with mental/substance use
Youth detox needs to include medical detox. Communications NEEDS to be streamlined and appropriate. Right now people have no idea where to go for help. The city and county need to be actively engaging people most affected by systems for their strategic planning, otherwise any blinders could be multiplied. This is really critical
Youth mentoring programs

Q6: How do you primarily get information to stay updated on available behavioral health supports and initiatives? Please check all info sources you rely on

Other sources as specified:
Colleagues, Professional Organizations
Community Meetings
Groups
Local collaboratives
Neighborhood Associations and Coalitions
Networking with partner organizations and site visits
New Mexico Psychological Association (NMPA)
People telling us about them.
Presentations/webinars
primary care provider
Professional journals
public records,
We actively seek out new and existing resources through my work
work meetings and updates

Q7: Additional suggestions for the County/City behavioral health strategic plan may be added here:

Other suggestions as specified:
A dedicated transitional living facility for those exiting incarceration.
Add a list of supported providers to a web page for referrals to each other
Again, the city and county must engage community members with lived experiences, and their families. The one time community member eventbrite is not going to get to all whose voices need to be included. And the city and county need to increase their ability to support people with addictions. Social model detox (county) and a city based program that does not provide medications support are not up to date. Lastly, there needs to be a centralized and up to date system of community members understanding resources, and a very strong network of care providers.
Albuquerque needs more funding for all the important issues.
Can we take the money being sucked into the jail, and use it to make the jail into a true rehabilitation center....
comprehensive curriculum covering detox, rehab, housing, job - with ongoing case management
Crisis triage and family support during crisis should be included.
Desperately need Intensive Out Patient services for all ages
Email listserve or general distribution list for all providers in the metro area to share information about availability of programs, beds, therapists, housing would be useful immediately.
Expand access to behavioral health services to children and families through our schools
expand services
Expanding vocational training opportunities for criminally involved youth and adults. Expanding mental health resources provides through schools.
Get the kids involved before they get into trouble. Identify at risk families earlier
Grandparents r8ising grandchildren assistance
In patient beds. There is no back up for private practitioners to escalate level of care. I feel no support for serving sicker clients.
Maintain focus on developing a racially, ethnically, sexually and gender diverse resource network.
More enforcement, prosecution, and convictions on drug related offences would make drugs less appealing. I see so many mental health issues caused by drugs, including marijuana.
Need guidelines and standards for overnight shelters updated and published. Need guidelines and standards for approved encampments updated and published.
Not sending ambulance bills to collections for those who are low income.
Open forum regularly scheduled meetings with community and providers.
People need housing before they can begin to address their behavioral health! We need more housing, specifically permanent supportive housing and emergency shelters that are low barrier to better serve folks with behavioral health concerns.
Provide all resources available at one site
Public awareness
Reach out to private practice groups or agencies
reduce fentanyl supply here
Safe injection/use sites to reduce opiate/fentanyl OD deaths

The county needs more agencies with wrap around services that can be accessed on a walk in basis. The city also needs to advertise about the westside shelter and provide better security. Many clients do not want to seek services there because they've had a bad experience with being robbed, assaulted, or intimidated by other residents.

The gateway center is a terrible idea. Its located too close to already struggling residential neighborhoods

Utilize community based organizations to find out what the community needs and not what the "suits" think the community needs.

We need to support our parents and those who are criminal justice involved, as well as irradiate stigma associated with behavioral health service utilization

Yes -- make sure there is a buffer zone around any behavioral health facility and the adjacent properties. City behavioral health facilities should be self-contained and should NOT become a blight to the neighborhoods in which they're in.

Appendix: Responses to Open-Ended Questions

Section 2: Community Member Survey

Written Comments provided in Survey Responses for Questions 4, 5 and 6.

Q4: Please select the top two activities that you think will best prevent future substance use and mental health distress. Check the box next to the two areas you view as most important.

Other: 42 Responses

Other activities as specified:
1. develop an array of non-police responses to people experiencing difficulties/crises. 2. develop a continuum of intermediate care level settings that are not the jail, for people with disabilities who aren't dangerous to others.
A centralized location for several services will not be manageable
A joint ABQ BernCo comprehensive behavioral health plan that coordinates services and resources
Affordable housing and better paying jobs
Arrest and prosecute drug dealers
Centers for services should be accessible in several areas of city/county
Create a statewide system like the school IEP for each person needing services so we can stop guessing and start seeing real progress with real time-sensitive accountability for individual lives.
Create one central location that can treat both mental and drug addiction
Enforce existing vagrancy laws. ABQ and BC quality of life for tax paying citizens is in a spiral. Stop screwing around with more fluffy stuff like the failed Tiny Homes. Enforce the existing laws including shop lifting laws that are killing businesses. My area Home Depot and Walmart don't even have shopping carts for paying customers. Stop using silly terms like 'housing insecurity' and call it what it is 'drug addict camps' making a living through crime on your paying 'citizens'.
ensure public input into BHI
Expand and fund programs that exist and open them up for more people - less restrictive.
Expand crisis teams that are first responders
Expand school-based behavioral health services
Expanded hours of community centers do youth have a safe place to hang out in the evenings from 6p - 12a
Focus on at risk children and their families-triage mentoring
Free pre-school childcare
Hold citizens accountable who refuse help. They cannot continue to live on the streets, it's too dangerous for them and for residents who live nearby.
Housing as its difficult to get services trying to survive on the streets
Housing. While I don't necessarily love the idea of paying for others' housing as a taxpayer, I am tired of being fearful in my own home because of the homelessness relative to mental health needs. I am hopeful that creating an environment where people have shelter/services temporarily as people work yo get their lives back on track would be helpful to everyone.
Increase support of religious groups and groups like Al-Anon
Increase the funding and availability of behavioral health centers and staff
Increase the number of providers who take insurance
Life skills training. How to survive when life gets tough.
Mental HHealth 1st responders. Keeping criminals in jail
More effective and more kinds of providers. We all hear so often, no help was available.
More than one centralized location--Bernco is big.
Needs to be more locations to receive services and recourses
NOT a centralized location - have locations in each quadrant of town. We don't want to create a blighted area with good intentions.

NOT a centralized location with a wide variety of services. Expand services throughout the city - including the far north east heights. Services should be provided throughout the city.
One way bus ticket out of Albuquerque
poverty reduction programs
Revamp emergency mental health care
Root cause prevention and mitigation.
Sub-acute psychiatric hospitals
The enormous funds/money going into paying health care to manage the crisis is not producing results, except for health care company shareholders, prescriptions don't solve this problem, people can't get psych appts, Housing the unhoused with wrap around services in place there much better than putting them up in hospitals who spit them back out without follow up
Utilize resources currently directed at jail to instead be used to turn the jail into a wellness center.
Why can't these programs be integrated with the homeless treatment center at the Old Lovelace Hospital. The services should encompass all at risk people. It doesn't seem that with all the money spent toward helping the homeless that they actually want help. Why not combine. programs.
Within the centralized location, provide programs, training and info.
you are talking about services that are almost impossible to access
You're totally missing the point...treating the symptoms and not trying to find a cure. The cure lies in reduced crime, creating a better economic environment, City/State Gov't become business friendly

Q5: How would you like to learn more about behavioral health resources? Please check all info sources you rely on:

Other: 24 Responses

Other sources as specified:
A safe place to check some of the listed suggestions like email. When I was homeless I used the computers at the library because I didn't have access to a phone and the type of services I needed were hard to find so maybe having a newsletter in centralized places will help
Anonymous
Billboards with "score cards" that identify use in numbers not percentages
city and county information lines like 311
Community Organizations via training
Don't need anymore communication. Need to see action. Shame on you Keller and company for allowing your 'feel good' policies to ruin the city for all.
Faith Community
From health care providers, educators, community centers, community forums and trainings
Go to Kevin Arthun's cross-referenced online resource guide
I attend / Zoom HCC meetings. BERNCO seems to have stoped inviting the public to BHI meetings.
insurance is self interested, bottom line only, questionable ally in this
It is important to explain through different mediums the potential costs involved for accessing each behavioral health resource
Medical providers
Nextdoor
Psychology Today's database is okay but it is very out of date.
Reach out to churches and involve their members in neighborhood service and outreach
referrals from health care providers
School,billboards, bus wraps, bulletin boards,community centers, libraries, parks,doctors, medical appointments, er visits
Schools
Text
The Paper (weekly Alibi)

Through NAMI referral services
Trainings for staff already working in this field

Q6: Additional suggestions for the County/City behavioral health strategic plan may be added here.

108 Open Ended Responses, 156 Skipped

Additional suggestions for the County/City behavioral health strategic plan may be added here.

Other suggestions as specified:
24/7/365 free bus transportation to allow for access to Services
A full-service mental hospital should be built
ACS is telling people about services that we really cant get. No housing avail, no tiny homes avail, no drs avail
Address systemic racism that continues to cause people to want to self medicate and causes behavioral health issues. Let's try a housing first model.
All studies show first 5 years of human life is the most important, therefore, programs should be given priority that reflect this knowledge.
All these service providers should be located in different parts of the city and not just in area like the se
Alot of surveys with no results. All we out here get is surveys.
As mentioned before, why not combine these services with the homeless services at Lovelace Hospital.
As much as possible, keep costs down in order to make the services widely available
Assistance is needed to treat substance abuse and mental health
Be forward thinking in your budget forecasts
Be realistic.
Because of Covid's documented mental health effects on everyday people, provide a hotline, if there isn't one already, and free public programs on coping with the pandemic; for example, due to the loss of job, income, children's school arrangements, social contacts with friends and family, ability to travel, and ability to plan for the future.
Behavioral healthcare workers need to be paid a living wage so that we can retain workers who choose to make it their career. High quality services start with quality providers who are not overworked and underpaid. We need facilities that are operating with cutting edge treatments and staff who are well-trained and well-paid. In the past, staff at treatment centers have been poorly qualified for the complexities of the job and poorly paid. If our city does not make a commitment to improving the behavioral health of community members, then we will continue to revolve through cycles of abuse, poverty, trauma, and crime.
Better interface between mental health providers and police on the beat.
Boots on the ground
Check the research about what works and then develop a plan to implement proven strategies..
Co-mingle funds to increase supportive housing, enhance SUD treatment and provide coordination of care services across the continuum
Conduct surveys of the homeless to determine why they continue the lifestyle and what would encourage them to change.
continue to act with integrity and justice
Continued community advisory committee and community grants for educational and service programs and projects
coordinate available services without duplicating/fragmenting
County and City Government need a comprehensive Homeless Plan that is jointly funded.
Create an on-site hospice. Perhaps where the old car dealership used to be. Homeless can be taken there for comfort care. Not fair to ventilate, poke, operate, then send them back to the streets. Better to peacefully pass. More dignified
Create neighborhood specific resource/social service/law enforcement/ networking centers that coordinate services focusing on at risk families.
Create work/housing programs similar to the CCC (Civilian Conservation Corps)

Creating affordable housing and services throughout the city. Not allowing some areas to turn into violent zones bad for families while allowing wealthy, white citadels in the northeast heights. We are all ONE Albuquerque.
do not forget about seniors mental health - ptsd, medication dependency
Don't micro-manage individuals. Healing takes time.
End property and personal crime against resident tax payers. Stop whoever is buying catalytic converters. This theft is ridiculous!
Everything hinges on mental health and substance abuse treatment. Everything.
Expand measurement of initiatives and input from users of services
Expand the Crisis Intervention Team cooperation with APD
Fewer individuals behind desks major increase of hands on help
Figure out how to best utilize the tiny homes!
First, potential participants / clients/consumers must be met where they are. Not all are ready for housing or for treatment or some of the other services being mentioned here. It is important that individuals be safe
Focus on sustainable delivery and embedding services in law, not policies that change .
Have leadership be transparent and accountable instead of misrepresenting financial situations
Have transportation services to a mental health facility or drug rehab center.
Help get the drugs and rape under control. Too much on the streets
Hold people accountable for criminal acts
Home visits and family support. Monitoring compliance with prescribed medications, as well as efficacy of medications and side-effects.
housing first!
I know mental health is expensive, but I think a lot of homelessness and crime has a root cause in mental health.
I responded as formerly homeless, but am also a business owner in the downtown core. It's a flaw in the survey and in our perspective. I have a lot of insight addressing these issues. Once again, the people that could be the biggest resource in addressing these issues are only talked about and not invited to the conversation.
I think most of the Albuquerque public is misinformed and puzzled about the causes of the spike in homelessness and clearly mentally ill people on the streets. Informing the public as to the reasons behind this crisis as well as initiatives to resolve the issues would quiet much of the hysteria and misinformation being spread on social media.
I think that the city/county should focus efforts on communication about possible services a person may be seeking. I also think there should be specific focus points for vulnerable groups like the transgender and queer community. I would wander the streets I felt safer on because I could not access shelters because of possible harm to myself or others because I am transgender. I think that if all services available can be linked in a useful manner like a list of help options and the information to seem the services most needed for the individual would be highly appreciated. To communicate this info would be easier with different forms of media not that social media is more present. If a central hub could be created with access to phone, computers and a type of triage to help the individual find the most needed services for them would be extremely helpful!
I think the city/county needs more transitional living services with vouchers or sliding scale based on income. I also think supportive housing services needs to require the person to seek treatment for mental health and substance dependency
I used the mobile crisis intervention team a few years ago when a family member was having a mental health emergency, but they were extremely difficult to find and get ahold of. I was only able to contact them through personal referral by a police officer and not by calling 911 or by internet search or even by calling mental health crisis lines.
If they do not want help, then simple, don't let them do drugs freely on the street. Do something that involves real 'action'. Stop having so many meetings and get something done. 14 million for the Gateway Center and what happened to it?
Incorporate existing providers in planning, offer part time opportunities for fully employed providers to offer support
Increase funding for the county/city professional and licensed social workers AND PROVIDE PROPER TRAINING FOR ALL OF THEM
Information about resources in local churches, community centers, skate parks, middle & high schools
It is critical the city and county work together

I've seen a lot of waste in this area. You need to address this.
Just like the dog pound, pickem up, nourish back to health, social worker/equivalent
Keep going forward - this is not an issue that can continually be pushed under the rug.
Law enforcement must take a more proactive approach to finding and apprehending those who are illegally distributing addictive narcotics.
Legislation to allow for interventions before harm begins
Long term behavioural health facilities and drug rehab!
Make narcan and other emergency intervention drugs available only w treatment
Make the environment at the RCC user friendly so that those exiting the MDC system can get the help they need without being made to feel like they are "less than".
Mental health support for disabled people
More c
More effective neighborhood Associations
More outdoor activities along the bosque
More Peer support/outreach
More street outreach. The plans currently in place seem to help many people, however I don't think there are enough people to assist all the needs in our community.
More subsidies and incentives for single family rentals to increase the affordable rental inventory.
Move the homeless camps out of parks and into vacant lots that are supervised
Need ore ways to make direct contact with service providers.example i am a 75 year old veteran, no family, no transportation and my phone crashed. I have no way to set or get my cover booster.
Need behavioral support services/education in schools, dedicated liaisons for schools to make same day referrals to programs..
Need strategic plan for BHI
Need to focus outreach efforts (regarding services & resources) on practical outreach methods i.e. most everyone has a cell phone so an App would be very effective) for directly and personally contacting substance abusers (and their families/friends).
NOT one centralized hub with all services... spread services throughout the city - not District #6
Open-Ended Response
Please don't focus efforts exclusively on people with homelessness or addiction issues. clearly, people from all economic backgrounds could use this help. Sometimes the only thing keeping them from homelessness or out of control addiction is the BH help they might get from these services.
Please increase services available for teens. Services that address those at risk of suicide.
Please remember that housing vouchers without available housing is no more than a political red herring.
Prevention and early intervention, especially for young people, are critical services and often best accessed at school.
Prioritize permanent supportive housing with additional supportive services (i.e. case management, job placement, transportation, counseling, financial literacy, etc.)
Prioritize supportive housing with appropriate behavioral health supports.
Prioritizing gives information, but all of the strategies are essential for success. Another one is short term supportive housing, including Safe Outdoor Spaces.
Psychiatry is not a first line in our health system, they are "specialists" and thus a barrier for access to that treatment - yes people need access to prescriptions put psychiatrists out there on the front line rather than down the list of referrals - they partly created this problem and half or more of medication treatment is ineffective or not sustainable for patients. The only place people can go is the ER most days - that really HAS to change if they could help they would, POVERTY is not a germ, so what can medical really do, they get help if there is an actual medical issue, most just get spit back out and this costs enormously, and the ERs / hospitals are getting crushed on all aspects - they shouldn't have to treat / not treat poverty as if it is a disease.
Quit relying on law enforcement to respond and deal with the issues
Retain consultants and government personnel who have worked in communities with a functional behavioral health service system of care.
Reverse the sanctuary city legislation

Reverse the sanctuary city legislation
safe housing first
Slogan like: Accept, Appreciate, Accommodate
So many important programs and needs!
Spread it across the city. Should not be located in just one area.
Stop enabling people to be homeless and drug-addicted. If they do not want help, put them in jail or commit them to Mental Health facility which actually provides care, respects all patients and staff members, and detox. Refer released patients to support groups. Have ALL patients/homeless involved in projects like cleaning up the community.
Stop handing out motel vouchers to drug addicts and gang bangers.
Subcommittees should have more input .
Suboxone should be available to those in prisons and jails. It's a life-saving drug to help with recovery.
Support and education for families with members needing behavioral health assistance
support public health school in NM, preferably UNM
Support School based health centers
Talk to the 5 cities that have done the BEST in this topic. Find out where they spent their money, where they succeeded, where they failed, and if they could do it again what would they change. Take those answers and implement them in ABQ no matter what the cost is to do it.
Teach children about strategies/ programs available to the community in School to educate, build empathy and create future leaders.
Teach the youth Life-Wise skills
Thank you for addressing these behavioral health needs in ways that do not involve APD.
The Community Safety Dept, with non-violent interventions needs to be grown and funded to the extent that staff can be hired. Education in Behavioral Health needs expansion.
Train probations officers to assist individuals accessing services and provide support as they reintegrate into the community.
We desperately need more affordable housing! When people are inside, they are able to address other concerns in their life which will improve community health and safety!
We need to expand the medicaid 1115 to include paying for longer term in patient substance abuse treatment that includes working with people with co-occurring disorders and currently on psych meds.
work with community health organizations to offer long term counseling
Youth need life and skill trade opportunities not just for law enforcement as the police chief suggested as if there are no other occupations to be had in the community. There also needs to be opportunity to educate youth about the dangers of alcoholism and drug addiction and how it damages the growing brain.