

is that if a child is showing signs of mental health difficulties, parents and clinicians should be asking about suicidal thoughts.”

“Although we found that, on average, parents are not aware of their children’s suicidal ideation, it appears that a family history of depression is associated with lower rates of discordance,” said DeVille. “It is possible that parents are more likely to

start conversations with their children about suicide or mental health when they know there is a significant family history of depression. While other studies have reported high rates of discordance between parent and child reports, to my knowledge the relationship between family history of mental health problems and lower discordance has not previously been shown,” she said. •

Mental Health Weekly

welcomes letters to the editor from its readers on any topic in the addiction field. Letters should be no longer than 350 words. Submit letters to:

Valerie A. Canady, Managing Editor
Mental Health Weekly
111 River St., Hoboken, NJ 07030-5774
Email: vcanady@wiley.com

Letters may be edited for space or style.

Advocates for the homeless seeking funding for COVID-19

Now that the federal \$8.3 billion appropriations bill has passed and been signed into law this month to stem the spread of the new coronavirus (COVID-19), advocates are hoping some of that funding reaches one of this country’s most vulnerable populations: the homeless.

“With the passage of the \$8.3 billion that the federal government passed to deal with the coronavirus, we have no guarantees any money is coming to help homeless people,” Neli Vazquez Rowland, president and co-founder of the Chicago-based A Safe Haven, told *MHW*.

The 501 (c)(3) not-for-profit organization advocates for policy issues on mental health and behavioral health care, poverty, opioids, jobs and housing.

“We believe that community-based homeless and behavioral health care programs serving our most vulnerable citizens should be treated on par with first responders of any kind,” said Vazquez Rowland, who, along with her husband, Brian Rowland, founded A Safe Haven in 1994.

“We’re very concerned about how the funding is going to be allocated to deal with the coronavirus,” said Vazquez Rowland. “While we agree that we need to get funding committed to research, fast-tracking drugs, and institutions and health care systems, such as hospitals and clinics, we also believe that money must come to the front lines to avert a catastrophic outbreak among the homeless populations

and the providers who serve them.”

Vazquez Rowland added, “[The government] is not realizing that our census is bigger than most hospitals. About 400 homeless people reside in our main A Safe Haven building, and as a 365/7/24 operation, we have over 100 employees too at one location alone.”

Multidisciplinary team

A multidisciplinary team of professionals and clinical psychologists is on staff, as well as drug treatment providers and educators. Programs and courses are offered in the GED, computers, and financial literacy.

Every year, A Safe Haven assists an average of over 1,000 formerly homeless people with barriers like criminal justice backgrounds and gaps in their résumé back into the workforce, said Vazquez Rowland.

Whether it’s housing, transitional housing or a triage center, the agency provides what people need, including wraparound services unique to their needs, she said. “Our job is to assess and connect people with the right services, the right jobs and the right levels of housing,” she said.

The homeless in Illinois are the most costly and frequent users of the most expensive level of care in the emergency health care system and account for more than half of Medicaid cost, said Vazquez Rowland.

Susceptible population

“The homeless demographic is very susceptible to the coronavirus,”

said Vazquez Rowland. “O’Hare is the largest and busiest international airport, and people travel using our public transportation system, where the homeless often find refuge and ride the trains throughout the day and night,” she said.

The homeless are not likely to hit the ER at the first sign of the flu or call telehealth-related services, Vazquez Rowland said. They would most likely come to a public space or to a homeless program to sleep and eat, she said. “If one homeless person become host of coronavirus they tend to congregate among others who might catch it and spread it,” she said.

“A Safe Haven has always had a rigorous policy to protect us from any flu, virus or disease,” Vazquez Rowland noted. “But we have no test kits to find out whether people we’re serving have the coronavirus yet. It will take money and resources to get them.”

Vazquez Rowland added, “In the meantime, we inform people about the basics, like handwashing and all of the other recommendations being made by the Centers for Disease Control and Prevention for all of us to follow. The stakes are high, and it needs to be a public health mandate that the homeless are seen as a top priority, or we risk having a very high-risk and hard-to-track population exposing all of us to the disease.”

“We represent a demographic
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who rely on all of our voices,” Vazquez Rowland said. “I hope to hear more of us using them to make sure that we are doing everything we can on our own to do our part to give and to ask government to include helping the least among us.” •

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STATE NEWS

Report finds suicide leading cause of death for Oregon youth

Suicide has reemerged as the leading cause of death for Oregon young people ages 10 to 24, *Willamette Week* reported March 5. The Oregon Health Authority released its annual report on its Youth Suicide Intervention and Prevention Plan at the beginning of the month. The report reflects data from 2018, the most recent figures released to the organization. In 2017, the leading cause of death for Oregon youth was unintentional injury. But unintentional injury rates have decreased, while the rate of death has significantly increased. Oregon now has the 11th-highest suicide rate in the country for young people. Across demographics, Oregon's suicide rate has been on the rise since 2000 and is more than 30% above the national average. Last year, Senate Bill 52, or Adi's Act, was signed into law, requiring Oregon schools to develop suicide prevention plans. Before Adi's Act, Oregon was one of only three states that went without suicide prevention regulations for schools.

CALL FOR PROPOSALS

The National Hispanic and Latino Addiction Technology Transfer Network, the National Hispanic and

Coming up...

The **New Jersey Association of Mental Health and Addiction Agencies** will hold its Information Technology Conference, “No Fooling — IT Is Critical!” **April 1 in Edison, N.J.** Its annual conference, “Reimagining Health Care,” will be held April 23–24 in Iselin, N.J. Visit <https://njamhaa.org/events> for more information.

The **National Council for Behavioral Health** is holding NATCON 20 **April 5–7 in Austin, Texas.** For more information, visit <https://www.thenationalcouncil.org>.

The **New York Association for Psychiatric Rehabilitation Services** is holding its 16th Annual Executive Seminar Program, “2020 Vision: Lead, Partner, Perform and Transform,” on **April 21–22 in Albany, New York.** For more information, visit <https://rms.nyaprs.org/event/?page=CiviCRM&q=civicrm%2Fevent%2Finfo&reset=1&id=35>.

The **American Psychiatric Association** will host its 2020 annual meeting, “Advancing Quality: Challenges and Opportunities,” **April 25–29 in Philadelphia.** Visit <https://www.psychiatry.org/psychiatrists/meetings/annual-meeting> for more information.

Zero Suicide International, in partnership with the Zero Suicide Alliance, is hosting the Zero Suicide International 5 Summit, “Urgency by Design: Identifying Three Key Next Steps,” **May 11–12 in Liverpool, U.K.** For more information, visit <https://zerosuicide5.com/register/summit-access/full-summit>.

Mental Health America is holding its 2020 annual conference, “From Resiliency to Recovery,” **June 11–13 in Washington, D.C.** Visit <https://www.mhanational.org/2020/annual-conference> for more information.

Latino Prevention Technology Transfer Network and the National Hispanic and Latino Mental Health Technology Transfer Network are hosting the 2020 National Latino Behavioral Health Conference: Shaping the Vision of Latino Behavioral Health Equity Sept. 16–18 in Los Angeles. The purpose of the conference

is to highlight the latest and most relevant data around prevention, treatment, recovery, policy and research focusing on the Hispanic and Latino communities. Submit proposals before April 10. For more information, visit <https://na.eventscloud.com/esurvey/index.php?surveyid=81668>.

In case you haven't heard ...

Behavioral health care professionals from across the country descended on Capitol Hill March 11 to urge members of Congress to support the bipartisan Excellence in Mental Health and Addiction Treatment Expansion Act (S. 824/H.R. 1767), which looks to extend and expand Certified Community Behavioral Health Clinics (CCBHCs) for two years and add 11 states before the demonstration expires on May 22, according to a news release from the National Council for Behavioral Health. More than 100 CCBHC advocates joined Sens. Debbie Stabenow (D-Mich.) and Roy Blunt (R-Mo.) at the event to outline the benefits the clinics provide to tens of thousands of vulnerable Americans with mental health issues or addictions and call for immediate action by lawmakers. In 21 states, CCBHCs have delivered treatment to more than 400,000 patients, according to the Substance Abuse and Mental Health Services Administration (SAMHSA). The National Council is committed to establishing a total of 500 CCBHCs nationwide, serving 2.9 million individuals, by 2025.