

Alternatives to Forced Treatment: Voluntary, Community-Based Behavioral Health Services in Massachusetts

Helplines

Peer Support Lines & Warmlines*

Peer Support Lines and Warmlines are lines answered by people who've "been there" themselves and are trained to offer whatever is most needed in the moment ranging from crisis navigation to a listening ear to resource information.

There are a handful of these lines based in Massachusetts, as well as several national lines that accept calls from Massachusetts residents. More information is available at warmline.org.

Behavioral Health Help Line (BHHL)*

The BHHL is a clinically staffed call line offering a 24/7 single, insurance-blind, multi-channel entry point for Commonwealth residents in search of MH and SUD treatment. The BHHL provides access to BH assessment, recommendations, and referral. For more information, see masshelpline.com.

Trans Lifeline at 877-565-8860

Trans Lifeline is a grassroots hotline run by and for trans people offering direct emotional and financial support to trans people in crisis. For more information, see translifeline.org.

Thrive Lifeline

Committed to non-carceral peer support that avoids any and all involuntary interventions. Limited times available via website chat. For more information, see thivelifeline.org.

Blackline 800-604-5841 (also available by their new app)

Blackline is a resource that offers peer support through a LGBTQ+ Blacke Femme lens, prioritizing Black, Indigenous and other people of color (BIPOC) communities. It is particularly intended for people in crisis, who have experienced or witnessed violence and/or are seeking affirmation of their experiences in the world. For more information, see callblackline.com.

Never Use Alone at 800-484-3731 or 877-696-1996

Never Use Alone is a toll-free national service for people who use drugs while alone. It provides peer support, crisis response, and medical intervention without stigma and judgment. For more information, see neverusealone.com.

Additional Crisis, Support & Resource Lines*

There are a variety of additional lines (or listings of lines and other resources) that may be useful. These include:

- Mass.gov crisis, support and related lines: tinyurl.com/MASSGOVlines
- William James College Directory of help lines: tinyurl.com/WJlistings
- NAMI Helpline: tinyurl.com/NAMIl ine

**Some lines may engage 911 or the police for wellness checks or other in-person interventions with or without a caller's knowledge or permission. If you are concerned about this, it is always best to check with an operator or on the line's website to learn more about their policies.*

Peer-run Groups, Communities, & Individual Supports

Hearing Voices Groups

Hearing Voices groups grew out of the Hearing Voices Movement which started in Europe and have since made their way to the U.S. The approach was developed collaboratively by Patsy Hage (a voice hearer), Marius Romme (a psychiatrist) and Sandra Escher (a professor). There are groups both for people who are hearing voices, seeing visions, or having other related experiences, as well as groups for their family and friends. In addition to in-person groups, Hearing Voices USA maintains a list of groups available virtually. For more information on these groups, see tinyurl.com/HVNonline.

Alternatives to Suicide Groups

The Alternatives to Suicide approach is a peer-to-peer support practice for voicing, sitting with, understanding, and moving through suicidal thoughts. The approach was developed by [The Wildflower Alliance](#) (formerly the Western Massachusetts Recovery Learning Community) in the U.S. For information on groups, see tinyurl.com/WAonlinegrps.

Community Bridger Programs

Community Bridgers are peer supporters who focus on supporting people staying in restrictive environments (psychiatric facilities, etc.) to transition back to living successfully in the community. One source of Bridgers is through the Metro Boston Recovery Learning Community. For more information, see tinyurl.com/MBbridgers.

Wildflower Alliance 1:1 Consults

The Wildflower Alliance offers paid one-on-one peer support and consultations to individuals, family members, service providers, and organizations. For more information, see tinyurl.com/121WA.

Wildflower Alliance Discord Server

A 24/7 virtual community space with a mix of groups, on-line gathering spaces and places to post thoughts, questions and more. For more information, see wildfloweralliance.org/discord.

Roots Up 1:1 Consults

Roots Up is another source of one-on-one support and consultations to individuals, family members, providers and beyond based on a sliding scale. For more information, e-mail info@rootsup.info.

Maastricht Approach (from Hearing Voices movement)

The Maastricht Approach grew out of the Hearing Voices movement in Europe and clinicians and others began being trained in it in the U.S. over the last decade. The approach supports voice hearers to make meaning of and map out their voice hearing experiences in ways that can build understanding and increase a sense of agency over the experience. For more information on finding providers trained in this approach, e-mail info@rootsup.info.

Recovery Learning Communities (RLCs)

RLCs offer a variety of peer supports and connection points, as well as resource information advocacy and other opportunities. They are free and open to anyone. For more information, see tinyurl.com/RLCSmass.

Alternatives to Emergency Departments & Psychiatric Hospitalization

Peer Respites*

Peer Respites are crisis alternatives that offer 24/7 space (including individual bedrooms and shared community spaces) with the opportunity to rest, reflect, explore resources and turn crisis into a learning opportunity. Stays vary and range from 5 days to 2 weeks. These are the current peer respites in Massachusetts:

- Afiya Peer Respite (Northampton), wildfloewralliance.org/afiya
- Karaya Peer Respite (Worcester), kivacenters.org/respite/karaya
- Juniper Peer Respite (Uxbridge), kivacenters.org/respite/juniper
- La Paz Peer Respite (Dudley), kivacenters.org/respite/la-paz
- Anemoni Peer Respite (Holyoke), wildfloweralliance.org/anemoni**

**A bill to increase the number and accessibility of peer respites in Massachusetts is pending at the State House: H.2231/S.1383 (2025-26).*

***Anemoni is specifically intended for LGBTQI+ community members. It also has up to 8 spots available for mobile supports by phone, text, and in-person for people who want additional support, but are not wanting or able to stay at a peer respite.*

Peer-run Living Rooms

The Living Room Model is a community crisis center that offers people navigating crisis an alternative to hospitalization. Living Rooms are 24/7 environments that offer people experiencing crisis a place to connect, get warm, rest and get support. While Living Rooms are spaces to rest, they differ from peer respites in that they don't usually offer individual bedrooms and stays aren't usually longer than 48 hours. These are the current Living Rooms in Massachusetts:

- Living Room (Framingham) by Advocates, tinyurl.com/AdvocatesLR
- Living Room (Springfield) by Behavioral Health Network, tinyurl.com/BHNLRoom

Restoration Center of Greater Lowell

Opening in 2026, the Restoration Center of Greater Lowell, operated by Vinfen, is a new innovative mental health and substance use disorder center developed in collaboration with the Middlesex County Restoration Center commission and the Mass. Executive Office of Health and Human Services. It is a diversion program designed to offer an alternative to emergency room and incarceration for individuals experiencing behavioral health crises. For more information, see tinyurl.com/RestVF.

Mental Health Treatment Approaches & Family Supports

Illness Management and Recovery

Training in this approach involves teaching people about the nature of their diagnosis and how to manage it while helping them set and pursue their own recovery goals. Research shows that illness

management and recovery programs reduce hospitalization and improve psychosocial functioning and quality of life in people with serious mental illness. This is an evidence-based program.

Family Psychoeducation

In this intervention, a member of the client’s treatment team works with the family (including the client) to teach them about psychiatric illness and the principles of its management, as well as strategies for reducing stress and solving problems together. This program reduces rehospitalizations and increases client functioning. It is an evidence-based program.

Coordinated Specialty Care (CSC)*

CSC programs are for people who have recently developed a first episode of hearing distressing voices and other experiences often referred to as “psychosis”. CSC programs typically provide pharmacological treatment, family psychoeducation, individual or group psychotherapy, supported employment and education, and peer support. Extensive research shows that CSC programs improve outcomes of individuals. For more information, see tinyurl.com/CSCareMA.*

Enduring Connections

Enduring Connections is a pilot program based at Advocates that offers sustained, respectful, flexible, and compassionate support. It has been designed particularly for people who have not benefited from clinical interventions and/or whose experiences with institutional systems and settings have eroded trust and created feelings of desperation. It involves partnering individuals and families with peer supporters who offer compassionate and persistent outreach, as well as exploration of strategies for communication and collaboration between family members. It is considered an alternative to “Assisted Outpatient Treatment”. See more information at tinyurl.com/EnduringAdv.

Open Dialogue

Open Dialogue is an approach that originated in the Western Laplands of Finland and has more recently made its way to the U.S. Focus is on working with the whole family (however “family” is defined), making meaning of what’s going on and collaborative approaches overall. Advocates has had the longest standing Open Dialogue program in Massachusetts. For more information, see tinyurl.com/ODadv.

Family Supports**

NAMI offers a resource section for family and friends. For additional information, see tinyurl.com/NAMIMAfam.

**A bill to require commercial health insurance carriers to cover CSC is pending at the State House: H.1135/S.709 (2025-26).*

***For additional family supports, see also 1:1 consults offered through Wildflower Alliance and Roots Up, as well as Family & Friend Hearing Voices and Alternatives to Suicide groups.*

Behavioral Health Roadmap Services

Community Behavioral Health Centers (CBHCs)

CBHCs serve the entire Commonwealth. They offer same-day evaluation and access to evidence-based treatment for mental health and substance use conditions, with timely follow-up

appointments. They offer clinical services and peer supports with both evening and weekend hours. For more information, see tinyurl.com/MassCBHC.

Mobile Crisis Intervention (MCI), 877-382-1609

MCI is a community-based service of the CBHCs. Mobile crisis is offered as a separate service for youth and adults. Mobile crisis teams are able to go to people in crisis in the community to offer support and explore additional options for support. For more information, see tinyurl.com/MCICBHC.

Community Crisis Stabilization (CCS)

CCS services provide intensive short-term clinical treatment and stabilization in a 24/7 environment to help divert from avoidable trips to the emergency department or inpatient hospitalization. For more information, see tinyurl.com/Clinicalrespite.

Behavioral Health Urgent Care (BH UC)

BH UC provides timely behavioral health evaluations, short-term counseling, psychopharmacological services, and referrals for longer-term care when necessary. Urgent care appointments should be available within 48 hours, while comprehensive diagnostic assessment and urgent outpatient services should be available within 72 hours. For more information, see tinyurl.com/BHUCMA.

Children’s Behavioral Health Initiative (CBHI) & Behavioral Health Services for Children and Adolescents (BHCA) Services

Children’s Behavioral Health Initiative (CBHI)

CBHI began as an interagency initiative to carry out the remedy from the Rosie D. class action lawsuit, filed on behalf of MassHealth-enrolled children and youth with serious emotional disturbance (SED). Through the remedy, MassHealth pays for an enhanced continuum of **home- and community-based behavioral health services**, requires that primary care providers **screen** for behavioral health conditions at well-child and other office visits and standardizes behavioral health assessment by requiring clinicians to use the Child and Adolescent Strengths and Needs (CANS) **assessment tool** to document comprehensive initial assessments, and to update the CANS every 90 days to ensure that treatment plans address strengths and needs as they evolve. For more information, see tinyurl.com/CHBImass.

Behavioral Health Services for Children and Adolescents (BHCA)

The Division of Insurance and the Department of Mental Health jointly issued Bulletin 2018-07 to clarify that commercial health insurance plans must include specific benefits for Behavioral Health for Children and Adolescents or BHCA. These benefits mirror those available to youth eligible for Medicaid-funded CBHI services. For more information, see tinyurl.com/BHCAmass.

Additional Supports Funded by the Massachusetts Department of Mental Health

Clubhouses

Clubhouse Services are psychosocial rehabilitation services that provide supports through a membership-based community center. Clubhouse Services assists people to recognize their strengths, develop goals, and enhance the skills people determine are needed to live, work, learn, and participate fully in their communities. Clubhouses are open to anyone, not only DMH clients. For more information, see massclubs.org.

Homelessness Services

Homeless Support Services serve adults who are homeless and have psychiatric histories or who are otherwise experiencing emotional distress or extreme states that make them eligible for these supports. People who qualify for these supports may be living in shelters, on the streets, and in other places not meant for human habitation such as parks, under bridges and alleys. Homeless Support Services identify and engage people with the primary goal of linking them to appropriate services including the DMH service system. Three types of Homeless Support Services include Outreach and Engagement, Stabilization, and Housing First. For more information, see the “Homelessness Services” section here tinyurl.com/DMHunhoused.

Employment services

Supported Employment

Supported employment helps people with psychiatric histories get and keep competitive jobs in areas that are of interest to them. Unlike traditional vocational rehabilitation programs where training precedes job search, supported employment pairs rapid job search with supports to help the person maintain the job. This is an evidence-based practice.

Career Initiatives

Career Initiatives grants offer up to \$2000 grants to people with psychiatric histories who reside in Western Massachusetts and have an idea for a small business or independent project. They are intended to support people who’ve experience significant hardships and barriers to building the life they want to be able to pursue and explore their dreams. For more information, see tinyurl.com/WACAggrant.

Housing services

Housing First

Housing First is a service model that provides permanent, supportive housing without preconditions (like sobriety or mental health treatment compliance). This model has shown success in reducing crises for unhoused individuals with severe mental health conditions.

Examples of Innovations from Other States

Soteria Vermont

Based on the original Soteria program in California as founded by Loren Mosher, this program focuses on providing an alternative to hospitalization and other supports for people having their first experiences of what commonly gets referred to as “psychosis”. This program mixes some conventional clinical access with supports designed to meet someone where they’re at and explore their needs and how to make meaning of their experiences. Stays usually last up to six months. Operated by Pathways Vermont. For more information, see tinyurl.com/SoteriaV.

Intensive and Sustained Engagement Teams (INSET)

These New York-based programs are considered another alternative to “Assisted Outpatient Treatment”. Supports are peer-led, available 24/7 and primarily intended for people who have not had access to or been unsuccessful with conventional mental health supports. For more information, see tinyurl.com/INSETny.

IMANI Breakthrough

IMANI Breakthrough is a faith-based individual and group wellness intervention taking place in the community within Latinx and Black churches. The IMANI Breakthrough is designed to decrease opioid use and its negative consequences. For more information, see tinyurl.com/ctIMANI.