New England SAMHSA Overview 2021

Taylor Bryan Turner, Assistant Regional Administrator
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services

Wednesday, March 10, 2021
RI Overdose Prevention and Intervention Task Force Agenda

• SAMHSA Overview
• Priorities
• Data Snapshot
• Promising Practices
• On The Horizon
The Substance Abuse Mental Health Services Administration (SAMHSA) is an agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the Nation.

**Roles:**
- Leadership
- Voice
- Data
- Surveillance
- Public Education
- Regulation & Standard Setting
- Practice Improvement
- Funding

**Behavioral health is essential to health**
- Prevention works
- Treatment is effective
- People recover

*Our mission is to reduce the impact of substance abuse and mental illness on America’s communities*
The Building Blocks of Recovery

Health  Home  Purpose  Community
New England’s Own SAMHSA Regional Administrator

Tom Coderre

Acting Assistant Secretary for Mental Health and Substance Use at the Substance Abuse and Mental Health Services Administration (SAMHSA)

Tom Coderre is the Acting Assistant Secretary for Mental Health and Substance Use.
Priority Areas

1. Combating the Opioid Crisis through the Expansion of Prevention, Treatment, and Recovery Support Services;

2. Addressing Serious Mental Illness and Serious Emotional Disturbances;

3. Advancing Prevention, Treatment, and Recovery Support Services for Substance Use;


Coronavirus Response and Relief Supplemental Appropriations Act

- SAMHSA received $4.25 billion to provide increased MH and SUD services and support, including:
  - $1.65 billion for the Substance Abuse and Prevention Treatment Block Grant;
  - $1.65 billion for the Mental Health Services Block Grant;
  - $600 million for Certified Community Behavioral Health Clinics;
  - $50 million for suicide prevention programs;
  - $50 million for Project AWARE to support school-based mental health for children;
  - $240 million for emergency grants to States; and
  - $10 million for the National Child Traumatic Stress Network;
  - Not less than $125 million of funds provided to SAMHSA must be allocated to tribes, tribal organizations, urban Indian health organizations, or health service providers to tribes across a variety of programs.

- Regular FY 2021 Labor-Health and Human Services-Education Appropriations
  - $6.015 billion for SAMHSA, an increase of $133 million over FY 2020
  - $487 million for the Programs of Regional and National Significance, which includes a number of mental health services programs, such as mental health awareness training and $4 million for Comprehensive Opioid Recovery Centers as well as $35 million increase for Mental Health Block Grant
### RHODE ISLAND

#### Summaries FY 2020

**Formula Funding**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Abuse Prevention and Treatment Block Grant</td>
<td>$7,995,251</td>
</tr>
<tr>
<td>Community Mental Health Services Block Grant</td>
<td>$2,748,538</td>
</tr>
<tr>
<td>Projects for Assistance in Transition from Homelessness (PATH)</td>
<td>$319,276</td>
</tr>
<tr>
<td>Protection and Advocacy for Individuals with Mental Illness (PAIMI)</td>
<td>$428,000</td>
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<tr>
<td><strong>Subtotal of Formula Funding</strong></td>
<td><strong>$11,490,965</strong></td>
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**Discretionary Funding**

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<tr>
<td>Mental Health</td>
<td>$8,167,803</td>
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<tr>
<td>Substance Abuse Prevention</td>
<td>$349,954</td>
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<tr>
<td>Substance Abuse Treatment</td>
<td>$21,685,084</td>
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<tr>
<td>Flex Grants</td>
<td>$2,800,000</td>
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<tr>
<td><strong>Subtotal of Discretionary Funding</strong></td>
<td><strong>$33,003,041</strong></td>
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**Total Funding**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Total Mental Health Funds</td>
<td><strong>$11,663,517</strong></td>
</tr>
<tr>
<td>Total Substance Abuse Funds</td>
<td><strong>$30,031,089</strong></td>
</tr>
<tr>
<td><strong>Total Funds</strong></td>
<td><strong>$41,694,606</strong></td>
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### Region 1 Behavioral Health Priorities

- **Substance Use/Misuse:** Alcohol, Methamphetamine & Opioid Addiction
- **Mental Health:** Depression, Anxiety & Suicide
- **Access to Care:** Technology and Tele-Health
- **Health Promotion & Prevention:** Changing Cultural Norms / BH Literacy
- **Integrative/Collaborative Care:** Primary & Specialty Behavioral Health Care
- **Behavioral Health Practitioner Education and Training**
- **Special Populations:** Tribal, Criminal Justice, Veterans

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<tbody>
<tr>
<td>Rhode Island</td>
<td>1.06 Million</td>
<td>1025</td>
<td>3.00%</td>
<td>6.92%</td>
<td>4.9%</td>
<td>9.5 (106)</td>
<td>51.8%</td>
</tr>
<tr>
<td>Region 1</td>
<td>12,292,629</td>
<td>210</td>
<td>3.1%</td>
<td>6.5%</td>
<td>5.1%</td>
<td>14.45 (1939)</td>
<td>51%</td>
</tr>
<tr>
<td>United States</td>
<td>329,064,917</td>
<td>92.9</td>
<td>2.8%</td>
<td>5.8%</td>
<td>4.8%</td>
<td>14.8 (48,344)</td>
<td>43.6%</td>
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</tbody>
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*Prevalence Estimate Data taken from 2019 NSDUH Survey*
Regional Priorities

- Addressing SUD/OUD and overdose (FIWO) – Surgeon General New England Town Hall
- SMI and Suicide (Federal Collaborative on SMI/SED)
- Diversity, Equity and Inclusion
- Criminal Justice / Recovery Courts
- Harm Reduction Efforts (Naloxone, Syringe Service Programs, other EBPs)
- FEMA Region 1 Recovery Taskforce
- Collaborating with HHS sister agencies on specific initiatives:
  - ACL: collaborating with ADA Office
  - ACF: Whole Family Approach to Jobs, Opportunity Zones, Regional Report
  - OCR, OGC and CMS: PHI, discrimination related projects
  - HRSA: primary care/BH integration in FQHCs, HIV/AIDS, MAT, BH workforce development, HEART Committee
  - OASH: Syringe Services Programs, ASTHO, CHW collaboration
  - ASPR: Disasters, COVID recovery coordination group
- Collaborating with federal agencies outside HHS:
  - HUD: Mayor’s challenge to end homelessness, promising practices with SUD
  - DOL, USDA: providing TA and opioid specific grants and programming
  - FEMA: opioid crisis planning, COVID, disasters
- Facilitating TA support for state/local BH authorities
- Scale up Peer Recovery Support Services / Recovery Housing
- Working closely with federally recognized Tribes in Region I who continue to experience high rates of suicide, alcohol/other drug use and lack of access to BH services
COVID-19 the Family, State and Federal Policy
Lessons Learned in New England
Challenges We’re Hearing In New England

- Increased opioid overdoses across the region
- Increase in alcohol purchases and consumption
- Homelessness and the intersection of SUD
- Increased suicidality - NYT [Las Vegas link](#)
- [Lancet Review](#) of high anxiety, stress, and trauma for COVID-19 survivors
- Youth trauma due to lack of social circles, parental stress due to illness and unemployment
- Burden of isolation and lack of connection (zoom fatigue, higher risk of SUD overdose, drug supply etc.)
- [Diversity, Equity, and Inclusion; Communities of Color](#)
- Broadband connectivity
Disparities in COVID-19 Deaths

Nationwide, Black people have died at 1.4 times the rate of white people.

Deaths per 100,000 people by race or ethnicity through February 24, 2021

- Black or African American: 170
- American Indian or Alaska Native: 165
- Hispanic or Latino: 145
- Native Hawaiian or Other Pacific Islander: 136
- White: 119
- Other: 98
- Asian: 90
- Two or more races: 20

Source: https://covidtracking.com/race
People of Color and COVID-19

- **Increased risk for serious illness if they contract COVID-19**
  - Due to higher rates of underlying health conditions, such as diabetes, asthma, hypertension, and obesity compared to Whites

- **Difficult to social distance or self-isolate at home**
  - More likely to live in multigenerational families or low-income and public housing

- **Increased risk for work-related exposure**
  - Often working in jobs without teleworking option

- **Limited access to COVID-19 testing and treatment services**
  - More likely to be uninsured and lack a primary care provider

- **Increased risk for loss of income**
  - More likely to work in service industries such as restaurants, retail, and hospitality
Mental and Substance Use Disorders Among African Americans

But treatment gaps aren’t the only problem!

- Substance Use Disorder (SUD) 12+: 2.4M, 90.0% NO TREATMENT*
- Any Mental Illness (AMI) 18+: 5.2M, 67.1% NO TREATMENT
- Serious Mental Illness 18+: 1.2M, 42.1% NO TREATMENT
- Co-Occurring AMI and SUD 18+: 947K, 91.5% NO TREATMENT*
- Major Depressive Episode 12-17: 367K, 64.4% NO TREATMENT

* No Treatment for SUD is defined as not receiving treatment at any location, such as a hospital (inpatient), rehabilitation facility (inpatient or outpatient), mental health center, emergency room, private doctor’s office, self-help group, or prison/jail.
SAMHSA’s Diversity Inclusion Project Showcase (DIPS) is a new initiative that aims to increase a more diverse pool of historically marginalized populations to grant funding opportunities by providing the chance to showcase their goals and populations served, to federal and state leaders, as well as philanthropic partners in a “Round Robin-style” of innovation.
Black/African American Behavioral Health Equity: Resources on this population include national survey reports, agency and federal initiatives, and related behavioral health resources.

The HBCU Center for Excellence in Behavioral Health: Recruits and trains students for behavioral health careers and prepares them for obtaining advanced behavioral health degrees.

National Network to Eliminate Disparities in Behavioral Health (NNED): Network of community-based organizations focused on the mental health and substance use issues of diverse racial and ethnic communities. The NNED supports information sharing, training, and technical assistance towards the goal of promoting behavioral health equity.
SAMHSA's Technology Transfer Centers in New England

- **Addiction Technology Transfer Center (ATTC)**

  ![ATTC Logo]

- **Mental Health Technology Transfer Center (MHTTC)**

  ![MHTTC Logo]

- **Prevention Technology Transfer Center (PTTC)**

  ![PTTC Logo]
Upcoming Events/Trainings and Webinars

**ATTC**
The Substance Use and Mental Health Leadership Council of Rhode Island:
March 11, 2021 9:00am
Parent Support Network of Rhode Island: Wraparound Training Series:
March 11, 2021 1:00pm

**MHTTC**
Children’s Mobile Crisis Team Model: Lessons Learned:
March 10, 2021 4:00pm
Enhancing Health Professionals’ Well-Being: A Structured Approach Utilizing the Adult Resilience Curriculum (ARC):
March 18, 2021 12:00pm

**PTTC**
Getting to Know the Problem Gambling Councils in New England:
March 17, 2021 1:00pm

**Other Partners:**
National Telecommunications and Information Administration (NTIA) Broadband USA Grant Programs in the Consolidated Appropriations Act of 2021
Wed, Mar 17, 2021 2:00pm
Promising Practices from States Utilization of CARES Funding Across New England

Rhode Island

- **Tele-Buprenorphine Hotline**: Funded 24/7 hotline for telemedicine buprenorphine induction, available 24/7 and supported daily by three physicians affiliated with Brown University’s Warren Alpert School of Medicine.

Maine

- **OPTIONS**: The *Overdose Prevention Through Intensive Outreach Naloxone and Safety* (OPTIONS) initiative is a coordinated effort of the Maine Office of Behavioral Health (OBH) and other state agencies to improve the health of Mainers using substances through harm reduction strategies, helping them on the road to recovery, and dramatically reducing the number of fatal and non-fatal drug overdoses.
Massachusetts

- **COVID-19 specific groups**: Women who experience post partum depression from increased isolation and stress due to COVID-19 and the inability to interact with their natural supports. A support group was formed specifically for this prenatal and postnatal group.

New Hampshire

- $500K filtered through an existing Community Action Program initiative (also funded with CARES money) specifically for rental/fee assistance for sober housing. $450K for respite shelters for individuals awaiting residential treatment or other longer-term housing solutions. While in respite, individuals received support with identifying treatment options as well as addressing other social influencers of health.
Happening Now and on the Horizon

➢ **SAMHSA Communities Talk**
  ▪ *Sound of Your Voice*
  ▪ *College Drinking Discussion Guides*
  ▪ *Quick Start Planning Guide*

➢ **Certified Community Behavioral Health Centers (CCBHC)**

➢ **NIDA – National Drug and Alcohol Facts Week**

➢ **Nationwide Mental Health Crisis And Suicide Prevention Number: 9-8-8**

➢ **National Guidelines for Behavioral Health Crisis Care**

➢ **Crisis Services: Meeting Needs, Saving Lives**
New SAMHSA Training Centers to Support Healthcare Providers

- African American Center of Excellence (AABH-COE)
- Center of Excellence on LGBTQ+ Behavioral Health Equity (CoE LGBTQ+ BHE)
- The Homeless and Housing Resource Center (HHRC)
- E4 Center of Excellence for Behavioral Health Disparities in Aging
- National Family Support Technical Assistance Center (NFSTAC)
- Peer Recovery Center of Excellence
Thank You!

SAMHSA’s mission is to reduce the impact of substance abuse and mental illness on America’s communities.

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