

Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover



Shaping and Informing Public Policy to Improve Lives

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Behavioral Health – Impact on America

The Economy

- *Annually - total estimated societal cost of substance abuse in the U.S. is \$510.8 billion*
- *Total economic costs of mental, emotional, and behavioral disorders among youth is approximately \$247 billion*
- *Alcohol and drug abuse & dependence: approximately \$263 billion in lost productivity costs per year*
- *Mental disorders: approximately \$94 billion in lost productivity costs per year*

Behavioral Health – Impact on America

Health Care

- *By 2020, BH conditions will surpass all physical diseases as a major cause of disability worldwide*
- *Almost one quarter of all adult stays in community hospitals involved M/SUDs*
- *44 percent of all cigarettes consumed in the U.S. are by individuals with M/SUDs*
- *Up to 83 percent of people with SMI (Serious Mental Illness) are overweight or obese*
- *People with SMI have shortened life-spans; on average living only until 53 years of age*

Behavioral Health – Impact on America

Criminal Justice

- *More than 80 percent of State prisoners, 72 percent of Federal prisoners, and 82 percent of jail inmates meet criteria for having either mental health or substance use problems*
- *Substance abuse or dependence rates of prisoners are more than four times that of the general population*
- *Providing housing for persons with mental illnesses who are homeless reduces criminal justice involvement by 38 percent for jail days and 84 percent for prison days*



Behavioral Health – Impact on America

Schools

- *Approximately 12 to 22 percent of all young people under age 18 are in need of services for mental, emotional, or behavioral problems*
- *Half of all lifetime cases of M/SUDs begin by age 14 and three-fourths by age 24*
- *Almost one quarter (24 percent) of pediatric primary care office visits involve behavioral and mental health problems*
- *On an average day in the U.S., adolescents (12-17):*
 - **508,000 drink alcohol**
 - **641,000 use illicit drugs**
 - **More than 1 million smoke cigarettes**

Behavioral Health – Impact on America

Colleges

- *Prevalence of serious mental health conditions among 18 to 25 year olds is almost double that of general population*
- *Suicide is 3rd leading cause of death among all youth 15-24 years old*
- *Adults who begin drinking alcohol before age 21 more likely to have alcohol dependence or abuse than those who had their first drink after age 21*
- *Young people have lowest rate of help-seeking behaviors*



Behavioral Health – Impact on America

Child Welfare

- *Between 50 and 80 percent of all child abuse and neglect cases involve some degree of substance misuse by a parent*
- *More than a 500 percent increase in adult alcoholism is related to adverse childhood experiences*
- *More than 6 in 10 youth exposed to violence in past year, including witnessing a violent act, assault with a weapon, sexual victimization, child maltreatment, and dating violence*
- *Childhood traumas/difficulties potentially explain 32.4 percent of psychiatric disorders in adulthood*



Behavioral Health – Impact on America

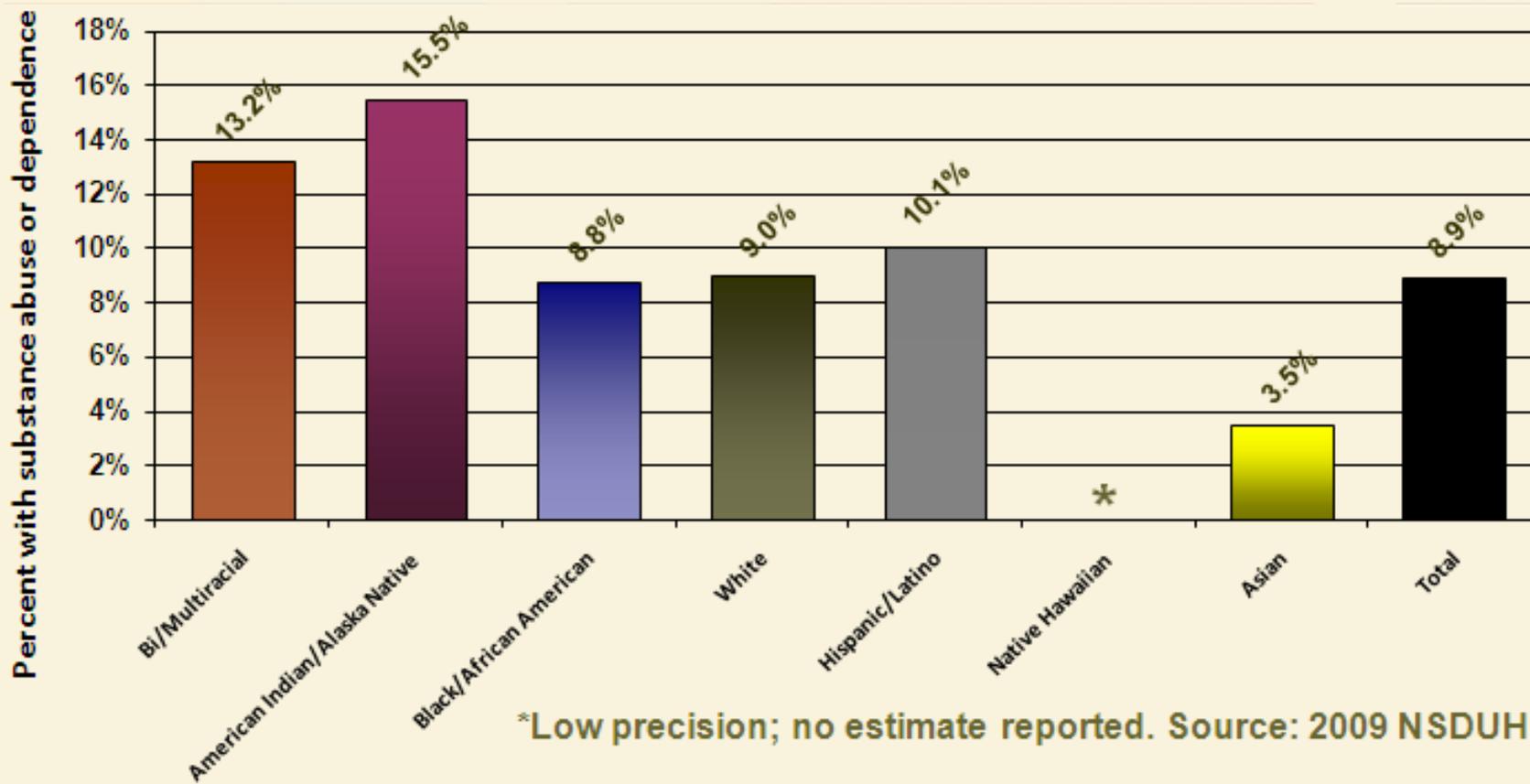
Homelessness

- *Approximately 643,000 people are homeless in the U.S.*
 - **Approximately 63 percent are individuals**
 - **37 percent are adults with children**
- *Approximately two-thirds of homeless people in U.S. have co-occurring M/SUDs*
- *Providing housing for individuals with mental illness who are homeless decreases criminal justice involvement by 38 percent and decreases prison days by 84 percent*

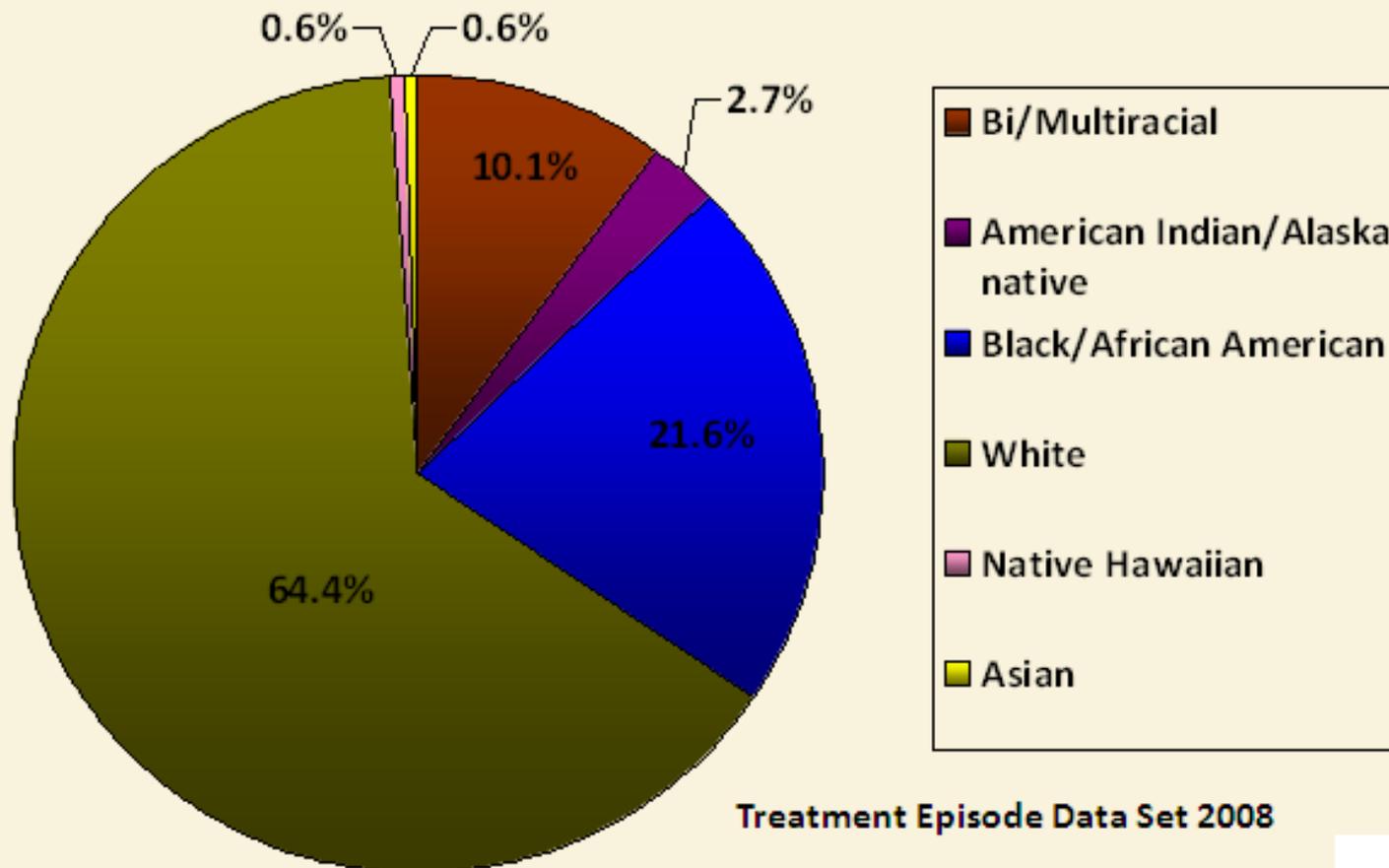
Behavioral Health – Impact on America

- **AI/AN communities – elevated levels of SUDs and higher suicide rates than general population**
- **Native Hawaiian and Pacific Islander youth – among highest rates of illicit drug use and underage drinking**
- **African Americans – among highest unmet needs for treatment of depression and other MH disorders**
- **African Americans – ~13 percent U.S. population yet ~ half (49 percent) of people who get HIV and AIDS**
- **LGBT population – elevated rates of tobacco use**
- **Latina youth – highest rates of suicide attempts**
 - *Adolescent youth in general showing increase in binge drinking*

Percent of Persons 12 or Older Who Met Criteria For Substance Abuse or Dependence By Race/Ethnicity: 2009

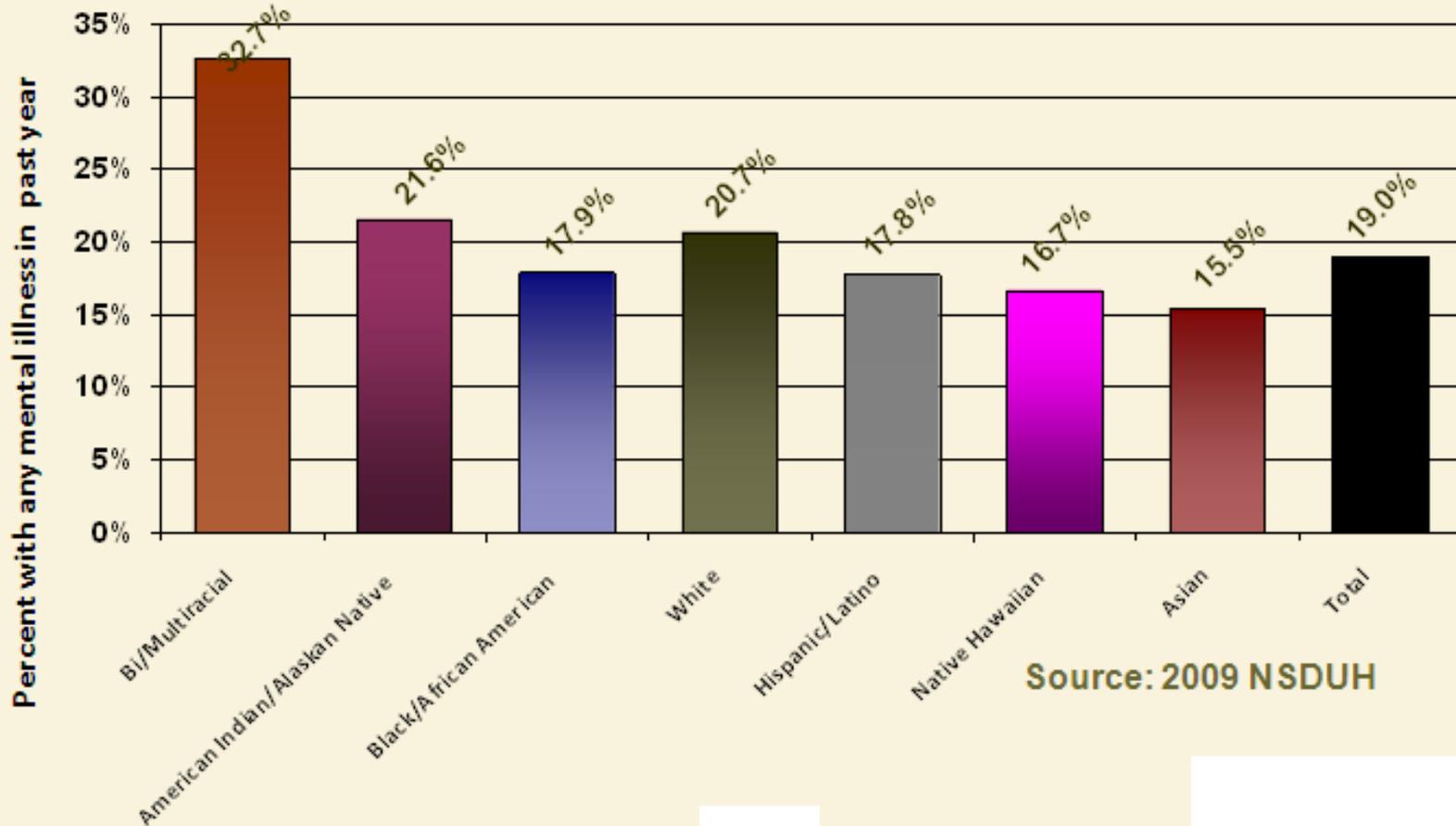


Percent of Admissions to Specialty Substance Abuse Treatment Facilities by Race/Ethnicity - 2008



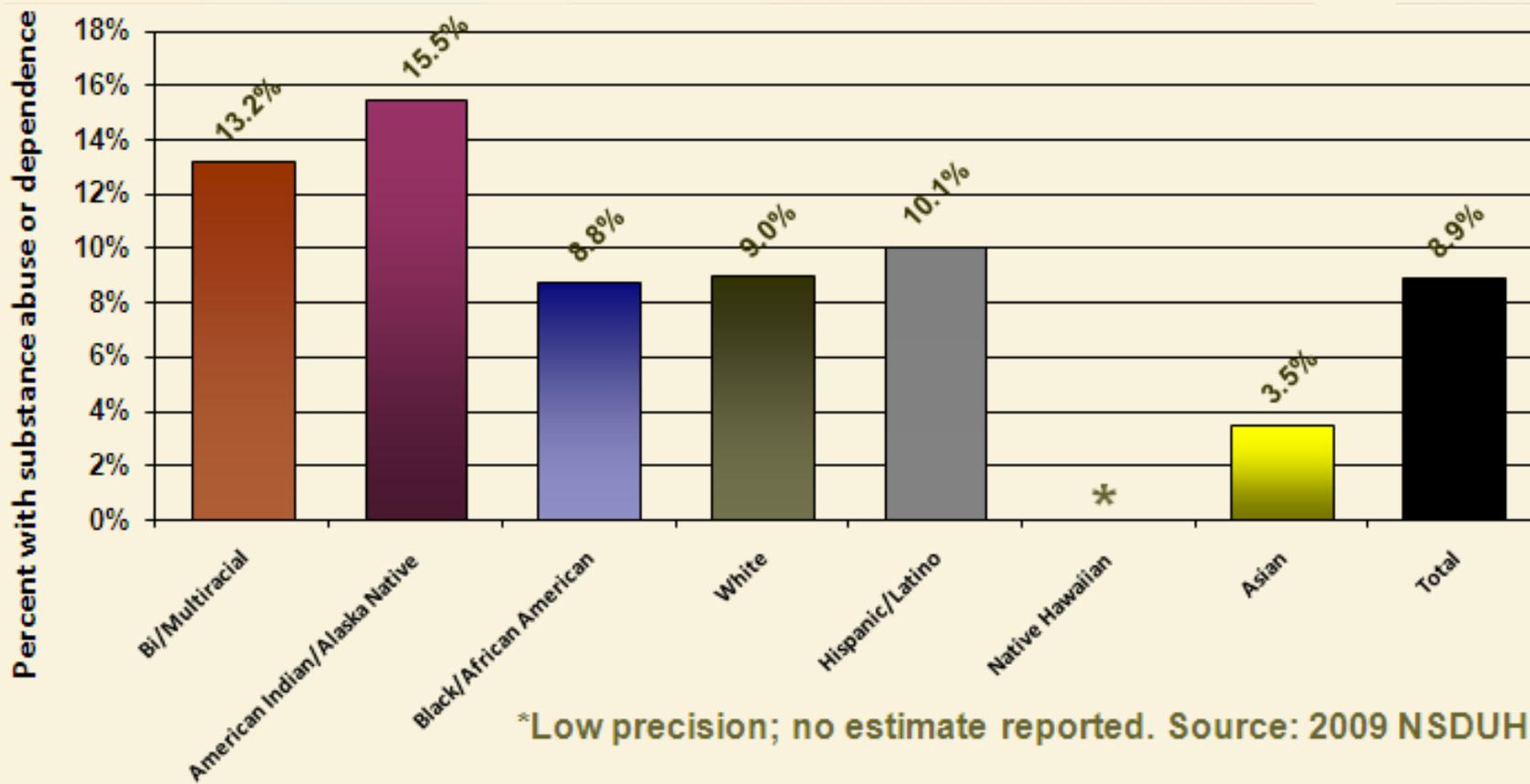
Treatment Episode Data Set 2008

Percent of Persons 18 or Older Who Met Criteria For Any Mental Illness by Race/Ethnicity: 2009



Source: 2009 NSDUH

Percent of Persons 12 or Older Who Met Criteria For Substance Abuse or Dependence By Race/Ethnicity: 2009



Workforce Development

- **Worker shortages**
- **Inadequately and inconsistently trained workers**
- **Education and training programs not reflecting current research base**
- **Inadequate compensation**
- **High levels of turnover**
- **Poorly defined career pathways**
- **Difficulties recruiting people to field – esp., from minority communities**

Under Representation – Minorities in Behavioral Health

Minorities make up approximately 30 percent of U.S. population yet only account for:

- *24.3 percent - all psychiatrists*
- *5.3 percent - all psychologists*
- *14.9 percent - all social workers*
- *20.0 percent - all counselors*
- *8.5 percent - all marriage and family therapists*
- *4.9 percent - all school psychologists*
- *9.8 percent - all psychiatric nurses*

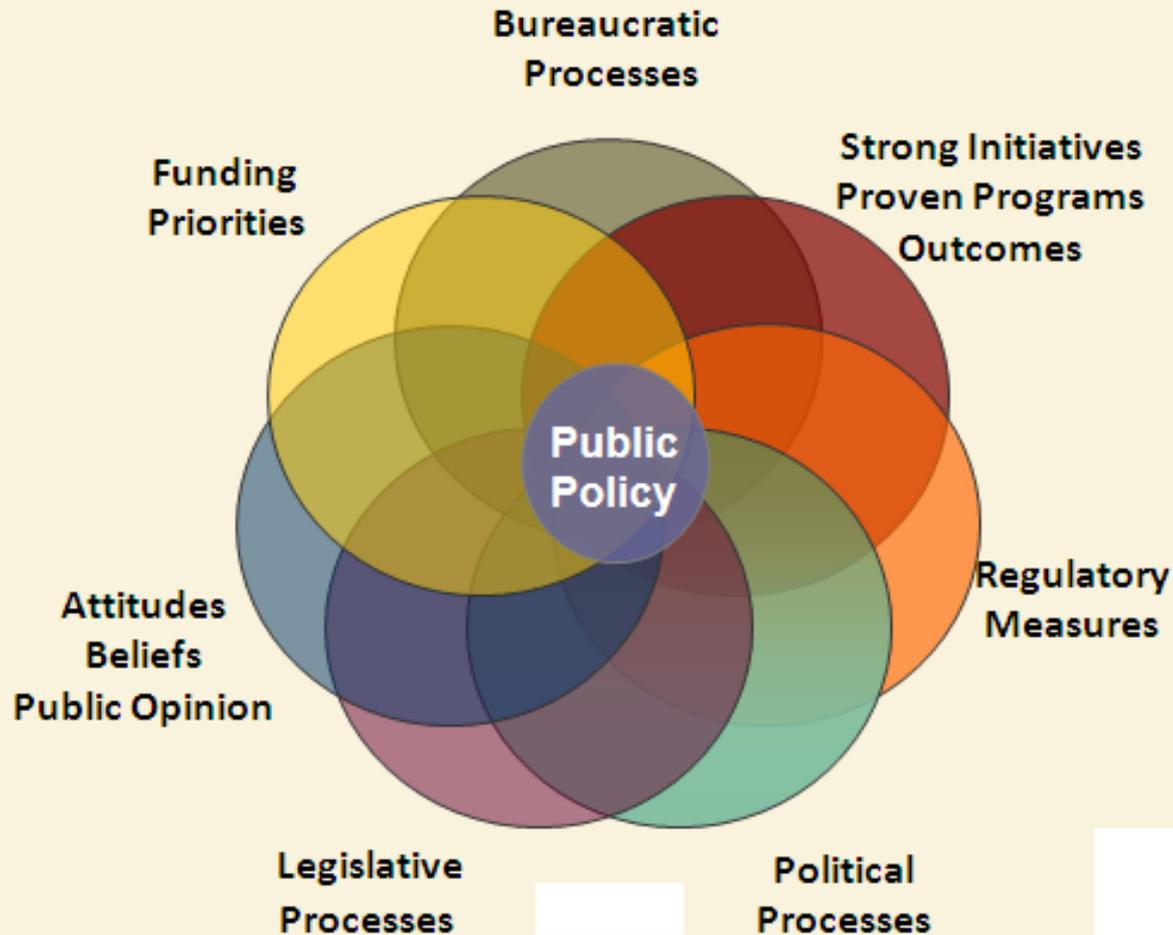
Daily Disaster of Unprevented and Untreated M/SUDs

- **Substance Dependence/Abuse: 22.5 million people with 1.6 percent receiving treatment**
- **Diabetes: 25.8 million people with 84.0 percent receiving medication**
- **Heart Disease: 81.1 million people with 74.6 percent receiving cholesterol screenings**
- **Hypertension: 74.5 million people with 70.4 percent receiving medication**
- **Any Mental Illness: 45.1 million people with 37.9 percent receiving treatment**
- **For every 2 people murdered in the U.S. 3 people die by suicide**

SAMHSA's Focus

- **People - NOT money**
- **People's lives - NOT diseases**
- **Sometimes we focus so much on a disease / condition we forget that people come to us with multiple diseases / conditions, multiple social determinants, and multiple cultural attitudes**

Layers of Public Policy Making in Behavioral Health



Legislation Impacts Policy: Policy – Politics - Budgets

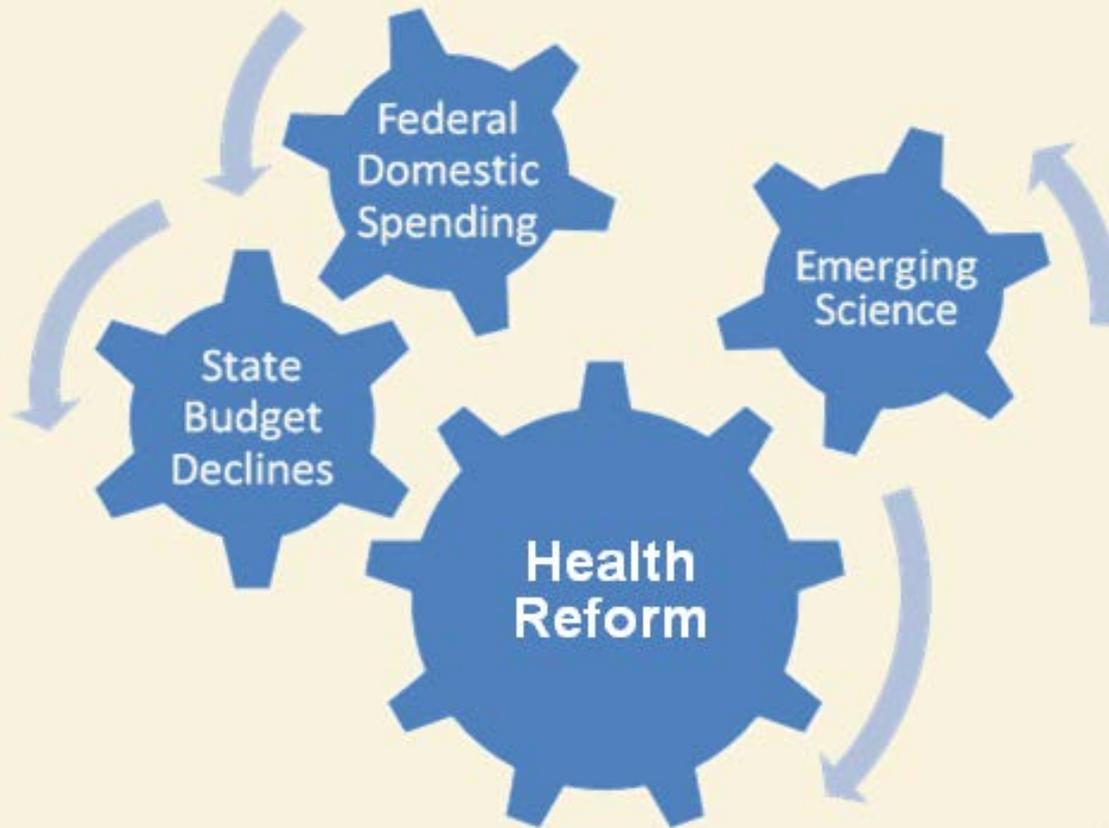
- **Mental Health Parity and Addiction Equity Act (MHPAEA)**
 - *Eliminates unequal health treatment and improves access*
 - *Provides equal insurance coverage for M/SUDs*
- **Affordable Care Act (ACA)**
 - *Reforms insurance markets and makes insurance more affordable*
 - *Protects consumers' rights and addresses disparities*
 - *Prevention, early intervention, and treatment of M/SUDs key*
- **Tribal Law and Order Act (TLOA)**
 - *Coordinate efforts, resources, and services across Indian Country*
 - *Improves prevention/treatment of SUDs; builds awareness of CODs*
- **National All Schedules Prescription Electronic Reporting (NASPER) and Harold Rogers Prescription Drug Monitoring Program (PDMP)**
 - *Support and enhance/improve State prescription drug monitoring programs/standards*

Budget Requests are Opportunities to Impact Policy

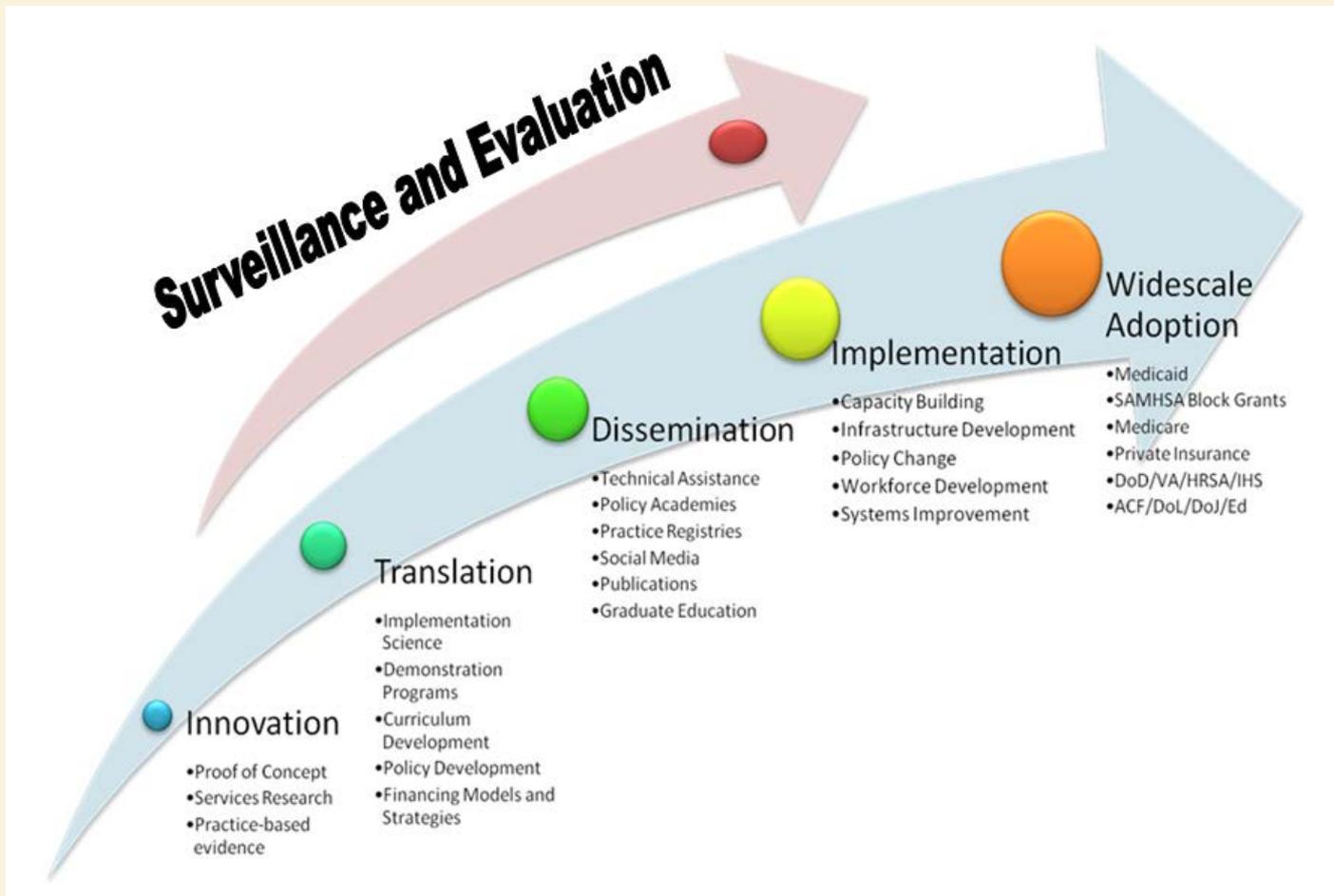
SAMHSA's FY 2012 Budget and actions taken to manage FY 2011 funding differently impacts policy

- *Adopting strategy of doing more with available resources (tough times equal tough choices)*
- *Shifting focus to meeting needs of people rather than focusing their illness or condition*
- *Capitalizing on new opportunities in health reform*
- *Redesigning how BH is financed to keep pace with changes in health care financing*
- *Elevating the importance of HIT*
- *Capturing and using scientific advances – putting into practice what we know*
- *Emphasizing understanding of recovery, personal responsibility and self-directed care, etc.*

Drivers Of Change



SAMHSA's Theory of Change



SAMHSA – Leading Change

Mission

- *To reduce the impact of substance abuse and mental illness on America's communities*

Roles

- *Leadership and Voice*
- *Funding - Service Capacity Development*
- *Information/Communications*
- *Regulation and Standard setting*
- *Practice Improvement*

Leading Change

- *8 Strategic Initiatives*

HHS Strategic Plans – SAMHSA Strategic Initiatives

AIM: Improving the Nation's Behavioral Health

1. *Prevention*
2. *Trauma and Justice*
3. *Military Families*
4. *Recovery Support*

AIM: Transforming Health Care in America

5. *Health Reform*
6. *Health Information Technology*

AIM: Achieving Excellence in Operations

7. *Data, Outcomes and Quality*
8. *Public Awareness and Support*

Prevention - Challenges

- **Reduced perception of harm**
- **Increasing rates of illicit drug use and prescription drug misuse**
- **2009: approximately 3.1 million persons (12 and older) used an illicit drug for the first time; this averages to about 8,500 initiates per day**
- **More than half (55.3 percent) of youth and adults who use prescription pain relievers non-medically got them from a friend or relative for free**

Prevention - Challenges

- **Approximately 5,000 deaths each year attributable to underage drinking**
- **Adults who begin drinking alcohol before age 21 more likely to have alcohol dependence or abuse than those who had their first drink after age 21**
- **More than 34,000 Americans die every year as a result of suicide; one suicide every 15 minutes**
 - *Approximately 30 percent of deaths by suicide involved alcohol intoxication with BAC at or above legal limit*

SAMHSA Strategic Initiative - Prevention

- **Prevent Substance Abuse and Mental Illness (Including Tobacco) and Build Emotional Health**
 - *Prevention Prepared Communities (PPCs)*
- **Underage Drinking/Alcohol Polices**
- **Suicide**
- **Prescription Drug Abuse**

Trauma and Justice - Challenges

- **Substance abuse or dependence rates of prisoners are more than four X's general population**
- **Youth in juvenile justice have high rates of M/SUDs**
 - *Prevalence rates as high as 66 percent; 95 percent experiencing functional impairment*
- **More than 80 percent of State prisoners, 72 percent of Federal prisoners, and 82 percent of jail inmates meet criteria for having either mental health or substance use problems**
 - *More than 41 percent of State prisoners, 28 percent of Federal prisoners, and 48 percent of jail inmates meet criteria for having both, contributing to higher corrections costs*
- **On any given day, veterans account for nine of every hundred individuals in U.S. jails and prisons**
- **Trauma's impact on families**

SAMHSA Strategic Initiative – Trauma and Justice

- **Public health approach to trauma**
- **Trauma informed care and screening; trauma specific service**
- **Decrease impact of violence and trauma on children / youth**
- **Increase BH services for justice involved populations**
 - *Prevention*
 - *Diversion from juvenile justice and adult criminal justice systems*
- **Decrease impact of disasters on BH of individuals, families, and communities**

Military Families - Challenges

- **2009: M/SUDs caused more hospitalizations among troops than any other cause**
- **Service members back from deployment: approximately 18.5 percent with PTSD or depression and approximately 19.5 percent with traumatic brain injury**
- **Approximately 50 percent of returning service members who need treatment for mental health conditions seek it**
 - *Slightly more than half receive adequate care*

Military Families - Challenges

- **2005 – 2009: More than 1,100 Armed Forces members took their own lives; an average of 1 suicide every 36 hours**
- **2010 Army suicide rate among active-duty soldiers decreases slightly; number of suicides in the Guard and Reserve increase by 55 percent**
 - *More than half of the National Guard members who died by suicide in 2010 had not deployed*
- **2009: On any given night approximately 107,000 veterans were homeless**

SAMHSA Strategic Initiative – Military Families

- **Improve access of military families to community-based BH care**
- **Help providers respond to needs within military family culture**
- **Promote BH of military families with programs and evidence-based practices**
 - *Support resilience and emotional health*
 - *Prevent suicide*
- **Develop effective and seamless BH service system for military families**

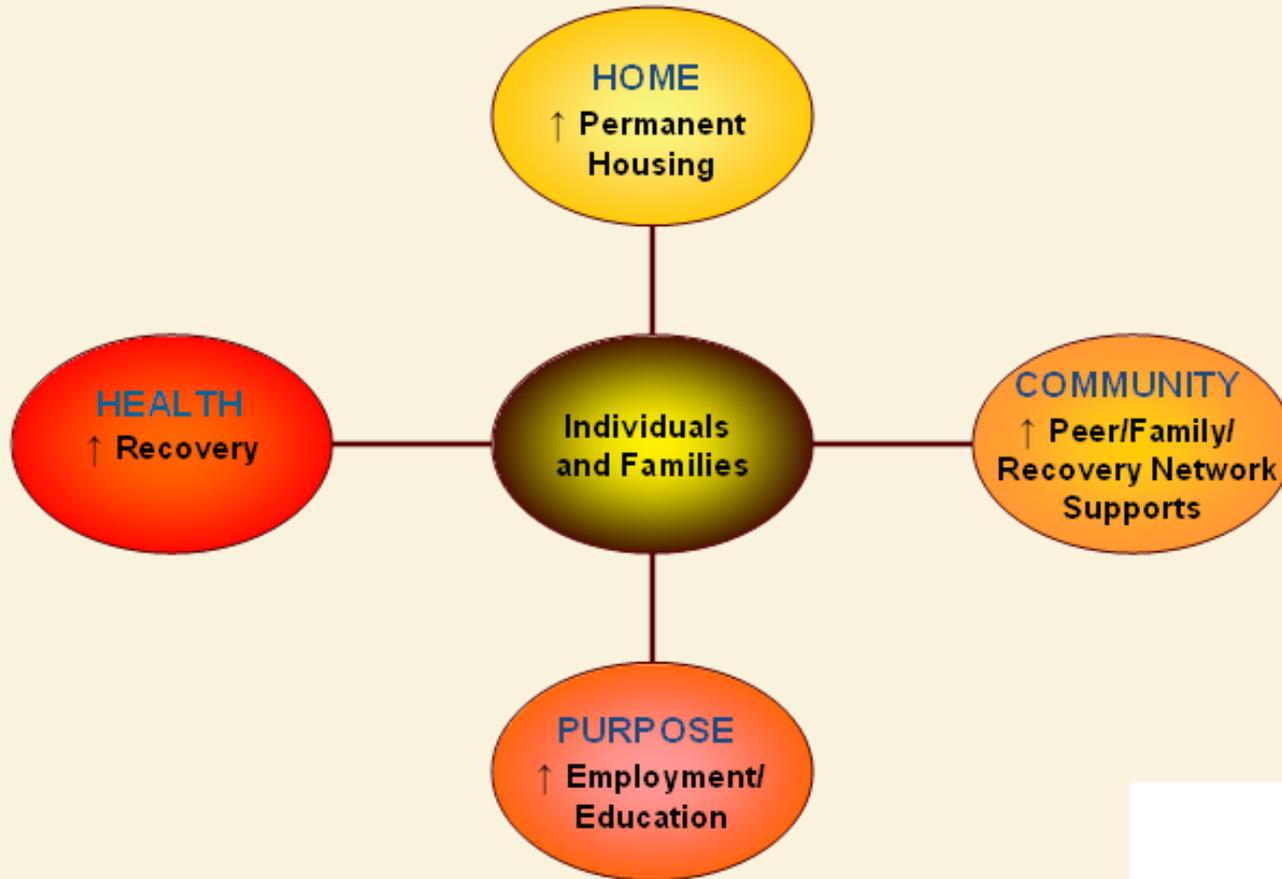
Recovery Supports - Challenges

- **64 percent of persons who are homeless have an alcohol or SUD**
- **Since 2007: 30 percent increase in number of homeless families**
- **Of the more than 6 million people served by MHAs approximately 79 percent are unemployed yet only 2.1 percent receive evidence-based supported employment services**

Recovery Supports - Challenges

- **In 2009: Unemployed adults were classified with SUDs at a higher rate (16.6 percent) than were full (19.6 percent) or part time (11.2 percent) employed adults**
- **Individuals with M/SUDs often lack socially valued activity, adequate income, personal relationships, recognition and respect from others, and a political voice**

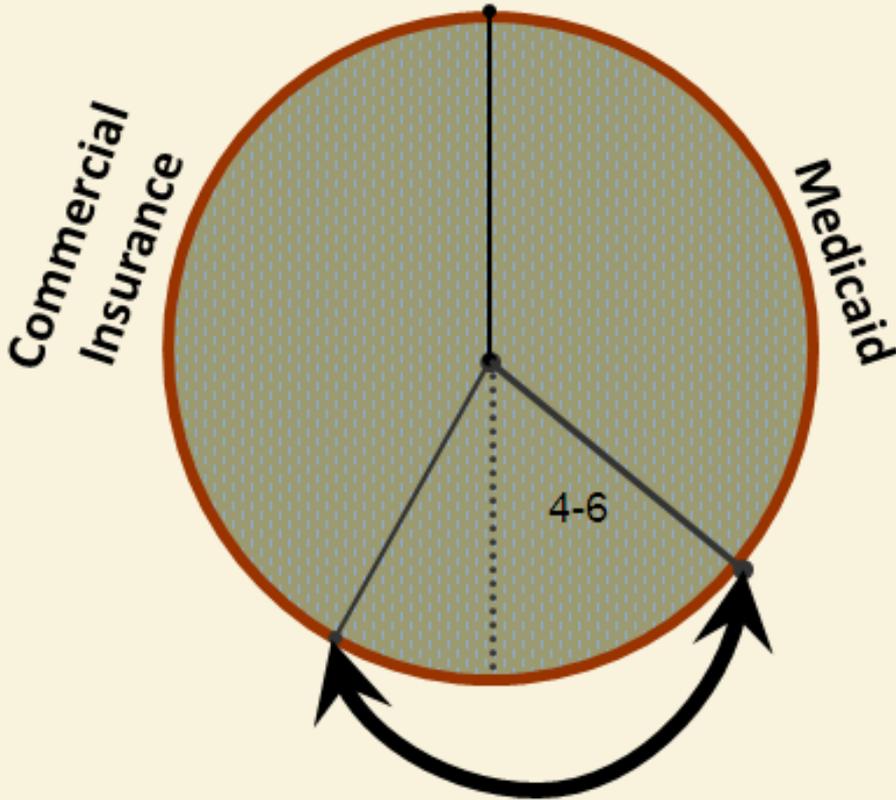
SAMHSA Strategic Initiative - Recovery Support



Health Reform – Impact of Affordable Care Act

- **More people will have insurance coverage**
 - *Increased demand for qualified and well-trained BH professionals*
- **Medicaid will play a bigger role in M/SUDs**
- **Focus on primary care and coordination with specialty care**
- **Major emphasis on home and community-based services; less reliance on institutional care**
- **Theme: preventing diseases and promoting wellness**
- **Focus on quality rather than quantity of care**

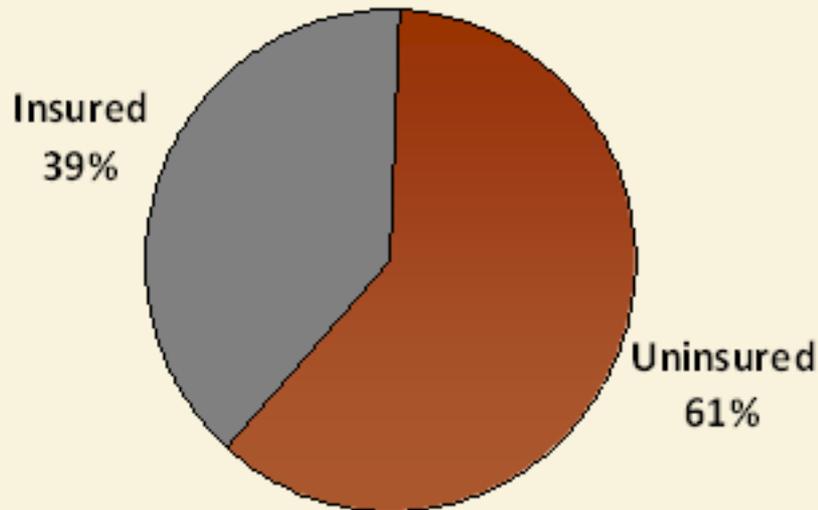
In 2014: 32 Million More Americans Will Be Covered



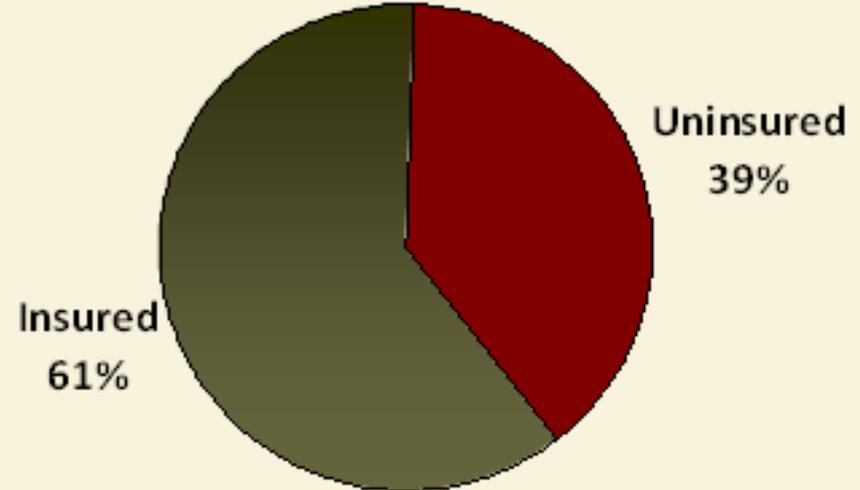
6-10 Million with M/SUDs

Health Reform - Challenges

Individuals Served by SSAs



Individuals Served by MHAs



90-95 percent will the have opportunity to be covered -
Medicaid/Insurance Exchanges

SAMHSA Strategic Initiative – Health Reform

- **Ensure BH included in all aspects of health reform**
- **Support Federal, State, Territorial, and Tribal efforts to develop/implement new provisions under Medicaid and Medicare**
- **Finalize/implement parity provisions in MHPAEA and ACA**
- **Develop changes in SAMHSA Block Grants to support recovery and resilience and increase accountability**
- **Foster integration of primary and behavioral health care**

HIT - Challenges

- **20 percent of 175 substance abuse treatment programs surveyed, had no information systems, e-mail, or even voicemail**
- **Only 8.2 percent of community mental health centers surveyed in 2009 had interoperable systems with medical and primary care systems**
- **IT spending in BH and human services organizations represents 1.8 percent of total operating budgets (compared to 3.5 percent of for general health care services)**

HIT - Challenges

- **Less than half of BH and human services providers possess fully implemented clinical electronic record systems**
- **State and Territorial laws vary on extent providers can share medically sensitive information, such as HIV status and treatment for psychiatric conditions**

SAMHSA Strategic Initiative – Health Information Technology

- **Develop infrastructure for EHRs**
 - *Privacy*
 - *Confidentiality*
 - *Data standards*
- **Provide incentives and create tools to facilitate adoption of HIT and EHRs with BH functionality – general and specialty health care**
- **Deliver TA to increase adoption of EHRs and HIT**
- **Increase capacity for exchange and analysis of EHR data to assess quality of care and improve patient outcomes**

Data, Outcomes, and Quality - Challenges

- **Fragmented data systems; separate treatment systems; and distinct funding streams**
- **Inconsistent data requirements**
- **Current illicit drug use among 18 to 22 year olds who were in college full time increased from 20.2 percent in 2008 to 22.7 percent in 2009**
 - *Marijuana increased from 17.9 to 20.2 percent*
 - *Current nonmedical use of psychotherapeutic drugs increased from 5.2 to 6.3 percent*
 - *OxyContin[®] use increased from 0.2 to 0.6 percent*
 - *There were **no significant changes** in rates of current use for any drugs among persons aged 18 to 22 who **were not** full-time college students*

Data, Outcomes, and Quality - Challenges

- **Young adults (18 to 22) in college full time more likely to use alcohol in the past month, binge drink, and drink heavily than their peers**
 - *63.9 percent were current drinkers vs. 53.5 percent*
 - *43.5 percent were binge drinkers vs. 37.8 percent*
 - *16.0 percent were heavy drinkers vs. 11.7 percent*
- **AMI lower for college graduates (17.2 percent) than high school dropouts (21.8 percent) and those with some college (21.0 percent)**

SAMHSA Strategic Initiative – Data, Outcomes, and Quality

- **Integrated approach – single SAMHSA data platform**
- **Common standards of measurement and collection to improve quality and outcomes**
 - *Trauma and military families*
 - *Prevention billing codes*
 - *Recovery measures*
- **Common evaluation and service system research framework**
 - *For SAMHSA programs*
 - *Working with researchers to move findings to practice*
 - *Improvement of NREPP as registry for EBPs*
- **Improve access to surveillance, outcome and performance, and evaluation information**

Public Awareness and Support - Challenges

What Americans Believe:

- 66 percent believe treatment and support can help people with MI lead normal lives
- 20 percent feel persons with MI are dangerous to others
- Two thirds believe addiction can be prevented
- 75 percent believe recovery from addiction is possible
- 20 percent say they would think less of a friend/relative if they discovered that person is in recovery from an addiction
- 30 percent say they would think less of a person with a current addiction

SAMHSA Strategic Initiative - Prevention

WHAT A DIFFERENCE A FRIEND MAKES

Life in the Community for Everyone

SAMHSA

About this initiative Partner/Grassroots Organizations Media Center

LEARN SUPPORT LISTEN

2gether [Visit the Forum](#)

Chat with people living with mental health problems and to friends of those living with mental health problems. The 2gether forums are a great place to ask questions and share experiences and ways to help.

What a difference a friend makes.

Welcome! This site is here for people living with mental illness—and their friends. You'll find tools to help in the recovery process, and you can also learn about the different kinds of mental illnesses, read real-life stories about support and recovery, and interact with the video to see how friends can make all the difference.

Multicultural Campaigns

Anyone can experience mental health problems. Get information, hear stories on support and recovery, and learn how to help people in your community:

- [African American](#): View real-life stories and resources to help in the recovery process.

SAMHSA Strategic Initiative – Public Awareness and Support

- **Understanding of and access to services**
- **Cohesive SAMHSA identity and media presence**
 - *SAMHSA branding*
 - *Consolidation of websites*
 - *Common fact sheets*
 - *Single 800 number*
- **Consistent messages – communications plan for initiatives**
 - *Use of social media*
- **Provide information to BH workforce**
- **Increase social inclusion and decrease discrimination**

National Dialogue on Role of Behavioral Health in Public Life

- **Tucson, Fort Hood, Virginia Tech, Red Lake, Columbine**
- **Violence in school board and city council meetings, in courtrooms and government buildings, on high school and college campuses, at shopping centers, in the workplace and places of worship**
- **In America more than 60 percent of people who experience MH problems and 90 percent of people who need SA treatment do not receive care**

National Dialogue on Role of Behavioral Health in Public Life

- In America suicides are almost double the number of homicides
- How do I know when a family member/someone is having a mental health crisis or AOD problem?
 - *We know universal sign for choking*
 - *We know facial expressions of physical pain*
 - *We recognize blood and other physical symptoms of illness and injury*
- **What can I do to help?**
 - *We know basic terminology for physical illness, accidents, and injury*
 - *We know basic First Aid and CPR for physical crisis*

SAMHSA Principles

- **People**

Stay focused on the goal



- **Partnership**

Cannot do it alone



- **Performance**

Make a measurable difference

