



Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover



BEHAVIORAL HEALTH AND JUSTICE INVOLVED POPULATIONS

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BEHAVIORAL HEALTH → IMPACT ON AMERICA

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- **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 ~ \$247 billion
- **HEALTH CARE:** By 2020, BH conditions will surpass all physical diseases as a major cause of disability worldwide
 - Half of all lifetime cases of M/SUDs begin by age 14 and three-fourths by age 24
- **CRIMINAL JUSTICE:** >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

BEHAVIORAL HEALTH → IMPACT ON AMERICA

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- **SCHOOLS:** ~12 to 22 percent of all young people under age 18 in need of services for mental, emotional, or behavioral problems
- **COLLEGES:** Prevalence of serious mental health conditions among 18 to 25 year olds is almost double that of general population
 - Young people have lowest rate of help-seeking behaviors
- **CHILD WELFARE:** Between 50 and 80 percent of all child abuse and neglect cases involve some degree of substance misuse by a parent
 - Childhood traumas/difficulties potentially explain 32.4 percent of psychiatric disorders in adulthood
- **HOMELESSNESS:** ~ Two-thirds of homeless people in US have co-occurring M/SUDs

CONTEXT OF CHANGE

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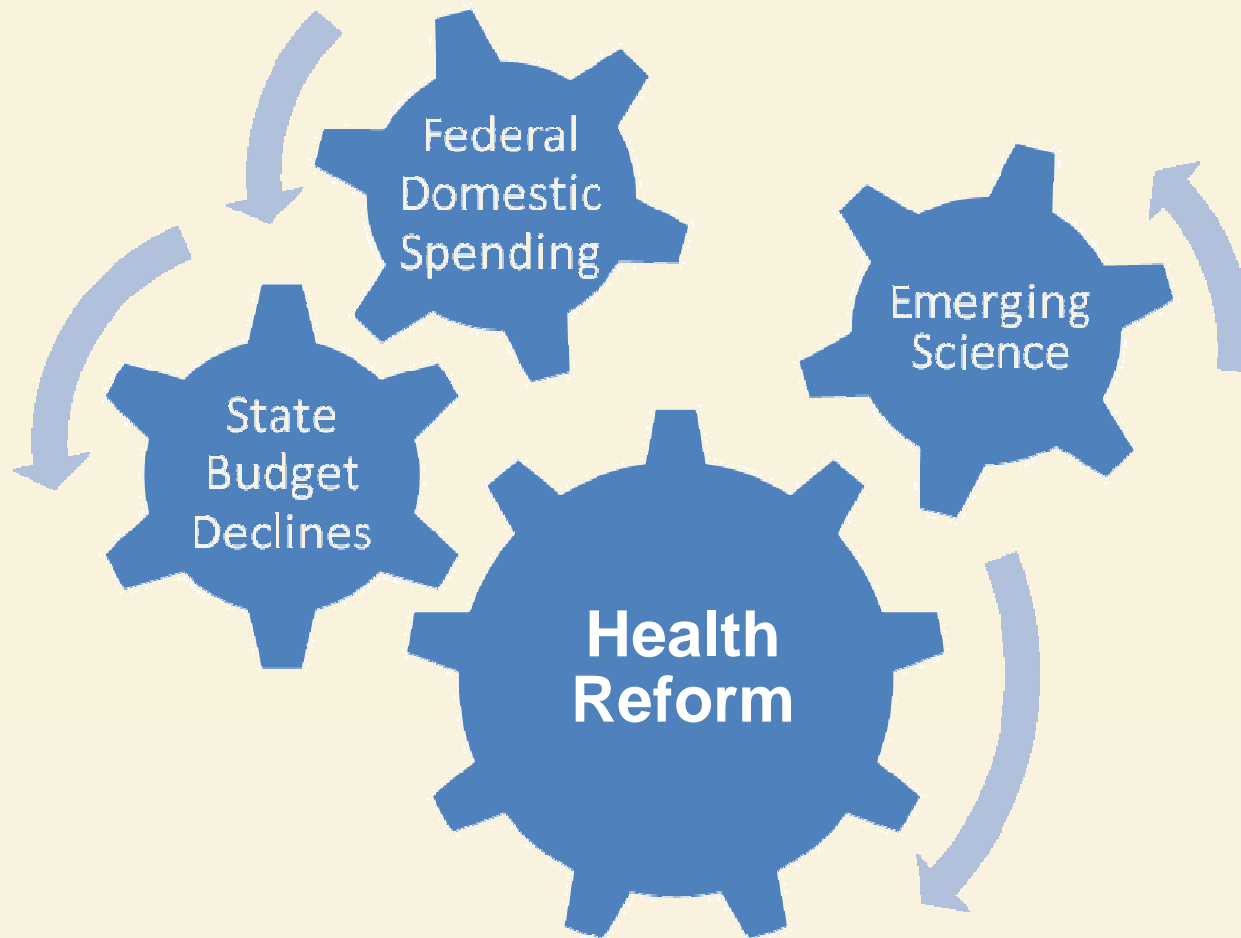
- Budget constraints, cuts and realignments – economic challenges like never before
- No system in place to move innovative practices and systems change efforts that promote recovery to scale
- Science has evolved; language is changing
- Integrated care requires new thinking about recovery, wellness, role of peers, in responding to whole health needs
- New opportunities for behavioral health (Parity/Health Reform/Tribal Law and Order Act)

SAMHSA'S FOCUS

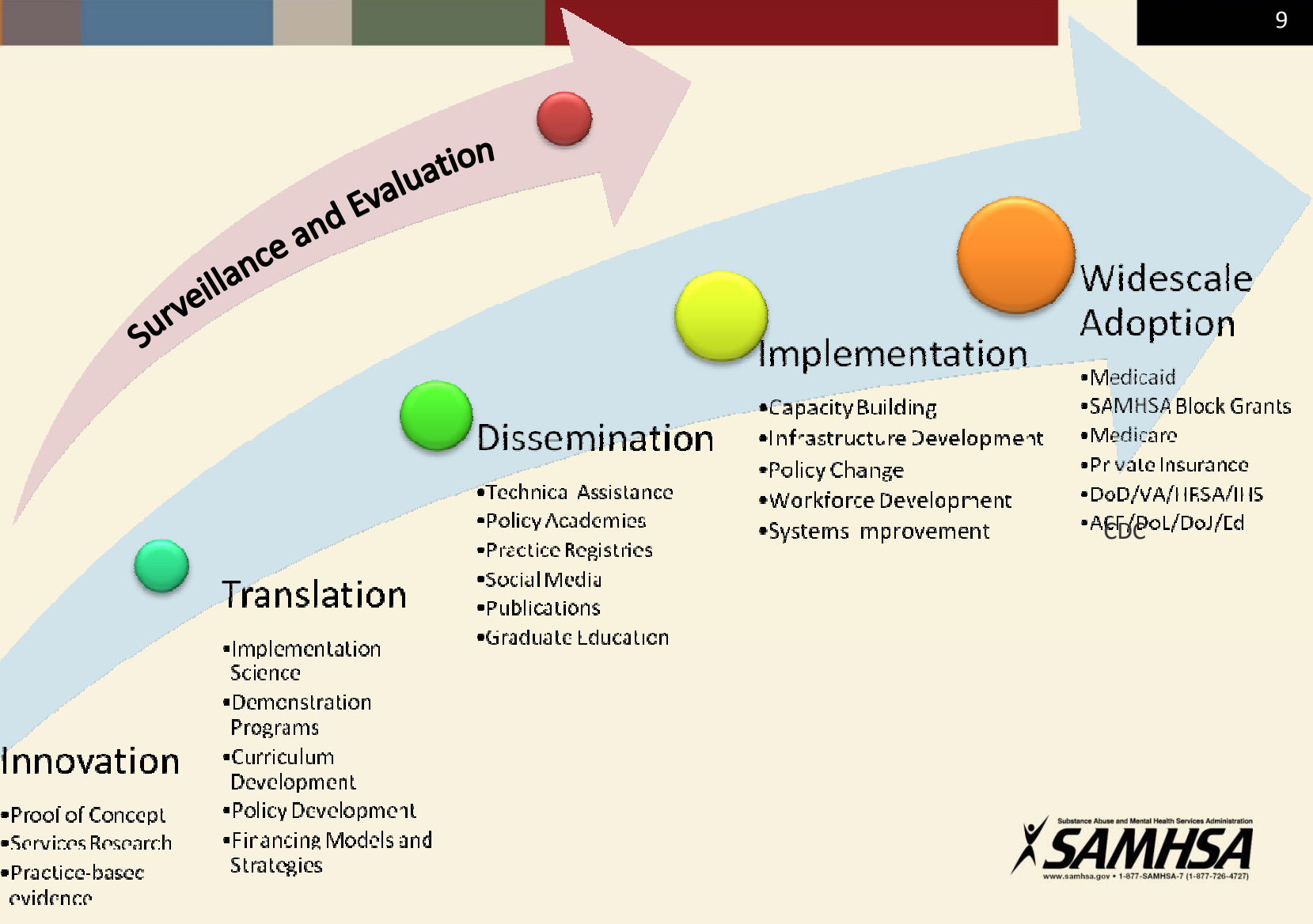
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- People - NOT money
- People's lives - NOT diseases
- Sometimes focus so much on a disease/condition we forget people come to us with multiple diseases/conditions, multiple social determinants, multiple cultural attitudes

DRIVERS OF CHANGE



SAMHSA's Theory of Change



SAMHSA → LEADING CHANGE

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→ **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

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→ 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 & Quality
- 8 Public Awareness & Support

TRAUMA AND JUSTICE → CHALLENGES

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- Substance abuse or dependence rates of prisoners >four times general population
- Youth in juvenile justice have high rates of M/SUDs
 - Prevalence rates as high as 66 percent; 95 percent experiencing functional impairment
- ~ Three-quarters+ of State, Federal, and jail inmates meet criteria for either MH or SU problems, contributing to higher corrections costs
 - >41 percent State prisoners, 28 percent Federal prisoners, and 48 percent jail inmates meet criteria for having both

TRAUMA AND JUSTICE → CHALLENGES For Veterans & Housing

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- On any given day, veterans account for nine of every 100 individuals in U.S. jails and prisons
- Among inmates w/MH problems, 13 percent of State prisoners and 17 percent jail inmates were homeless in year prior to incarceration
 - ~46 percent of people who are homeless have a mental illness
 - Providing housing for persons with MI who are homeless can decrease criminal justice involvement by 84 percent for prison days and 38 percent for jail days
- In 2009, nearly 76,000 veterans were homeless on a given night, ~ 136,000 veterans spent at least one night in a shelter

SAMHSA STRATEGIC INITIATIVE TRAUMA AND JUSTICE – GOALS

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

TRAUMA & JUSTICE

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➔ When done right, jail diversion works – those diverted:

- Use less alcohol and drugs (last 30 days)
 - Any Alcohol Use: Baseline at 59 percent vs. 6 months at 28 percent
 - Alcohol to Intoxication: Baseline at 38 percent vs. 6 months at 13 percent
 - Illegal Drug Use: Baseline at 58 percent vs. 6 months at 17 percent
- Have fewer arrests after diversion compared to 12 months before (2.3 vs. 1.1)
- Fewer jail days (52 vs. 35)

➔ Communities want jail diversion programs: three of four jail diversion programs keep operating after Federal funding ends

TRAUMA & JUSTICE

OPPORTUNITIES FOR PARTNERSHIP

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- Federal Partners group - meets regularly to share information and strategize → CMHS, CSAT, GAINS Center, NIC, OJJDP, BJA
- New opportunity with Attorney General's newly formed (Jan 2011) Interagency Reentry Council to focus on prisoner reentry
- Work with OJP/BJA & OJJDP and National Institute of Corrections to continue expanding new approaches for BH treatment courts & diversion initiatives

TRAUMA & JUSTICE

OPPORTUNITIES FOR PARTNERSHIP

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- Work with OJP to provide training for adult/juvenile court judges, prosecutors, defense attorneys, probation officers, court managers, and other judicial staff
- Partner with criminal justice, law enforcement, and related groups, (e.g., International Association of Chiefs of Police, Associations of Sheriffs, and the NADCP) to ↑ use of culturally appropriate crisis intervention training and pre-booking diversion for people w/ BH problems and histories of trauma
- Collaborate w/ BJA and CSG Justice Center → engage American State Corrections Association, NASADAD and NASMHPD to develop and provide training on standards of care for reentry
- Work with ACF & DOJ on supporting TA for their trauma grants

THE ROLE OF PROBLEM-SOLVING COURTS

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→ Common to all SAMHSA initiatives

- Prevention, early intervention, treatment, and recovery support services
- Shared vision (e.g. PPCs, Community Resilience and Recovery Initiative, SBIRT, Access to Recovery)

→ Expand access to community-based BH services at all points of contact with justice system

→ People served by drug courts and mental health courts tend to have multiple issues which create multiple challenges and opportunities

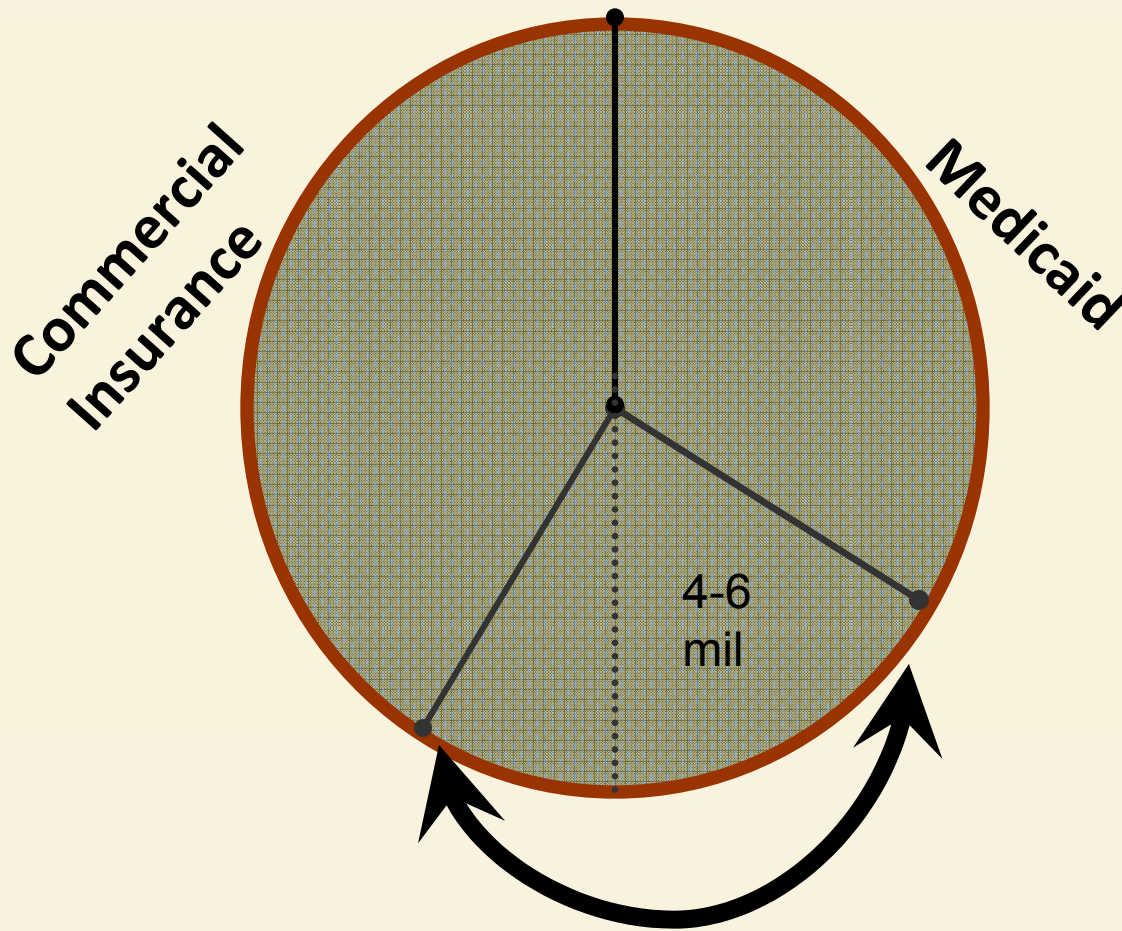
HEALTH REFORM

IMPACT OF AFFORDABLE CARE ACT

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

In 2014: 32 MILLION MORE AMERICANS WILL BE COVERED

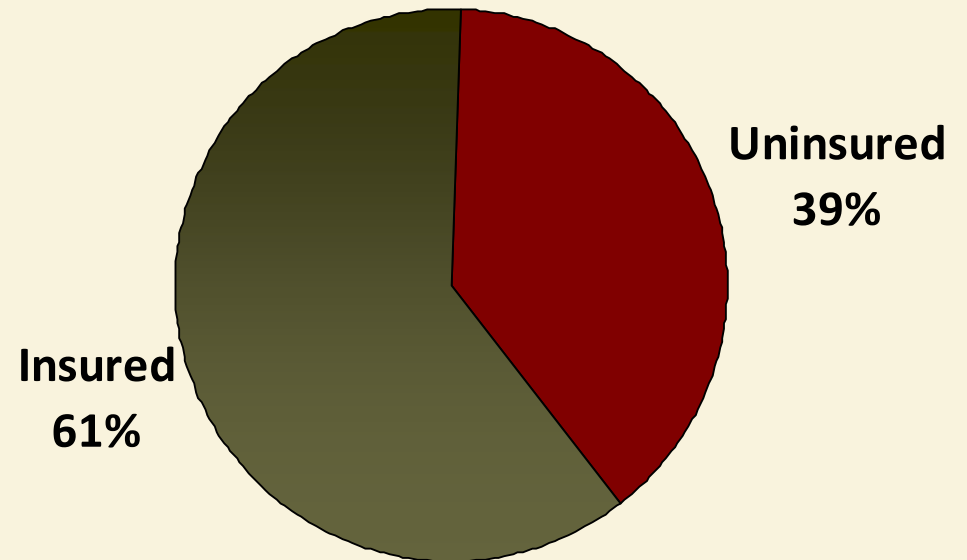
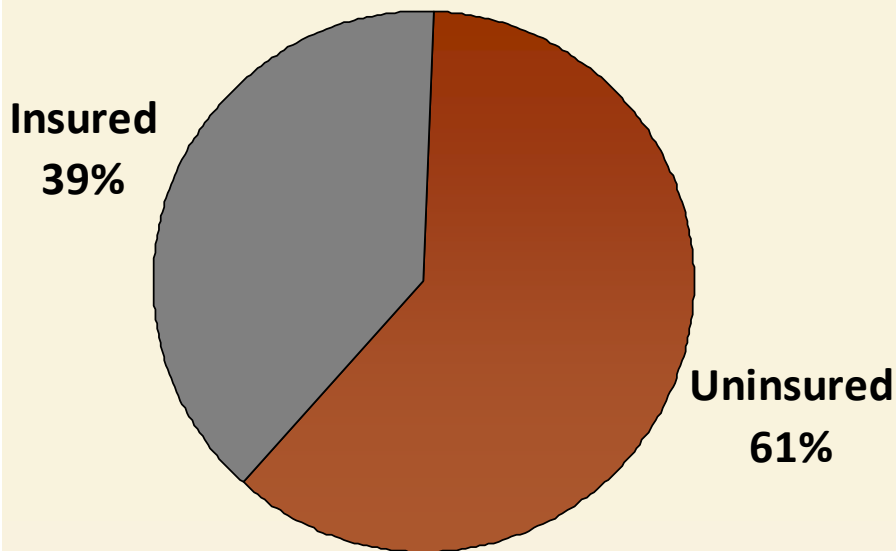


6-10 Million with M/SUDs

HEALTH REFORM → CHALLENGES

Individuals Served by MHAs

Individuals Served by SSAs



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

ACA & JUSTICE INVOLVED POPULATIONS

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- Coverage expansion means individuals reentering communities from jails and prisons (generally have not had health coverage in past) will now have more opportunity for coverage
- CJ population w/ comparatively high rates of M/SUDs = opportunity to coordinate new health coverage w/other efforts to ↑ successful transitions
- Addressing BH needs can ↓ recidivism and ↓ expenditures in CJ system while ↑ public health and safety outcomes
- SAMHSA and partners in OJP will develop standards and improve coordination around coverage expansions –
 - ***Enrollment is the challenge***

ACA & JUSTICE INVOLVED POPULATIONS

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- ACA presents opportunities to improve outcomes related to trauma
- New home visiting funding to States includes programs proven effective in ↓ traumatic events (e.g., child maltreatment)
- Coverage expansions through health reform = more individuals w/access to treatment for psychological trauma
- SAMHSA work with Federal, State, and local partners to improve practices around prevention/treatment of trauma

SAMHSA PRINCIPLES

→ People

- *Stay focused on the goal*



→ Partnership

- *Cannot do it alone*



→ Performance

- *Make a measurable difference*

