

Grantee Meeting and 11th Clinical Update

Ryan White HIV/AIDS Programs

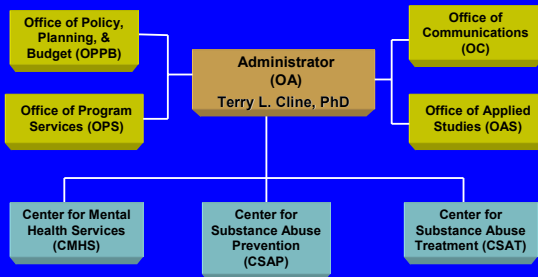
SAMHSA/CSAT Update

August 26, 2008
Marriott Wardman Park Hotel
Washington, D.C.

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HIV/AIDS Team Leader
Minority AIDS Initiative
Center for Substance Abuse Treatment
Substance Abuse Mental Health Services
Administration

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SAMHSA's Organization



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SAMHSA's Goals

Accountability

Measure and report program performance

- Track national trends
- Establish measurements & reporting systems
- Develop and promote standards to monitor service systems
- Achieve excellence in management practices

Capacity

Increase service availability

- Support service expansion
- Improve services organization and financing
- Recruit, educate, and retain workforce
- Create interlocking systems of care
- Promote appropriate assessment
- Assess resources and needs referral

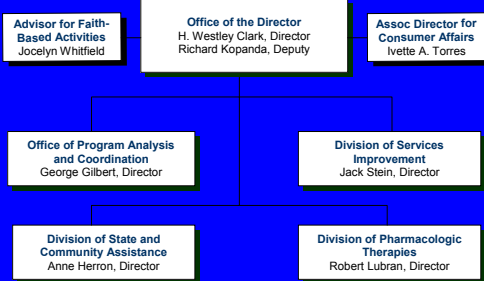
Effectiveness

Improve service quality

- Assess service delivery practices
- Identify and promote evidence-based approaches
- Implement & evaluate innovative services
- Provide workforce training & education

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Center for Substance Abuse Treatment



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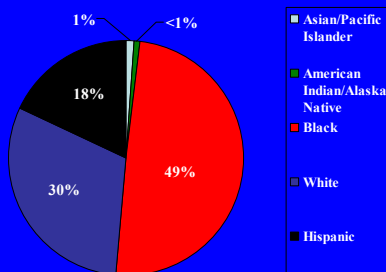
Goals of SAMHSA's HIV/AIDS Programs

- To make an impact on curbing the nation's HIV/AIDS epidemic.
- To disseminate knowledge about the mental health aspects of HIV/AIDS and the ethical issues of providing services to people living with or affected by HIV/AIDS.
- To identify effective approaches for delivering mental health services to people living with HIV/AIDS and disseminate these findings to health care providers who serve the HIV/AIDS population.
- To improve the health outcomes of people living with HIV/AIDS who also have a mental and substance use disorder

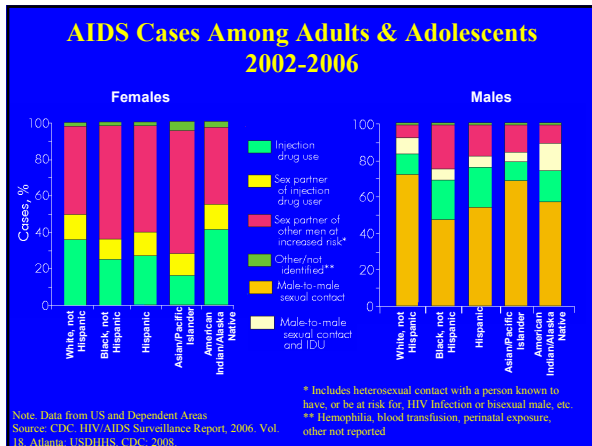
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HIV Diagnoses by Race/Ethnicity

Blacks, or African Americans, accounted for almost half of the estimated number of HIV/AIDS diagnoses made during 2006.



Note. Based on data from 33 areas with long-term, confidential name-based HIV reporting.
Source. CDC. HIV/AIDS Surveillance Report, 2006. Vol. 18. Atlanta. US Department of Health and Human Services, CDC; 2008.



- ### SAMHSA Goals Minority AIDS Initiative (MAI)
- Increase access of racial and ethnic minority communities to HIV prevention, care & treatment services;
 - Implement strategies and activities specifically targeted to the highest risk and hardest-to-serve populations; and
 - Establish collaboration, partnership or opportunities for programs and/or activities to be integrated, including
 - Faith & Community-based organizations
 - Minority-serving colleges & universities
 - Healthcare organizations
 - State & local health departments
 - Criminal & Juvenile Justice Systems
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SAMHSA MAI Funding

Dollars in Thousands

	FY 2007 Actual	FY 2008 Enacted	FY 2009 Estimate
Center for Mental Health Services	\$9,283	\$9,283	\$9,283
Center for Substance Abuse Prevention	\$39,358	\$39,385	\$39,385
Center for Substance Abuse Treatment	\$62,488	\$63,129	\$63,129
TOTAL SAMHSA	\$111,129	\$111,797	\$111,797

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SAMHSA HIV/AIDS Targeted Capacity Expansion Grants

The SAMHSA HIV/AIDS and Hepatitis Targeted Expansion (TCE) grants are administered by

CSAT:

- The purpose of the CSAT TCE/HIV grant program is to enhance and expand substance abuse treatment and/or outreach and pretreatment services in conjunction with HIV/AIDS services.
- These grants require that at a minimum, 80% of all clients will be tested for HIV/AIDS.

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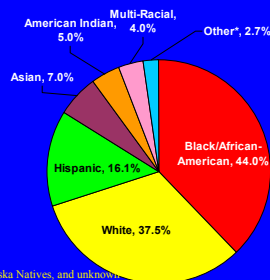
SAMHSA's Rapid HIV Testing Initiative (RHTI)

- From FY 2005 through FY 2007, 416,895 rapid testing kits were distributed to SAMHSA and non-SAMHSA grantees.
 - Phase I (01/04 – 04/06) – distributed 371,120 kits
 - Phase II (08/06 – 09/07) – distributed 45,775 kits
- The RHTI was designed to increase awareness of HIV status among minority populations who may be at an even greater risk for acquiring or transmitting HIV associated with substance abuse and/or a mental health disorder than other populations.

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Percent of Phase II Rapid HIV Tests Conducted By Race: November 2006 – October 2007

- 97.8% of test results were negative or non-reactive.
- 95.7% of clients received test results



*Includes Native Hawaiians, Other Pacific Islanders, Alaska Natives, and unknown race.
Source: RHTI Final Report, February 2008

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CSAT & HRSA Collaboration

- Severity of Need Index (Ryan White funding formulas) Interagency Workgroup
- SAMHSA/HRSA/CDC Cross-Training Initiative: Substance Abuse & Infectious Diseases State Training
- 3 TC Workgroup: SAMHSA's ATTCs, HRSA's AETCs, and CDC's RTCs
- Referral Network for Grantee Collaboration (Funding Requirement for TCE/HIV Grantees)
- HIV Rapid Testing Guidelines

CSAT & CDC Collaboration

SAMHSA is actively engaged in collaborating with CDC regarding HIV initiatives and data. Outcomes from a February meeting between SAMHSA and CDC include:

- SAMHSA will identify points of contact for collaboration in data collection and implementation guidance for testing.
- SAMHSA is actively engaged with CDC in implementing the HIV testing guidelines.
- SAMHSA/CDC Interagency Work Group to Address the Intersection of Methamphetamine Use and the Transmission of Infectious Diseases.

CSAT

HIV/AIDS ACTIVITIES

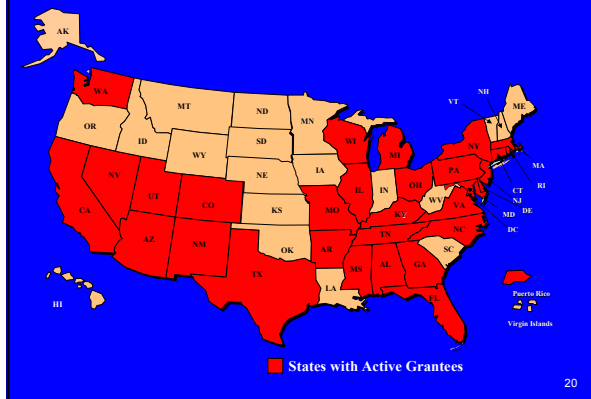
CSAT - Minority AIDS Initiative (MAI)

- Minority AIDS grants (TCE/HIV and HIV Outreach) are awarded to community-based organizations with two or more years of experience in the delivery of substance abuse treatment and related HIV/AIDS services.
- Programs target African American, Latino/Hispanic and other racial or ethnic communities highly affected by substance abuse and HIV/AIDS.
- **HIV Outreach grants have served 22,760 clients**
- **TCE/HIV grants have served 18,158 clients**

Source: SAIS, Data FY 2004 – 2/26/08

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Active CSAT TCE/HIV Grantees



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TCE/HIV & HIV Outreach Changes in Risk Behaviors

Clients reporting...	At Intake	6-Month Follow-up	Difference
Injection Drug Use	11.6%	4.3%	↓ 62.9%
Unprotected Sexual Contact with HIV+ Individual	5.2%	4.7%	↓ 9.0%
Unprotected Sexual Contact with IDU	9.0%	6.0%	↓ 34.0%
Unprotected Sexual Contact with Individual High on Some Substance	34.1%	21.3%	↓ 37.6%

Source: SAMHSA, SAIS, data collected through 6/24/08

Examples of MAI Grantee Activities

- St. Luke's-Roosevelt Institute for Health Scis - NYC
 - Offers HIV rapid testing, along with pre- and post-test counseling at the hospital's emergency room. Target population: HIV positive and HIV high-risk minority adolescents with substance abuse problems in school-based and outpatient treatment settings
- Test Positive Aware Network – Chicago, IL
 - Aims to decrease substance abuse and HIV transmission among African American men by providing education, brief interventions, individual and group level counseling, HIV testing, and substance abuse treatment.

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Examples of MAI Grantee Activities (cont'd)

- Latino Community Services Inc. – Connecticut
 - Latino Faith Partnership for Prevention and Treatment, in partnership with a core group of Latino pastors, targets the Latino/Hispanic community in CT with evidence-based practices for community outreach, screening, HIV/STD testing, substance abuse treatment and HIV prevention intervention
- Prototypes – Los Angeles County, CA
 - In collaboration with the Los Angeles County Public Defender's office, provides HIV/AIDS services, including rapid confidential HIV testing and referrals for medical treatment, to mostly Latina and African American women sex workers in Los Angeles

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CSAT – SAPT Block Grant Set-Aside

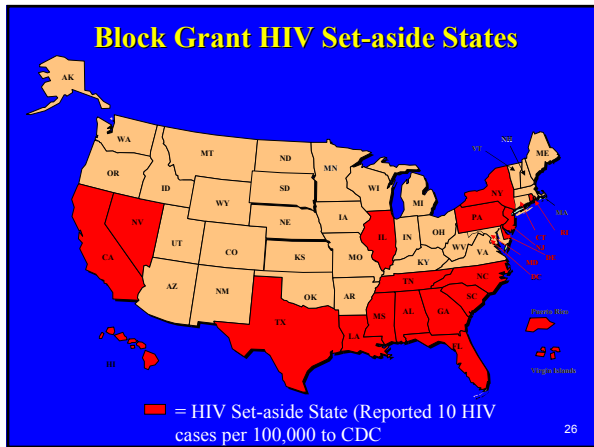
- The Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) Reorganization Act of 1992 amended Title XIX, Part B, Subpart II of the Public Health Service Act
- Requires States with an AIDS case rate of 10 or more per 100,000 individuals ("Designated States") to set-aside a certain percentage of the SAPT Block Grant to establish 1 or more projects for early intervention services for HIV.

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FY 2008 SAPT Block Grant Set-Aside

- In FY 2008, 21 States, Puerto Rico, and U.S. Virgin Islands were HIV “Designated States.”
- Currently, all Designated States are required to set aside 5% of their SAPT Block Grant allocations for early intervention HIV services.
- Total SAPT HIV Set-Aside funding: **\$56.77 Million**
 - HIV early intervention projects include counseling, HIV testing, and referral services.
 - States are being encouraged to use part of their HIV set-aside to purchase Rapid HIV Test Kits

Block Grant HIV Set-aside States



Early Intervention Services Being Funded

- Pre/post-test counseling
- Referral services
- Risk assessment
- HIV/AIDS education
- Rapid HIV Testing
- Outreach
- Integrated infectious disease services

How Services are being Provided

- The majority of the states have developed agreements with DOH and other entities to provide HIV testing and counseling services to substance abuse clients – either onsite or by referral – and with DPH to provide supplies & services for HIV.
 - Some states provide direct funding to providers to make available early intervention services for persons receiving substance abuse treatment
 - Other states transfer SAPT funds to DOH to make the services available for persons who are in substance abuse treatment

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Additional CSAT Grantees Serving those with HIV/AIDS

CSAT has a total of 193 grantees who serve those with HIV/AIDS. In addition to TCE-HIV and Outreach grants, they include:

- Recovery Community Services Programs
- Addiction Treatment for Homeless
- Youth Offender Re-entry Programs
- Treatment Drug Courts
- Screening, Brief Intervention, Referral & Treatment
- Pregnant & Postpartum Women, and
- Access to Recovery

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Future Directions: Program Areas of Emphasis

- HIV Outreach and Pretreatment
- Screening, Brief Intervention, and Referral to Treatment
- Co-occurring Conditions
- Cultural Adaptation of EBPs
- Treatment Drug Courts
- Electronic Health Records
- Performance Measures/Outcomes
- Workforce Development
- Rapid HIV Testing

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Capacity Grant Program

- Access to Recovery
- Addiction Treatment for Homeless
- Adolescent Treatment
- Co-Occurring
- Family and Juvenile Treatment Drug Courts
- Residential Treatment for Pregnant and Postpartum Women
- Recovery Community Services Program
- Screening, Brief Intervention, Referral, and Treatment
- Targeted Capacity Expansion
- Targeted Capacity Expansion-HIV/AIDS
- Young Offender Reentry Program

Science to Service

- Knowledge Application Program (KAP)
- Addiction Technology Transfer Centers (ATTCs)
- National Registry for Evidence-Based Programs and Practices (NREPP)
- Public Awareness/Recovery Month

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Knowledge Application Program (KAP)

Treatment Improvement Protocols (TIPs)

- Redesigned as a how-to document
- Check out TIP 12, 17, 21, 23, 30



Collateral products

- Short, concise documents based on TIPs, including Quick Guides, KAP Keys, screening tools



Treatment manuals

- For teens, adults, and older adults
- Topics: anger management, relapse prevention, stimulant abuse, marijuana abuse



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Addiction Technology Transfer Centers (ATTC) Program

- Purpose: To develop and strengthen the addictions treatment workforce.
- In partnership with stakeholders, the ATTCs assess the training and development needs of the substance use disorders workforce, and develop and conduct training and technology transfer activities to meet identified needs.
- Particular emphasis is on raising awareness of and improving skills in using evidence-based and promising treatment/recovery practices in recovery-oriented systems of care.

National Registry of Evidence-based Programs and Practices (NREPP)

- The National Registry of Evidence-based Programs and Practices (NREPP) is a searchable online registry of mental health and substance abuse interventions that have been reviewed and rated by independent reviewers.
- The NREPP website helps states, territories, community-based organizations, and others to identify service models that may address your particular regional and cultural needs, and match your specific resource capacity.
- <http://www.nrepp.samhsa.gov/>



Public Awareness

- **As You Age**
 - Targets age 60 and above
 - Print, radio and television PSAs
 - Posters and brochure
 - *As You Age; Do The Right Dose; and Aging, Medicines, Alcohol, Generic Drugs*
- **Do the Right Dose**
 - Targets 50 – 60 year olds
 - Print, radio and television PSAs
 - Posters
 - Distributed also by NAB on website http://www.nab.org/publicservice/right_dose.asp



Public Awareness

- *Not Worth The Risk Even If It's Legal* – 2007 campaign
 - Television and radio PSAs
 - Brochures and print media
- *Killer Bod – What Anabolic Steroids Can Do to You* – 2007 campaign
 - Brochures, video and 10 high school outreach seminars
- *The Buzz and It's to Die For...*
 - Television, radio and print PSAs
 - Brochures and Posters



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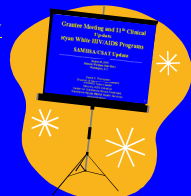
SAMHSA/CSAT Information

- SAMHSA web site: www.samhsa.gov
- CSAT web site: www.csat.samhsa.gov
- Treatment locator web site: www.samhsa.gov/treatment
- Mental Health AIDS newsletter: <http://mentalhealthaids.samhsa.gov/index.asp>
- Mental Health Care Provider Education: <http://mentalhealth.samhsa.gov/publications/allpubs/NMH02-0141/default.asp>
- SHIN 1-800-729-6686 for publication ordering or information on funding opportunities
 - 1-800-487-4889 – TDD line
- 1-800-662-HELP – SAMHSA's National Helpline (average # of tx calls per mo. - 24,000)

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