

SAMHSA: Behavioral Health in Rural Communities

Hal Zawacki, Asst. Regional Administrator, Region 9
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services

SORH Region D Partnership Meeting, Reno NV
June 8, 2022



SAMHSA
Substance Abuse and Mental Health
Services Administration

Substance Abuse and Mental Health Services Administration (SAMHSA)

Mission

Reduce the impact of substance use
and mental illness on America's
communities

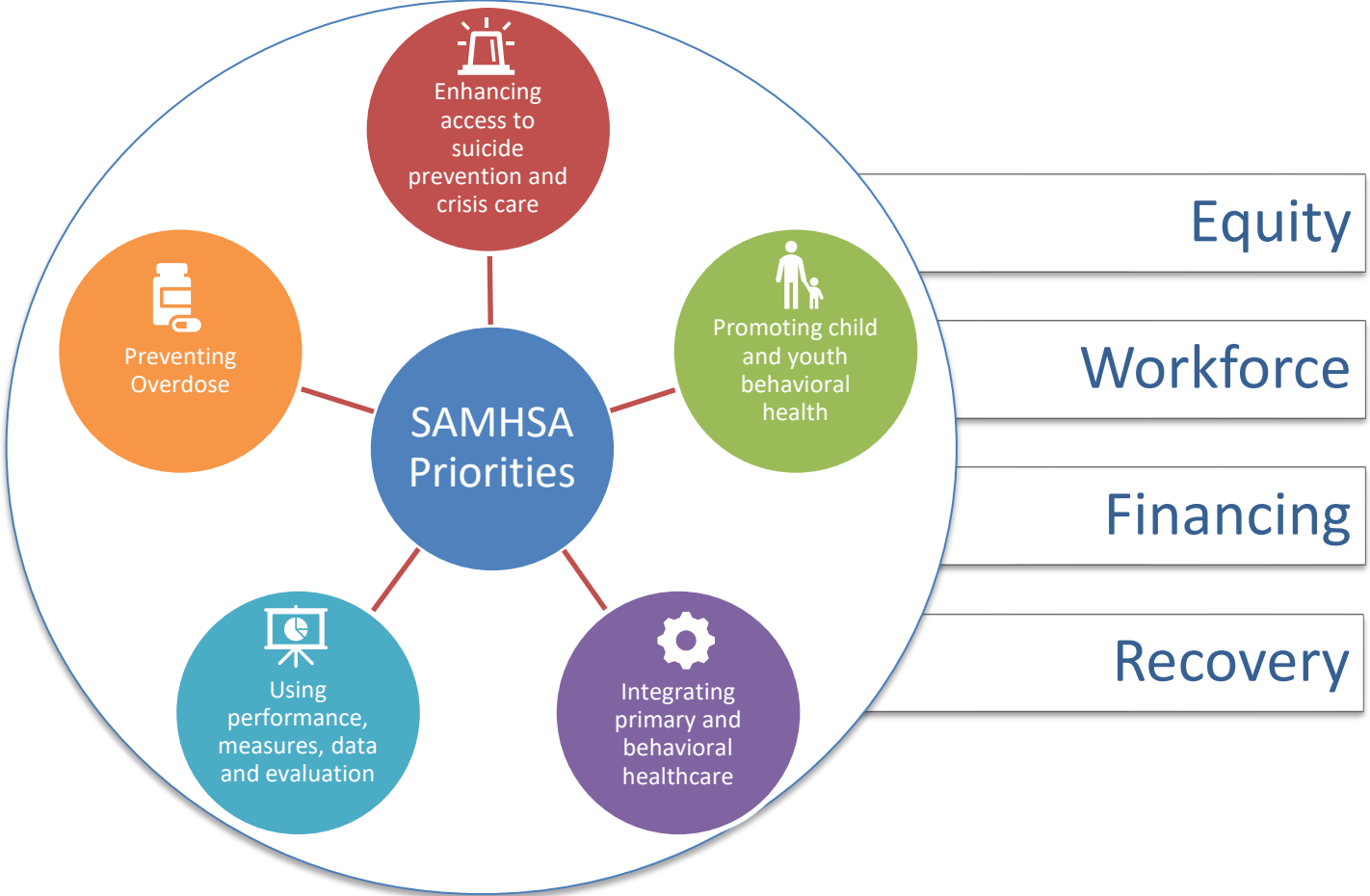
**Behavioral Health is
Essential to Health**

Prevention Works

Treatment Is Effective

People Recover

SAMHSA's Priorities and Cross-Cutting Principles



Mental Health Awareness

SAMHSA is raising awareness about the importance of mental health (MH) in the lives of all Americans.

Some mental health focus areas include:

Children's MH

- Disruptions in routines and relationships have led to increased social isolation, anxiety, and learning loss.

Maternal MH

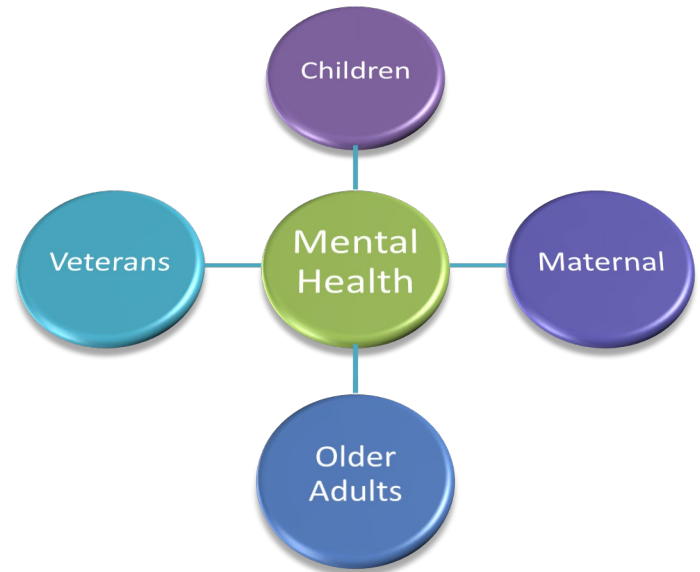
- Life changes around pregnancy can make women more vulnerable to mental illness.

Older Adults MH

- Social isolation and its impact on mental and physical health, lack of access to health care, increased substance use, and grief are at the forefront.

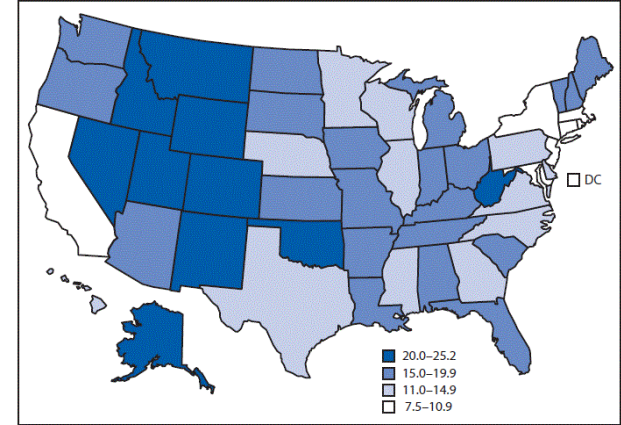
Veterans MH

- For veterans undergoing PTSD, TBI, and/or depression, life can be extremely difficult. A disturbing trend – the average number of Veteran suicides per day: 17.9.



Rural Health Disparities in Behavioral Health

- Rural **suicide** rate nearly 2x the rate in urban areas
 - This difference has widened from 1999 to 2019, increasing 50% in rural areas compared to 31% in urban areas.
 - Suicide among rural youth is 54% higher than urban youth and has increased 74% over the past 12 years.
- Misuse of **Opioids**
 - (ages 12+) in rural areas – 3.5% vs. national avg of 3.2%
 - The CDC analyzed patient opioid prescription data from 2014-2017 and found that the percentage of patients prescribed an opioid was higher in rural areas than in urban settings.
- **Alcohol** use among rural youth (ages 12-20) - 32.2% vs. national avg. of 28.5%
- Rural adults also have higher rates of use for **tobacco** and **methamphetamines**.
- 20% of rural counties lack Mental Health services versus 5% in metropolitan areas.
- Limited **broadband** availability may hinder the use of tele-behavioral health



Age-Adjusted Suicide Rates by State — National Vital Statistics System, United States, 2018

Barriers Creating or Exacerbating Rural Disparities

Accessibility

Availability

Affordability

Acceptability

Barriers Creating or Exacerbating Rural Disparities

Accessibility

- Travel distances to available BH providers.
- Lack of public transportation.
- limited broadband availability in rural areas may hinder tele-behavioral health

Availability

- Fewer providers covering crisis care, mental health and substance abuse services
- limited or no access to detox services.
- Limited access to Medications for Opioid Use Disorder (e.g. Buprenorphine or methadone).

Affordability

- Higher poverty and uninsured rates in rural areas may make it difficult to pay for treatment, esp. out-of-pocket costs.
- Areas with limited BH providers may not accept insurance plans with lower reimbursement rates
- Inadequate BH parity, insurance payments

Acceptability

- Higher stigma associated with substance use disorders care and recovery in rural areas.
- Residents may be more susceptible to stigma surrounding behavioral healthcare in small communities where everyone knows each other and fewer choices of trained professionals can lead to a lack of faith in confidentiality

Best Practices to Address Rural Disparities

- Prevention and Community Education
- Workforce Recruitment and Retention
- Emerging Leaders in Behavioral Health
- Telehealth
- Integration of Behavioral Health & Primary Care
- Community-Based Supports and Services



Substance Abuse and Mental Health
Services Administration

[Home](#) | [Site Map](#) | [Contact Us](#)

[Find Treatment](#) | [Practitioner Training](#) | [Public Messages](#) | [Grants](#) | [Data](#) | [Programs](#) | [Newsroom](#) | [About Us](#) | [Publications](#)

[Home](#) » [Programs](#) » Rural Behavioral Health



Rural Behavioral Health

Advancing health equity involves ensuring that everyone has a fair and just opportunity to be as healthy as possible. This also applies to behavioral health. In conjunction with quality services, this involves addressing social determinants, such as employment and housing stability, insurance status, proximity to services, culturally responsive care – all of which have an impact on behavioral health outcomes.

SAMHSA: Current Funding Opportunities

Opportunity Number	Opportunity Title	Agency	Opportunity Status	Posted Date ↓	Close Date
SM-22-016	Cooperative Agreements for Innovative Community Crisis Response Partnerships	HHS-SAMHS-SAMHSA	Posted	05/24/2022	07/25/2022
SM-22-017	Cooperative Agreements for School-Based Trauma-Informed Support Services and Mental Health Care for Children and Youth	HHS-SAMHS-SAMHSA	Posted	05/24/2022	07/25/2022
TI-22-005	State Opioid Response Grants	HHS-SAMHS-SAMHSA	Posted	05/19/2022	07/18/2022
SM-22-013	Center of Excellence on Social Media and Mental Wellbeing Cooperative Agreement	HHS-SAMHS-SAMHSA	Posted	05/18/2022	07/18/2022
FG-22-001	Asian American, Native Hawaiian, and Pacific Islander Behavioral Health Center of Excellence	HHS-SAMHS-SAMHSA	Posted	05/09/2022	07/08/2022
TI-22-006	Tribal Opioid Response Grants	HHS-SAMHS-SAMHSA	Posted	04/27/2022	06/27/2022
SP-22-006	Sober Truth on Preventing Underage Drinking Act Grants	HHS-SAMHS-SAMHSA	Posted	04/22/2022	06/21/2022
SM-22-011	Cooperative Agreement for the Center of Excellence for Building Capacity in Nursing Facilities to Care for Residents with Behavioral Health Conditions	HHS-SAMHS-SAMHSA	Posted	04/21/2022	06/20/2022
TI-22-012	Rural Opioid Technical Assistance Regional Centers	HHS-SAMHS-SAMHSA	Posted	04/15/2022	06/14/2022
SP-22-004	Strategic Prevention Framework-Partnerships for Success	HHS-SAMHS-SAMHSA	Posted	04/12/2022	06/13/2022
TI-22-007	State Opioid Response (SOR)/Tribal Opioid Response (TOR) Technical Assistance	HHS-SAMHS-SAMHSA	Posted	04/11/2022	06/10/2022

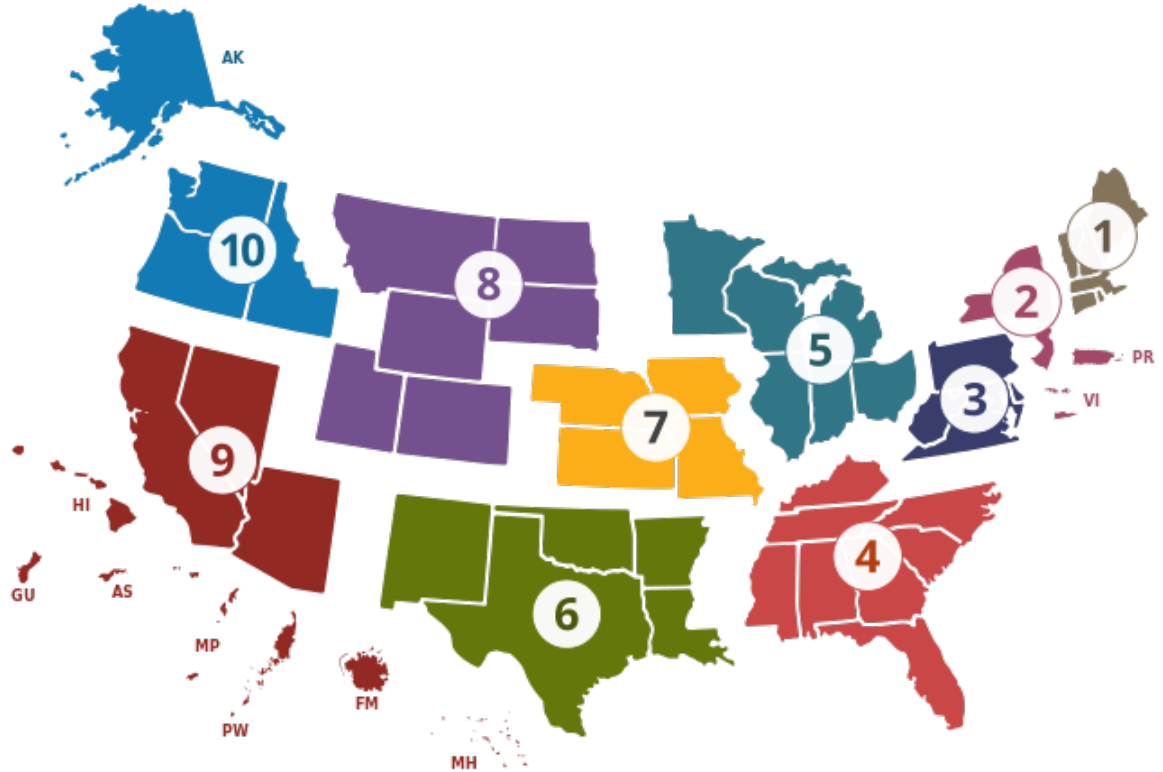
SAMHSA Rural Opioid Technical Assistance - ROTA

Develop and disseminate training and technical assistance for rural communities addressing opioid issues affecting their communities.

- Community events and training
- Empowering youth and families
- MAT and Naloxone training
- Mental health
- Reducing stigma
- Drug take back events

2022 ROTA-R – Regional CoEs

Regional Centers of Excellence to develop and disseminate training and technical assistance addressing opioid and stimulant misuse affecting rural communities.



Rural Workforce Development

Rural Emergency Medical Services (EMS) Training Program

The purpose of this program is to recruit and train emergency medical services (EMS) personnel in rural areas.

- To date SAMHSA has funded two cohorts with a total of 59 Rural EMS grantees. Together they have:
 - Recruited EMS personnel in rural areas.
 - Engaged the EMS staff in trainings, including training on SSUD and Mental Health.
 - 90% of the grantees have used grant funds to purchase essential training equipment or supplies, such as Naloxone kits.
- In 2022 SAMHSA expects to fund another 22 Rural EMS organizations.

Screening Brief Intervention Referral to Treatment (SBIRT)

- Universal screening **of all patients regardless of an identified disorder**
 - Allows health care professionals to address the spectrum of potential behavioral health problems
 - Informs/educates participants not actively seeking an intervention or treatment for his or her problem
- SAMHSA's SBIRT Grant Screening Focuses include;
 - Opioid use disorder
 - Underage drinking,
 - Other substance use



Examples of CMHS Grants Serving Rural Areas

- Asserted Community Treatment (ACT)
- Assisted Outpatient Treatment (AOT)
- Community Mental Health Services Center (CMHC)
- Certified Community Behavioral Health Clinic (CCBHC)
- Community Mental Health Services Block Grant (CMHS BG)
- Crisis Counseling Program (CCP)
- Garrett Lee Smith State/Tribal Youth Suicide Prevention
- Mental Health Awareness Training (MHAT)
- Minority AIDS Initiative (MAI)
- Minority Fellowship Program (MFP)
- National Child Traumatic Stress Initiative (NCSTI)
- Offender Reentry Program (ORP)
- Project AWARE
- Promoting Integration of Primary and Behavioral Health Care (PIPBHC)
- Statewide Consumer Network (SCN)
- Statewide Family Network (SFN)
- Suicide Hotline
- Systems of Care/Circles of Care for Children's Mental Health (SOC Or CMHI)
- Tribal Behavioral Health Program (aka Native Connections)

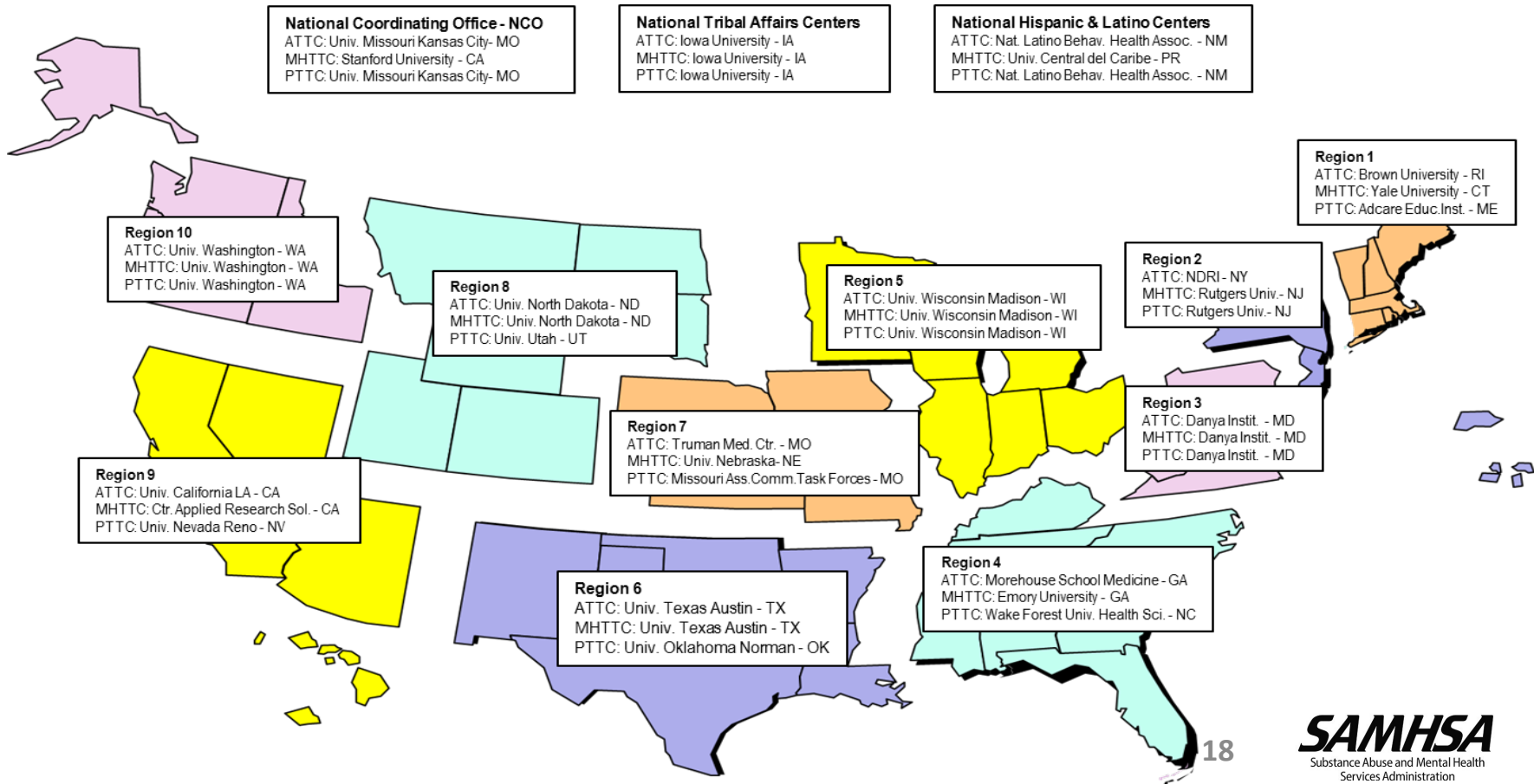
Examples of CSAT and CSAP Grants Serving Rural Areas

- Substance Abuse Prevention and Treatment Block Grants (SAPT BG)
- Enhancement and Expansion of Treatment and Recovery Services for Adolescents, Transitional Aged Youth, and their Families (Youth and Family TREE)
- State Pilot Grant Program for Treatment for Pregnant and Postpartum Women (PPW-PLT)
- Building Communities of Recovery (BCOR)
- Tribal Opioid Response Grants (TOR)
- Rural Opioid Technical Assistance Regional Centers (ROTA-R)
- Screening, Brief Intervention, and Referral to Treatment (SBIRT)
- First Responders-Comprehensive Addiction and Recovery Act Grants (FR-CARA)
- Rural Emergency Medical Services Training Grant (EMS Training)
- Strategic Prevention Framework for Prescription Drugs (SPF Rx)
- Grants to Prevent Prescription Drug/Opioid Overdose-Related Deaths (PDO)
- Substance Abuse and HIV Prevention Navigator Program for Racial/Ethnic Minorities Cooperative Agreement (Prevention Navigator)
- Sober Truth on Preventing Underage Drinking Act Grants (STOP Act)

SAMHSA Technical Assistance Centers

- Rural Opioid Technical Assistance (ROTA)
- Suicide Prevention Resource Center (SPRC)
- Service Member, Veteran and Family Technical Assistance Center (SMVF)
- Bringing Recovery Support Services Technical Assistance Center (BRSS-TACS)
- Tribal Technical Assistance Center (T-TAC)
- National Network to Eliminate Disparities in Behavioral Health (NNED)
- National Resource Center for Mental Health Promotion & Youth Violence Prevention
- Infant/Early Childhood Mental Health Consultation Center (IECMHCC)
- National Child Traumatic Stress Network (NCTSN)
- National Center on Substance Abuse & Child Welfare (NCSACW)
- GAINS Center for Behavioral Health and Justice Transformation (GAINS Center)
- Disaster Technical Assistance Center (DTAC)
- Homeless and Housing Resource Center
- Center for Integrated Health Solutions (CIHS)
- SSI/SSDI Outreach, Access and Recovery (SOAR)

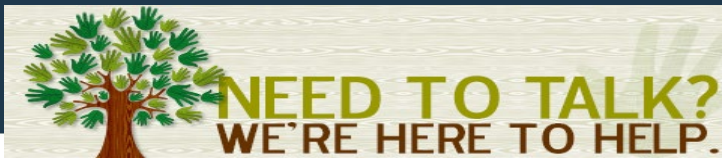
Technology Transfer Centers (TTC) Entities



Governor's Challenge: Policy Academy

- Joint effort between the Department of Veterans Affairs (VA) and SAMHSA.
- The challenge is to prevent suicide among Service Members, Veterans, and their Families (SMVF).
- Incorporates the VA's National Strategy for Preventing Veteran Suicide and incorporates evidence-based strategies from the CDC's Preventing Suicide: A Technical Package of Policy, Programs, and Practices.
- 48 states and 4 territories have/are participating
- To note, the majority of Veterans do not receive care at the VA, therefore it's vital to bring public health efforts such as the Governor's Challenge to communities, states, and territories across the nation as we work to increase support and address upstream risk factors for suicide in SMVF.





Suicide Prevention Lifeline [1-800-273-TALK \(8255\)](tel:1-800-273-TALK)

www.suicidepreventionlifeline.org

24-hour, toll-free, confidential suicide prevention hotline available to anyone in suicidal crisis or emotional distress. Your call is routed to the nearest crisis center in the national network of more than 150 crisis centers.

SAMHSA's National Helpline [1-800-662-HELP \(4357\)](tel:1-800-662-HELP)

www.samhsa.gov/find-help/national-helpline

Also known as, the Treatment Referral Routing Service, the Helpline provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.

Disaster Distress Helpline [1-800-985-5990](tel:1-800-985-5990)

www.samhsa.gov/find-help/disaster-distress-helpline

Stress, anxiety, and other depression-like symptoms are common reactions after any natural or human-caused disaster. Call this toll-free number to be connected to the nearest crisis center for information, support, & counseling.

Veteran's Crisis Line [1-800-273-TALK \(8255\)](tel:1-800-273-TALK)

www.veteranscrisisline.net

Connects veterans (families and friends) in crisis with qualified, caring VA responders through a confidential, toll-free hotline, online chat, or text.

Drug-Free Workplace [1-800-WORKPLACE \(967-5752\)](tel:1-800-WORKPLACE)

www.samhsa.gov/workplace/resources/drug-free-helpline

Assists employers and union representatives with policy development, drug testing, employee assistance, employee education, supervisor training, and

Behavioral Health Treatment Services Locator

Find alcohol, drug, or mental health treatment facilities and programs around the country at findtreatment.samhsa.gov.

Buprenorphine Practitioner & Treatment Program Locator

Find information on locating practitioners and treatment programs authorized to treat opioids at www.samhsa.gov/medication-assisted-treatment/practitioner-program-data/treatment-practitioner-locator.

Early Serious Mental Illness Treatment Locator

Find treatment programs in your state that treat recent onset of serious mental illnesses at www.samhsa.gov/esmi-treatment-locator.

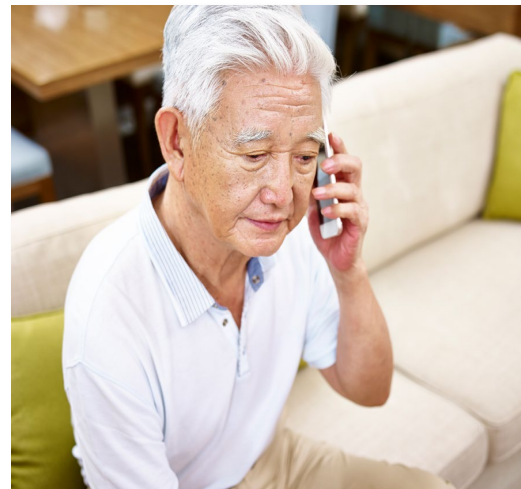
Opioid Treatment Program Directory

Find treatment programs in your state that treat addiction and dependence on opioids at dpt2.samhsa.gov/treatment/.

The Opportunity of 988

Transitioning to 988 is an important step in transforming crisis care in the country, creating a universal entry point to needed crisis services in line with access to other emergency medical services.

- We are strengthening and expanding the National, state and territory infrastructure to respond to all behavioral health crisis calls, texts, and chats anywhere in the country;
- We are transitioning the National Suicide Prevention Lifeline number (1-800-273-8255) to an easy-to-remember, 3-digit number (988);
- An unprecedented opportunity to improve behavioral health crisis response and care for the nation.
- SAMHSA can't do this alone. We embrace the partnership from states and territories to meet the needs of anyone in crisis



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



1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TDD)

Thank You

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

www.samhsa.gov

Findtreatment.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) 1-800-487-4889 (TDD)

Hal Zawacki

Assistant Regional Administrator – Region 9

Substance Abuse and Mental Health Services Administration

U.S. Department of Health and Human Services

90 7th Street, 8th Floor, San Francisco, CA

(415)437-7566