

SAMHSA/CSAT/CMHS Treatment for Homeless Program Technical Assistance Workshop

Update on CSAT Homeless Programs

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Homelessness & Substance Abuse

- Half of all homeless adults have substance use disorders.¹
- 13 percent of those in substance abuse treatment in 2002 were homeless at the time of admission (up from 10% in 2000).²
- More than 120,000 people admitted for substance abuse treatment are homeless at the time of admission.³

1 Blueprint for Change, 2003. CMHS, SAMHSA.
2 The DASIS Report: Characteristics of Homeless Female Admissions to Substance Abuse Treatment, 2002. Drug and Alcohol Services Information System (DASIS), SAMHSA, OAS.
3 The DASIS Report: Characteristics of Homeless Admissions to Substance Abuse Treatment, 2000. Drug and Alcohol Services Information System (DASIS), SAMHSA, OAS.

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Women and Homelessness

- 47% of homeless women have had a major depressive disorder -- more than twice the rate of the general female population.
- 39% of homeless women have experienced Post Traumatic Stress Disorder -- a rate three times higher than in the general female population.
- 33% of homeless women who have experienced violence have attempted suicide at least once.
- 45% of homeless women who have experienced abuse during their lives have struggled with alcohol or drug dependency.

Source: The National Center on Family Homelessness

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Homeless Veterans

- As many as 200,000 veterans are homeless in any given night – 23% of the homeless population.
- Among homeless veterans, 1/3 to 1/2 have co-occurring mental illnesses and substance use disorders.
- An estimated 33% of homeless vets served in a war zone – 89% received honorable discharges.
- 76% experience alcohol, drug, or mental health problems

Source: Coalition for Homeless Veterans, retrieved from www.nchv.org

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Multiple Challenges

- Reaching those in need of services
- Developing culturally-appropriate, evidence-based interventions
- Managing by performance
- Building and sustaining a qualified workforce
- Providing adequate resources
- Integrating substance use disorder services into the public health paradigm (e.g. recovery-oriented systems of care)

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CSAT Funding for Homeless Programs

Amount:

- Three Year Grant Period
 - 17 grants funded for \$9.8 M in 2001.
 - 19 grants funded for \$10.9 M in 2002.
 - 14 grants funded for \$7.8 M in 2003.
- Five Year Grant Period
 - 34 grants funded for \$13.5M in 2004.
 - 30 grants funded for \$11.9M in 2005.
 - 23 grants funded for \$9.0 M in 2006.
 - 25 grants to be funded for \$10.0 M in 2008

TOTAL: 137 (Current Active Grantees: 87)

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CSAT Grants Serving Homeless Populations

- CSAT funds 163 discretionary grants that provide services for the homeless.
- These grants include not only Treatment for Homeless grants, but also
 - Access to Recovery,
 - Recovery Community Services Program (RCSP),
 - TCE/HIV and HIV Outreach,
 - Screening, Brief Intervention, Referral & Treatment (SBIRT),
 - Pregnant & Postpartum Women (PPW), and
 - Treatment Drug Courts.

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Treatment for Homeless Program

- 5,875 clients served in 2007
- 53% male, 46% female
- Only 12% under the age of 24
- African American: 36%; White: 35%; Hispanic/Latino: 16%
- Substances reported at intake:
 - Alcohol 43%
 - Cocaine/crack 25%
 - Marijuana/hashish 21%
 - Methamphetamine 6%
 - Heroin 5%

Source: SAMHSA, Services Accountability Improvement System (SAIS)

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Treatment for Homeless Program (cont'd)

- Length of Stay:
 - 121 or more days 52%
 - 91-120 days 8%
 - 31-90 days 22%
 - 0-30 days 18%
- Housing Progress

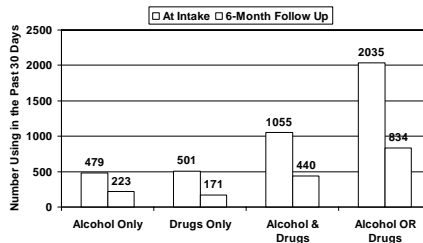
	At Intake	At 6-Mo. Follow-up
- Shelter	35%	20%
- Street/Outdoors	17%	5%
- Institution	10%	5%
- Home	42%	71%

Source: SAMHSA, Services Accountability Improvement System (SAIS)

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Treatment for Homeless Evidence of Success

Use in Past Month

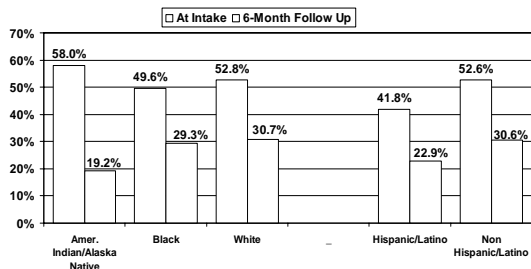


Source: SAMHSA, Services Accountability Improvement System (SAIS)

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Treatment for Homeless Evidence of Success

Use of Alcohol or Drugs in the Past Month



Source: SAMHSA, Services Accountability Improvement System (SAIS), 4/08

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FY 2008 Treatment for Homeless (CSAT)

- RFA period just ended and applications will soon be reviewed.
- Anticipated Total Available Funding: Up to \$10 million
- Anticipated Number of Awards:
 - Treatment for Homeless - General - Up to 13
 - Treatment for Homeless - Services in Supportive Housing - Up to 12
- Anticipated Award Amount: Up to \$400,000
- Length of Project Period: Up to 5 years

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Key Upcoming Activities

- Homeless Program Cross-Site Evaluation – Fall 2008
- Internal PART Review – Ongoing
- Transition Planning
- Priorities of New Administration
 - Behavioral Health Care
 - National Health Insurance
 - Parity

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Treatment for Homeless Program PART Review

- CSAT and CMHS recently began Program Assessment Rating Tool (PART) planning for Homeless programs.
- PART is used by the Office of Management and Budget (OMB) to assess and improve program performance.
- Review examines all factors that affect and reflect program performance, including program purpose and design; performance measurement, evaluations, and strategic planning; program management; and program results.

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CSAT Homeless Grant Budget (Dollars in Millions)

	2008	2009 President's Request
Continuation Grants	\$29.0	\$29.6
New Grants	\$10.1*	----
TA/Evaluation	\$3.4	\$3.0
Total	\$42.5	\$32.6

* 25 Grants

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Key Upcoming Budget Considerations

- Hill action on 2009 Budget
- Likely 2009 Long-term Continuing Resolution (CR)
- OMB Discussions on CR Program Distribution
- 2010 Budget Development
- Priorities of New Administration
 - Fiscal Management
 - Budget Priorities
 - Agency Staffing

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Sustaining Grassroots Community-Based Programs: A Toolkit for Community and Faith-Based Service Providers

- Includes discussions, handouts and exercises on the Strategic Planning Process, Organizational Assessment and Readiness, Effective Marketing Strategies, Financial Management, Sustainability Strategies: Funds Development and Fund Raising, Results-Oriented Evaluations.
- Available to order or download from the National Clearinghouse on Alcohol and Drug Abuse website <http://ncadi.samhsa.gov/> in July 2008.
- Questions, contact: Joycelyn Whitfield Jocelyn.Whitfield@samhsa.hhs.gov

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Get involved in Recovery Month

Help bring hope and healing to others

- Visit the *Recovery Month* Web site at www.recoverymonth.gov
- Use the tools to spread the *Recovery Month* message:
 - Toolkits, presentations, giveaways, public service announcements, and more
- Join thousands of individuals and organizations by hosting a *Recovery Month* event in your community
- Educate others about the effectiveness of treatment and the hope of recovery
- For more information call 1-800-662-Help

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A Time of Transition

An election year always creates an interesting and challenging working environment.

One certainty is that nothing is certain.

So...Stay Tuned!

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