Leading Change: A Plan for SAMHSA’s Roles and Actions 2011–2014

Executive Summary and Introduction

Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover
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Executive Summary

The Substance Abuse and Mental Health Services Administration (SAMHSA), an operating division within the U.S. Department of Health and Human Services (HHS), is charged with reducing the impact of substance abuse and mental illness on America’s communities. SAMHSA pursues this mission at a time of significant change. Health reform has been enacted, bringing sweeping improvements in how the United States delivers, pays for, and monitors health care. The evidence base behind behavioral health prevention, treatment, and recovery services continues to grow and promises better outcomes for people with and at risk for mental and substance use disorders. All of this change is happening at a time when State budgets are shrinking and fiscal restraint is a top priority.

Recognizing the need to balance these opportunities and challenges, SAMHSA has identified eight Strategic Initiatives to focus its limited resources on areas of urgency and opportunity. The Initiatives will enable SAMHSA to respond to national, State, Territorial, Tribal, and local trends and support implementation of the Affordable Care Act and the Mental Health Parity and Addictions Equity Act. People are at the core of SAMHSA’s mission, and these Initiatives will guide SAMHSA’s work through 2014 to help people with mental and substance use disorders and their families build strong and supportive communities, prevent costly and painful behavioral health problems, and promote better health for all Americans.

Each Initiative has an overarching purpose, specific goals, action steps, and measures for determining success. In addition, three issues cut across all of the Initiatives: behavioral health disparities, health reform, and workforce development. This strategic plan will guide SAMHSA as it:

- Sets budget and policy priorities;
- Manages grants, contracts, technical assistance, agency staff, and interagency efforts;
- Engages partners at every level; and
- Measures and communicates progress.

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1 The term “behavioral health” in this document refers to a state of mental/emotional being and/or choices and actions that affect wellness. Behavioral health problems include substance abuse or misuse, alcohol and drug addiction, serious psychological distress, suicide, and mental and substance use disorders. This includes a range of problems from unhealthy stress to diagnosable and treatable diseases like serious mental illnesses and substance use disorders, which are often chronic in nature but that people can and do recover from. The term is also used to describe the service systems encompassing the promotion of emotional health, the prevention of mental and substance use disorders, substance use, and related problems, treatments and services for mental and substance use disorders, and recovery support.

2 “Mental and substance use disorders” are referred to throughout this document. This phrase is meant to be inclusive of mental disorders, substance use disorders, and co-occurring mental and substance use disorders.

3 In this paper, the term “Territories” includes United States Associated Jurisdictions.
The Initiatives are data driven and grounded in a public health foundation as they respond to the
toll that substance abuse, poor emotional health, and mental illnesses take. Like physical
illnesses, mental and substance use disorders cost money and lives if they are not prevented, are
left untreated, or are poorly managed. Their presence exacerbates the cost of treating co-morbid
physical diseases\textsuperscript{1} and results in some of the highest disability burdens in the world for
individuals, families, businesses, and governments.\textsuperscript{2}

The impact on America’s children, adults, and communities is enormous:

- The annual total estimated societal cost of substance abuse in the United States is
  $510.8 billion.\textsuperscript{3}
- By 2020, behavioral health disorders will surpass all physical diseases as a major cause
  of disability worldwide.\textsuperscript{4}
- In 2008, an estimated 9.8 million adults aged 18 and older in the United States had a
  serious mental illness. Two million youth aged 12 to 17 had a major depressive episode
during the past year.\textsuperscript{5}
- In 2009, an estimated 23.5 million Americans aged 12 and older needed treatment for
  substance use.\textsuperscript{6}
- Half of all lifetime cases of mental and substance use disorders begin by age 14 and
  three-fourths by age 24.\textsuperscript{7}

In 2011 and beyond, SAMHSA will work to improve understanding about mental and substance
use disorders, promote emotional health and the prevention of substance abuse and mental
illness, increase access to effective treatment, and support recovery. SAMHSA’s Strategic
Initiatives will address trauma; support military families; improve access to culturally competent,
high-quality care; develop community, peer, and family support; build information systems; and
promote important messages about behavioral health while adjusting to changing conditions. By
working across health, justice, social services, education, and other systems and with State,
Territorial, Tribal, and other partners, SAMHSA will lead the way to improving the Nation’s
behavioral health.
The Strategic Initiatives

The following eight Initiatives will guide SAMHSA’s work from 2011 through 2014:

1. **Prevention of Substance Abuse and Mental Illness**—Creating communities where individuals, families, schools, faith-based organizations, and workplaces take action to promote emotional health and reduce the likelihood of mental illness, substance abuse including tobacco, and suicide. This Initiative will include a focus on the Nation’s high-risk youth, youth in Tribal communities, and military families.

2. **Trauma and Justice**—Reducing the pervasive, harmful, and costly health impact of violence and trauma by integrating trauma-informed approaches throughout health, behavioral health, and related systems and addressing the behavioral health needs of people involved in or at risk of involvement in the criminal and juvenile justice systems.

3. **Military Families**—Supporting America’s service men and women—active duty, National Guard, Reserve, and veteran—together with their families and communities by leading efforts to ensure that needed behavioral health services are accessible and that outcomes are positive.

4. **Recovery Support**—Partnering with people in recovery from mental and substance use disorders and family members to guide the behavioral health system and promote individual-, program-, and system-level approaches that foster health and resilience; increase permanent housing, employment, education, and other necessary supports; and reduce discriminatory barriers.

5. **Health Reform**—Increasing access to appropriate high quality prevention, treatment, and recovery services; reducing disparities that currently exist between the availability of services for mental and substance use disorders compared with the availability of services for other medical conditions; and supporting integrated, coordinated care, especially for people with behavioral health and other co-occurring health conditions such as HIV/AIDS.

6. **Health Information Technology**—Ensuring that the behavioral health system, including States, community providers, and peer and prevention specialists, fully participates with the general health care delivery system in the adoption of health information technology (HIT) and interoperable electronic health records (EHRs).

7. **Data, Outcomes, and Quality**—Realizing an integrated data strategy and a national framework for quality improvement in behavioral health care that will inform policy, measure program impact, and lead to improved quality of services and outcomes for individuals, families, and communities.

8. **Public Awareness and Support**—Increasing the understanding of mental and substance use disorders and the many pathways to recovery to achieve the full potential of prevention, help people recognize mental and substance use disorders and seek assistance with the same urgency as any other health condition, and make recovery the expectation.
Introduction

This paper details eight Strategic Initiatives that will provide a framework to support the vision and mission of the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS).

Vision

SAMHSA provides leadership and devotes its resources—programs, policies, information and data, contracts and grants—toward helping the Nation act on the knowledge that:

- Behavioral health is essential for health;
- Prevention works;
- Treatment is effective; and
- People recover from mental and substance use disorders.

Mission

SAMHSA’s mission is to reduce the impact of substance abuse and mental illness on America’s communities. By providing leadership, voice, funding, and standards, SAMHSA has the expertise and facilitates the collaboration needed to achieve its vision. SAMHSA accomplishes this mission through partnerships, policies, and programs that build resilience and facilitate recovery for people with or at risk for mental or substance use disorders. SAMHSA-funded services help individuals pursue recovery, avoid the abuse of drugs or alcohol, and reduce the impact of mental illnesses.

This document first presents a brief overview of SAMHSA’s plan for leading change, including SAMHSA’s focus on people and recovery, SAMHSA’s roles, and some background about the eight Initiatives. The individual chapters present key facts and each Initiative’s overall purpose, followed by background information; a discussion of the Initiative in the context of disparities, health reform, and the behavioral health workforce; an overview of the components of the Initiative; and specific goals and action steps.

Finally, each chapter provides measures for determining progress. Each Initiative has at least two measures: one population based and one SAMHSA specific. The population-based measures are aspirational and will require broad change in partnership with other systems, levels of government, private organizations, and the American people. The SAMHSA-specific measures are closely tied to SAMHSA-funded programs and provide more immediate targets for the work described in these Initiatives.
Above All, SAMHSA Seeks To Improve the Lives of People

Individuals and families cannot be healthy without positive mental health and freedom from addictions and abuse of substances. Prevention, treatment, and recovery support services for behavioral health are important parts of health service systems and communitywide strategies that work to improve health status and lower costs for individuals, families, businesses, and governments.

Substance abuse, addictions, poor emotional health, and mental illnesses take a toll on individuals, families, and communities. They cost money, and they cost lives, as do physical illnesses that are not prevented, are left untreated, or are poorly managed. Their presence exacerbates the cost of treating co-morbid physical diseases and results in some of the highest disability burdens in the world, compared with other causes of disability. SAMHSA has a unique responsibility to focus the Nation’s health and social agendas on these preventable and treatable problems stemming from disease, trauma, inadequate access to appropriate care, and insufficient community and family supports.

SAMHSA’s goal is a high-quality, self-directed, satisfying life integrated in a community for all Americans. This life includes:

- **Health**—Overcoming or managing one’s disease(s) as well as living in a physically and emotionally healthy way;
- **Home**—A stable and safe place to live that supports recovery;
- **Purpose**—Meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society; and
- **Community**—Relationships and social networks that provide support, friendship, love, and hope.

A person’s health, home, purpose, and community are compromised when emotional resources are inadequate to contend with adverse events, a mental disorder is left untreated, drugs and alcohol are abused or lead to addictive disorders, families or communities experience trauma, health care is unavailable, or basic needs go unmet. In these circumstances, security and hope are lost. SAMHSA will work to restore hope for individuals, families, and communities by helping service delivery systems prevent and improve these conditions.

**SAMHSA’s Roles**

In order to achieve its mission and vision and improve the lives of people, SAMHSA has many roles:

Providing **Leadership and Voice** by developing policies; convening stakeholders; collaborating with people in recovery and their families, providers, localities, Tribes, Territories, and States; collecting best practices and developing expertise around behavioral health services; advocating for the needs of persons with mental and substance use disorders; and emphasizing the importance of behavioral health in partnership with other agencies, systems, and the public.
Promoting change through **Funding and Service Capacity Development**. Supporting States, Territories, and Tribes to build and improve basic and proven practices and system capacity; helping local governments, providers, communities, coalitions, schools, universities, and peer-run and other organizations to innovate and address emerging issues; building capacity across grantees; and strengthening States’, Territories’, Tribes’, and communities’ emergency response to disasters.

Supporting the field with **Information/Communications** by conducting and sharing information from national surveys and surveillance (e.g., National Survey on Drug Use and Health [NSDUH], Drug Abuse Warning Network [DAWN], Drug and Alcohol Service Information System [DASIS]); vetting and sharing information about evidence-based practices (e.g., National Registry of Evidence-based Programs and Practices [NREPP]); using the Web, print, social media, public appearances, and the press to reach the public, providers (e.g., primary, specialty, guilds, peers), and other stakeholders; and listening to and reflecting the voices of people in recovery and their families.

Protecting and promoting behavioral health through **Regulation and Standard Setting** by preventing tobacco sales to minors (Synar Program); administering Federal drug-free workplace and drug-testing programs; overseeing opioid treatment programs and accreditation bodies; informing physicians’ office-based opioid treatment prescribing practices; and partnering with other HHS agencies in regulation development and review.

**Improving Practice (i.e., community-based, primary care, and specialty care)** by holding State, Territorial, and Tribal policy academies; providing technical assistance to States, Territories, Tribes, communities, grantees, providers, practitioners, and stakeholders; convening conferences to disseminate practice information and facilitate communication; providing guidance to the field; developing and disseminating evidence-based practices and successful frameworks for service provision; supporting innovation in evaluation and services research; moving innovations and evidence-based approaches to scale; and cooperating with international partners to identify promising approaches to supporting behavioral health.

**Meeting the Needs of a Diverse Nation**

SAMHSA will be proactive in targeting its limited resources, setting priorities, and engaging private and public partners at the national, State, Territorial, Tribal, local, and community levels.

SAMHSA acknowledges that American Indian and Alaska Native Tribal governments are sovereign governmental entities that have a unique historical and legal relationship with the Federal Government. SAMHSA will honor that relationship and embrace a government-to-government approach, to the extent allowed by law, in working with Tribal governments. SAMHSA’s Tribal activities will be based on early and meaningful consultation, trust, mutual respect, and shared responsibility. SAMHSA will seek guidance from Tribal governments about the Initiatives included in this strategic plan as well as other activities affecting Tribes.

As needed, SAMHSA also will provide Tribal governments and providers with assistance to address issues stemming from entrenched poverty, historical trauma, small or sparse populations, remote locations, lack of capacity, and differing requirements across Federal programs.
Accountability will be maintained while SAMHSA looks for ways to accommodate the unique needs and strengths of American Indians and Alaska Natives. Tribes or Tribal issues are specific foci of several parts of this plan, and broad Tribal participation throughout SAMHSA’s programs is expected and encouraged.

As SAMHSA moves forward with these Initiatives, it will address the disparities in access, quality, and outcomes of care for vulnerable populations that historically have been underserved or inappropriately served by the behavioral health system. These groups include racial and ethnic minorities; lesbian, gay, bisexual, transgender, and questioning (LGBTQ\textsuperscript{iv}) individuals; women; children; people with disabilities; and persons who face economic hardship or live in health care workforce shortage areas. Across its Initiatives, SAMHSA will encourage behavioral health services and systems to incorporate respect for, and understanding of, the histories, traditions, beliefs, language, sociopolitical contexts, and cultures of diverse racial and ethnic populations. This work will be guided by the leadership of the newly established Office of Behavioral Health Equity within SAMHSA.

\section*{A Framework for Managing Change}

The Strategic Initiatives have been chosen for a number of reasons. For each Initiative, there are documented concerns, gaps, or problems; identified opportunities for Federal leadership; and available resources and actions to support this leadership. This section outlines three overarching aims that connect the Initiatives with the HHS Strategic Plan: (1) improving the Nation’s behavioral health, (2) transforming health care in America, and (3) achieving excellence in operations.

\textit{AIM: Improving the Nation’s Behavioral Health}

In a time of constrained resources, focusing on critical areas of need is more important than ever. Because behavioral health conditions, taken together, are the leading causes of disability burden in North America, efforts to improve their prevention and treatment will benefit society as a whole. To achieve nationwide improvements in health, SAMHSA will lead efforts to reduce the impact of mental and substance use disorders on America’s communities. Four Strategic Initiatives address this aim.

\section*{Strategic Initiative #1: Prevention of Substance Abuse and Mental Illness}

The promotion of positive mental health and the prevention of substance abuse and mental illness have been key parts of SAMHSA’s mission to reduce the impact of substance abuse and mental illness on America’s communities. The evidence base in this area continues to grow and was recently summarized by the 2009 Institute of Medicine (IOM) report, \textit{Preventing Mental, \textsuperscript{iv} This paper uses two abbreviations: LGBTQ (lesbian, gay, bisexual, transgender, and questioning) and LGBT (lesbian, gay, bisexual, and transgender). LGBTQ refers to broad populations that may include individuals who are questioning their sexual or gender identities. LGBT refers to communities and stakeholder groups that are known to exist. Cohesive questioning communities typically do not exist. Many stakeholder groups do not explicitly include or represent persons questioning their sexual or gender identities.
Emotional, and Behavioral Disorders among Young People. The Affordable Care Act is also putting a heavy focus on prevention and promotion activities at the community, State, Territorial, and Tribal levels. Unfortunately, much of the strong evidence in this area has not been moved into practice, and our Nation lacks a consistent infrastructure for the prevention of substance abuse and mental illness. Through this Initiative, SAMHSA will work to take advantage of the opportunities presented by the Affordable Care Act and the growing evidence base behind prevention.

**Goal 1.1:** With primary prevention as the focus, build emotional health, prevent or delay onset of, and mitigate symptoms and complications from substance abuse and mental illness.

**Goal 1.2:** Prevent or reduce consequences of underage drinking and adult problem drinking.

**Goal 1.3:** Prevent suicides and attempted suicides among populations at high risk, especially military families, LGBTQ youth, and American Indians and Alaska Natives.

**Goal 1.4:** Reduce prescription drug misuse and abuse.

**Strategic Initiative #2: Trauma and Justice**

Trauma can occur from a variety of causes, including maltreatment, separation, abuse, criminal victimization, physical and sexual abuse, natural and manmade disasters, war, and sickness. Although some individuals who experience trauma move on with few symptoms, many, especially those who experience repeated or multiple traumas, suffer a variety of negative physical and psychological effects. Trauma exposure has been linked to later substance abuse, mental illness, increased risk of suicide, obesity, heart disease, and early death.

This Initiative has a dual focus. First, it seeks to address the behavioral health impact of trauma by developing a public health approach to trauma that strengthens surveillance, prevention, screening, and treatment and supports trauma-informed systems that better respond to people who have experienced trauma and are less likely to cause trauma through their interventions. Second, the Initiative focuses on the behavioral health needs of people involved in or at risk of involvement in the criminal and juvenile justice systems.

**Goal 2.1:** Develop a comprehensive public health approach to trauma.

**Goal 2.2:** Make screening for trauma and early intervention and treatment common practice.

**Goal 2.3:** Reduce the impact of trauma and violence on children, youth, and families.

**Goal 2.4:** Address the needs of people with mental disorders, substance use disorders, co-occurring disorders, or a history of trauma in the criminal and juvenile justice systems.

**Goal 2.5:** Reduce the impact of disasters on the behavioral health of individuals, families, and communities.
Strategic Initiative #3: Military Families

Military families (i.e., active duty, National Guard, Reserve, and veteran) are feeling the strain of frequent deployments; separation; exposure to combat and other dangers, such as military sexual trauma; and health and behavioral health needs. Too frequently, community providers are not equipped or trained to meet the needs of these families. Gaps exist in the care available in communities for military families. Increased coordination is needed between military health care systems and the behavioral health care system. SAMHSA will work with the U.S. Departments of Defense (DoD) and Veterans Affairs, States, Territories, Tribes, and communities to reduce barriers and increase military families’ access to culturally competent, trauma-informed services, regardless of where they choose to seek care.

Goal 3.1: Improve military families’ access to community-based behavioral health care through coordination among SAMHSA, TRICARE®, DoD, and Veterans Health Administration services.

Goal 3.2: Improve the quality of behavioral health-focused prevention, treatment, and recovery support services by helping providers respond to the needs within the military family culture.

Goal 3.3: Promote the behavioral health of military families with programs and evidence-based practices that support their resilience and emotional health and prevent suicide.

Goal 3.4: Develop an effective and seamless behavioral health service system for military families through coordination of policies and resources across Federal, national, State, Territorial, Tribal, and local organizations.

Strategic Initiative #4: Recovery Support

While coverage expansions under the Affordable Care Act and the Mental Health Parity and Addictions Equality Act will ensure broader coverage and access to traditional behavioral health care, many recovery supports are not covered within the traditional medical framework. A broad range of services and supports beyond traditional treatments for mental and substance use disorders can help people manage their recovery from mental and substance use disorders. Behavioral health care and support should also be more responsive to the needs and direction of people in recovery and their families. The elements of health, home, purpose, and community are the pillars of person-centered, evidence-based, quality-driven systems and services that support recovery from mental and substance use disorders.

Goal 4.1: (Health) Promote health and recovery-oriented service systems for individuals with or in recovery from mental and substance use disorders.

Goal 4.2: (Home) Ensure that permanent housing and supportive services are available for individuals with or in recovery from mental and substance use disorders.

Goal 4.3: (Purpose) Increase gainful employment and educational opportunities for individuals with or in recovery from mental and substance use disorders.

Goal 4.4: (Community) Promote peer support and the social inclusion of individuals with or in recovery from mental and substance use disorders in the community.
AIM: Transforming Health Care in America

On March 23, 2010, President Barack Obama signed the Patient Protection and Affordable Care Act (Affordable Care Act) (P.L. 111–148) into law, transforming and modernizing the Nation’s health care system. The Affordable Care Act makes health insurance coverage more secure and reliable for Americans who have it, brings about more affordable coverage, and reduces health care costs. HHS will improve patient outcomes, promote efficiency and accountability, support patient safety, encourage shared responsibility, and work toward a high-value health care system. SAMHSA will ensure that behavioral health is embedded throughout the transformed health care paradigm. Three Initiatives encompass this aim.

Strategic Initiative #5: Health Reform

Health reform will have a dramatic impact on the Nation’s behavioral health system. It will increase access to health care, including behavioral health care; grow the country’s health and behavioral health workforce; reduce physical and behavioral health disparities experienced by low-income Americans, racial and ethnic minorities, and other underserved populations; and implement programs that draw on the science of behavioral health promotion and of prevention, treatment, and recovery support services. States, Territories, Tribes, primary care and behavioral health providers, and individuals and families will need assistance to understand and participate actively in local health reform efforts. SAMHSA will address this need by providing technical assistance and training to help these groups understand and participate actively in health reform efforts and to move toward the integration of primary and behavioral health care. As part of its integration activities, SAMHSA will address the behavioral health needs of persons with or at risk for HIV/AIDS by implementing recommendations from the President’s National HIV/AIDS Strategy.

Goal 5.1: Ensure that behavioral health is included in all aspects of health reform.

Goal 5.2: Support Federal, State, Territorial, and Tribal efforts to develop and implement new provisions under Medicaid and Medicare.

Goal 5.3: Finalize and implement the parity provisions in the Mental Health Parity and Addiction Equity Act and the Affordable Care Act.

Goal 5.4: Develop changes in SAMHSA Block Grants to support recovery and resilience.

Goal 5.5: Foster the integration of primary and behavioral health care.

Strategic Initiative #6: Health Information Technology

Both the American Recovery and Reinvestment Act and the Affordable Care Act are driving health systems toward the use of information technology for service delivery, quality improvement, cost containment, and increased patient control of personal health care and related information. State, Territorial, Tribal, county, and city governments as well as providers and service recipients will need support through this fundamental change in the way that health care is delivered. In the past, the specialty behavioral health system has often operated independently from the broader health system and has differed in the type and scope of information technology used. Through this Initiative, SAMHSA will work to increase access to HIT so that Americans with behavioral health conditions can benefit from these innovations. In partnership with the
Office of the National Coordinator for Health Information Technology (ONC), SAMHSA will drive innovation and the adoption of HIT and EHRs to support the transition of specialty behavioral health to interoperate with primary care by 2014.

**Goal 6.1:** Develop the infrastructure for interoperable EHRs, including privacy, confidentiality, and data standards.

**Goal 6.2:** Provide incentives and create tools to facilitate the adoption of HIT and EHRs with behavioral health functionality in general and specialty health care settings.

**Goal 6.3:** Deliver technical assistance to State HIT leaders, behavioral health and health providers, patients and consumers, and others to increase adoption of EHRs and HIT with behavioral health functionality.

**Goal 6.4:** Enhance capacity for the exchange and analysis of EHR data to assess quality of care and improve patient outcomes.

**AIM: Achieving Excellence in Operations**

In addition to internal efforts to invest in its workforce, SAMHSA will build a world-class organization, realign grants and contracts around Strategic Initiatives, improve program integrity, enhance policy development and implementation processes, and increase its presence throughout the United States by moving staff to each of the 10 HHS regional offices. SAMHSA will achieve excellence in operations through the following two Strategic Initiatives:

**Strategic Initiative #7: Data, Outcomes, and Quality**

Given the resource constraints faced at all levels of government, the need is great to track outcomes, improve the quality of services, and ensure that resources are directed to effective approaches. Both outside and inside of government, there is a demand for increased data. For example, the GPRA Modernization Act of 2010, which amends the Government Performance and Results Act (GPRA) of 1993, requires SAMHSA to report information to HHS on a quarterly basis. In addition, better coordination is needed around data collection and evaluation at multiple levels. Through this Initiative, SAMHSA will track results, improve quality and outcomes for the people it serves, and increase transparency.

**Goal 7.1:** Implement an integrated approach for SAMHSA’s collection, analysis, and use of data.

**Goal 7.2:** Create common standards for quality of care, outcomes measurement, and data collection to better meet stakeholder needs.

**Goal 7.3:** Improve the quality of SAMHSA’s program evaluations and services research.

**Goal 7.4:** Improve the quality and accessibility of surveillance, outcome and performance, and evaluation information for staff, stakeholders, funders, and policymakers.

**Strategic Initiative #8: Public Awareness and Support**

Although acceptance of the importance of behavioral health is greater now than at any time in the past, a great need exists for public awareness around mental and substance use disorders.
Serious gaps exist between the number of people who need treatment for mental and substance use disorders and those who seek that treatment. Attitudes and discrimination toward people with mental and substance use disorders impede their recovery and create barriers to their ability to lead full lives integrated within their communities.

**Goal 8.1:** Increase public understanding about mental and substance use disorders, the reality that people recover, and how to access treatment and recovery supports for behavioral health conditions.

**Goal 8.2:** Create a cohesive SAMHSA identity and media presence.

**Goal 8.3:** Advance SAMHSA’s Strategic Initiatives and HHS priorities through strategic communications efforts.

**Goal 8.4:** Provide information for the behavioral health workforce.

**Goal 8.5:** Increase social inclusion and reduce discrimination.

**2011 and Beyond**

This is a living document, and SAMHSA will continue to work with its partners to update and implement these Initiatives as conditions change over time. Undoubtedly, action steps and goals will shift, but the purpose will remain the same. These Strategic Initiatives will provide direction for SAMHSA and the field and ensure that resources are focused where greatest need meets greatest opportunity. Through this dialogue and these actions, SAMHSA will continue to improve the Nation’s behavioral health, transform health care in America, and achieve excellence in operations.

**References:**
