



DEPARTMENT OF HEALTH & HUMAN SERVICES

Substance Abuse and Mental  
Health Services Administration

Center for Mental Health Services  
Center for Substance Abuse  
Prevention  
Center for Substance Abuse  
Treatment  
Rockville MD 20857

Dear Tribal Leader:

I am writing to invite you to apply for participation in an unprecedented opportunity to join with Tribal, Federal, and local partners to help improve services to people with and at risk for co-occurring substance use and mental disorders. We know that meaningful community systems improvement happens when policy, finance, and culturally appropriate and responsive service experts come together in a focused and strategic effort. We hope that you will apply to send a team to participate in the "Policy Academy on Co-Occurring Substance Use and Mental Disorders for American Indians and Alaska Natives."

The 2004 National Survey of Substance Abuse Treatment Services (N-SSATS) revealed that the primary focus of most AI/AN health facilities was substance abuse, and the second most common focus for facilities was a mix of mental health and substance abuse treatment. Substance abuse, historical trauma, forced cultural change, and lack of economic opportunity complicate the behavioral health policy and practice planning process for AI/AN communities and overall health disparities are significant. Additional efforts are needed to initiate and transform policy and practice activities for the purpose of improving AI/AN behavioral health and recovery systems.

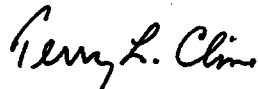
This invitation for participation in the Policy Academy on Co-Occurring Disorders is an opportunity for Tribal communities to receive specialized technical assistance to facilitate planning activities designed to streamline and improve the effectiveness of the mental health and substance abuse systems response to co-occurring disorders. The Policy Academy will provide a forum for your Tribe and/or Tribal Organization to consider how your local policies and program resources influence the response to co-occurring disorders and whether there are efficiencies or changes in program operations that would improve the response. In addition, pre- and post Academy technical assistance will be provided to assist Tribal Teams in exploring strategies to develop and implement their strategic plans designed to address issues of policy, financing, services, and supports for people with and at risk for co-occurring substance use and mental disorders.

Up to eight Tribal teams will be selected to participate in an intensive policy-building forum to develop Tribal-level Strategic Plans for improving access to appropriate prevention and treatment services for persons with and at risk for co-occurring substance use and mental disorders.

Enclosed please find the Substance Abuse and Mental Health Services Administration (SAMHSA) Invitation to Apply for the *Policy Academy on Co-Occurring Substance Use and Mental Disorders for American Indians and Alaska Natives*. The Policy Academy will take place on **September 11 – 13, 2007** in **Phoenix, Arizona**.

I encourage you to give this opportunity your full consideration as you pursue health and welfare reform efforts in your communities. **Application for participation must be received no later than June 15, 2007 and can be mailed or faxed.** If you have any questions, please consult the enclosed invitation or feel free to contact Elizabeth I. Lopez, Ph.D., Policy Academy Coordinator, at 240-276-2242 or [Elizabeth.lopez@samhsa.hhs.gov](mailto:Elizabeth.lopez@samhsa.hhs.gov).

Sincerely,



Terry L. Cline, Ph.D.  
Administrator

Enclosure

# **POLICY ACADEMY ON CO-OCCURRING SUBSTANCE USE AND MENTAL DISORDERS FOR AMERICAN INDIAN/ALASKA NATIVE POPULATIONS – INVITATION to APPLY**

**Application deadline: June 15, 2007**

## **PROJECT OVERVIEW**

The human, social and economic costs of co-occurring substance use and mental disorders take a toll on individuals, families, schools, the work place, communities, states, Tribes, urban Indians, and ultimately the Nation as a whole. The Substance Abuse and Mental Health Services Administration (SAMHSA) will host a Policy Academy on Co-Occurring Disorders for American Indians and Alaska Natives (AI/AN) which will support Tribes with the ongoing work of improving and enhancing services for children, adolescents, and adults with and at risk for co-occurring substance use and mental disorders.

The 2004 National Survey of Substance Abuse Treatment Services (N-SSATS) revealed that the primary focus of most AI/AN health facilities was substance abuse, and the second most common focus for facilities was a mix of mental health and substance abuse treatment (*Drug and Alcohol Services Information System Report*, December 9, 2005). Substance abuse, historical trauma, forced cultural change, and lack of economic opportunity complicate the behavioral health policy and practice planning process for AI/AN communities and overall health disparities are significant. Additional efforts are needed to initiate and transform policy and practice activities for the purpose of improving AI/AN behavioral health and recovery systems. Collaboration and involvement of AI/AN policy makers in the development and implementation of a strategic action planning process is an important next step. This invitation for participation in the Policy Academy on Co-Occurring Disorders is an opportunity for Tribal communities to receive specialized technical assistance to facilitate planning activities designed to streamline and improve the effectiveness of the mental health and substance abuse systems response to co-occurring disorders.

In July 2006, SAMHSA consulted with a panel of Tribal experts for the purpose of obtaining guidance regarding the feasibility of using the policy academy model to address co-occurring substance use and mental disorders among American Indians and Alaska Natives. Panel members agreed that co-occurring disorders were a critical issue for AI/AN. Furthermore, they agreed that Tribes would be very interested, and that using the model in a culturally-relevant way would be beneficial. Panelists made the following points: 1) AI/AN are more likely to receive treatment for a substance abuse disorder than a co-occurring disorder, as a consequence of how funding streams work; 2) Spirituality and culture should be included as a key element of service delivery systems; 3) Efforts should be made toward improving Tribal-state relationships since states are a key funding vehicle; 4) It is important to include Tribal elected officials as well as local providers, program administrators, behavioral health specialists, and Tribal healers/wellness directors as part of the Policy Academy team.

The need for the Policy Academy on Co-Occurring Disorders for AI/AN is compelling and multi-dimensional. Greater than one-third of the demands made on health facilities in AI/AN populations involve concerns related to mental health, alcoholism, and substance abuse. Considerable health disparities exist for rates of mental and substance use disorders among

AI/AN as compared with the general U.S. population. AI/AN individuals tend to underutilize services, experience higher dropout rates, and are less likely to respond to conventional treatment methods and approaches.

### **Objective of the Co-occurring Policy Academy**

The objective of the Policy Academy for AI/AN is to improve and expand access to effective, culturally relevant, and appropriate prevention and treatment services and recovery support services for individuals with and at-risk for co-occurring substance use and mental disorders. The Policy Academy will bring together Tribal Teams, comprised of Tribal officials with policy-making influence, and nationally recognized faculty and facilitators who will assist the Teams to develop a Strategic Plan for expanding access and improving co-occurring treatment and prevention services in their Tribes and communities (see page 4 for a list of required and optional team members). The Academy will also help to identify promising practices in Tribal communities that may serve as models to assist other Tribal populations to address co-occurring disorders in new and innovative ways.

### **Policy Academy Design and Format**

The Policy Academy will highlight strategies and programs for AI/AN programs that have been effective in addressing co-occurring disorders. Faculty will share practices and lessons learned in areas such as prevention, the adoption of culturally competent evidence-based practices, funding, integrated models of care, and service system approaches. Participants will have ample opportunity for both Tribe-to-Tribe peer consultation and dialogue with experts on the financing, planning, workforce development and delivery of services.

Tribal teams will participate in an interactive process to develop a Tribal Strategic Plan that identifies specific strategies for overcoming barriers to providing effective services to individuals with co-occurring disorders. The goal is to create plans that will be sound, comprehensive, feasible, and sustainable. Following participation in the Academy and the submission of a draft Strategic Plan for comment by Federal officials, it is anticipated that Tribal Teams will be eligible for follow-up technical assistance to help Tribes and Tribal organizations in refining and implementing their Strategic Plans. Technical assistance will focus on policies and services designed to enhance the delivery of services to Tribal members and constituencies with co-occurring disorders.

An important component of preparations for the Policy Academy will be a 1 ½ day visit to the Tribal Team's designated location. This visit will afford the SAMHSA facilitation team an opportunity to meet the Tribal Team and assist the Team with Academy preparation. The purpose of the pre-Academy site visits is to get acquainted with the Team, provide the Team with an overview of the Policy Academy process, work with the Team in the development of a vision statement, and identify technical assistance needs.

The Policy Academy design facilitates leaders, policy makers, and advocates from the Tribe and community to build on strengths, develop policy strategies, and implement Strategic Plans for transforming practice before, during, and after the Academy meeting. Involvement in the Co-Occurring Policy Academy requires a strong commitment. The overarching goal of the Policy Academy on Co-Occurring Mental and Substance Abuse Disorders is to enhance the provision of co-occurring services in Tribes and communities. This goal is supported by four objectives of the Policy Academy:

- 1) To assist Tribal policymakers to develop a Strategic Plan intended to improve access to appropriate services for people with co-occurring substance abuse and mental disorders;
- 2) To create and/or reinforce relationships among the Tribal government and community leaders, local program administrators, and other stakeholders;
- 3) To provide an environment conducive to the process of strategic decision-making within the context of co-occurring disorders; and
- 4) To assist Tribal policymakers in identifying issues or areas of concern that may result in a formal request for technical assistance.

The Policy Academy model employs a sequential process:

- 1) Pre-meeting work, a technical assistance site visit (1 ½ days), and SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis;
- 2) Formal Academy meeting (on-site technical assistance), over 2 ½ day period;
- 3) Post-meeting technical assistance and follow-up; and
- 4) Ongoing implementation (on-site technical assistance).

## **COST**

Travel, hotel, meal expenses, and registration fees for up to 10 Tribal Team Members for 8 Teams will be covered by SAMHSA. Requests for a team composition in excess of 10 team members will be considered, however, each team member beyond 10 will need to cover their own travel, hotel and per diem expenses.

## **DATES & LOCATION**

The Policy Academy on Co-occurring Disorders for AI/AN will be held on **September 11 -13, 2007 and will be held in Phoenix, Arizona**. The 1 ½ days pre-meeting will take place between the end of June through the middle of August 2007.

Tribal entities selected will receive detailed travel and logistics information.

## **ELIGIBILITY INFORMATION**

Eligibility for participation in the Co-Occurring Policy Academy is limited to federally recognized American Indian and Alaska Native Tribes or Tribal Organizations. Tribal Organization means the recognized governing body of any American Indian/Alaska Native tribes, any legally established organization of American Indians/Alaska Natives which is controlled, sanctioned, or charter such governing body or which is democratically elected by the adult members of the Indian community to be served by such organizations and which includes the maximum participation of AI/ANs in all phases of its activities.

## **PROPOSAL GUIDELINES AND CRITERIA**

SAMHSA will convene a review committee to select up to eight Tribes and/or Tribal organizations to participate in the Academy. A technical review panel will review each application and assist in the selection process.

To apply for participation in the Academy, applicants must submit a proposal that includes the following information:

- 1) List of proposed Team members including Team Leader who will serve as contact person and consensus-builder for the Team. Include the rationale for each member's participation and how he/she can influence Tribal-level policy development and change.
- 2) No more than five page narrative on why the Tribe/organization is seeking to participate in the Academy and how the Tribe/organization expects to benefit. Additional details on the narrative requirements are provided below in the Review Criteria section.
- 3) Tribal resolution (if applicable) or proxy indicating commitment by Tribe/organization.
- 4) Cover letter with contact information.

### **1) Team Members**

Develop a list of all proposed Tribal Team Members. The composition of each applicant's team should consist of persons who can clearly demonstrate abilities to impact and implement Tribal-level policy changes.

#### **Team Members *should* include:**

Individuals who are responsible for implementation of the substance abuse and mental health treatment and prevention services, programs, systems, organizations, and offices serving their Tribal communities. Team members could include (but are not limited to) the following individuals: Tribal leaders, Tribal health administrators, managers of Tribal behavioral health grants, Tribal behavioral health specialists, Tribal prevention specialists, traditional Tribal healers/wellness directors, representatives from Tribal providers with expertise in substance abuse and mental health prevention and treatment services, senior-level representatives from the Governor's office of the State in which the applicant is primarily based, Co-Occurring State Incentive Grant (COSIG) program staff/official (if applicable), and staff/officials of State agencies responsible for mental health, substance abuse, and Medicaid. Applicants are encouraged to add key members to their team to assist in addressing priority subpopulations. This may include: children/adolescents/family experts, criminal justice, homeless provider entities, HIV/AIDS specialists, or primary care representatives.

#### **Optimal Team Members *may* include:**

Representatives from innovative Tribal programs serving those with co-occurring disorders; Tribal State legislators; Tribal advocacy groups or rural representatives; other social/public health entities, as determined by applicant priorities and needs.

Include each team member's name, title, Tribal entity /organizational affiliation, address, and brief paragraph explaining the rationale for each member's participation on the team including how he/she can influence Tribal - level policy development and change. Please also designate and identify a Team Leader for further information on your application. The Team Leader will provide consensus building capacity and appropriate organizational skills.

### **2) Narrative**

Prepare a 4 to 5 page single-spaced narrative that explains why the applicant is seeking to participate in the Academy and how the applicant expects to benefit from the Academy. In preparing the narrative, applicants should address the review criteria below.

### **3) Tribal Resolution/Proxy**

If the applicant is a Federally recognized Tribe, State recognized Tribe, a non-recognized Tribe, or a Tribal organization, a Tribal resolution from the Tribal government or organization should be part of the application. However, since Tribal resolutions may be difficult to secure in a short period of time, a proxy, signed by appropriate Tribal officials, will be accepted in lieu of the resolution of support. Applications that affect more than one Tribe must also include a signed proxy. For example, if the applicant is an eligible consortium of Tribes, the signed proxy must demonstrate support from each Tribe of the consortium.

### **4) Cover Letter**

Please include a cover letter with your application that clearly indicates the name, title, Tribal entity/organization, complete mailing address, telephone number and email address (if available) of the person designated as the Team Leader to be contacted for matters involving this application.

## **REVIEW CRITERIA (Total 100 Points)**

Applications will be reviewed based on the following criteria:

- Core capacity/readiness standard
- Tribes' relationship with the States
- Sharing lessons learned

## **CORE CAPACITY/READINESS STANDARD (Total: 60 points)**

Applicants must have established substance abuse and mental health treatment programs or systems. Applicants will be assessed on four levels of capacity and readiness: 1) clearly defined problem or needs, 2) service systems/infrastructure, 3) policy commitment, and 4) financing systems.

### **Clearly Defined Problem/Needs (15 points)**

Application must provide a narrative that describes the Tribal community's behavioral health population and the need for co-occurring services. Outline the Tribal community's current prevalence rates for substance abuse (e.g. methamphetamine abuse, other illicit drug use, alcohol abuse, underage drinking, etc.). Specify incidence and prevalence of mental disorders, such as suicide, trauma, depression, anxiety disorders, PTSD, other serious mental illness, etc. Indicate the number of Tribal members currently served by substance abuse and mental health programs. Describe the Tribal community's history and experience in addressing Tribal substance abuse and mental health needs. Discuss substance abuse and mental health treatment needs, gaps, and resources available to meet the identified needs and gaps. Link needs and gaps to Tribal treatment subpopulations with co-occurring disorders, such as individuals affected by domestic violence, homelessness, criminal justice, HIV/AIDS, etc.

**Service Systems/Infrastructure (15 points)**

Applicants should describe their existing service delivery capacity, infrastructure, and strengths for preventing and treating co-occurring disorders. Discuss the Tribe's organizational structure in which substance abuse and mental health treatment services are delivered. Describe the current substance abuse and mental health providers and/or facilities, the services they offer, and the interrelationships among the service providers and/or facilities. Discuss how clinical issues related to substance abuse and mental health are handled. Identify any barriers to integrating substance abuse and mental health systems or programs, and strategies to overcome the barriers. Outline the Tribal community's future priorities in behavioral health services delivery and the anticipated significance of a Strategic Plan on co-occurring disorders in advancing those priorities.

**Policy Commitment (15 points)**

Applicants must provide compelling evidence that the intended Tribal community will benefit from the Academy and pre- and post-technical assistance by dedicating the staff time and resources necessary to participate in the Academy. Post-Academy, each applicant should demonstrate a commitment to at least one year of follow-up with the Tribal Strategic Plan. This commitment will also include participating in a brief evaluation process with SAMHSA or its representatives. Describe the involvement of key Tribal decision-makers who will have the authority, responsibility, and control of resources that will support systems change for improving services to Tribal members with co-occurring disorders. Identify who makes Tribal policy and describe how policy decisions are made. Identify who handles substance abuse and mental health treatment policy. Describe each decision-makers role(s) in crafting co-occurring policies and their ability or willingness to leverage or redeploy resources and make policy and procedural changes.

**Financing Systems (15 points)**

Applicants should discuss financing of services to Tribal members with co-occurring disorders and assess the Tribe/organization's investment in building support for this population. Describe how the Tribe/organization's substance abuse and mental health services are currently funded. Discuss innovative funding alternatives or creative financing models, if any, that promote and support the treatment of co-occurring disorders. Identify existing substance abuse and mental health grants and their respective funding agencies/organizations.

**TRIBES' RELATIONSHIP WITH THE STATES (Total: 25 points)**

While optimal Tribal-State relationships are not uniformly present in Indian Country, the goals and objectives of the Tribal Academy will be enhanced by improved Tribal-State relationships. Applicants must either 1) demonstrate an effective working relationship with State(s) health systems, or 2) demonstrate a desire to improve/enhance the working relationship with the State(s) health systems. Identify the State(s) health systems with which your Tribe/organization has a working relationship. Discuss the nature and outcomes of the working relationship(s) with an emphasis on highlighting results of Tribal-State relationships forged around substance abuse and mental health. Describe formal linkages and institutional processes between the applicant and State(s) health systems to address systemic barriers to delivering substance abuse and mental health treatment services. Identify examples of or opportunities for resource-sharing efforts between the applicant and the State(s) health systems around substance abuse and mental health. Describe any collaborations with the State(s) health care programs, such as Medicaid, maternal child health programs, the Children's Health Insurance Program, and county medical assistance programs which serve as important resources for AI/AN access to behavioral health services.



Applicants should describe how the State(s) health system(s) could be involved in the development of the Tribal Strategic Plan.

### **SHARING LESSONS LEARNED (Total: 15 points)**

Applicants must indicate a willingness to share lessons learned with at least one other Tribe/organization that did not participate in this Academy. Follow-up technical assistance will be available from SAMHSA and technical experts to assist in implementing this requirement. The applicant must identify other Tribal governments/communities/organizations with which it collaborates and the nature of the collaborations. Briefly describe how the training and lessons learned could be shared with one or more Tribes/organizations.

### **APPLICATION DEADLINE**

Applications must be received by **no later than June 15, 2007.**  
**Please include 1 original and 4 copies in your submission.**

### **Mail Applications to:**

Elizabeth I. Lopez, Ph.D.  
Substance Abuse and Mental Health Services Administration  
Office of Policy, Planning & Budget  
1 Choke Cherry Road  
8-1103  
Rockville, MD 20857  
240-276-2242

**Applications can be faxed to: 240-276-2252**

### **POLICY ACADEMY OUTCOMES**

The Tribal response to co-occurring disorders is influenced largely by policy choices, such as whether the Tribal entity has a policy on co-occurring disorders, how human service resources and other resources are allocated, decisions made about eligibility to participate in a program, and emphasis placed on the coordination and integration of services. These are only a few examples of system components that affect whether a Tribal member with co-occurring disorders has access to effective services.

The Tribal Policy Academy will encourage your Tribe/organization to consider how current policies and program resources influence the response to co-occurring disorders. It will encourage analysis and consideration of whether there are efficiencies or changes in program operations that would improve the response. The Academy will also provide your Tribe/organization with an environment where you will have the opportunity to learn from your peers in other AI/AN communities. The Policy Academy will support a dialogue among colleagues about whether and how Tribal entities make services more accessible, practical, and sustainable for persons with co-occurring disorders. Finally, it will help your Tribe/organization evaluate your goals, policies, time frames, resources, and constituencies.