Background or context

Barriers to Care for Mental Health Problems in Rural Populations (Gann, 2010):

1. Limited access to specialty mental health providers
2. Lack of sufficient mental health training, expertise, and co-ordination among providers in rural areas
3. Limited utilization of available services due to stigma

Some statistics:
- 20% of non-metro counties lack psychiatrists vs. 5% metro counties
- 1253 small rural counties: 75% have no psychiatrist, and 95% have no child psychiatrist
- Higher suicide rates among rural adult males vs urban adult males

New Mexico data [from SAMHSA]
- Ranks in top fifth in alcohol dependence and abuse rates among all age groups, and among all persons 12 or older [only four other states managed this]
- Highest rate of past year drug dependence or abuse [3.7%]
- One of only nine states to rank in highest fifth for alcohol AND drug rates
- One of only two states to rank in highest fifth for all age groups
- One of only three states ranked in the top quartile of persons needing but not receiving help for drug and alcohol issues

Corrections Data:
- NM has more adult detainees in local jails and prisons than the national average with approximately 6,526 individuals in state corrections facilities and 100s more in federal corrections (NM Corrections Department, 2007).
- Approximately 18% of the state’s prison population has a mental illness and 80-90% have substance abuse or substance dependence (TAC, 2002).

Training is KEY for Evidence Based Treatment Implementation in Substance Abuse Treatment (Garner, 2008).

Current Program Descriptions

Telespsychiatry
- Our program features in the Psychiatric News, May, 2008
- We currently provide:
  - Direct clinical care (Carlsbad, Mescalero, To’Hajiilee)
  - Consultations
  - Supervision
  - Training

Veterans First Jail Diversion Project
- SAMSA funded grant implemented by Presbyterian Medical Services in collaboration with Veterans and Family Support Services (VFSS), UNM’s CRCBH, and the offices of the State of New Mexico.
- Goals are to divert veterans with trauma spectrum disorders from jail, to provide appropriate services, and to develop a sustainable system to treat them.
- Seeking safety, an evidenced based treatment for co-occurring Post Traumatic Stress Disorder and substance use disorder, will be utilized as the main adjunctive treatment.
- UNM’s CRCBH was and will be the primary grantwriters, and are involved in the evaluations portion of the grant, and will measure, among others, substance use and substance use disorder severity outcomes.

SBIRT [Screening, Brief Intervention, and Referral to Treatment]
- Project to integrate primary care and behavioral health
  - 70% of all healthcare visits are driven by psychosocial factors
  - 50% of all mental health care is provided in primary care
  - 25% of elderly patients receive BH solely from PCP
  - 94% with SUDs do not perceive the need for treatment
- Five year SAMSHA service grant
- UNM had a collaborative role
- Multiple settings- rural primary care clinics, school based clinics, ERs, hospital inpatient units
- Good outcome data: accepted by patients and PCPs alike
- Improvements in rates of abstinence, mean days of alcohol use/month, mean days of drug use/month, binge drinking, and health/behavioral/social consequences
  - $97,357/month of savings
- UNM continuing to provide consultations and training through CRCBH

Future Directions

- Expand supervision for substance abuse providers with limited experience in mental health assessments and treatments
- Do more consultations and trainings around the state using telemedicine technology
- Current ongoing collaboration with Dr. Kamilla Venner of CASAA on her project examining barriers to alcohol treatment among Native American populations of the state
- More collaboration with primary care clinics and community groups to increase access to suboxone treatment
- Providing substance use disorder treatments for adolescent populations
- Collaborating with a multidisciplinary team to provide state-of-the-art care to patients with pain disorders
- Continuing to provide psychiatric and SUD treatment to patients with HIV/AIDS via consultations at the Truman Clinic

Current Program Descriptions

ASAP [Alcohol and Substance Abuse Program]
- Provides comprehensive and state-of-the-art SUD treatments to underserved populations
- SUD treatments for pregnant women through collaboration with the Milagro program
- Recently started an on-site primary care clinic for our clients with substance use disorders, many of whom have no other source of primary care
- Providing SUD treatment to patients involved with the criminal justice system as a means of preventing incarceration or re-incarceration

• NIDA Blending Conference
  • The National Institute on Drug Abuse (NIDA) hosted its 8th Blending Conference in Albuquerque NM in partnership with the University of New Mexico, the University of Arizona, and the University of California, San Francisco on April 22-23, 2010, in Albuquerque, New Mexico.
  • The Blending Addiction Science and Practice: Evidence-Based Treatment and Prevention in Diverse Populations and Settings conference provided an opportunity for over 1,200 attendees to examine and learn about innovative, science-based approaches that have been proven to be effective in the prevention and treatment of drug abuse and addiction.
  • Many of our faculty were presenters at this major national conference

Current Program Descriptions

• RCBH

http://hsc.unm.edu/som/psychiatry/CRCBH