

## 2019 Current Fiscal Year Report: Advisory Committee for Women's Services

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<b>1. Department or Agency</b>		<b>2. Fiscal Year</b>	
Department of Health and Human Services		2019	
<b>3. Committee or Subcommittee</b>		<b>3b. GSA Committee No.</b>	
Advisory Committee for Women's Services		188	
<b>4. Is this New During Fiscal Year?</b>	<b>5. Current Charter</b>	<b>6. Expected Renewal Date</b>	<b>7. Expected Term Date</b>
No	06/15/2018	06/15/2020	06/15/2020
<b>8a. Was Terminated During FiscalYear?</b>	<b>8b. Specific Termination Authority</b>		<b>8c. Actual Term Date</b>
No	N/A		
<b>9. Agency Recommendation for Next FiscalYear</b>	<b>10a. Legislation Req to Terminate?</b>	<b>10b. Legislation Pending?</b>	
Continue	Not Applicable	Not Applicable	
<b>11. Establishment Authority</b> Statutory (Congress Created)			
<b>12. Specific Establishment Authority</b>	<b>13. Effective Date</b>	<b>14. Committee Type</b>	<b>14c. Presidential?</b>
42 U.S.C. 290aa	07/10/1992	Continuing	No
<b>15. Description of Committee</b> Non Scientific Program Advisory Board			
<b>16a. Total Number of Reports</b>	No Reports for this FiscalYear		
<b>17a. Open</b> 2	<b>17b. Closed</b> 0	<b>17c. Partially Closed</b> 0	<b>Other Activities</b> 0
<b>17d. Total</b> 2			

### Meetings and Dates

Purpose	Start	End
Provide updates; Review the Pregnant and Post-Partum Women (PPW) Data and Portofolio; Understanding the Development Impacts of Opioid Exposure on Infants & Young Children; Received recommendations and innovative practices regarding PPW; Discussion regarding impact of Marijuana on PPW population.	05/29/2019	05/29/2019
Updates on Past Recommendations; Women In Homelessness Discussion & Updates; HRSA's Strategy to Address Intimate Partner Violence and Care Coordination Model for Women with Opioid Use Disorder; Innovative Models from Committee Members; Highlights of Women's Services Network of State coordinators sponsored by NASADAD	08/20/2019	08/20/2019

### Number of Committee Meetings Listed: 2

	Current FY	Next FY
<b>18a(1). Personnel Pmts to Non-Federal Members</b>	\$1,800.00	\$4,800.00
<b>18a(2). Personnel Pmts to Federal Members</b>	\$854.00	\$1,000.00
<b>18a(3). Personnel Pmts to Federal Staff</b>	\$133,922.00	\$141,330.00
<b>18a(4). Personnel Pmts to Non-Member Consultants</b>	\$0.00	\$0.00
<b>18b(1). Travel and Per Diem to Non-Federal Members</b>	\$0.00	\$21,060.00

<b>18b(2). Travel and Per Diem to Federal Members</b>	\$0.00	\$0.00
<b>18b(3). Travel and Per Diem to Federal Staff</b>	\$0.00	\$0.00
<b>18b(4). Travel and Per Diem to Non-member Consultants</b>	\$0.00	\$0.00
<b>18c. Other(rents,user charges, graphics, printing, mail, etc.)</b>	\$12,479.00	\$21,534.00
<b>18d. Total</b>	\$149,055.00	\$189,724.00
<b>19. Federal Staff Support Years (FTE)</b>	0.75	0.75

**20a. How does the Committee accomplish its purpose?**

In accordance with section 501(f) of the Public Health Service Act, 42 U.S.C. 290aa, the SAMHSA Associate Administrator for Women’s Services (AAWS) shall provide leadership and guidance in developing and implementing agency plans to meet women’s substance abuse and mental health services needs; coordinate and promote collaboration among the three SAMHSA Centers, and with other U.S. Department of Health and Human Services (HHS) components; develop policies and programs regarding women’s issues; develop plans to standardize and enhance the collection of data on women’s health; establish and operate the mandated agency Coordinating Committee for Women’s Services; promote the allocation of sufficient resources for women’s services within each SAMHSA Center; establish and support the mandated ACWS; ensure the establishment, maintenance and operation of a program to provide information on women’s substance abuse and mental health services; assure the conduct of appropriate evaluation of women’s services; and monitor and report on agency recruitment and hiring of women in senior positions.

**20b. How does the Committee balance its membership?**

The ACWS is comprised of ten members appointed by the Assistant Secretary for Mental Health and Substance Use, SAMHSA and 1 ex-officio federal employee (Associate Administrator for Women's Services). A majority of the members are women who are not employees of the Federal Government. Members include physicians, practitioners, consumer advocates, treatment providers and other health professionals, whose clinical practice, specialization, or professional expertise include a significant focus on women's substance abuse and mental health conditions. Appointments are made by paying close attention to experience, expertise and gender representation, as well as equitable race/ethnicity representation and geographical distribution. All members participate fully in policy discussions and program development, each bringing to bear their own unique perspective.

**20c. How frequent and relevant are the Committee Meetings?**

The Committee met twice virtually during this reporting period. It is anticipated that two 1-day face-to-face or virtual meetings will be held in FY 2020, thus adhering to the

Committee's mandate and continuing function of advising SAMHSA on the appropriate policies and activities with respect to women's substance abuse and mental health services and on the improvement in the participation of women in the Agency's workforce. The meetings are relevant to SAMHSA because they allow the Agency to secure the professional expertise necessary to accomplish its mission and maintain the public's trust.

**20d. Why can't the advice or information this committee provides be obtained elsewhere?**

The ACWS is composed of experts whose clinical practice, specialization or professional expertise includes a significant focus on women's substance abuse and mental health conditions. The direction, scope, balance and emphasis of the advice received from this group cannot be obtained from Agency staff or from other established sources because the membership of the Committee is constituted to meet the specific requirements of the mandated mission of the Committee and of the Agency. Moreover, the Committee provides a direct link between SAMHSA and the field and is invaluable in helping SAMHSA to be responsive to the needs of women with or at risk for addictive and mental health disorders.

**20e. Why is it necessary to close and/or partially closed committee meetings?**

N/A

**21. Remarks**

Anne Herron is the Acting Associate Administrator for Women's Services and serves on the committee as the Chair, federal employee, ex-officio member. Anne Herron is acting until a new AAWS is chosen.

**Designated Federal Officer**

Valerie Kolick Public Health Analyst

<b>Committee Members</b>	<b>Start</b>	<b>End</b>	<b>Occupation</b>	<b>Member Designation</b>
Andrzejczyk-Beatty, Kelly	01/01/2019	12/31/2022	Outpatient Psychiatrist	Special Government Employee (SGE) Member
Delphin-Rittmon, Mariam	01/01/2018	12/31/2021	CT Department of Mental Health & Addiction Services	Special Government Employee (SGE) Member
Harlan, Sparky	04/01/2017	03/31/2021	Chief Executive Officer, Bill Wilson Center	Special Government Employee (SGE) Member
Herron, Anne	01/03/2019	02/28/2021	AAWS	Regular Government Employee (RGE) Member

Icenhower, Kathryn	01/01/2017	12/31/2021	Manager, Women's Substance Use Disorders Programs, Office of Behavioral Health	Special Government Employee (SGE) Member
Jones, Hendree	01/01/2015	12/31/2018	Executive Director, UNC Horizons	Special Government Employee (SGE) Member
Lovell, Cortney	01/01/2017	12/31/2021	Founder of CEO of WRise, LLC	Special Government Employee (SGE) Member
Lustig, Dan	01/01/2015	12/31/2021	Vice President of Clinical Services	Special Government Employee (SGE) Member
Pai-Espinosa, Jeannette	01/01/2014	12/31/2018	President, The National Crittenton Foundation	Special Government Employee (SGE) Member
Slone, Duane	12/31/2018	12/30/2022	Judge	Special Government Employee (SGE) Member
Warshaw, Carole	02/16/2012	12/31/2018	Executive Director, Domestic Violence and Mental Health Policy Initiative, Director: National Center of Domestic Violence, Trauma and Mental Health	Special Government Employee (SGE) Member

**Number of Committee Members Listed: 11**

**Narrative Description**

The Advisory Committee for Women’s Services (ACWS) provides guidance and advice to the Assistant Secretary for Mental Health and Substance Use, SAMHSA, on the appropriate activities to be undertaken by the Agency with respect to women’s substance abuse and mental health services. SAMHSA is directed by Congress to target effectively substance abuse and mental health services to the people most in need and to translate research in these areas more effectively and more rapidly into the general health care system. Over the years SAMHSA has demonstrated that - prevention works, treatment is effective, and people recover from mental and substance use disorders. Behavioral health services improve health status and reduce health care and other costs to society. Continued improvement in the delivery and financing of prevention, treatment and recovery support services provides a cost effective opportunity to advance and protect the Nation's health. In FY 2019, the ACWS supported the Agency's mission of reducing the impact of substance abuse and mental illness on America's communities by providing input on policies and planning and identifying issues/problems specifically related to women and girls. The Committee researched and discussed the mental health and substance use needs of the Pregnant and Parenting Women (PPW) population. SAMHSA staff shared the current SAMHSA PPW Data and Portfolio and the committee made recommendations regarding creating a family-centered focus, addressing transportation and housing barriers; incorporating SBIRT into more family and PPW related program; strengthening the system of care models; adding more programming for children; addressing domestic violence in the PPW population; and had a long discussion around

preventing marijuana use in the PPW population. Additionally the committee met and provided recommendations to the Women's Services Network Coordinators sponsored by NASADAD, and is coordinating a project with HRSA's Strategy to Address Intimate Partner Violence and Care Coordination Model for Women with Opioid Use Disorder.

**What are the most significant program outcomes associated with this committee?**

Checked if Applies

- Improvements to health or safety
- Trust in government
- Major policy changes
- Advance in scientific research
- Effective grant making
- Improved service delivery
- Increased customer satisfaction
- Implementation of laws or regulatory requirements
- Other

**Outcome Comments**

N/A

**What are the cost savings associated with this committee?**

Checked if Applies

- None
- Unable to Determine
- Under \$100,000
- \$100,000 - \$500,000
- \$500,001 - \$1,000,000
- \$1,000,001 - \$5,000,000
- \$5,000,001 - \$10,000,000
- Over \$10,000,000
- Cost Savings Other

**Cost Savings Comments**

Committee recommendations and suggestions may lead to savings over time. However, the savings may not be realized for years and are difficult to determine.

**What is the approximate Number of recommendations produced by this committee for the life of the committee?**

### **Number of Recommendations Comments**

Between FYs 1994 and 2019, the ACWS produced approximately 99 recommendations. During FY 2019, members recommended the following: (a) address housing barriers for women with multiple children or children over 12 years of age; (b) create a larger focus on family first models and wraparound services; (c) Expand barriers to care in rural communities including the expansion and flexibility of telehealth for MAT and domestic violence services; (d) Add a pregnant and post-partum women (PPW) set-aside in the Mental Health Block Grant; (e) Build stronger partnerships with domestic violence programs; (f) Educate the public and providers on marijuana usage effects of the PPW population; (g) Respond to workforce challenges; (h) Mitigate the fear of the PPW population that accessing SUD treatment will mean they will lose custody of their children; (i) educate all aspects of the judicial system on addiction as they interact with the community (connect the National Judicial Opioid Task Force with Single State Agency Directors); (j) engage and screen women early pregnancy and link them into programs SUD/MH programs earlier; (k) work with recover navigator (peers) who can share their own stories and services.

### **What is the approximate Percentage of these recommendations that have been or will be Fully implemented by the agency?**

65%

### **% of Recommendations Fully Implemented Comments**

Since the beginning of the ACWS, approximately 65% of the Committee's recommendations have been fully implemented by the Agency. For example, SAMHSA is ensuring that cultural competency perspective and trauma informed care is incorporated into all of its strategic initiatives. SAMHSA connected the National Judicial Opioid Task Force with Single State Agencies. SAMHSA is working OWH/OASH to publish the Re-entry guide which should be released in FY 2020.

### **What is the approximate Percentage of these recommendations that have been or will be Partially implemented by the agency?**

10%

### **% of Recommendations Partially Implemented Comments**

During the life of the Committee, approximately 10% of its recommendations have been partially implemented due to restrictions imposed by legislative/fiscal/programmatic concerns and/or superseding agency priorities.

**Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?**

Yes  No  Not Applicable

**Agency Feedback Comments**

Status reports on actions by the Agency on matters that have come before the Committee are provided at Committee meetings. The Agency provides feedback to the members in the Assistant Secretary for Mental Health and Substance Use, SAMHSA and Associate Administrator for Women's Services' Reports provided to members in each meeting. The Agency ensures that complete meeting minutes are prepared and circulates them in draft to the members for clearance and approval at the next official meeting. When the ACWS votes to pass resolutions/recommendations for the Secretary or the Assistant Secretary for Mental Health and Substance Us, SAMHSA, it is SAMHSA's policy to ensure responses to the Committee are provided within a prescribed time frame. Summaries of information may be mailed, e-mailed, telephoned or faxed to Committee members. Communications from SAMHSA staff to ACWS members include: issue papers, fact sheets, press releases, reports and other documents. ACWS members also have access to senior management and technical experts, when needed.

**What other actions has the agency taken as a result of the committee's advice or recommendation?**

Checked if Applies

Reorganized Priorities	<input checked="" type="checkbox"/>
Reallocated resources	<input checked="" type="checkbox"/>
Issued new regulation	<input type="checkbox"/>
Proposed legislation	<input type="checkbox"/>
Approved grants or other payments	<input type="checkbox"/>
Other	<input type="checkbox"/>

**Action Comments**

N/A

**Is the Committee engaged in the review of applications for grants?**

No

**Grant Review Comments**

N/A

**How is access provided to the information for the Committee's documentation?**

Checked if Applies

- Contact DFO
- Online Agency Web Site
- Online Committee Web Site
- Online GSA FACA Web Site
- Publications
- Other

**Access Comments**

N/A