## 2024 Current Fiscal Year Report: Advisory Committee for Women's Services

Report Run Date: 04/19/2024 11:57:12 PM

1. Department or Agency 2. Fiscal Year

Department of Health and Human

Services

2024

3b. GSA Committee

3. Committee or Subcommittee

No.

Advisory Committee for Women's

Services

188

4. Is this New During 5. Current 6. Expected 7. Expected Fiscal Year? Charter Renewal Date Term Date

No 06/15/2022 06/15/2024

8a. Was Terminated During 8b. Specific 8c. Actual

FiscalYear? Term Date

Authority

No N/A

9. Agency 10b.

Recommendation for Next Req to Terminate?

| Continue of the c

Continue Not Applicable Not Applicable

11. Establishment Authority Statutory (Congress Created)

12. Specific 13. 14.

Establishment Effective Committee Presidential?

Authority Date Type

42 U.S.C. 290aa 07/10/1992 Continuing No

**15. Description of Committee** Non Scientific Program Advisory

Board

16a. Total

No Reports for this FiscalYear

Reports

17a.

Open 0 17b. Closed 0 17c. Partially Closed 0 Other Activities 0 17d. Total 0

Meetings and Dates

No Meetings

	<b>Current Next</b>	
	FY	FY
18a(1). Personnel Pmts to	ድስ ሰ	ሳ ቀሳ ሳሳ
Non-Federal Members	φυ.υ	0\$0.00
18a(2). Personnel Pmts to	\$0.0	0\$0.00
Federal Members	φυ.υ	υ φυ.υυ
18a(3). Personnel Pmts to	\$0.0	0\$0.00
Federal Staff	ψυ.υ	υ ψυ.υυ
18a(4). Personnel Pmts to	\$0.0	0\$0.00
Non-Member Consultants	ψυ.υ	υ ψυ.υυ
18b(1). Travel and Per Diem to	\$0.0	0\$0.00
Non-Federal Members	ψυ.υ	υ ψυ.υυ
18b(2). Travel and Per Diem to	\$0.0	0\$0.00
Federal Members	ψυ.υ	υ ψυ.υυ
18b(3). Travel and Per Diem to	\$0.0	0\$0.00
Federal Staff	ψ0.0	υ ψυ.υυ
18b(4). Travel and Per Diem to	\$0.0	0\$0.00
Non-member Consultants	ψ0.0	υ ψυ.υυ
18c. Other(rents,user charges,	\$0.0	0\$0.00
graphics, printing, mail, etc.)	ψυ.υ	υ ψυ.υυ
18d. Total	\$0.0	0\$0.00
19. Federal Staff Support Years	0.0	0.00
(FTE)	0.0	0.00

## 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 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, criminal justice professionals 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 two times in a hybrid (on-site/virtual) setting in 2023. On April 25, 2023 the committee focused largely on Maternal Mental Health, followed by a discussion on behavioral health of girls, the behavioral health impacts of social media on adolescent girls, and gender-based violence. During the August 29, 2023 meeting we discussed the Interagency Taskforce on Military and Veterans Mental Health, Early Diversion Programs, 988 Suicide Prevention hotline, a follow-up discussion on gender based violence, SAMHSA & WIC partnership, recommendations for the National Hispanic and Latinx Mental Health Technology Transfer Center and Maternal Mental health. It is anticipated that two 1-day face-to-face or virtual meetings will be held in FY 2024, 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?

#### 21. Remarks

Dr. Nima Sheth, Chief Medical Officer of the SAMHSA Center For Mental Health became the Associate Administrator of Women's Services in January of 2023. GSA Comment: The agency did not complete the FY23 ACR for this committee.

#### **Designated Federal Officer**

Valerie Kolick Public Health Analyst

Committee Members	Start	End	Occupation	Member Designation
Andrzejczyk-Beatty, Kelly	01/01/2019	12/31/2023	Outpatient Psychiatrist	Special Government Employee (SGE) Member
Clark Harvey, Le Ondra	12/01/2021	11/30/2025	CEO, California Council of Community Behavioral Health Agencies	Special Government Employee (SGE) Member
Frederick, Tanisha	03/31/2022	02/01/2026	Founder Beautiful As You Are	Special Government Employee (SGE) Member
Harris, Octavia	03/01/2022	02/28/2026	Veteran Care	Special Government Employee (SGE) Member

Icenhower, Kathryn	01/01/2017	08/31/2024	Manager, Women's Substance Use Disorders Programs, Office of Behavioral Health, Denver	Special Government Employee (SGE) Member
Nadkarni, Lavita	10/01/2019	06/01/2027	Associate Dean Forensic Studies University of Denver	Special Government Employee (SGE) Member
Nicholson, Joanne	12/01/2021	11/30/2025	Professor, Bradeis University	Special Government Employee (SGE) Member
Sheth, Nima	11/22/2022	12/31/2024	AAWS	Regular Government Employee (RGE) Member
Slone, Duane	12/31/2018	12/30/2024	Judge	Special Government Employee (SGE) Member

Number of Committee Members Listed: 9

#### **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 2023, the ACWS supported the Agency's mission SAMHSA's to lead public health and service delivery efforts that promote mental health, prevent substance misuse, and provide treatments and supports to foster recovery while ensuring equitable access and better outcomes, and through ACWS, identifying issues/problems specifically related to women and girls, maternal mental health, women veterans, and gender based violence.

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

	Checked if	
	Applies	
Improvements to health or safety		1
Trust in government	5	1
Major policy changes	6	1
Advance in scientific research	6	1
Effective grant making	5	1
Improved service delivery	5	/
Increased customer satisfaction	5	1
Implementation of laws or regulatory		
requirements		
Other		

#### **Outcome Comments**

N/A

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

<b>3</b>	
	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 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 <u>Number</u> of recommendations produced by this committee for the life of the committee?

127

#### **Number of Recommendations Comments**

Between FYs 1994 and 2023, the ACWS produced approximately 127 recommendations. During FY 2023, the following recommendations were made: (1) CMS and Certified Community Behavioral Health Centers (CCBHCs) become more active in the care of Veteran women. (2) 988 Suicide Hotline work closely with the CCBHCs to ensure a continuum of services (more grant funding may be needed to support this) (3) Increase in data regarding behavioral health outcomes for gender based violence (4) Related to GBV - Work with HUD and shelters regarding their knowledge and understanding of SUD, because many shelters will not accept women with SUD needs (5) Needs to be more education and resources for addressing GBV needs with their clients (6) The GBV work needs to integrate primary care, behavioral health, victim services, and non-traditional providers around screening, treatment and resources (7) Work on a certification process for promotores so they can be reimbursed for their services (8) Project AWARE should work with Community-Based Organizations (CBOs) to ensure services for children over the summer and after-school hours. (9) Regarding Gender Based Violence work it was suggested that: add services gaps for native american women, train judges on types of GBV, work with child welfare system to keep families together, work with housing partners, look into harm reduction for couples that choose to stay together, educate teachers on signs and how to report, look at other types of state funding that can be used to address this. (10) Interested in grant funding or programs to help with individuals who need services but do not have SMI/SED

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency?

60%

#### % of Recommendations Fully Implemented Comments

Since the beginning of the ACWS, approximately 60% 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 worked with OWH/OASH to publish the Re-entry guide which was released Spring of FY 2020. Additionally, SAMHSA is continuing to research the best practices for telehealth, sustainability, increase in BH services for women and children, furthering of data collection and analysis, and incorporating trauma-informed care through primary care providers. SAMHSA continues to receive feedback and implement suggestions from the ACWS for the White House National Plan to End Gender Based Violence, and the cross-agency Maternal Mental Health Task Force

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Partially</u> 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 Use, 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. The public can obtain information on the SAMHSA website:

### What other actions has the agency taken as a result of the committee's advice or recommendation? Checked if Applies Reorganized Priorities Reallocated resources Issued new regulation Proposed legislation Approved grants or other payments Other ✓ **Action Comments** The ACWS has made recommendations to disparity statements that have been added into grant language, and has helped to reprioritize strategies in multiple areas such as maternal mental health, veterans services, and gender based violence. 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

#### **Access Comments**

**Publications** 

Online GSA FACA Web Site

N/A

Other