



CSTE and SAMHSA Partnership

Since 2015, CSTE’s **partnership** with the Substance Abuse and Mental Health Services Administration’s (SAMHSA)’s Center for Behavioral Health Statistics and Quality has supported the expansion of national public health capacity building efforts in substance use and behavioral health applied epidemiology. The partnership has focused on integrating mental health promotion and substance use disorder prevention into existing public health agency frameworks. As the home for applied epidemiologists, CSTE is in a unique position to engage our membership working throughout the U.S. at state, territorial, local and tribal levels of public health.

CENTRAL CHALLENGE

-  **Workforce Capacity**

-  **Surveillance Standardization**

-  **Novel Surveillance**

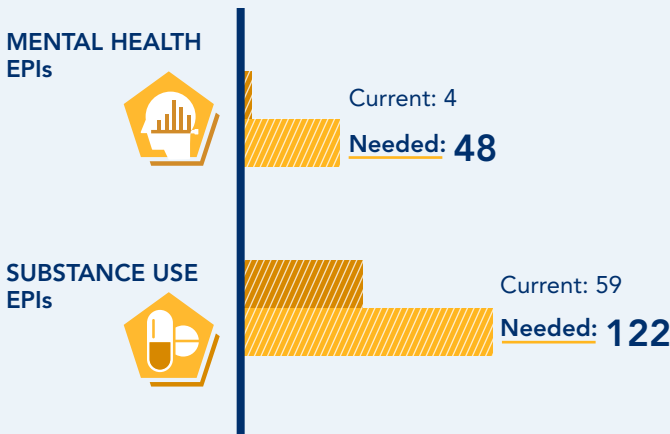
-  **National Strategy & Partner Harmonization**



WORKFORCE CAPACITY

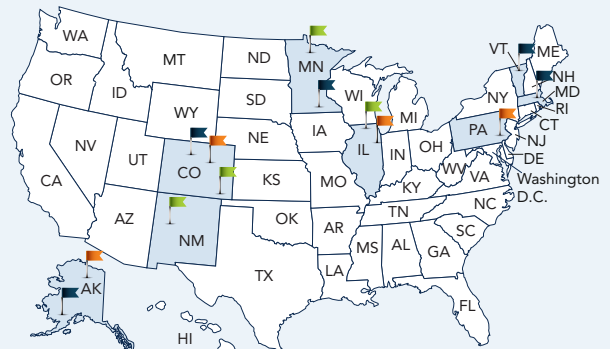
CSTE’s mission and vision focus on using the power of epidemiology for data driven decisions. Among the 51 Epidemiology Capacity Assessment (ECA) respondents (50 states and DC), **93% of agencies indicated a perceived need to improve their capacity for substance use surveillance**, and 63% of these agencies indicated it as a high priority. A critical part of this mission is ensuring that there is a sufficient workforce to support surveillance efforts across the nation. One method that CSTE uses to build a competent workforce is the CSTE Applied Epidemiology Fellowship. While receiving training, fellows provide support to under-resourced projects and/or critical challenge areas.

The Need for Applied Epidemiologists



- 2017 CSTE Epidemiology Capacity Assessment

CSTE Applied Epidemiology Fellowship Positions funded by SAMHSA



Cohorts

- 2015 – 4 fellows: MN, NM, Chicago, CO, graduated 2017
- 2016 – 4 fellows: AK, Denver (CO), Philadelphia (PA), Chicago SAMHSA Region V, graduated 2018
- 2017 – 5 fellows: AK, Boulder County (CO), MN, VT, Rockville (MD) - SAMHSA Headquarters, will graduate 2019

SURVEILLANCE STANDARDIZATION

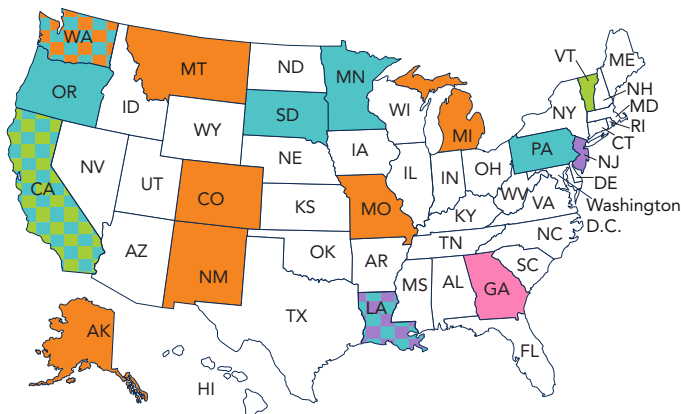
In late 2015, CSTE formed a workgroup to develop and standardize a group of surveillance measures for substance use and mental health. The workgroup, consisting of substance use and mental health epidemiologists and various subject matter experts, selected and defined key indicators for state-based surveillance of substance use and mental health. The roadmap to the right provides a high level view of the key steps CSTE has completed and those still remaining.



NOVEL SURVEILLANCE

The key challenge that remains within the substance abuse and mental health domain is the ability to collect timely and actionable surveillance data. CSTE has leveraged our partnership with SAMHSA and the available funding to pilot novel surveillance projects with state, local, and tribal (STLT) health departments as well as provided funding for the development of:

- 1 Mobile application technology for real-time community level assessments
- 2 A post-disaster behavioral health rapid surveillance module
- 3 A geospatial database to identify communities at risk.



STLT Projects by Location PHASE I

- ALASKA**
- Maricopa
- ARIZONA**
- COLORADO**
- Boulder County & Denver
- COLORADO**
- Mesa County
- COLORADO**
- MICHIGAN**
- St. Louis County
- MISSOURI**
- Rocky Mountain Tribal Epi Center
- MONTANA**
- NEW MEXICO**
- Seattle & King County
- WASHINGTON STATE**

Mobile App Pilots PHASE 1

- Castleton University
- VERMONT**

PHASE 2

- Santa Clara County
- CALIFORNIA**

STLT Projects by Location PHASE II

- San Mateo County
- CALIFORNIA**
- LOUISIANA**
- Baltimore
- MARYLAND**
- MINNESOTA**
- Multnomah County
- OREGON**
- Philadelphia
- PENNSYLVANIA**
- Great Plains Tribal Epi Center
- SOUTH DAKOTA**
- Seattle & King County
- WASHINGTON STATE**

Post-Disaster Behavioral Health Rapid Surveillance Module

- New Orleans Cohort
- LOUISIANA**
- NEW JERSEY**
- Cohort

Community Geospatial Database

- Emory University
- ATLANTA, GEORGIA**