



**WEB INTEGRITY
PROJECT**

A project of the Sunlight Foundation

Web Governance in Times of Changing Priorities:

**The Substance Abuse and Mental Health Services
Administration Overhauls its Website**



**Web Integrity Project Trend Report
October 2019**



WEB INTEGRITY PROJECT

The **Web Integrity Project** is a project of the Sunlight Foundation.

Our mission is to monitor changes to government websites, holding our government accountable by revealing shifts in public information and access to web resources, as well as changes in stated policies and priorities. We work with journalists to make our findings public, and we produce policy analyses to evaluate and recommend changes to web governance practices and help ensure access to valuable web resources.

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This report is available online at: <https://sunlightfoundation.com/samhsa-trend-report/>

For more information go to <https://sunlightfoundation.com/web-integrity-project/>

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Image source: [Pixabay](#).

Web Governance in Times of Changing Priorities:

The Substance Abuse and Mental Health Services Administration Overhauls its Website

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October 2019

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Executive Summary

Federal agencies often have to choose between competing evidence bases.

Government agencies like the Substance Abuse and Mental Health Services Administration (SAMHSA), the federal agency that “[leads public health efforts to advance the behavioral health of the nation](#),” are frequently confronted with diverse and conflicting evidence-based views held by policy experts and scientific professionals. In this report, we explore the web integrity issues like notice, archiving, and link maintenance, that are raised when a federal agency begins emphasizing a different part of the evidence base on its primary communication vehicle — the agency website.

Internal transformations within SAMHSA suggest a change in approach.

Critics of SAMHSA’s decades-old approach to the treatment of mental health and substance use disorders, including the agency’s recently-appointed top official, have suggested SAMHSA relied too heavily on “soft” recovery approaches in the past, to the detriment of proper treatment for serious mental illness and a more medical approach ([Chapter 1](#)). In the last two years, staffing changes, funding decisions, and the disbanding of recovery-oriented programs have suggested an increased role for a medical approach.

Reflecting this change, SAMHSA overhauled its website, but did so poorly and unduly inconvenienced users.

Beginning in 2018, SAMHSA systematically restructured its website in ways that seem to reflect a shift away from the heavily recovery-oriented approach of the past ([Chapter 2](#)). In the process of changing everything from the website’s color scheme to its information architecture, SAMHSA removed much-relied upon databases dating back as early as 1997, masses of content aimed at training practitioners and informing the public, and numerous publications.

The agency failed to provide notice of significant removals, to properly archive resources before they were removed, and to create useful redirects for removed URLs, leaving users in the lurch and likely resulting in confusion, frustration, and wasted time.

There are four key principles that could have prevented the inconvenience.

When overhauling its website, SAMHSA, like any federal agency, has a duty to implement the overhaul so as to minimize confusion, irritation, wasted time, and frustration among the American people. To fulfill this duty, the Web Integrity Project encourages agencies to adopt

four key principles when making changes to their websites ([Chapter 3](#)):

- **Content on the federal web should be current and regularly reviewed and updated.** The public should be able to presume content reflects current laws, policies, and evidence.
- **Content on the federal web should provide notice of when it was last reviewed or altered.** The public should be able to quickly assess the currency and applicability of information on government websites, as well as whether anything has changed since their last visit.
- **Prior notice should be provided when major changes are about to be made.** The public should be made aware when large swaths of information, or information that they need or rely upon, will soon be removed or significantly altered. When resources are removed, the public should be made aware of the justification for that removal (e.g. obsolescence, change in policy).
- **Continued access to content should be prioritized.** The public should be able to find useful information that was once available and be directed to content that fills the same need, or be provided an explanation of why past content is no longer available. The public should also be able to

hold the government accountable by researching changes that were made over time.

If these principles had been upheld, it is likely that the SAMHSA website overhaul would have resulted in minimal confusion, irritation, wasted time, and frustration.



Introduction: Web Governance in Times of Changing Priorities

Beginning in 2018, the Substance Abuse and Mental Health Services Administration (SAMHSA), the federal agency that “[leads public health efforts to advance the behavioral health of the nation](#),” systematically restructured its website in ways that seem to reflect a shift away from the agency’s decades-old approach to the treatment of mental health and substance use disorders.

In the past, SAMHSA’s website reflected the agency’s emphasis on what is known in the mental health treatment community as the “recovery” model of treatment for mental health and substance use disorders. The agency and its online messaging tended to emphasize policies and programs that prioritized the role of [environmental factors](#) in effective treatment, with particular focus on approaches like peer support and counseling. The agency’s website overhaul has deemphasized such resources, shifting emphasis toward the “medical” model of care, which [focuses on biological causes](#) and more fully embraces the use of pharmaceutical treatments.

The reshaping of the website may reflect broader changes at SAMHSA itself. The agency’s top official since 2017, Elinore McCance-Katz, is a psychiatrist and former president of the American Academy of Addiction Psychiatry who has long been associated with a medical model of care. Upon her appointment, observers widely expected her to reorder the agency’s priorities. And while McCance-Katz has called for a balance between the medical and recovery models, she has also criticized SAMHSA for giving medical interventions short shrift in the past. Some of the bureaucratic restructuring of the agency under her leadership has empowered officials with psychiatric backgrounds, and some funding choices have also suggested an increased role for what might be considered a medical approach.

It is not WIP’s intention to evaluate or take a posi-

tion on the best approach for the treatment of mental health or substance use disorders. There has long been a spirited professional debate about these matters, and most clinicians — including SAMHSA’s current leadership — say successful treatment incorporates both recovery and medical interventions as appropriate. This report seeks only to evaluate the restructuring of the SAMHSA website as the agency recalibrates its priorities, and how it has — or should — manage messaging during such a transition.

Whatever reasons spurred SAMHSA to update their most prominent public-facing resource — the SAMHSA website — the way they have gone about the overhaul raises serious, and all too common, web governance questions. The overhaul has resulted in the removal of widely-used online databases, collections of resources, and swaths of content without notice or proper archiving, and, in many cases, without establishing useful redirects. Users of the website likely experienced confusion, irritation, wasted time, and frustration as a result of SAMHSA’s overhaul, with much relied-upon content suddenly vanishing without a trace and bookmarked pages returning 404 errors or redirecting to unrelated pages.

Agency Websites: Worthy of our trust?

Government websites, which constitute official government communication, are widely presumed to be [reliable sources of information](#), are [highly trafficked](#), and are highly visible, appearing at the top of Google search results for all manner of search terms. Because of their perceived authority, government websites inform the public’s decision-making about everything from [whether to travel to a particular country](#), [whether to seek help for a medical condition](#), [whether to take an umbrel-](#)



[la outside](#), [when and how to apply for citizenship](#), [when and how to get health insurance coverage](#), and so on and so forth. Like federal agency websites generally, SAMHSA's website is the "[primary means](#)" by which it communicates with the public. In SAMHSA's case, its website is especially important. It has been a primary vehicle through which SAMHSA provides training and technical assistance resources to practitioners and grantees.

But websites are also a uniquely flexible medium. A limitless number of new pages can be added to a site, and existing webpages can be easily changed or removed from public access, or even deleted from servers, leaving no permanent record. While the flexibility of the medium has many positive features, it also creates potential risks and challenges.

As SAMHSA undergoes what many observers expect will be a shift in approach toward the medical model of treatment, the agency faces a challenge: how to alter the messaging it has employed in the past without simply discarding resources amassed over many years? What should be done with content that was relied upon by the public, but the agency no longer considers as relevant as it once did?

These questions are easier to answer when material is clearly false or outdated: remove the page from the website, but make sure a publicly-accessible archival copy of the page is available with a note that the content may not be up-to-date or accurate.

But in the case of SAMHSA's site, these decisions are more complicated. While the agency may properly choose, in this case, to emphasize the medical model of treatment, resources associated with the recovery model still have value, and, in most cases, should not be simply discarded. These choices are made especially difficult by the fact that professionals in the mental health community have legitimately divergent views of the best approach. There is still a large constituency for recovery-based resources.

This is not a challenge unique to SAMHSA. In the regular conduct of government business, agencies are frequently confronted with diverse and conflicting evidence-based views held by policy experts and scientific professionals. In many areas of government action, from setting macroeconomic policy through to school lunch decisions, policy experts legitimately disagree about the best approach, and scientific research provides evidence for multiple approaches. In this milieu, agencies

administering programs in any evidence-based field frequently — and legitimately — may side more with one view over another and, importantly, may vacillate from one to another, depending on agency interpretation of the evidence, the fashions of the time, and the predispositions of the administration, leadership, staff, and clients.

In this report, we explore the web integrity issues that are raised when a federal agency begins emphasizing a different part of the evidence base, but does not — or should not — want to throw out everything that came before.

Report Overview

In [Chapter 1](#), we set out the context for SAMHSA's website overhaul, outlining the agency's adoption of a recovery-oriented approach, the brewing of a backlash against that approach, the passage of legislation aimed at reorienting SAMHSA, and the appointment of an adherent of the medical model, Elinore F. McCance-Katz, to oversee SAMHSA.

Apparently reflecting changes in the law and agency leadership, SAMHSA began to overhaul its website to emphasize the medical model and de-emphasize the recovery model, which involved adding, changing, and removing large volumes of content.

In [Chapter 2](#), we document and discuss the overhaul of SAMHSA's website, particularly the removals that tend to reflect a shift away from the recovery model of care. Among major changes to the site were the removal of a series of pages on the Recovery to Practice Program, a scaling back of materials in SAMHSA's "Store" subdomain that frequently pertained to the recovery model, and the removal of a major clearinghouse known as the National Registry of Evidence-Based Programs and Practices, which also featured many evidence based recovery program materials.

In [Chapter 3](#), we explore policy recommendations for agencies seeking to overhaul their messaging like SAMHSA has done. We consider the appropriate steps that an agency should take when overhauling its website to reflect a different evidence-based position than it previously promoted, including guidelines for terms of notice, archiving, and establishing page redirects.

After concluding, we present in the appendices [technical documentation](#) of the removals.





1. SAMHSA Shifts Emphasis

There is a perceptible hostility toward psychiatric medicine: a resistance to addressing the treatment needs of those with serious mental illness and a questioning by some at SAMHSA as to whether mental disorders even exist—for example, is psychosis just a “different way of thinking for some experiencing stress?”

-- [Elinore F. McCance-Katz, MD, PhD, Psychiatric Times, April 21, 2016](#)

In 2016, Elinore F. McCance-Katz, a psychiatrist who had just left SAMHSA after two years as its Chief Medical Officer, wrote [a scathing critique of the agency in the Psychiatric Times](#). McCance-Katz accused SAMHSA of failing to address the needs of people with serious mental illness due to a deep “hostility towards psychiatric medicine” endemic to the organization’s culture:

...the unit within SAMHSA charged with addressing these [substance use and mental] disorders, the Center for Mental Health Services, chooses to focus on its own definition of “recovery,” which generally ignores the treatment of mental disorders, and, as a major initiative under “recovery” services, focuses on the development of a “peer workforce.”...There is a perceptible hostility toward psychiatric medicine ... For too long the treatment needs of the seriously mentally ill have been ignored by SAMHSA, and this needs to change.

The emphasis on the recovery model, which focuses on environmental and societal factors more than medication, that McCance-Katz described emerged in the early 2000s. In 2002, then-President George W. Bush issued Executive Order 13263, which established the President’s New Freedom Commission on Mental Health. In 2003, the commission released “[Achieving the Promise: Transforming Mental Health Care in America](#),” affirming the agency’s commitment to the recovery-

oriented model, and by [2004](#), the Department of Health and Human Services (HHS), which oversees SAMHSA, had issued a recommendation for a shift to recovery approaches in treating mental illness. For the next 13 years, the recovery model undergirded many of the agency’s programs.

A backlash against SAMHSA’s emphasis on the recovery approach had been brewing for several years by the time McCance-Katz wrote her column. Lawmakers and professional health organizations criticized SAMHSA for focusing too much on the “soft” recovery model, and, as a result, failing to take a “serious” stance on mental health issues. As far back as [2013](#), Representative Tim Murphy had criticized SAMHSA for not focusing on serious mental illness and relying too much on “broad terms of ‘behavioral’ and ‘emotional’” health and promoting such concepts as “wellness” and “recovery.” Murphy began promoting legislation to change the agency’s priorities.

The 21st Century Cures Act

Criticisms of SAMHSA, driven in part by Murphy’s efforts and incorporating some of his earlier legislation, culminated in 2016 with the passage of the [21st Century Cures Act](#). It sailed through the Senate with only five nay votes and was signed into law in December 2016 by then-President Barack Obama.



The 21st Century Cures Act established the National Mental Health and Substance Use Policy Laboratory, emphasized the need to address serious mental illness (SMI), and required a workforce development report, including “a study on peer-support specialist programs in up to 10 States that receive funding from the Substance Abuse and Mental Health Services Administration.” It also created a new position to oversee SAMHSA, the Assistant Secretary for Mental Health and Substance Use. In April 2017, President Trump nominated McCance-Katz to that position, and the Senate confirmed her in August of 2017.

McCance-Katz’s Tenure at SAMHSA

As the head of SAMHSA, McCance-Katz would shape the future direction of the agency. Since her appointment, she has overseen what appears to be an increased emphasis on the medical model, including the changes to SAMHSA’s website documented in this report.

Shortly after her confirmation, in an [interview](#) with MedPage Today, McCance-Katz reaffirmed her commitment to the medical model, stating:

my belief is that psychiatric medicine is absolutely key, that people who have serious mental illness do not get to what has been called ‘recovery’ without getting that treatment piece.

But McCance-Katz also acknowledged the importance of recovery approaches, explaining that “recovery supports are equally important to the care and treatment and the ability of a person living with a serious mental illness to live a full and preventive life.” McCance-Katz explained that she wanted to bring both approaches together in the fight against mental health and substance abuse issues. This arguably more balanced approach reflects a departure from SAMHSA’s recent past.

As Assistant Secretary for Mental Health and Substance Use, McCance-Katz has begun reshaping SAMHSA in ways that appear to be consistent with a greater emphasis on the medical model: (1) hiring psychiatrists to key roles once staffed by social scientists; (2) increasing funding of medication-assisted treatment (MAT) for people with substance use disorders; and (3) reorganizing or discontinuing long-established SAMHSA programs.

Reflecting her connections to professional health organizations, McCance-Katz tapped people from psychiatry-related organizations to senior staff positions in SAMHSA. One particularly controversial personnel change was to transfer the head of the Center for Mental Health Services (CMHS) and replace

them with a psychiatrist. The head of CMHS, Paolo del Vecchio, was [transferred](#) by McCance-Katz to SAMHSA’s Office of Management, Technology, and Operations, a top post at SAMHSA, but “one with less direct oversight of mental health and substance abuse policy.” Del Vecchio was a social scientist by training and had served as director of CMHS for six years. He was replaced with Anita Everett, a past president of the American Psychiatric Association.

McCance-Katz has also made a high-profile embrace of medication-assisted treatment (MAT), increasingly viewed as the gold standard for the treatment of opioid dependency. In contrast to more traditional interventions, which often emphasize abstinence from all drugs, MAT employs decades-old opioid replacement medications like [methadone](#), as well as newer alternatives like [buprenorphine](#), that help people with substance use disorders stay off more dangerous drugs like heroin.

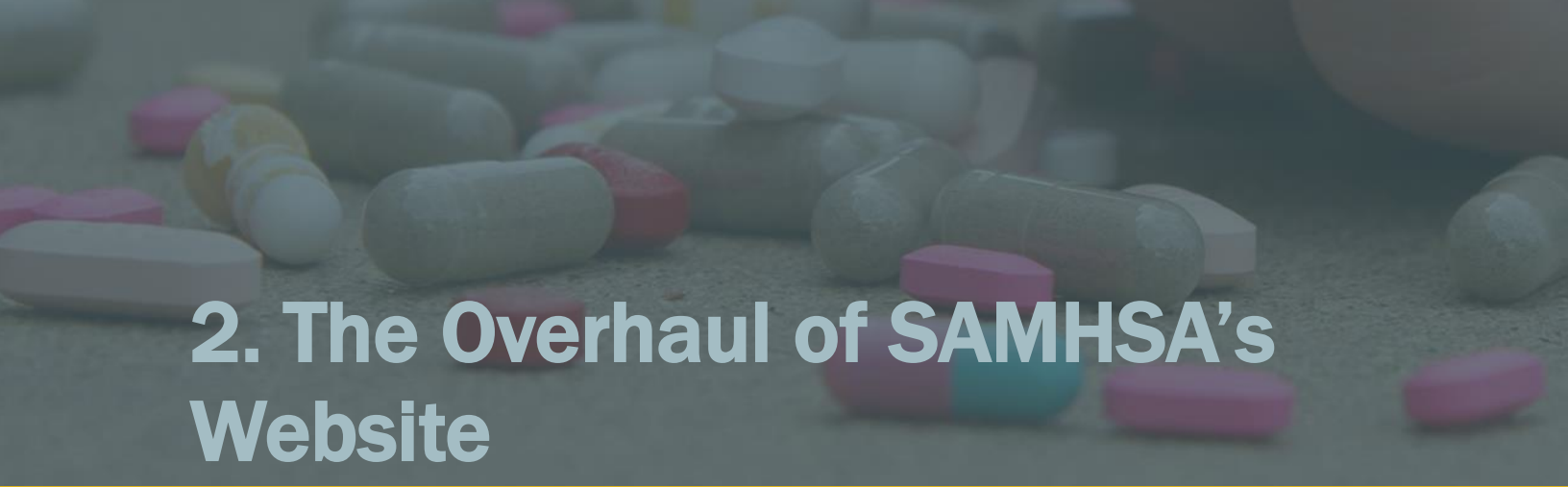
In 2018, the agency set aside [nearly \\$70 million](#) as part of its Medication Assisted Treatment – Prescription Drug and Opioid Addiction (MAT-PDOA) program, specifically to improve access to MAT. Of a \$1.8 billion overall [spending effort](#), nearly \$1 billion was distributed to states as block grants, with the stipulation that funded programs incorporate MAT.

Finally, McCance-Katz has overseen the discontinuation of some long-established SAMHSA programs and resources. One of the first steps taken under the new leadership was the removal of the National Registry of Evidence-based Programs and Practices (NREPP). In January 2018, SAMHSA officials [confirmed](#) the contract for running the NREPP database had been terminated. The registry, launched in 1997, provided mental health and substance abuse specialists access to recognized programs.

McCance-Katz had criticized the registry as lacking evidence-based practices that deal with serious mental illnesses and of promoting unproven programs. NREPP was replaced with the new “EBP Resource Center,” which was not launched until April 2018 and lacks the breadth offered by NREPP.

While SAMHSA’s current leadership continues to emphasize that it is committed to a balance between recovery and medical treatment approaches, signs of an increased emphasis on the medical model and a decreased emphasis on the recovery model have been visible. A close look at SAMHSA’s website seems to reflect that broader shift.





2. The Overhaul of SAMHSA's Website

Beginning in 2018, SAMHSA overhauled its website in significant ways, altering everything from the website's aesthetics to its information architecture, and removing databases and numerous publications. Many of the changes implemented during the overhaul amount to improvements in design and navigation. Others left materials inaccessible or harder for the public to use. While SAMHSA has begun to add new resources, these new resources are small in number when compared to those removed. Further, the agency failed to provide **notice** of significant removals, leaving users in the lurch. They also failed to properly **archive** resources before they were removed and to create useful **redirects** for many removed URLs.

Of the materials that were removed or made less accessible, many related to the recovery model of mental health and substance use treatment, an observable shift in emphasis that may reflect the apparent changes in priorities at SAMHSA.

The purpose of this chapter is to identify and characterize the changes made during SAMHSA's website overhaul, and to highlight web governance failures relating to notice, archiving, and redirecting. In the [Technical Documentation appendix](#), we document in detail each of the changes referenced in this chapter.

Removal of Recovery-oriented Slogan from Homepage

One of the most obvious changes to SAMHSA's website that signals a de-emphasis of the recovery approach is the removal of the slogan "Behavioral health is essential to health. Treatment is effective. Prevention works. People recover." from its prominent position on the homepage in October 2018 ([Figure 1; 1. Homepage](#)). The slogan is [closely associated](#) with "Recovery Month," a campaign that emphasizes recovery-oriented approaches. It

has been commonly used as a statement of SAMHSA's mission since being adopted in the 2011 report, "[Leading Change: A Plan for SAMHSA's Roles and Actions 2011 – 2014](#)," and had been emblazoned on the homepage since [February 2011](#). The slogan [still appears](#) on the site's "Recovery and Recovery Support" page, lending further evidence of the slogan's close association with the recovery approach.

While this change does not raise web governance issues (an agency should be free to change its slogan, and the homepage is properly archived in the [Library of Congress' web archive](#)), it does provide evidence that a change in emphasis was guiding the SAMHSA overhaul.

Removal of "Recovery to Practice" Resources

A second change that signals a de-emphasis of the recovery model is the removal of "Recovery to Practice" (RTP) resources ([8. Recovery](#)). RTP emphasized "recovery-oriented" approaches to treatment, and the collection of resources was intended to help "[practitioners improve delivery of recovery-oriented services, supports, and treatment](#)." The collection of resources offered included educational materials, such as virtual learning courses, webinars, and podcasts designed for health professionals to obtain continuing medical education credits, hours, and/or certificates of attendance. The RTP site also offered educational curricula developed with six professional organizations to promote recovery principles within their specialty areas. These curricula are still available on the external websites of each respective organization.

Numerous pages have been removed from the RTP collection, including an entire [subdomain](#) at <http://atr.samhsa.gov/>, which featured a resource



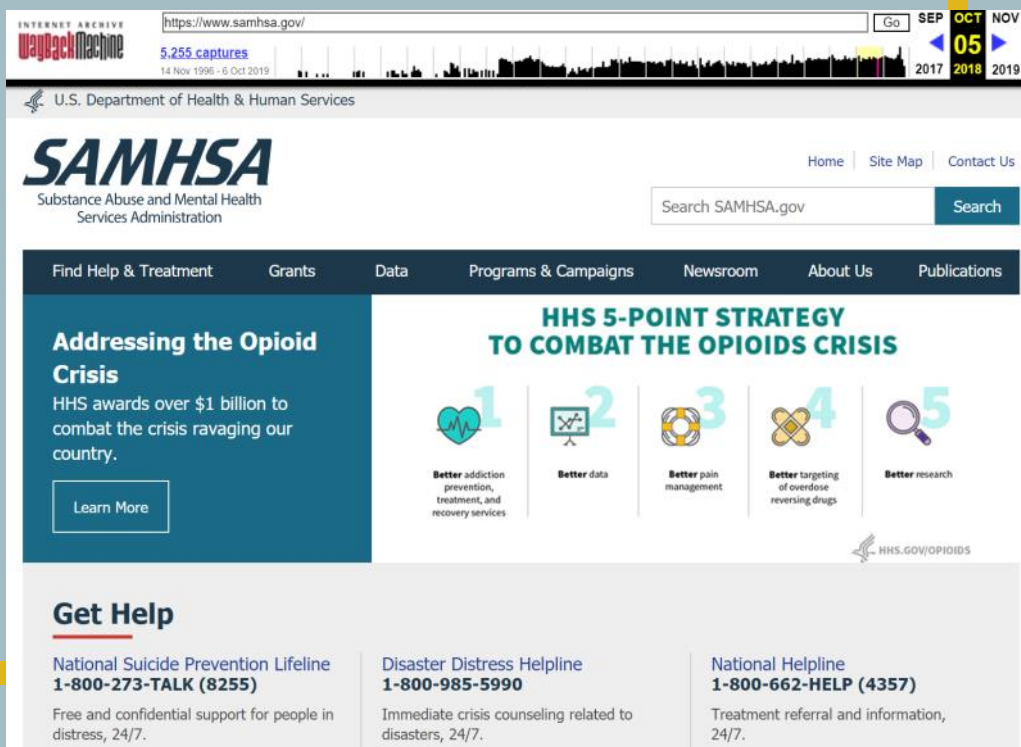
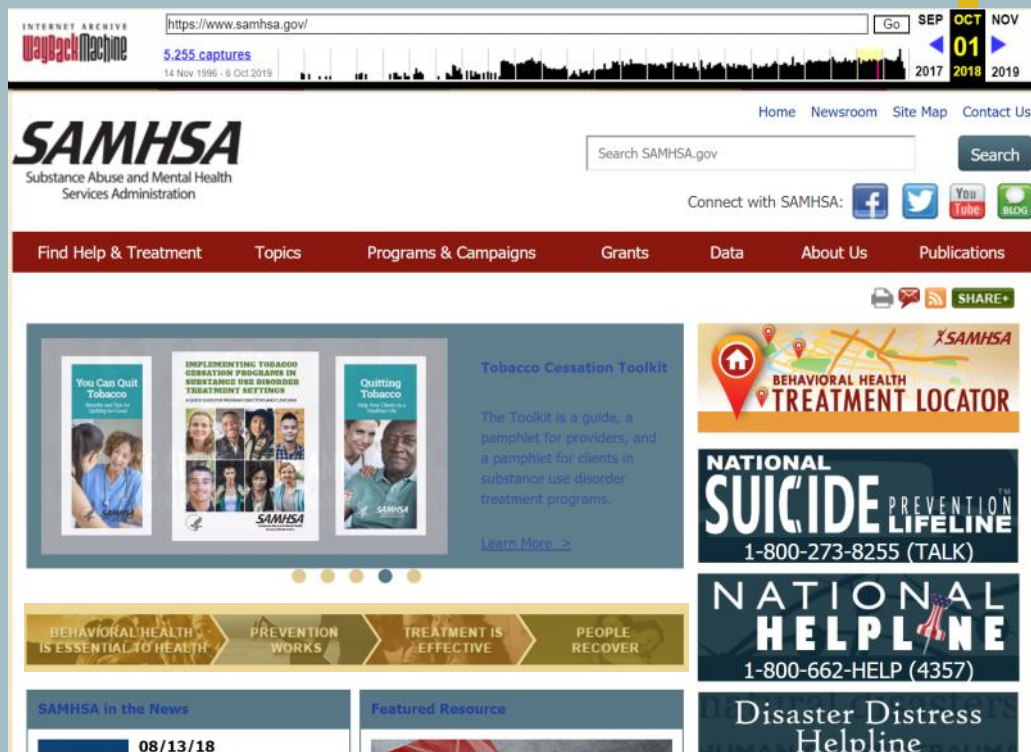
A comparison of the SAMHSA.gov homepage, 2011–2018.

Figure 1

The top portion of the SAMHSA.gov homepage on [February 17, 2011](#) (this page, top), [June 30, 2011](#) (this page, bottom), [October 1, 2018](#) (next page, top), and [October 5, 2018](#) (next page, bottom). The slogan “Behavioral health is essential to health. Treatment is effective. Prevention works. People recover.” is highlighted in yellow. (Webpages captured by the [Internet Archive's Wayback Machine](#)).



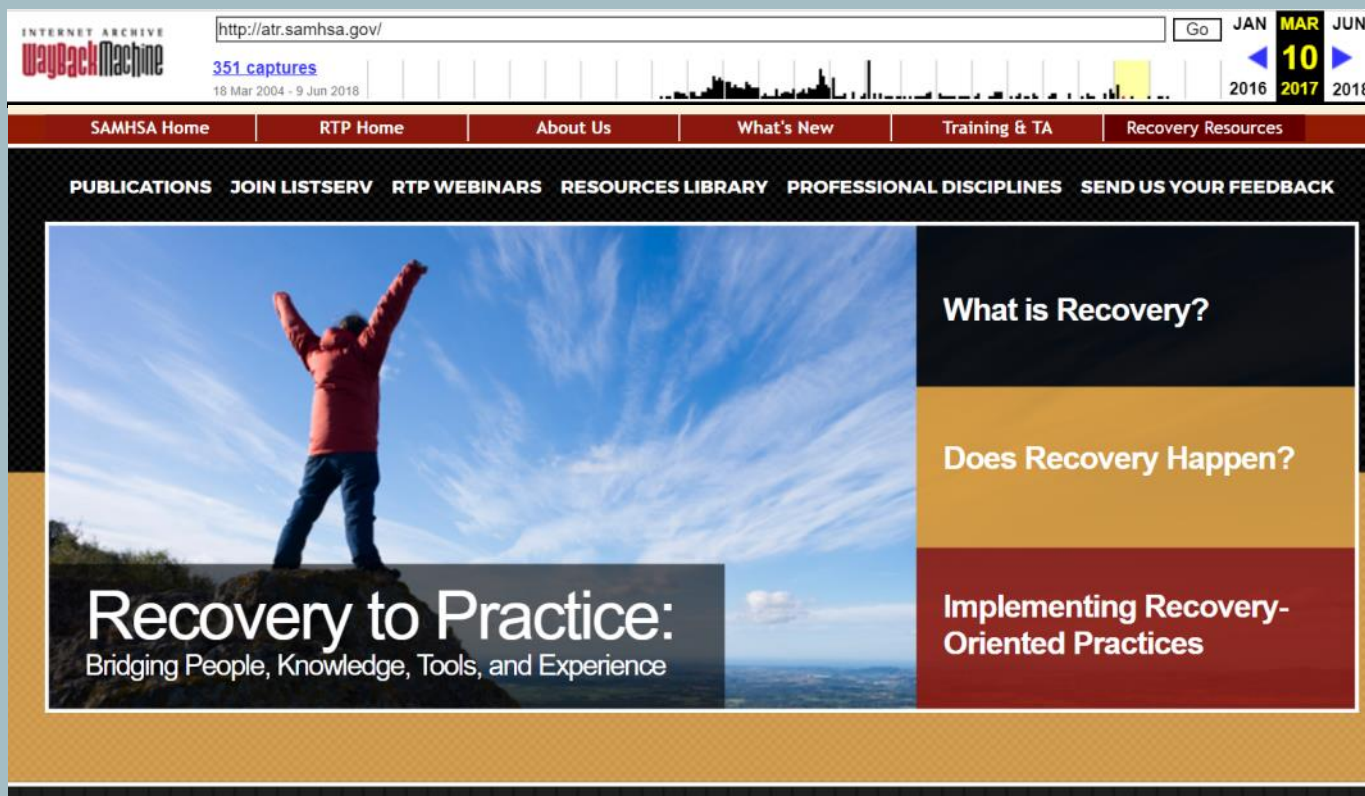
Figure 1 (cont.)



The homepage of the Recovery to Practice Subdomain.

Figure 2

The RTP subdomain homepage on [March 10, 2017](#). The subdomain was no longer accessible by [June 20, 2017](#). (Webpages captured by the [Internet Archive's Wayback Machine](#)).



library of recovery-oriented interventions, as well as general information about the program ([Figure 2](#)).¹ Some RTP pages, such as the “[RTP Curricula](#)” page, are still available online; however, because a user would be unable to access these pages by navigating the website, they are effectively orphaned. To access the resource, a user would need to know the full URL or have prior knowledge of the resource’s existence in order to search for it via a search engine. SAMHSA removed all references to the program from the “Programs” page, the main pathway to accessing information on SAMHSA’s programs.

These removals raise significant web governance flags. SAMHSA did not provide notice for the removal of the RTP pages, and we were unable to locate a public archive collected at the request of the agency, the Federal Depository Library Program Web Archive, or the Library of Congress for these pages. Users who have bookmarked these resources would have found the bookmarked URLs now redirect to the “Programs” page, which, as we have noted, contains no references or links to the RTP program.

National Registry of Evidence-Based Programs and Practices

Another change that indicates a de-emphasis of the recovery model is the removal of the National Registry of Evidence-Based Programs and Practices (NREPP) [database](#) ([4. NREPP](#)). NREPP was created in 1997 and provided practitioners a database of over 400 evidence-based interventions.² It was hosted on its own domain, <http://nrepp.samhsa.gov/>. In addition to the database, NREPP included a “[Learning Center](#)” to inform users about using NREPP, the science behind NREPP, and best practices for evidence-based programs. As [Jon Campbell explains](#), NREPP’s retirement met with suspicion in some quarters, with some experts suggesting the decision was part of a general devaluing of evidence-based medicine under the Trump administration, but relief in other quarters, with some experts noting that NREPP had declined in quality in recent years and included low-quality materials.

The removal of NREPP was one of the first actions



taken on the website after Assistant Secretary McCance-Katz took office, with SAMHSA officials [confirming](#) in January 2018 that the contract for NREPP had been terminated.

The NREPP removal was done poorly, from a web governance perspective.

No redirects were established for removed pages, except for one: a page removed from the SAMHSA domain, [which contained information on NREPP and links to the NREPP domain](#), now redirects to the “EBP Resource Center” page. All NREPP domain URLs return an error.

The NREPP homepage, <http://nrepp.samhsa.gov/>, had not been archived in a public archive at the request of the agency, the Federal Depository Li-

brary Program Web Archive, or the Library of Congress since 2011. Many NREPP pages had never been archived in a public archive.

Only oblique notice of the impending removal was given on the NREPP domain. In response to a [Washington Post article](#) on January 10, 2018, the following text [was added to the NREPP homepage \(Figure 3\)](#):

Although the current NREPP contract has been discontinued, SAMHSA is very focused on the development and implementation of evidence-based programs in communities across the nation. SAMHSA’s Policy Lab will lead the effort to reconfigure its approach to identifying and disseminating evidence-based practice and programs.

The NREPP subdomain landing page, 2018

Figure 3

The NREPP subdomain landing page on [January 11, 2018](#) (this page) and [January 23, 2018](#) (next page), showing the notice provided about the future of NREPP. The domain was removed after [July 22, 2018](#). (Webpages captured by the [Internet Archive's Wayback Machine](#)).



This text was [soon replaced with the text](#) “Please read Assistant Secretary Elinore F. McCance-Katz’s statement about NREPP and evidence-based practices here” and a link to [a statement from McCance-Katz](#) criticizing NREPP and confirming that the database would no longer be maintained. Neither the statement, nor any notice on NREPP’s website, indicated the domain would be removed.

On April 5, 2018, SAMHSA [announced](#) the release of its new “EBP Resource Center” ([13. EBPre-source](#)), which it claimed was “part of SAMHSA’s new comprehensive approach to identifying and disseminating clinically sound and scientifically based policies, practices, and programs.” [As Campbell reports](#), while the EBP Resource Center is intended to replace NREPP, it is nowhere near as expansive.

Removal of Access to Resources on SAMHSA’s Store

SAMHSA altered its “Store” subdomain located at the URL [store.samhsa.gov](#), including by reducing access to a striking number of publications relating to the recovery model. In SAMHSA’s store, users can navigate to webpages that link all publications with a particular tag, such as “Alternative Therapy” or “Suicide.” SAMHSA significantly reduced the number of publications tagged for many subject areas ([Table 1](#) and [Spreadsheet 1](#)),³ but this reduction was especially apparent for publications tagged “[Recovery Models](#),” which declined [from 39](#) publications to [just 5](#) ([21. Models](#)).

Publications for which easy access via the “Recovery Models” tag has been removed include “[Access to Recovery \(ATR\) Approaches to Recovery-Oriented Systems of Care](#),” which features

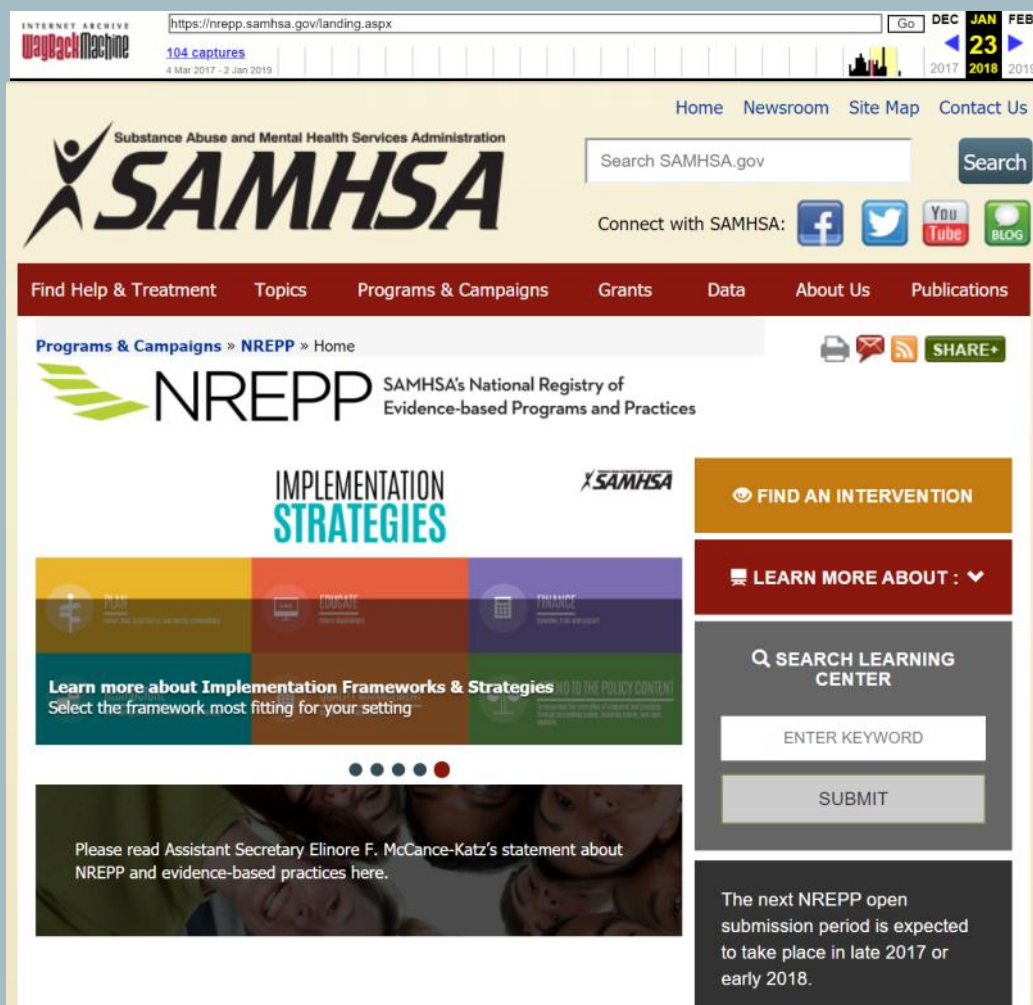


Table 1

Number of Resources by Tag in the “Substances” section of the SAMHSA Store on January 18, 2017 and September 5, 2019.

Category	Number of publications tagged		Change	
	1/18/2017	9/5/2019	Number	Percent
Alcohol	134	68	-66	-49%
Anabolic Steroids	2	0	-2	-100%
Bath Salts	1	0	-1	-100%
Buprenorphine	1	10	9	900%
Cocaine	6	6	0	0%
Ecstasy	1	0	-1	-100%
Fentanyl	0	1	1	New category
GHB	2	0	-2	-100%
Hallucinogens	1	1	0	0%
Heroin	4	2	-2	-50%
Illegal Drugs	27	15	-12	-44%
Illicit Stimulants	0	1	1	New category
Inhalants	3	2	-1	-33%
Ketamine	1	0	-1	-100%
Marijuana	19	12	-7	-37%
Methadone	1	11	10	1000%
Methamphetamine	16	6	-10	-63%
Nicotine	4	5	1	25%
Opioids or Opiates	60	54	-6	-10%
Over-the-Counter Drugs	16	6	-10	-63%
PCP	1	0	-1	-100%
Pain Relievers	1	3	2	200%
Prescription Drugs	62	30	-32	-52%
Rohypnol	1	0	-1	-100%
Stimulants	9	0	-9	-100%
Synthetic Cannabinoids	1	0	-1	-100%
Tobacco	37	25	-12	-32%
Median change				-50%

three case studies on recovery approaches to care. Before it was removed ([8. Recovery](#)), users could also have accessed the publication from a link from the “Recovery to Practice” collection. A [PDF of the publication](#) is still available; however, it is unclear how a user of the website would be able to access the publication without the full URL.

Access to another ATR-related publication titled “[Access to Recovery Implementation Toolkit](#)” was also removed. The toolkit helped guide practitioners to develop “systems of care for substance abuse treatment and recovery.” In this case, the [publication landing page](#), and the [PDF of the publication](#) were also removed.



SAMHSA did not provide notification for the removal of access to these resources, and neither resource is in a public archive collected at the request of SAMHSA, the Federal Depository Library Program Web Archive, or the Library of Congress. Redirects for the publications were not established, with the URLs for removed publications and landing pages returning a 404 “page not found” error.

Removal of Cultural Competence Content from Topics Pages

As part of the website overhaul, SAMHSA eliminated the “Topics” section from its website, removing many pages and moving others to different sections of the website ([14. Topics](#)). As part of this process, much content on cultural competence, a concept associated with the recovery model of care, was eliminated from the website. Cultural competence materials highlighted the importance of cultural factors in effective care, advising providers to consider factors such as age, race, beliefs, and status, when planning and delivering health services.

For example, in altering the “[Disaster Preparedness, Response, and Recovery](#)” page, SAMHSA

removed a section on “Cultural Awareness and Competency” ([16. Disaster](#)), which emphasized that “[p]eople’s reactions to disaster and stress, and their coping skills, can differ based on their beliefs, cultural traditions, or economic and social status.” Other removals relating to cultural competence are documented in a spreadsheet: www.sunlightfoundation.com/SAMHSAtopics.

In addition to removing sections on cultural competence, SAMHSA removed a collection of pages that directly addressed issues facing specific populations ([18. Populations](#)). The “[Specific Populations](#)” page provided an overview of how SAMHSA addressed health disparities and included several subpages, including “[Racial and Ethnic Minority Populations](#),” “[Age- and Gender-Based Populations](#),” “[Serving the Needs of Diverse Populations](#),” and “[Other Specific Populations](#).” Each subpage provided statistical information and resources for each respective population. Some population-specific resources are still available through the [Office of Behavioral Health Equity](#).

More examples of removals are provided in [Table 2](#), and all changes made during the removal of the “Topics” section are documented in this spreadsheet: www.sunlightfoundation.com/SAMHSAtopics.

Examples of Removals from the “Topics” Section of the SAMHSA website

Table 2

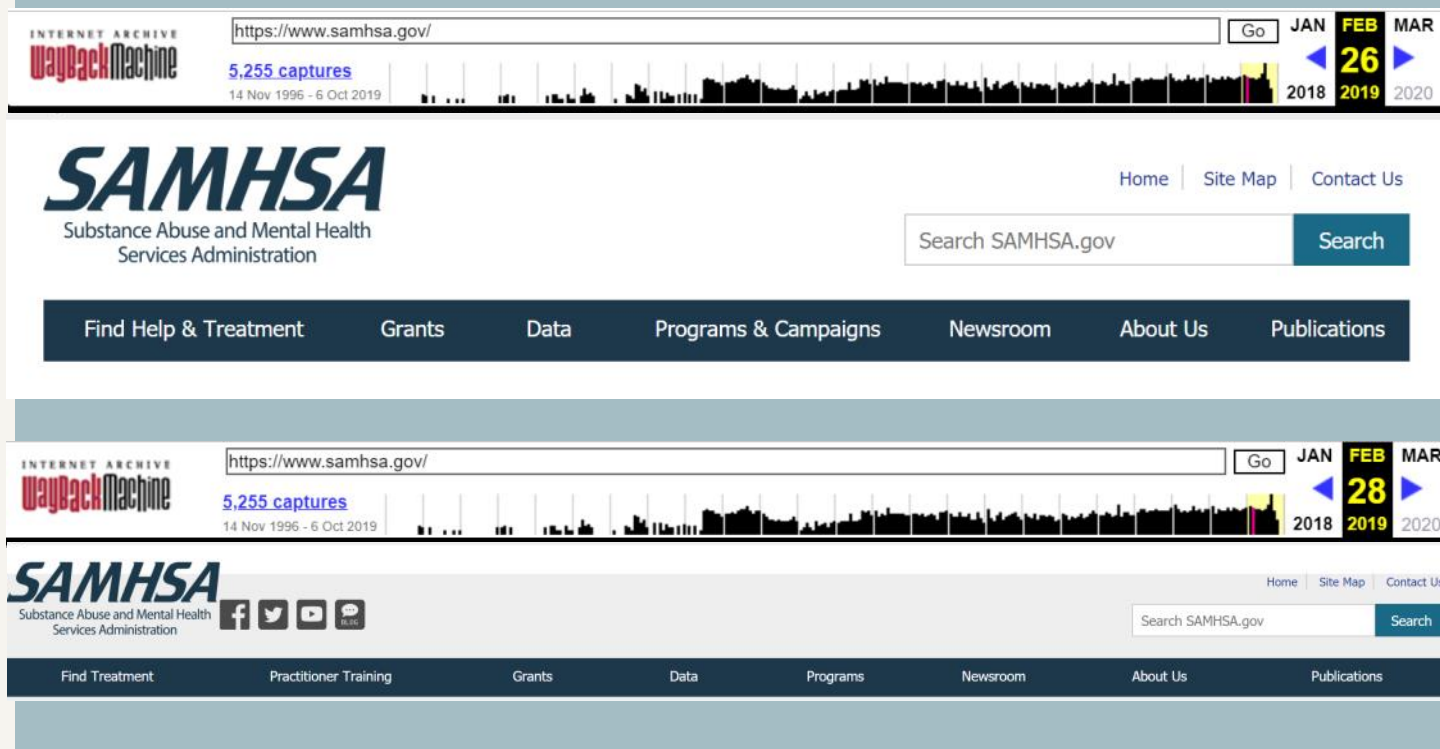
Link to Technical Documentation	Title	URL	Page Status	Number of subpages removed	Internet Archive's Wayback Machine Capture	
					Before Change	After Change
15. Alcohol	Alcohol, Tobacco, and Other Drugs	https://www.samhsa.gov/atod	Removed	8	1-Jan-19	4-Feb-19
16. Disaster	Disaster Preparedness, Response, and Recovery	https://www.samhsa.gov/disaster-preparedness	Altered	3	3-Dec-18	12-Feb-19
17. Homeless	Homelessness and Housing	https://www.samhsa.gov/homelessness-housing	Removed	5	10-Dec-18	21-Dec-18
18. Populations	Specific Populations	https://www.samhsa.gov/topics/specific-populations	Removed	5	7-Dec-18	21-Dec-18
19. Veterans	Veterans and Military Families	https://www.samhsa.gov/veterans-military-families	Removed	6	11-Dec-18	21-Dec-18
20. Workforce	Workforce	https://www.samhsa.gov/workforce	Altered	5	10-Jan-19	7-Feb-19



Figure 4

SAMHSA Main Menus, February 2019

A comparison of the SAMHSA main menus on [February 26, 2019](#) (top), and [February 28, 2019](#) (bottom). (Webpages captured by the [Internet Archive's Wayback Machine](#)).



No notice was provided for the removal of the “Topics” section of the website or the pages within the section. Additionally, for many of the removed pages and sections, we were unable to find any public archive. Finally, the removed pages frequently return an error or redirect to the “Programs’ landing page, which contains no information about the subject of the removed page.

Menu Changes

Among several changes to the main menu in late February 2019 ([1. Homepage](#); [Figure 4](#)), a subtle change, perhaps reflecting space constraints but certainly communicating a decreased emphasis on the more “soft” recovery model, was made to the “Find Help and Treatment” menu item. It was shortened to “Find Treatment,” and the page it linked to moved and renamed to exclude reference to “help.” (Compare the [February 24, 2019](#) capture from the Internet Archive’s Wayback Machine of the “Find Help and Treatment” page and the [March 1, 2019](#) capture of the “Find Treatment” page).

Other Changes

In addition to changes that appear to bear directly on the medical versus recovery model, SAMHSA made numerous other changes to its website, including changing the design, restructuring the “Programs and Campaigns” section and removing many program websites, removing the “Topics” section, the removal of the SAMHSA archive sub-domain, and the addition of a “Practitioner Training” page.

Website Design

Between [October 1, 2018](#), and [October 5, 2018](#), SAMHSA redesigned the visual elements of their website, many of which had been introduced in [September 2010](#). The redesign featured a change in the color palette, a changed logo, and changes to content offered on the Homepage ([1. Homepage](#)). These changes modernized the website.



Restructuring the “Programs and Campaigns” Section

During the overhaul, SAMHSA overhauled the “Programs and Campaigns” section of its site ([2. Programs](#)), renaming the page “Programs” and removing access to notable resources, including RTP and NREPP, documented above.

Center for the Application of Prevention Technologies (CAPT) website

Another removed resource was the Center for the Application of Prevention Technologies (CAPT) ([3. CAPT](#)). The CAPT website provided professionals with online training materials include a five-step “[Strategic Prevention Framework \(SPF\)](#)” for planning interventions and approximately 340 grantee stories, tools, and resources.

SAMHSA provided no notification for the removal

of CAPT. The pages and resources that were hosted on the <https://www.samhsa.gov/capt/> file path now return 404 errors. Few CAPT resources are captured in a public archive. There is no evidence that SAMHSA attempted to capture CAPT resources in a publicly-accessible archive before removing them.

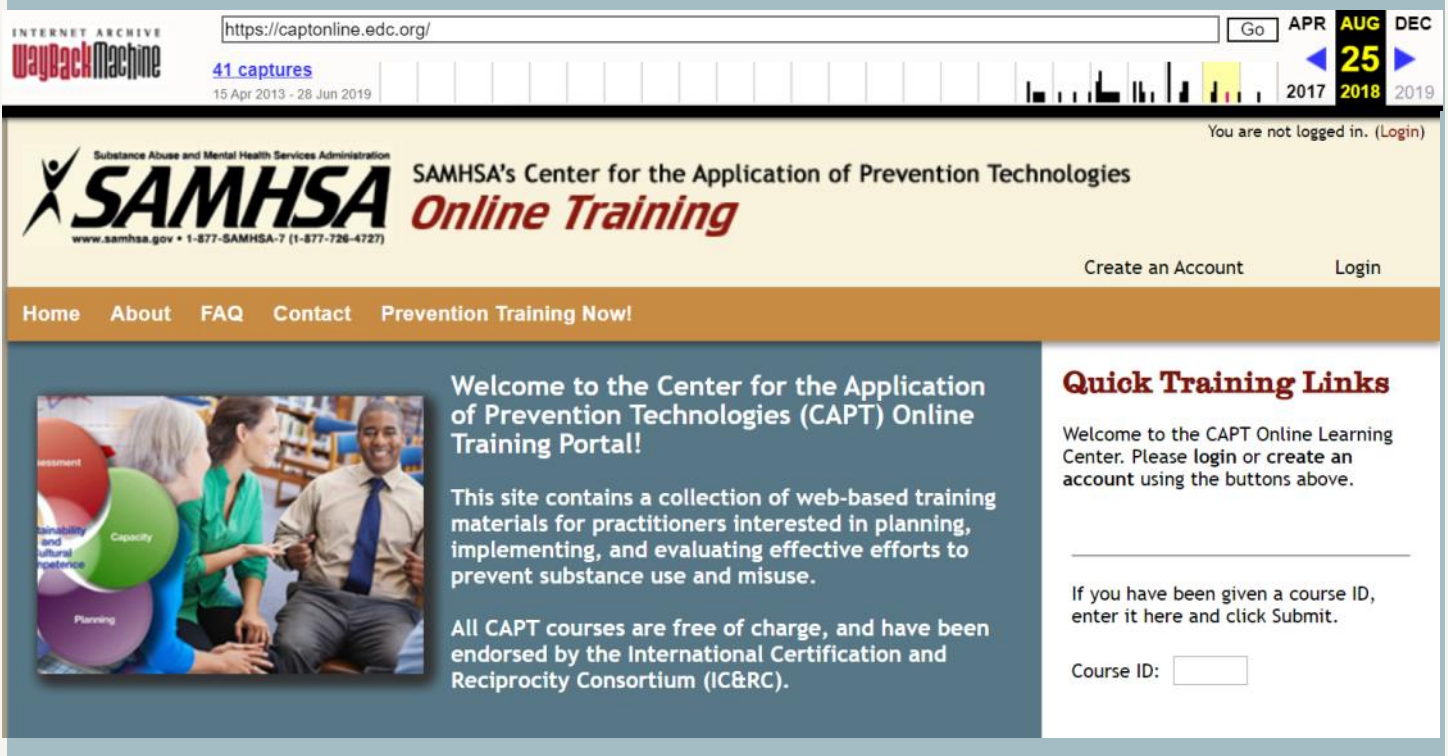
Perhaps reflecting the importance of CAPT resources, the contractor that was managing CAPT before it was apparently discontinued, [Educational Development Center](#) (EDC), still maintains a CAPT site on its [organizational website](#). It goes without saying that we should not have to rely on private organizations expending private funds to properly archive and maintain access to government resources.

The current status or future of CAPT is unclear, as is SAMHSA’s current relationship with EDC. A [sub-domain](#) on the EDC site that [previously featured SAMHSA’s logo and design](#) ([Figure 5](#)) now features only a message that states, “This webpage, previously hosted by SAMHSA’s Center for the Application of Prevention Technologies (CAPT), is no longer available.”

Figure 5

The “CAPT Online Training Site” page

The [August 25, 2018](#) version of the “CAPT Online Training Site” page on EDC’s website, showing SAMHSA’s logo and branding. By [December 21, 2018](#), the webpage would no longer be available (Webpages captured by the [Internet Archive’s Wayback Machine](#)).



Women, Children, and Families Website

The “[Women, Children, and Families](#)” program website was also removed ([11. WOMEN](#)). The website provided links to resources that focused specifically on women. For instance, the “Publications and Resources” page for the collection provided internal and external links to resources on topics including “Family-Centered Treatment,” “Trauma, Violence, and Trauma-Informed Approaches,” and “Pregnancy and Substance Use.”

One notable page within the “[Women, Children, and Families](#)” program website was the “[Trainings, Conferences, and Webinars](#)” page. This page provided webinars, toolkits, and online courses for professionals treating women and their families.

SAMHSA failed to provide notification for the removal of the Women, Children, and Families website. Additionally, we were unable to find a public archive of many of these resources. Finally, the URLs of the removed pages redirect to the “Programs” page, which contains no information related to the content of the removed pages.

In addition to CAPT, Women, Children, and Families, RTP, and NREPP, at least four other program websites were removed, including:

- “National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)” ([6. NCTIC](#))
- “Now Is The Time Technical Assistance Center” ([7. TIME](#))
- “Safe Schools/Healthy Students (SS/HS)” ([9. SCHOOLS](#))
- “Too Smart To Start” ([10. SMART](#))

Several program pages were added, including:

- “Know the Risks of Marijuana” ([12. MARIJUANA](#))
- “EBP Resource Center” ([13. EBPRResource](#))

[Table 3](#) documents removed and added programs in the “Programs” section.

The Elimination of the Topics Section

The changes that affected information relating to cultural competence and specific populations documented above were part of a larger set of changes caused by the elimination of the “Topics” section of SAMHSA’s site ([14. Topics](#)).

The removal of the “Topics” section also saw the removal of pages related to military veterans, alcohol and other drugs ([15. Alcohol](#)), homelessness ([17. Homeless](#)), and the behavioral health workforce ([20. Workforce](#)), among many other removals.⁴

The “[Veterans and Military Families](#)” page and six subpages, including the “[Reintegration into Civilian Life](#)” page, were removed as part of the elimination of the Topics section ([19. Veterans](#)). The pages provided statistical information and resources, including information about suicide rates, homelessness, and substance abuse among veterans. Despite the removal of these topical pages, the SAMHSA website still has some information relating to veterans on its website.

A public web archive of the main page, collected by the Library of Congress, is available but has not been captured since 2016. As with all other removals that resulted from the elimination of the Topics section, no notice of the planned removals was provided, and redirects often take the user to an unrelated page like the “Programs” page.

Removal of SAMHSA’s Archive

During the overhaul, SAMHSA has removed its “Archive” subdomain ([24. Archives](#)). The subdomain featured snapshots of archived content and subdomains from 2010 to 2015. The archive contained a search bar that allowed users to search for specific items, and also included a “[List of Archived Sites](#),” though it is unclear how exhaustive this list is. Many of the websites in the archive do not appear to be available in any web archive, although the archive homepage was captured in the Library of Congress web archive on June 24, 2017.

The “Archive” subdomain would have been a logical choice to store many of the resources removed during the overhaul. Its removal is confounding. Needless to say, archives should be preserved. Now, the SAMHSA website has no archive section, and it is unclear where SAMHSA plans to store superseded versions of its web content in the future.



Examples of Changes in the Programs Section of the SAMHSA website

Link to Technical Documentation	Title	URL	Description	Status	Internet Archive's Wayback Machine Capture	
					Before Change	After Change
3. CAPT	Center for the Application of Prevention Technologies (CAPT)	https://www.samhsa.gov/capt/	Training and technical assistance website.	Entire website removed	April 1, 2019	April 24, 2019
4. NREPP	National Registry of Evidence-based Programs and Practices (NREPP)	http://nrepp.samhsa.gov	Database of over 400 evidence-based interventions.	Entire website and database removed	July 22, 2018	N/A
5. EBPWeb	Evidence-Based Practices (EBP) Web Guide	https://www.samhsa.gov/ebp-web-guide	A collection of webpages that links to organizations that use evidence-based practices.	Removed	January 8, 2019	May 17, 2019
6. NCTIC	National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)	https://www.samhsa.gov/nctic	Training and technical assistance website.	Entire website removed	January 28, 2019	March 23, 2019
7. Time	Now Is The Time Technical Assistance Center	https://www.samhsa.gov/nitt-ta	Training and technical assistance website.	Entire website removed	March 1, 2019	March 8, 2019
8. Recovery	Recovery to Practice	https://www.samhsa.gov/recovery-to-practice	Training and technical assistance website.	Entire website removed	January 8, 2019	March 27, 2019
9. Schools	Safe Schools/Healthy Students (SS/HS)	https://www.samhsa.gov/safe-schools-healthy-students	A website providing a framework to promote positive mental health in students through violence and suicide prevention.	Entire website removed	January 8, 2019	May 22, 2019
10. Smart	Too Smart To Start	http://www.toosmarttostart.samhsa.gov/	A website that provided research-based strategies and materials to prevent underage alcohol use.	Entire website removed	August 15, 2017	September 16, 2017
11. Women	Women, Children, and Families	https://www.samhsa.gov/women-children-families	A website providing resources on addressing the behavioral health and recovery of women and their families.	Entire website removed	January 9, 2019	March 9, 2019
12. Marijuana	Know the Risks of Marijuana	https://www.samhsa.gov/marijuana	A new webpage providing information and links on the risks of marijuana use.	Added	N/A	May 15, 2019
13. EBPResource	EBP Web Resources	https://www.samhsa.gov/ebp-resource-center	A new database of scientifically-based resources for a broad range of audiences.	Added new website/database	N/A	April 23, 2018

Addition of a New “Practitioner Training” Section

A new dropdown, titled “Practitioner Training,” was added to the menu in the place the “Topics” dropdown had been ([26. Practitioner](#)). The “Practitioner Training” section features links to SAMHSA’s practitioner training and technical assistance programs as well as other resources. The section links to content that was previously available in other sections of the website, including [Bringing Recovery Supports to Scale Technical Assistance Center Strategy \(BRSS TACS\)](#) and the [GAINS Center](#).

Removal of Blog Archives

As first reported in [PsychCentral](#), SAMHSA removed its blog archives for the period October 2010 to August 2017. SAMHSA did not actively archive the full set of posts or move it to the (now removed) archives.samhsa.gov domain. Nor did SAMHSA provide notice of these removals. Neither did SAMHSA establish redirects, with URLs for blogs now returning error notices.

Conclusion

The overhaul of SAMHSA’s website represents a loss of resources for health professionals seeking to learn about approaches to mental health and substance abuse treatment. While federal government agencies should keep their websites up-to-date, efforts to overhaul their websites should follow sound web governance principles. SAMHSA’s overhaul fell short in many ways, with the agency failing to provide notice of significant removals, to properly archive resources before they were removed, and to create useful redirects for removed URLs. In the next chapter we explore principles of good web governance.



Chapter 3: Five Steps to Minimize Confusion and Irritation

SAMHSA, like any federal agency, can, and should, regularly update its website to reflect news about what the agency is doing with its federal funds, the implementation and promotion of new laws, the latest research into mental health treatment, and changes in departmental priorities or policy. However, as a part of the federal government, SAMHSA has a duty to change its website in such a way as to minimize confusion, irritation, wasted time, and frustration among its constituents.

In this regard, SAMHSA's overhaul fell short. By failing to provide proper notice about the removal of NREPP, [SAMHSA left contractors confused and users scrambling](#). By failing to adequately archive resources in RTP, NREPP and CAPT, SAMHSA ensured that practitioners and grantees who wanted to continue to draw on those resources were unable to do so. By not providing redirects to relevant pages, SAMHSA may have left users frustrated by 404 errors or bemused by why they were redirected to a generic, unrelated, page.

Key Web Governance Principles

To minimize the confusion, irritation, wasted time, and frustration of the American people, the Web Integrity Project encourages agencies to adopt four key principles when making changes to their websites.

1. **Content on the federal web should be current and regularly reviewed and updated.** The public should be able to presume content reflects current laws, policies, and evidence.
2. **Content on the federal web should provide notice of when it was last reviewed or altered.** The public should be able to quickly assess the currency and applicability of information on government websites, as well as whether anything has changed since their last visit.
3. **Prior notice should be provided when major changes are about to be made.** The public should be made aware when large swaths of information, or information that they need or rely upon, will soon be removed or significantly altered. When resources are removed, the public should be made aware of the justification for that removal (e.g. obsolescence, change in policy)
4. **Continued access to content should be prioritized.** The public should be able to find useful information that was once available and be directed to content that fills the same need or be provided an explanation of why past content is no longer available. The public should also be able to hold the government accountable by researching changes that were made over time.

Web Change Guidelines

In order to address the deficiencies identified in this report, we suggest SAMHSA adopt these guidelines:

1. The webmaster or designee shall review website content for accuracy, currency, functionality, compatibility, and accessibility at least every six months.
 - a. As part of the review process, the webmaster shall identify pages containing content that needs to be updated or removed.
 - b. The webmaster will ensure that the website is regularly captured by a publicly-accessible web archive, such as the Internet Archive's Wayback Machine, Archive-It, or a dedicated agency archive website.
 - i. In a prominent place on the agency's website (such as the



- “archive” link in the website footer), the webmaster shall cause the placement of a link to the relevant landing page on which archived versions of webpages are publicly available, as well as explanatory text notifying users that archived versions of pages within the site are available there.
- ii. As part of the review process, the webmaster shall cause the capture of an archival version of each page reviewed.
2. When significant changes are made, the webmaster shall ensure the public has adequate notice of the changes by publishing a notice along the top of the affected webpages.
 - a. “Significant change” means a change that involves:
 - i. Changes to the style or organization of an entire domain or subdomain; or
 - ii. The removal of the contents of a page and the retirement of a URL, irrespective of how well-trafficked the URL or whether a redirect to alternative content is planned.
 - b. “Adequate notice” means notice no less than two (2) weeks before a change is made, and ideally for a duration longer than the time between visits for the average engaged user.
 - i. Where the significant change involves the removal of the contents of a page and the retirement of a URL, “adequate notice” shall include a justification for the removal and a link, where relevant, to a replacement resource or press release announcing the change in policy.
 3. Before any change to the visible content on a webpage is made, the webmaster shall cause the capture of a publicly-accessible archival version of the pre-change page.
 4. Before materials from a previous administration, such as press releases, policy statements, or blogs, are removed, all materials shall be archived, and a prominent link to those materials shall be placed on the landing page for the current administration's equivalent material.
 - a. The archived material shall be presented using the same structure as the original website.
 5. When a URL is retired, a redirect shall be established and maintained for at least one (1) year. The redirect should lead to either:
 - a. An alternative URL with similar content that serves a similar purpose; or
 - b. A notice explaining why the content is no longer available (e.g. legislative change, policy change, technological redundancy).
 - c. If neither 5(a) or 5(b) is possible, the redirect should lead to content that is as relevant as possible to the content on the retired URL. Only in the rarest of circumstances should the redirect lead to the agency homepage.
 6. When URLs are retired, care should be taken to ensure other pages formerly linked to on the retired URL are not “orphaned” or “islanded.”

If these guidelines were followed, it is likely that less confusion, irritation, wasted time, and frustration would have resulted from the SAMHSA website overhaul. Additionally, all of the removed and altered content would still be available for users.





Conclusion

As with other agencies in the federal government, SAMHSA's website is the primary means through which the agency communicates with the public and practitioners. The agency uses the website to deliver many of its training and technical assistance resources to practitioners and grantees.

Beginning in 2018, SAMHSA overhauled its website, making changes to the design, structure and content of the site. The changes to SAMHSA's website may reflect changing priorities within the agency. New leadership, including Assistant Secretary McCance-Katz, appear to have moved SAMHSA away from its decades-old approach and reliance on recovery-oriented approach.

Whatever the reasons for the overhaul, the changes documented in this report demonstrate key failures in web governance. SAMHSA's website overhaul provides many instructive examples — from the sudden removal of CAPT, the blog archives, or the web archive, through to the confusing notice provided on the NREPP site — of the loss of content and inconvenience to users that can result from poorly executed website changes.

The adoption of four key principles that place continued public access to materials on which they have come to rely at the center of website governance decisions will help agencies avoid confusion, irritation, and wasted time among their core constituencies.

Endnotes

¹ The <http://atr.samhsa.gov/> subdomain dates back to at least 2004, when it was hosted at the "Access to Recovery (ATR) Grants" portal.

² Although not directly related to the shift away from the recovery model, SAMHSA did remove another resource relating to evidence-based interventions, the "[Evidence-Based Practices \(EBP\) Web Guide](#)" (5. EBPWeb) The web guide featured "research findings and details about EBPs used to prevent and treat mental and substance use disorders," and linked to websites that covered topics such as substance abuse and mental health treatment and prevention. The web guide outlined a clear [search and selection process](#) for websites that were featured in the web guide. SAMHSA did not provide notification for the removal of the page. A public web archive of the page, collected by the Library of Congress is available but has not been captured [since 2015](#).

³ Tags are not exclusive, as a single publication may be listed in several categories, so we can not conclude the exact number of publications that were removed. What is clear is that there has been a reduction in the number of publications available on the "Store" subdomain.

⁴ [Table 2](#) provides examples of "Topics" subpages that SAMHSA removed, and all changes made during the elimination of the Topics section are documented in this spreadsheet: www.sunlightfoundation.com/SAMHSAtopics.



Appendix 1:





Technical Documentation

Screen captures are taken from the Internet Archive's Wayback Machine (IAWM). The Internet Archive's Wayback Machine's (IAWM) displays time in UTC/GMT. However, the dates and times referenced in this report are in EST/EDT.

Alterations to SAMHSA's Homepage

Tag: #HOMEPAGE

Summary of Findings

Between [October 1, 2018](#) and [February 28, 2019](#), SAMHSA redesigned its website. In addition to changes to the website design, SAMHSA altered the main menu. SAMHSA removed the link titled “Topics” and added a link titled “Practitioner Training” in its place. The titles of two other main menu items were changed: (1) the “Find Help & Treatment” link was renamed “Find Treatment;” and (2) the “Programs & Campaigns” link was renamed “Programs.”

Change Classification

- (1) Altering or removing text and non-text content
- (2) Altering or removing links
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Page title: Homepage

Page status: Altered

- **Before:** [October 1, 2018](#)
- **After:** [February 28, 2019](#)

URL: <https://www.samhsa.gov>

Known archives: A public web archive of this page, collected by the Library of Congress is available from July 22, 2018. Search for the archived version of the page at <https://webarchive.loc.gov/>.

Description of change:

The following content was changed between [October 1, 2018](#) and [October 5, 2018](#):

1. **Overhauled** the design of the website:
 - (i) Altered the layout and color palette.
 - (ii) Removed text and links from website footer.
 - (iii) Altered the main body content, including a banner containing SAMHSA's long-time motto, "Behavioral health is essential to health. Treatment is effective. Prevention works. People recover."
 - (iv) Moved the link to the "[Newsroom](#)" page from the top-right corner of the page and added it to the main menu.
 - (v) Removed the link to the "[Topics](#)" page from the main menu.

The following content was changed between [February 26, 2019](#) and [February 28, 2019](#):

1. **Altered** the main menu:
 - (i) Renamed "Find Help & Treatment" to "Find Treatment" and changed the link from <https://www.samhsa.gov/find-help> to <https://www.samhsa.gov/find-treatment>.
 - (ii) Added link to "[Practitioner Training](#)" page.
 - (iii) Renamed "Programs & Campaigns" to "Programs" and changed the link from <https://www.samhsa.gov/programs-campaigns> to <https://www.samhsa.gov/programs>.

Internet Archive Wayback Machine <https://www.samhsa.gov/> Go SEP OCT NOV 2017 01 2018 2019 5,232 captures 14 Nov 1996 - 18 Sep 2019

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NATIONAL HELPLINE
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Disaster Distress Helpline
1-800-985-5990

SAMHSA Blog

Why Should Providers Ask this Critical Question...?
09/24/18

When individuals enter the field of healthcare, they are driven by a passion to assist others in achieving their best state of wellness. No matter...

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SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

5600 Fishers Ln • Rockville, MD 20857
1-877-SAMHSA-7 (1-877-726-4727)

SAMHSA
Substance Abuse and Mental Health
Services Administration

Screenshot: A comparison of the [October 1, 2018](#) (left) and [February 28, 2019](#) (right) versions of the SAMHSA Homepage showing the site's redesign and changes made to the main menu. Captured by the Internet Archive's [Wayback Machine](#).

Internet Archive Wayback Machine <https://www.samhsa.gov/> 5,232 captures 14 Nov 1996 - 18 Sep 2019

U.S. Department of Health & Human Services

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Current Topics

Behavioral Health Services for American Indians and Alaska Natives
For Behavioral Health Service Providers, Administrators, and Supervisors

TIP 61: Behavioral Health Services for American Indians and Alaska Natives, provides guidance on culturally responsive treatment.
FROM ANNOUNCEMENTS | FEBRUARY 12, 2019

SAMHSA'S 15TH ANNIVERSARY ACTION

Read Dr. McCance-Katz's closing remarks from the 15th Annual Prevention Day, including urgent and emerging issues about marijuana use among young adults.
FROM ANNOUNCEMENTS | FEBRUARY 4, 2019

24/7/365 National Suicide Prevention Lifeline
1-800-273-TALK (8255)

Suicide—And A Reflection On Our Changing American Society, by Dr. McCance-Katz
FROM THE SAMHSA BLOG | JANUARY 24, 2019

Get Help

National Suicide Prevention Lifeline
1-800-273-TALK (8255)
Free and confidential support for people in distress, 24/7.

Behavioral Health Treatment Services Locator
Find treatment facilities confidentially and anonymously, 24/7.

National Helpline
1-800-662-HELP (4357)
Treatment referral and information, 24/7.

Spotlight On

Dear Colleague Letter
Read a letter from Dr. McCance-Katz about the synergistic epidemics of substance use disorder, HIV, and viral hepatitis.

Opioid Overdose Prevention Toolkit
Our toolkit provides essential information about preventing an opioid overdose—a crisis which claimed over 42,000 lives in 2016.

HHS 5-POINT STRATEGY TO COMBAT THE OPIOIDS CRISIS
Addressing the Opioid Crisis
HHS awards over \$1 billion to combat the crisis ravaging our country.

SAMHSA at a Glance

Who We Are
We lead public health efforts to advance the behavioral health of the nation.

About the Assistant Secretary
Elinore McCance-Katz, M.D., Ph.D., is the first Assistant Secretary for SAMHSA.

Apply for a Grant
We have resources to help you find and apply for funding opportunities.

Find Evidence-Based Practices
Our collection of scientifically-based resources includes toolkits and clinical practice guidelines.

View Data Collections
Our Center for Behavioral Health Statistics and Quality leads the nation in behavioral health data.

Tribal Affairs
We work with the Tribal Technical Advisory Committee to address issues among American Indian/Alaska Natives.

Practitioner Training

Technology Transfer Centers (TTC) Network
The TTC networks develop and strengthen the specialized behavioral healthcare and primary healthcare workforce that provides substance use disorder and mental health prevention, treatment and recovery support services.

Clinical Support System for Serious Mental Illness (CSS-SMI)
The project offers expert consultation services and learning opportunities nationwide to support clinicians who provide evidence-based care for individuals with SMI.

Center of Excellence for Protected Health Information (CoE-PHI)
The Center of Excellence develops and disseminates resources on various privacy laws and regulations relating to mental health and substance use disorders.

Rural Opioid Technical Assistance (ROTA)
This program develops and disseminates training and technical assistance for rural communities on addressing opioid issues affecting these communities.

[View All Practitioner Training](#)

Our Centers & Offices

Office of the Assistant Secretary (OAS)
OAS reports to the Secretary of the Department of Health and Human Services and is responsible for managing and directing SAMHSA.

Office of Communications (OC)
OC is SAMHSA's voice and face to the public.

Office of Financial Resources (OFR)
OFR develops and implements the policies and programs of the Assistant Secretary.

Office of Management, Technology, and Operations (OMTO)
OMTO oversees and supports SAMHSA needs.

Office of Policy, Planning and Innovation (OPPI)
OPPI provides an integrated and structured approach for the identification and adoption of policies and innovative practices that improve behavioral health services outcomes.

Office of Behavioral Health Equity (OBHE)
OBHE coordinates agency efforts to reduce behavioral health disparities for diverse populations.

Office of Tribal Affairs and Policy (OTAP)
OTAP works with tribal nations and tribal groups to address behavioral health issues that impact Native people.

Center for Behavioral Health Statistics and Quality (CBHSQ)
CBHSQ is the government's lead agency for behavioral health statistics, as designated by the Office of Management and Budget.

Center for Mental Health Services (CMHS)
CMHS leads federal efforts to promote the prevention and treatment of mental disorders.

Center for Substance Abuse Prevention (CSAP)
The mission of CSAP is to improve behavioral health through evidence-based prevention approaches.

Center for Substance Abuse Treatment (CSAT)
CSAT promotes community-based substance abuse treatment and recovery services for individuals and families in every community.

Language Assistance Available

Español | 繁體中文 | Tiếng Việt | 한국어 | Tagalog | Пуссаи | العربية | Kreyòl Ayisyen | Français | Polski | Português | Italiano | Deutsch | 日本語 | فارسی | English

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SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

5600 Fishers Ln, Rockville, MD 20857
1-877-SAMHSA-7 (1-877-726-4727)

SAMHSA
Substance Abuse and Mental Health Services Administration

Alterations to SAMHSA's "Programs" Page

(Previously "Programs & Campaigns")

Tag: #PROGRAMS

Summary of Findings

Between [March 31, 2018](#) and [March 18, 2019](#), SAMHSA altered its "Programs & Campaigns" page. Text and links to several program pages were removed, including text and links for CAPT, NREPP, and NCTIC (among others). Text and a link to the "EBP Resource Center," which was intended to replace NREPP, was added to the page. The title of the page was changed from "Programs & Campaigns" to "Programs," and the page was moved from <https://www.samhsa.gov/programs-campaigns> to <https://www.samhsa.gov/programs>.

Change Classification

- (2) Altering or removing links
- (3) Moving an entire webpage or collection of webpages or establishing redirects

Reporting

- N/A

Change Details

Page title: Programs (Previously "Programs & Campaigns")

Page status: Altered

- **Before:** [March 31, 2018](#)
- **After:** [March 18, 2019](#)

URL: <https://www.samhsa.gov/programs> (Previously <https://www.samhsa.gov/programs-campaigns>)

Known archives: No known public archive.

Description of change:

The following content was changed between [March 31, 2018](#) and [April 6, 2018](#):

1. **Added** a link and description for the [“EBP Resource Center.”](#)

The following content was changed between [July 27, 2018](#) and [August 3, 2018](#):

1. **Removed** a link and description for the [NREPP program page](#).

The following content was changed between [February 22, 2019](#) and [March 1, 2019](#):

1. **Removed** the links and descriptions for the following programs:

- (i) [CAPT](#)
- (ii) [EBP Web Guide](#)
- (iii) [NCTIC](#)
- (iv) [Recovery to Practice](#)
- (v) [Safe Schools/Healthy Students \(SS/HS\)](#)
- (vi) [Too Smart To Start](#)
- (vii) [Underage Drinking](#)
- (viii) [Voice Awards](#)
- (ix) [Wellness Initiative](#)
- (x) [Women, Children, and Families](#)

2. **Renamed** page from “Programs & Campaigns” to “Programs.”

The following content was changed between [March 1, 2019](#) and [March 8, 2019](#):

1. **Removed** a link and description for the [“Now is the Time Technical Assistance Center.”](#)

The following content was changed between [March 8, 2019](#) and [March 18, 2019](#):

1. **Moved** the “Programs” page to the URL www.samhsa.gov/programs
 - The page at the URL www.samhsa.gov/programs appears to be a newly-created page, and was first captured by IAWM on [March 1, 2019](#).
 - The content at the URL www.samhsa.gov/programs was almost identical to the content formerly hosted on www.samhsa.gov/programs-campaigns.
 - The URL www.samhsa.gov/programs-campaigns redirects to www.samhsa.gov/programs.

Screenshot: A comparison of the [March 31, 2018](#) version of the “Programs and Campaign” page and the top portion of the [March 18, 2019](#) version of the “Programs” page showing the removal of text and links to several programs. Captured by the Internet Archive's [Wayback Machine](#).

Internet Archive <https://www.samhsa.gov/programs-campaigns> 224 captures

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Programs & Campaigns

SAMHSA's programs and campaigns offer information, training, and technical assistance to improve the quality and delivery of behavioral health services across the nation.

Find Programs, Campaigns, Initiatives, Technical Assistance Centers, or Resource Centers

By Keyword

By Type All Types By Topic All Topics

Find Reset

A to Z list of Programs, Campaigns, Initiatives, Technical Assistance Centers, or Resource Centers

<p>Behavioral Health Equity Behavioral Health Equity is the right to access quality health care for all populations regardless of the individual's race,...</p> <p>BRSS TACS Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) advances effective recovery supports and...</p> <p>CAPT SAMHSA's Center for the Application of Prevention Technologies (CAPT) is a national substance abuse prevention training and...</p> <p>Center for Integrated Health Solutions CIHS is a national training and technical assistance center that promotes the development of integrated primary and behavioral...</p> <p>Center of Excellence for IECMH The Center of Excellence for IECMH helps communities support the success of the next generation by increasing access to evidence...</p> <p>Children's Mental Health The Caring for Every Child's Mental Health Campaign seeks to raise awareness about the importance of children's mental...</p> <p>Community Conversations Community Conversations About Mental Health provides information on holding a community dialogue that builds awareness and...</p> <p>Drug-Free Workplace Programs Drug-free workplace programs are comprehensive programs that address illicit drug use by federal employees and in federally...</p> <p>DTAC DTAC helps states, U.S. territories, tribes, and local providers plan for and respond to behavioral health needs after a disaster...</p> <p>EBP Web Guide The Evidence-Based Practices (EBP) Web Guide features research findings and details about EBPs used to prevent and treat mental...</p> <p>Faith-based and Community Faith-based and Community Initiatives (FCBI) is a model for how effective partnerships can be created between federal programs and faith-based and community...</p> <p>GAINS Center The GAINS Center focuses on expanding access to services for people with mental and/or substance use disorders who come into...</p> <p>La campaña nacional patrocinada por SAMHSA para la prevención del consumo de alcohol entre menores de edad ayuda a los padres y a...</p> <p>Homelessness Programs and Resources Learn how SAMHSA programs and resources support preventing and ending homelessness among people with mental and/or substance use...</p> <p>KAP KAP supports the professional development of behavioral health workers and provides information and resources on best practices...</p>	<p>Medication-Assisted Treatment (MAT) Medication-assisted treatment (MAT), including opioid treatment programs (OTPs), combines behavioral therapy and medications to...</p> <p>Million Hearts Initiative SAMHSA has joined in the Million Hearts® initiative to prevent 1 million heart attacks and strokes by 2017.</p> <p>Minority Fellowship Program (MFP) The Minority Fellowship Program (MFP) aims to reduce health disparities and improve behavioral health care outcomes for racial...</p> <p>National Child Traumatic Stress Initiative SAMHSA's National Child Traumatic Stress Initiative (NCTSI) improves treatment and services for children, adolescents, and...</p> <p>National Prevention Week National Prevention Week is an annual health observance dedicated to increasing public awareness of, and action around, mental...</p> <p>Native Connections Native Connections is a five-year grant program that helps American Indian and Alaska Native communities identify and address the...</p> <p>NCTC NCTC works to eliminate the use of seclusion, restraints, and other coercive practices and to develop the knowledge base on...</p> <p>How Is the Time Technical Assistance Center The NCTC-TTA Center is the national training and technical assistance (TTA) center for states, tribes, municipalities...</p> <p>NCTAC NCTAC provides states, tribes, and communities with training and technical assistance (TTA) on children's behavioral health...</p> <p>PF PF offers technical support and information to those who deliver services to people with substance use and co-occurring mental...</p> <p>Recovery Month Recovery Month promotes the societal benefits of prevention, treatment, and recovery for mental and substance use disorders...</p> <p>Recovery to Practice Recovery to Practice (RTP) helps behavioral health and general healthcare practitioners improve delivery of recovery-oriented...</p> <p>Safe Schools/Healthy Students (SSHS) SSHS is a collaborative effort and comprehensive model to promote mental health among students and create safe and secure...</p> <p>SBIRT SBIRT is an approach to the delivery of early intervention and treatment to people with substance use disorders and those at risk...</p>	<p>Section 232 Demonstration Program for Certified Community Behavioral Health Clinics Section 232 of the Protecting Access to Medicare Act (PAMA) helps states establish certified community behavioral health clinics...</p> <p>Semana de Prevención La Semana Nacional de Prevención es un evento anual de salud dedicado a aumentar la conciencia pública y generar acción...</p> <p>SMV TA Center The SMV TA Center works with states and territories to strengthen their behavioral health systems for service members, veterans...</p> <p>SSO/SSDI Outreach, Access, and Recovery (SOAR) SOAR increases access to Social Security disability benefits for people experiencing or...</p> <p>Star SAMHSA oversees implementation of the 5-year Amendment, which requires states to have laws prohibiting the sale and distribution...</p> <p>The Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD) Learn more about the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD)...</p> <p>The Power of Language and Narrative This series of webcasts educates the news and entertainment media about the best terminology and language to use, as well as how...</p> <p>TLOA Implementation The Office of Indian Alcohol and Substance Abuse (OIASA) and its federal partners provide tribes with prevention and treatment...</p> <p>Too Smart To Start Too Smart To Start helps prevent underage alcohol use by offering strategies and materials for youth, teens, families, educators...</p> <p>Tribe Training and Technical Assistance Center The Tribal TTA Center offers training and technical assistance (TTA) on mental and substance use disorders, suicide prevention...</p> <p>Underage Drinking SAMHSA's Underage Drinking Prevention campaign helps parents and caregivers start talking to their children early about the...</p> <p>Voice Awards SAMHSA's Voice Awards program honors people in recovery and their family members who are improving the lives of people with...</p> <p>Wellness Initiative SAMHSA's Wellness Initiative raises awareness of health disparities among people with serious mental and/or substance use...</p> <p>Women, Children, and Families Find current SAMHSA and other government agency resources on addressing the behavioral health and recovery of women and their...</p>
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Department of Health and Human Services USA.gov GRANTS.GOV

Internet Archive <https://www.samhsa.gov/programs> 88 captures

U.S. Department of Health & Human Services

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Programs

SAMHSA's programs and campaigns offer information, training, and technical assistance to improve the quality and delivery of behavioral health services across the nation.

Search Clear

<p>Behavioral Health Equity Behavioral Health Equity is the right to access quality health care for all populations regardless of the individual's race,...</p> <p>Center of Excellence for IECMH The Center of Excellence for IECMH helps communities support the success of the next generation by increasing access to evidence...</p> <p>Disaster Preparedness, Response, and Recovery SAMHSA provides communities and responders with behavioral health resources that help them prepare, respond, and recover from...</p> <p>EVIDENCE-BASED PRACTICES RESOURCE CENTER EBP Resource Center SAMHSA is committed to improving prevention, treatment, and recovery support services for mental and substance use disorders.</p> <p>GAINS Center The GAINS Center focuses on expanding access to services for people with mental and/or substance use disorders who come into...</p> <p>Interdepartmental Serious Mental Illness Coordinating Committee Learn more about the ongoing work of the Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC) and key...</p> <p>Million Hearts Initiative SAMHSA has joined in the Million Hearts® initiative to prevent 1 million heart attacks and strokes by 2017.</p> <p>National Children's Mental Health Awareness Day National Children's Mental Health Awareness Day shines a national spotlight on the importance of caring for every child's mental...</p> <p>NATIONAL TRAINING & TECHNICAL ASSISTANCE CENTER NCTC provides states, tribes, and communities with training and technical assistance (TTA) on children's behavioral health...</p>	<p>BRSS TACS Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) advances effective recovery supports and...</p> <p>Community Conversations Community Conversations About Mental Health provides information on holding a community dialogue that builds awareness and...</p> <p>Drug-Free Workplace Programs Drug-free workplace programs are comprehensive programs that address illicit drug use by federal employees and in federally...</p> <p>EARLY SERIOUS MENTAL ILLNESS TREATMENT LOCATOR Welcome to the Early Serious Mental Illness Treatment Locator, a confidential and anonymous source of information for persons and...</p> <p>KAP KAP supports the professional development of behavioral health workers and provides information and resources on best practices...</p> <p>Minority Fellowship Program (MFP) The Minority Fellowship Program (MFP) aims to reduce health disparities and improve behavioral health care outcomes for racial...</p> <p>National Prevention Week National Prevention Week is an annual health observance dedicated to increasing public awareness of, and action around, mental...</p> <p>PARTNERS RECOVERY</p>	<p>Center for Integrated Health Solutions CIHS is a national training and technical assistance center that promotes the development of integrated primary and behavioral...</p> <p>Criminal and Juvenile Justice SAMHSA promotes early intervention and recovery as healthier alternatives to detaining people with behavioral health conditions...</p> <p>DTAC DTAC helps states, U.S. territories, tribes, and local providers plan for and respond to behavioral health needs after a disaster...</p> <p>Faith-based and Community Initiatives FCBI is a model for how effective partnerships can be created between federal programs and faith-based and community...</p> <p>HOMELESSNESS Programs and Resources Learn how SAMHSA programs and resources support preventing and ending homelessness among people with mental or substance use disorders...</p> <p>Medication-Assisted Treatment (MAT) Medication-assisted treatment (MAT), including opioid treatment programs (OTPs), combines behavioral therapy and medications to...</p> <p>National Child Traumatic Stress Initiative SAMHSA's National Child Traumatic Stress Initiative (NCTSI) improves treatment and services for children, adolescents, and...</p> <p>Native Connections Native Connections is a five-year grant program that helps American Indian and Alaska Native communities identify and address the...</p> <p>Recovery Month Recovery Month promotes the societal benefits of prevention, treatment, and recovery for mental and substance use disorders...</p>
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912

Removal of the “Center for the Application of Prevention Technologies” (CAPT) Website

Tag: #CAPT

Summary of Findings

Between [April 1, 2019](#) and [April 24, 2019](#), SAMHSA removed a collection of webpages for the Center for the Application of Prevention Technologies (CAPT) from its website. CAPT [provided](#) “a national substance abuse prevention training and technical assistance (T/TA) system dedicated to strengthening prevention systems and the nation’s behavioral health workforce.” These resources include a page for the five-step “Strategic Prevention Framework” (SPF) and a list of approximately 340 grantee stories, tools, and resources.

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website
- (8) Altering, removing, or deleting datasets

Reporting

- N/A

Change Details

Page title: Center for the Application of Prevention Technologies (CAPT)

Page status: Removed

- **Before:** [April 1, 2019](#)
- **After:** [April 24, 2019](#)
- **URL:** <https://www.samhsa.gov/capt/> (redirects to <https://www.samhsa.gov/programs>)

Known archives: No known public archive.

Description of change:

The following content was changed between [April 1, 2019](#) and [April 24, 2019](#):

1. **Removed** the “Center for the Application of Prevention Technologies (CAPT)” main page and established a redirect to the “Programs” page at the URL <https://www.samhsa.gov/programs>.

- The “Center for the Application of Prevention Technologies” main page was the landing page for CAPT’s website, which provided information, grantee resources, and links to further its stated mission of “promot[ing] the application of prevention science to advance state, tribal, jurisdictional, and community efforts to address substance use and misuse.”

- The main page linked to four subpages, which were also removed:

(i) [Applying the Strategic Prevention Framework \(SPF\)](#)

- (a) The framework had the following description: “The five-step SPF guides you in selecting, implementing, and evaluating effective, culturally appropriate, and sustainable prevention activities.”

- (b) The “Applying the Strategic Prevention Framework (SPF)” page linked to seven subpages, each accessible via the CAPT sidebar and through a link in the main body of the page.

1. Five of the subpages pertained to a corresponding step (i.e. 1-5) within the framework:

- [Step 1: Assess Needs](#)
- [Step 2: Build Capacity](#)
- [Step 3: Plan](#)
- [Step 4: Implement](#)
- [Step 5: Evaluate](#)

2. Two additional subpages for “[Cultural Competence](#)” and “[Sustainability](#).”

(ii) [Practicing Effective Prevention](#)

- (a) The page had the following description: “Find information on how to plan, implement, and evaluate evidence-based interventions and learn how prevention relates to behavioral health.”

- (b) The “Practicing Effective Prevention” page linked to three subpages, each accessible via the CAPT sidebar.

1. [Prevention and Behavioral Health](#)

- The “Prevention and Behavioral Health” page linked to two additional subpages: “[Risk and Protective Factors](#)” and “[Adverse Childhood Experiences](#).”

2. [Epidemiology and Prevention](#)

- The “Epidemiology and Prevention” page linked to four additional subpages: “[Prevention Epidemiology and the SPF](#),” “[Finding Epidemiological Data](#),” “[Analyzing Epidemiological Data](#),” and “[Epidemiological Profiles for States and Jurisdictions](#).”

3. [Prevention Approaches](#)

- The page provides information on two primary approaches to preventing substance use disorders: “Individual-level Strategies” and “Environmental Strategies.”

(iii) [Grantee Stories, Tools, and Resources](#)

- (a) The “Grantee Stories, Tools, and Resources” page provided a list of approximately 340 resources of various types (i.e. Grantee Stories, T/TA Tools, Archived Webinars, Videos, Online Courses), with the most recent resources added in 2018.
- (b) Examples of types of resources provided by the “Grantee Stories, Tools, and Resources” page, and which are now removed:
 1. Examples of T/TA Tools:
 - [Tools from the CAPT: Increasing Cultural Competence to Reduce Behavioral Health Disparities](#)
 - [Positive Approaches to Preventing Substance Use and Misuse Among Boys and Young Men of Color: Programs and Strategies At-a-Glance](#)
 - [Ensuring the Well-being of Boys and Young Men of Color: Factors that Promote Success and Protect Against Substance Use and Misuse](#)
 2. Examples of Webinars:
 - [Cultural Competency for Understanding and Addressing the Prevention Needs of Lesbian, Gay, Bisexual, Transgender, and Queer/Questioning \(LGBTQ\) Populations](#)
 - [Cultural Competency for Working with Immigrant Populations](#)
 - [Empowering Communities to Address Health Disparities: Practical Steps to Take at the Local Level](#)

(iv) [News and Announcements](#)

- (a) The “News and Announcements” page linked users to the “[CAPT Newsletter](#)” page, which featured an archive of previous versions of the “CAPT on the Web Newsletter,” which were released monthly from February 2015 to September 2018. The newsletter featured “the latest prevention resources, articles, and tools, and spotlights grantee challenges and successes.”

Note: Between [February 22, 2019](#) and [March 1, 2019](#) a link and description text for the “Center for the Application of Prevention Technologies (CAPT)” main page was removed from SAMHSA’s “Programs” page (#PROGRAMS).

Screenshot: A capture of the [April 1, 2019](https://www.samhsa.gov/capt/) version of the main “Center for the Application of Prevention Technologies (CAPT)” page showing links to the four main subpages of the site. The page was removed by [April 24, 2019](https://www.samhsa.gov/capt/). Captured by the Internet Archive's [Wayback Machine](https://www.samhsa.gov/capt/).

Internet Archive Wayback Machine <https://www.samhsa.gov/capt/> Go FEB APR MAY 01 2019 2020 302 captures 30 Sep 2015 - 26 Jun 2019

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CAPT
Center for the Application of Prevention Technologies

Center for the Application of Prevention Technologies (CAPT)

CAPT promotes the application of prevention science to advance state, tribal, jurisdictional, and community efforts to address substance use and misuse.

Strategic Prevention Framework (SPF)

The five-step SPF guides you in selecting, implementing, and evaluating effective, culturally appropriate, and sustainable prevention activities.

[Step 1: Assess needs](#)
[Step 2: Build capacity](#)
[Step 3: Plan](#)
[Step 4: Implement](#)
[Step 5: Evaluate](#)

The two guiding principles of the SPF are [cultural competence](#) and [sustainability](#).

Grantee Stories, Tools, and Resources

Find information on prevention research, publications, grantee stories, and other resources.

[Access tools and other learning resources.](#)

Learn About CAPT

CAPT provides training and technical assistance services for SAMHSA substance misuse prevention grantees and resources for prevention professionals.

- » Learn about [CAPT services](#) and [who to contact](#) for more information.
- » Learn about [SAMHSA prevention grants](#).
- » Find [grantees](#) served by CAPT.
- » [Locate prevention contacts](#) at state agencies, tribal governments, and other entities.

Practicing Effective Prevention

Data-driven, evidence-informed prevention planning processes lead to more successful prevention outcomes.

Learn more about:

- » [Prevention and behavioral health](#)
- » [Epidemiology and prevention](#)
- » [Prevention approaches](#)

New from CAPT

- » [South Carolina Partners with Law Enforcement on Naloxone Program](#)
- » [Illicit Synthetic Opioids: Understanding Potential Risks for First Responders](#)
- » [Preventing Opioid Overdose: Understanding Good Samaritan Laws](#)

Preventing Opioid Misuse and Overdose
Resources and Tools

PREVENTION CONVERSATIONS
Watch Video Series

Prevention Training Now!
Enroll in CAPT Online Courses

Prevention Collaboration in Action Toolkit
Grantees Stories and Tools

News & Announcements

National Adolescent Drug Trends in 2017: Findings Released. Results from the annual Monitoring the Future study by the University of Michigan feature a significant increase in adolescent marijuana use and the first-ever national standard estimates for vaping.

SAMHSA Knowledge Network. This new area of the SAMHSA website provides easy access to SAMHSA trainings and tools.

SAMHSA's 14th Annual Prevention Day. February 5 in National Harbor, MD. This event will feature presentations, training sessions, technical assistance, and resources to support prevention practitioners and others in successfully addressing emerging substance misuse prevention issues.

» [Upcoming conferences and trainings](#)

Subscribe to the Newsletter

- » [Subscribe to the CAPT on the Web newsletter.](#)
- » [Access previous editions of CAPT on the Web.](#)

Removal of the “National Registry of Evidence-based Programs and Practices (NREPP)” Website

Tag: #NREPP

Summary of Findings

By September 2017, SAMHSA had frozen and was no longer updating the “National Registry of Evidence-based Programs and Practices (NREPP)” domain, which had a landing page at the URL <https://nrepp.samhsa.gov/landing.aspx> (Webpage 1). SAMHSA removed the domain some time after [July 22, 2018](#). SAMHSA also removed the “NREPP” page (Webpage 2) on its website. By [August 23, 2018](#), all content was removed from the page and replaced with a message regarding the termination of NREPP and by [June 3, 2019](#), the URL led to a “403 Access Denied” error message. NREPP, which has existed since 1997, had been replaced by a new webpage, the “EBP Resource Center” (See [13. EBPre-source](#)).

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website
- (7) Altering or removing search engines and open data platforms
- (8) Altering, removing, or deleting datasets

Reporting

- Washington Post, [Trump administration freezes database of addiction and mental health treatments](#) (01/10/2018)

Change Details

Webpage 1

Page title: National Registry of Evidence-based Programs and Practices (NREPP)
Page status: Removed

- **Last Available IAWM Capture:** [July 22, 2018](#)

URL: <https://nrepp.samhsa.gov/landing.aspx>

Known archives: A public web archive of this page, collected by the Library of Congress, is available but has not been captured since 2011. Search for the archived version of the page at <https://webarchive.loc.gov/>.

Description of change:

The following content was changed after [July 22, 2018](#):

1. **Removed** access to the National Registry of Evidence-based Programs and Practices (NREPP) main page and all pages in the subdomain, nrepp.samhsa.gov.
 - All nrepp.samhsa.gov subdomain URLs return errors.
 - According to a [Washington Post](#) report from January 10, 2018, the administration confirmed they had terminated the contract for running the database and the website had not been updated since September 2017. At the time of the Washington Post article, NREPP was accessible.
 - On January 11, 2018, a day after the release of the Washington Post article, SAMHSA released a [statement](#) confirming the retirement of NREPP and outlining SAMHSA's new approach to evidence-based practices.
 - The last available IAWM capture of the page is from [July 22, 2018](#).

Webpage 2

Page title: NREPP

Page status: Removed

- **Before:** [July 4, 2018](#)
- **After:** [July 22, 2019](#)

URL: <https://www.samhsa.gov/nrepp> (redirects to www.samhsa.gov/ebp-resource-center)

Known archives: A public web archive of this page, collected by the Library of Congress is available from February 28, 2018. Search for the archived version of the page at <https://webarchive.loc.gov/>.

The following content was changed between [July 4, 2018](#) and [August 23, 2018](#):

1. **Altered** the page to remove all content and replace it with the message:

SAMHSA is committed to advancing the adoption of evidence-based interventions related to mental health and substance use. In April 2018, SAMHSA launched the Evidence-Based Practices Resource Center (Resource Center) that aims to provide communities, clinicians, policy makers, and others in the field with the information and tools they need to incorporate evidence-based practices into their communities or clinical settings. The Resource Center contains a collection of science-based resources and is part of SAMHSA's new comprehensive approach to identify and disseminate clinically sound and scientifically based policy, practices, and programs. Consistent with the January 2018 announcement from the Assistant Secretary for Mental Health and Substance Use related to discontinuing the National Registry of Evidence-based Programs and Practices (NREPP), SAMHSA has now phased out the NREPP website, which has been in existence since 1997.

- The page had previously provided information on NREPP and links to various pages within the nrepp.samhsa.gov domain.

Note: Between [July 27, 2018](#) and [August 3, 2018](#) a link and description text for the "NREPP" page was removed from SAMHSA's "Programs" page (#PROGRAMS).

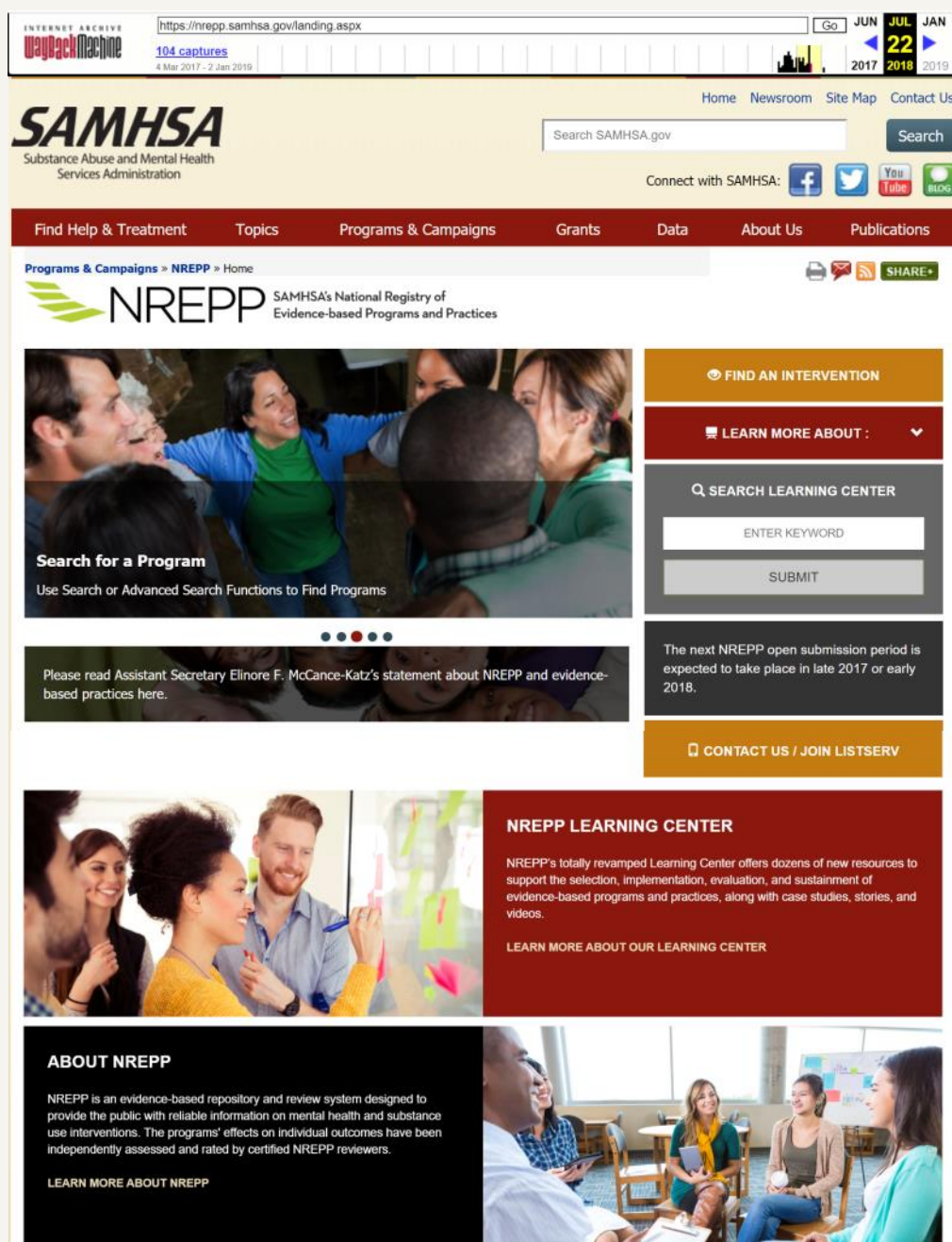
The following content was changed between [May 23, 2019](#) and [June 3, 2019](#):

1. **Removed** public access to the "NREPP" page.
 - By [June 3, 2019](#), the URL led to an "403 Access Denied" error message.

The following content was changed between [June 3, 2019](#) and [July 22, 2019](#):

1. **Removed** the “NREPP” page and established a redirect to a new page, titled “EBP Resource Center,” at the URL www.samhsa.gov/ebp-resource-center.

Screenshot: A capture of the [July 22, 2018](#) version of the National Registry of Evidence-based Programs and Practices (NREPP) homepage. Captured by the Internet Archive's [Wayback Machine](#).



Removal of the "Evidence-Based Practices (EBP) Web Guide" Pages

Tag: #EBPWeb

Summary of Findings

Between [January 8, 2019](#) and [May 17, 2019](#), SAMHSA removed the "Evidence-Based Practices (EBP) Web Guide" from its website. The guide featured "research findings and details about EBPs used to prevent and treat mental and substance use disorders."

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Page title: Evidence-Based Practices (EBP) Web Guide

Page status: Removed

- **Before:** [January 8, 2019](#)
- **After:** [May 17, 2019](#)

URL: <https://www.samhsa.gov/ebp-web-guide> (redirects to <https://www.samhsa.gov/ebp-resource-center>)

Known archives: A public web archive of this page, collected by the Library of Congress, is available but has not been captured since 2015. Search for the archived version of the page at <https://webarchive.loc.gov/>.

Description of change:

The following content was changed between [January 8, 2019](#) and [May 17, 2019](#):

1. **Removed** the “Evidence-Based Practices (EBP) Web Guide” main page and established a redirect to URL <https://www.samhsa.gov/ebp-resource-center>.
 - The “Evidence-Based Practices (EBP) Web Guide” homepage was the landing page for the Evidence-Based Practices (EBP) Web Guide, which linked to external websites that provided “research findings and details about EBPs used to prevent and treat mental and substance use disorders.”
 - The main page linked to five subpages containing links to external websites arranged by subject area, which were also removed:
 - [Substance Abuse Prevention](#)
 - [Substance Abuse Treatment](#)
 - [Prevention of Mental Health Disorders](#)
 - [Mental Health Treatment](#)
 - [Adult EBPs](#)
 - (i) Each subpage contained details and links to US and international organizations that “cover” EBPs in the relevant subject area. For instance, the “[Mental Health Treatment Evidence-Based Practices \(EBP\)](#)” page contained a “list of organizations’ websites that cover mental health treatment evidence-based practices (EBPs).” Organizations listed on the page include Oregon’s Office of Mental Health and Addiction Services (OMHAS) and New Zealand Guidelines Group.
 - A sixth subpage, “[Evidence-Based Practices \(EBP\) Web Guide Criteria](#),” provided information on “how criteria were developed for finding appropriate EBP sites through a thorough search and selection process.”

Note: Between [February 22, 2019](#) and [March 1, 2019](#), a link and description text for the “Evidence-Based Practices (EBP) Web Guide” main page was removed from the “Programs” page.

Screenshot: A capture of the [January 8, 2019](#) version of the “Evidence-Based Practices (EBP) Web Guide” page showing the main body content and links to subject areas. The page was removed by [May 17, 2019](#). Captured by the Internet Archive’s [Wayback Machine](#).

INTERNET ARCHIVE <https://www.samhsa.gov/ebp-web-guide> Go OCT JAN FEB
 waybackmachine 100 captures 21 Oct 2014 - 29 Jun 2019 2017 2019 2020

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Programs & Campaigns » EBP Web Guide



A Guide to Evidence-Based Practices (EBP)

The Evidence-Based Practices (EBP) Web Guide features research findings and details about EBPs used to prevent and treat mental and substance use disorders. EBPs integrate clinical expertise; expert opinion; external scientific evidence; and client, patient, and caregiver perspectives so that providers can offer high-quality services that reflect the interests, values, needs, and choices of the individuals served.

Stakeholders throughout the behavioral health field can use the EBP Web Guide to promote awareness of current intervention research and to increase the implementation and availability of EBPs.

Because of the incredible amount of information related to EBPs currently available online, a [search and selection process](#) was implemented to find the most appropriate sites.

SAMHSA and the U.S. Department of Health and Human Services (HHS) do not necessarily endorse the programs and practices described on the featured websites, or promote the use of related materials. The views, policies, and opinions expressed on the featured websites are those of the organizations maintaining the website and/or the website authors and do not necessarily reflect those of SAMHSA or HHS.

[Learn more about the EBP Web Guide.](#)

Browse by Area

- [Substance Abuse Prevention](#)
- [Substance Abuse Treatment](#)
- [Prevention of Mental Health Disorders](#)
- [Mental Health Treatment](#)
- [Adult EBPs](#)

Last Updated: 09/15/2017

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ACT EBP KIT



[Download the Assertive Community Treatment \(ACT\) Evidence-Based Practices \(EBP\) KIT today - 2008](#)

Grant Announcements

[Find SAMHSA funding opportunities.](#)

Removal of the "National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)" Website

Tag: #NCTIC

Summary of Findings

Between [January 28, 2019](#) and [March 23, 2019](#), SAMHSA removed the "National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)" webpage. NCTIC supported "interest in developing approaches to eliminate the use of seclusion, restraints, and other coercive practices and to further advance the knowledge base related to implementation of trauma-informed approaches."

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Page title: National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)

Page status: Removed

- **Before:** [January 28, 2019](#)
- **After:** [March 23, 2019](#)

URL: <https://www.samhsa.gov/nctic> (redirects to <https://www.samhsa.gov/programs>)

Known archives: No known public archive.

Description of change:

The following content was changed between [January 28, 2019](#) and [March 23, 2019](#):

1. **Removed** the “National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)” main page and established a redirect to the “Programs” page at the URL <https://www.samhsa.gov/programs>.
 - The page was the landing page for NCTIC, which “supports interest in developing approaches to eliminate the use of seclusion, restraints, and other coercive practices and to further advance the knowledge base related to implementation of trauma-informed approaches.”
 - The main page linked to four main subpages, which have also been removed:
 - (i) [About NCTIC](#)
 - This page provided information on NCTIC’s funding, purpose, mission, history, and framework.
 - (ii) [Trauma-Informed Approach and Trauma-Specific Interventions](#)
 - This page provided SAMHSA’s definition and six principles of a trauma-informed approach.
 - (iii) [Training and Technical Assistance](#)
 - This page provided information on the technical assistance and training that NCTIC provided.
 - (iv) [Resources](#)
 - This page provided information on NCTIC resources and links to hotlines and referral resources. The page also linked to four external products “developed and/or supported by NCTIC,” including:
 - (a) [Essential Components of Trauma-informed Judicial Practice: A Guide for Judges in Treatment Courts, and Trauma 101: What Every Judge Needs to Know about Trauma – 2013](#)
 - (b) [Engaging Women in Trauma-Informed Peer Support: A Guidebook](#)
 - (c) [Changing Communities, Changing Lives, NCTIC 2012 Report](#)
 - (d) [Creating A Place of Healing and Forgiveness: The Trauma-Informed Care initiative at the Women’s Correctional Center of Hawaii – 2013](#)

Note: Between [February 22, 2019](#) and [March 1, 2019](#), a link and description for the “National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)” main page was removed from the “Programs” page.

Screenshot: A capture of the [January 28, 2019](https://www.samhsa.gov/nctic) version of the “National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)” program page. The page was removed by [March 23, 2019](#). Captured by the Internet Archive's [Wayback Machine](#).

INTERNET ARCHIVE
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<https://www.samhsa.gov/nctic>
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Programs & Campaigns » NCTIC

National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)

NCTIC works to eliminate the use of seclusion, restraints, and other coercive practices and to develop the knowledge base on trauma-informed care.

About NCTIC

NCTIC supports interest in developing approaches to eliminate the use of seclusion, restraints, and other coercive practices and to further advance the knowledge base related to implementation of trauma-informed approaches.

[Learn more about NCTIC.](#)

Trauma-Informed Approach

The principles of a trauma-informed approach and trauma-specific interventions are designed to address the consequences of trauma in the individual and to facilitate healing.

[Learn more about the Trauma-Informed Approach.](#)

NCTIC Training and Technical Assistance

NCTIC provides technical assistance and training to a range of service systems:

- » Community-based behavioral health agencies
- » Institutions
- » Criminal and juvenile justice settings
- » Homeless and HIV service providers
- » Domestic violence organizations
- » State and federal agencies

[Learn more about NCTIC Training and Technical Assistance.](#)

NCTIC Resources

NCTIC provides technical assistance through in-person organizational technical assistance, virtual learning networks, technical assistance materials, and links to other resources supported by the federal government.

[Learn more about NCTIC and Other Resources.](#)

2017 Webinar Series

Join our webinars the fourth Monday of each month to learn about:

- » [Communities Addressing Trauma and Community Strife Through Trauma-Informed Approaches \(PDF | 466 KB\)](#) (1:00–2:30 p.m. ET)
- » [Trauma-Informed Innovations in Crisis Services \(PDF | 236 KB\)](#) (3:00–4:00 p.m. ET)

Contact NCTIC

National Center for Trauma-Informed Care
66 Canal Center Plaza, Suite 302
Alexandria, VA 22314

866-254-4819
Fax: 703-548-9517
NCTIC@NASMHPD.org

Last Updated: 09/15/2017

Removal of the "Now Is The Time Technical Assistance Center" Program Website

Tag: #TIME

Summary of Findings

Between [March 1, 2019](#) and [March 8, 2019](#), SAMHSA removed the "Now Is The Time Technical Assistance Center" site from its website. The training and technical assistance (T/TA) center was a national program that provided assistance for states, tribes, municipalities, communities, and local education agencies through two grant programs: Healthy Transitions and Project Advancing Wellness and Resilience Education (AWARE).

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Page title: Now Is The Time Technical Assistance Center

Page status: Removed

- **Before:** [March 1, 2019](#)
- **After:** [March 8, 2019](#)

URL: <https://www.samhsa.gov/nitt-ta> (redirects to <https://www.samhsa.gov/programs>)

Known archives: No known public archive.

Description of change:

The following content was changed between [March 1, 2019](#) and [March 8, 2019](#):


1. **Removed** the "Now Is The Time Technical Assistance Center" main page and established a redirect to the "Programs" page at the URL <https://www.samhsa.gov/programs>.
 - The page was the landing page for the website of NITT-TA, which was the "national training and technical assistance (T/TA) center for states, tribes, mu-

municipalities, communities, and local education agencies funded under the Project AWARE and Healthy Transitions grant programs.”


- The main page linked to four main subpages, which have also been removed:
 - (i) [About NITT-TA Center](#)
 - The page provided information on SAMHSA’s role in the Now Is The Time initiative, the center’s objectives, and the center partners.
 - (ii) [Grants and Grantees](#)
 - The page provided information on and links to the two grant programs supported by SAMHSA: [Healthy Transitions](#) and [Project AWARE](#).
 - (iii) [Training and Technical Assistance](#)
 - The page provided general information on NITT-TA’s Training and Technical Assistance.
 - The page linked to another page on training and technical assistance, “[Topics and Formats](#).”
 - (iv) [Distance Learning Videos](#)
 - The page linked to “Recorded videos of webinars and other multimedia trainings for Healthy Transitions and Project Advancing Wellness and Resilience Education (AWARE) grantees,” including the “[NITT-TA Center YouTube playlist](#),” which is still live on YouTube.
 - The page linked to three main subpages, all of which have been removed:
 - (a) [Healthy Transitions Distance Learning](#)
 - (a) [Project AWARE Distance Learning](#)
 - (a) [Cultural Competence and Collaboration](#)


Note: Between [March 1, 2019](#) and [March 8, 2019](#), a link and description for the “Now Is The Time Technical Assistance Center” main page was removed from the “Programs” page

Screenshot: A capture of the [March 1, 2019](#) version of the “Now Is The Time Technical Assistance Center” program page. The page was removed by [March 8, 2019](#). Captured by the Internet Archive’s [Wayback Machine](#).


<https://www.samhsa.gov/nitt-ta>
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NITT-TA

NOW IS THE TIME

TECHNICAL ASSISTANCE CENTER

Now Is The Time Technical Assistance Center

The NITT-TA Center is the national training and technical assistance (T/TA) center for states, tribes, municipalities, communities, and local education agencies funded under the Project AWARE and Healthy Transitions grant programs.

Grants & Grantees

The NITT-TA Center supports the following grant programs that address behavioral health issues among young people:

- » [Healthy Transitions](#)
- » [Project Advancing Wellness and Resilience Education \(AWARE\)](#)

Learn more about the [grants and grantees](#) supported by the NITT-TA Center.

About the *Now Is The Time* TA Center

The *Now Is The Time* initiative improves access to mental health services for young people. Learn about:

- » [SAMHSA's role](#) in the *Now Is The Time* initiative
- » The NITT-TA Center's [objectives](#) and [partners](#)

Find more information [about the NITT-TA Center](#).

Distance Learning Videos

Access [webinars and other multimedia trainings](#) designed for Healthy Transitions and Project AWARE grantees:

- » [Healthy Transitions Distance Learning](#)
- » [Project AWARE Distance Learning](#)
 - » [Project AWARE-SEA Distance Learning](#)
 - » [Project AWARE-Community Distance Learning](#)
 - » [Project AWARE-LEA Distance Learning](#)
 - » [ReCAST Distance Learning](#)

Trainings on [cultural competence and collaboration](#) topics are also available for all grantees.

Featured Distance Learning

Improve your program with the following recommended trainings:

Healthy Transitions

- » [Building Bridges Between Child and Adult Mental Health Systems](#) (52 min.) – August 31, 2016
- » [Early Intervention in Psychosis: Moving From Foundational Principles to Innovation](#) (61 min.) – May 26, 2016

Project AWARE

- » [Microaggressions, Bias, and School Climate](#) (86 min.) – February 8, 2017
- » [Using an Interconnected Systems Framework \(ISF\) in NITT, Project AWARE, Part 1: The "What and Why" of ISF](#) (13 min.) – August 18, 2016

All Grantees

- » [Mental Health: A Key to Positive Futures for Youth in Foster Care](#) (16 min.) – June 21, 2016

Newsletter and Mailing List

Register for the NITT-TA Center newsletter to stay informed of upcoming events or the grantee mailing list to receive program updates by sending an email to NITT-TA@cars-rp.org.

The nonprofit [Center for Applied Research Solutions \(CARS\)](#) processes newsletter and mailing list requests.

Contact Us

For general NITT-TA Center inquiries, contact the [Center for Applied Research Solutions \(CARS\)](#) at NITT-TA@cars-rp.org or by phone at 844-856-1749.

Last Updated: 08/23/2017

Removal of the “Recovery to Practice” Websites

Tag: #RECOVERY

Summary of Findings

SAMHSA removed two “Recovery to Practice” websites. Between [March 10, 2017](#) and [June 20, 2017](#), it removed the “Recovery to Practice” website hosted on the subdomain, <http://atr.samhsa.gov/> (Website 1). Between [January 8, 2019](#) and [March 27, 2019](#), SAMHSA removed the “Recovery to Practice” site from its website (Website 2). The websites provided resources on recovery-oriented approaches, including webinars and curricula.

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Webpage 1

Page title: Recovery to Practice

Page status: Removed

- **Before:** [March 10, 2017](#)
- **After:** [June 20, 2017](#)

URL: <http://atr.samhsa.gov/>

Known archives: A public web archive of this page from [January 17, 2017](#), collected at the request of the White House, is available on [Archive-It](#).

Description of change:

The following content was changed between [March 10, 2017](#) and [June 20, 2017](#):

1. **Removed** access to the entire subdomain at <http://atr.samhsa.gov/>.
 - The subdomain hosted a website called “Recovery to Practice,” which contained a resource library of recovery-oriented interventions.
 - URLs within the subdomain return error notices.

Webpage 2

Page title: Recovery to Practice

Page status: Removed

- Before: [January 8, 2019](#)
- After: [March 27, 2019](#)

URL: <https://www.samhsa.gov/recovery-to-practice> (redirects to <https://www.samhsa.gov/programs>)

Known archives: No known public archive.

Description of change:

The following content was changed between [January 8, 2019](#) and [March 27, 2019](#):

1. **Removed** the “Recovery to Practice” main page and established a redirect to the “Programs” page at the URL <https://www.samhsa.gov/programs>.
 - The page was the landing page for the website of the “Recovery to Practice” program, and contained information to help “behavioral health and general healthcare practitioners improve delivery of recovery-oriented services, supports, and treatment.”
 - The main page linked to three main subpages, which have also been removed:
 - (i) [Webinars and Podcasts](#)
 - The page provided “practical applications of recovery principles in diverse practice settings” and included details on and links to webinars and podcasts from the following series:
 - (a) Complex Clinical Decisions in Psychopharmacology Podcast Series
 - (b) Recovery-oriented Use of Medications Series
 - (c) Engagement and Recovery in Behavioral Health Services
 - (d) Recovery-Oriented Cognitive Therapy (CT-R) Series
 - (e) Impact of Homelessness and Unstable Housing on Provider Services Series
 - (f) Integrated Health Care Webinar Series
 - (g) Transition-Age Youth (TAY) Series
 - (h) [Recovery in Criminal Justice Settings](#)
 - (i) Psychiatric Advance Directives (PAD)
 - (j) Shared Decision-Making (SDM) (three webinars, one 20-minute podcast)
 - (k) Person-Centered Practice
 - (l) Role of Communities in Recovery Series
 - (m) Assessing Practice Implementation
 - (n) Recovery in Hospital Settings
 - (o) Crisis and Recovery
 - (p) Recovery-Oriented Care: Foundation of Cross Discipline Practice
 - (ii) [Training Opportunities](#)
 - The page offers “discipline-based curricula and on-demand continuing education courses on recovery-oriented practices.”
 - The page linked to two main subpages, which have been removed:
 - (i) [RTP Curricula](#)
 - (ii) [Virtual Learning Courses](#)

(iii) [Newsletter](#)

- The page linked to issues of SAMHSA's quarterly newsletter for practitioners, "Practicing Recovery" from January 2015 through August 2018.

Note: Between [February 22, 2019](#) and [March 1, 2019](#), a link and description to the "Recovery to Practice" main page was removed from the "Programs" page.

Screenshot: A capture of the [January 8, 2019](#) version of the "Recovery to Practice" program page. The page was removed by [March 27, 2019](#). Captured by the Internet Archive's [Wayback Machine](#).

The screenshot shows the SAMHSA website's "Recovery to Practice" page. At the top, the Internet Archive Wayback Machine interface is visible, showing the URL <https://www.samhsa.gov/recovery-to-practice> and a calendar for January 2019. The SAMHSA logo and navigation links (Home, Site Map, Contact Us) are at the top. A search bar is also present. The main navigation menu includes Find Help & Treatment, Grants, Data, Programs & Campaigns (highlighted), Newsroom, About Us, and Publications. The "Recovery to Practice" section features a large banner with the text "BRIDGING PEOPLE, KNOWLEDGE, TOOLS, AND EXPERIENCE". Below this, a description states: "Recovery to Practice (RTP) helps behavioral health and general healthcare practitioners improve delivery of recovery-oriented services, supports, and treatment." The page is organized into several columns. The left column contains "Webinars and Podcasts" and "About Recovery to Practice". The middle column lists "Training Opportunities" and a "Newsletter" section. The right column features a "Behavioral Health Treatment Locator", a "National Recovery Month" banner for September 2019, and a "Great Resources from RTP!" section with links to eLearning courses, podcasts, webinars, and newsletters. At the bottom right, there is a "SAMHSA Publications" section with links to various reports and case studies.

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Programs & Campaigns » Recovery to Practice

BRIDGING PEOPLE, KNOWLEDGE, TOOLS, AND EXPERIENCE

Recovery to Practice

Recovery to Practice (RTP) helps behavioral health and general healthcare practitioners improve delivery of recovery-oriented services, supports, and treatment.

Webinars and Podcasts

Check out RTP [webinars and podcasts](#) on important topics related to the delivery of recovery-oriented behavioral health care. Most have free continuing education hours.

About Recovery to Practice

RTP is a workforce development project that provides education, training, and resources on:

- » The value of recovery-oriented approaches
- » Integrating recovery-oriented practices
- » Bringing together providers and consumers

Training Opportunities

RTP offers [training and technical assistance](#), including:

- » [Virtual learning courses with free continuing education](#)
- » [Discipline-specific training curricula](#)

SAMHSA's online training course, "[Information for Peer Specialists Serving People with Mental Health Conditions Experiencing Homelessness](#)" is now available for free!

Newsletter

Access the [quarterly newsletter, Practicing Recovery](#), with articles and tips for recovery-oriented practice.

Behavioral Health Treatment Locator

JOIN THE VOICES FOR RECOVERY
Invest in health, home, purpose, and community
National Recovery Month
October 2019

Great Resources from RTP!

- » [eLearning course on Integrated Practice](#)
- » [eLearning course on peer support for people experiencing homelessness](#)
- » [eLearning courses on co-occurring disorders](#)
- » [eLearning course on clozapine](#)
- » [Podcasts on complex decisions in psychopharmacology](#)
- » [48 recorded webinars](#)
- » [15 topical newsletters](#)
- » [Discipline-based curricula on recovery](#)

SAMHSA Publications

- » [SAMHSA's Working Definition of Recovery – 2012](#)
- » [Provider Approaches to Recovery-Oriented Systems of Care – 2009](#)
- » [Access to Recovery \(ATR\) Approaches to Recovery-Oriented Systems of Care: Three Case Studies – 2009](#)

Removal of the “Safe Schools/Healthy Students (SS/HS)” Website

Tag: #SCHOOLS

Summary of Findings

Between [January 8, 2019](#) and [May 22, 2019](#), SAMHSA removed the “Safe Schools/Healthy Students (SS/HS)” site from its website. SS/HS was a framework to promote positive mental health in students through violence and suicide prevention.

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Page title: Safe Schools/Healthy Students (SS/HS)
Page status: Removed

- **Before:** [January 8, 2019](#)
- **After:** [May 22, 2019](#)

URL: <https://www.samhsa.gov/safe-schools-healthy-students>

Known archives: No known public archive.

Description of change:

The following content was changed between [January 8, 2019](#) and [May 22, 2019](#):

1. **Removed** the “Safe Schools/Healthy Students (SS/HS)” main page and established a redirect to the “Programs” page at the URL <https://www.samhsa.gov/programs>.
 - The page was the landing page for the website of the SS/HS program, which was a “collaborative effort and comprehensive model to promote mental health among students and create safe and secure schools.”
 - The main page linked to four main subpages, which have been removed:

- (i) [Success Stories](#)
 - The page presented information on “the success grantees have had as they implement the Safe Schools/Healthy Students (SS/HS) model.”
- (ii) [National Evaluation](#)
 - The page presented information on a five-year study of the SS/HS initiative and a link to the [final report](#), which is hosted and [still available](#) on the SAMHSA Store subdomain.
- (iii) [Resources](#)
 - The page provided information on resources available that align with the SS/HS framework
 - The page linked to two subpages:
 - (a) [School Violence Prevention Resources](#)
 - (b) [Suicide Prevention and Post-Suicide Resources](#)
- (iv) [About SS/HS](#)

Note: Between [February 22, 2019](#) and [March 1, 2019](#), a link and description to the “Safe Schools/Healthy Students (SS/HS)” main page was removed from the “Programs” page.


Screenshot: A capture of the [January 8, 2019](https://www.samhsa.gov/safe-schools-healthy-students) version of the “Safe Schools/Healthy Students (SS/HS)” program page. The page was removed by [May 22, 2019](#). Captured by the Internet Archive’s [Wayback Machine](#).

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<https://www.samhsa.gov/safe-schools-healthy-students>
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Programs & Campaigns > Safe Schools/Healthy Students (SS/HS)

Safe Schools/Healthy Students (SS/HS)

SS/HS is a collaborative effort and comprehensive model to promote mental health among students and create safe and secure schools. SS/HS is not accepting grant applications at this time.

Success Stories and Program Evaluation

Read highlights from grantees and see results from a five-year study of SS/HS.

- [Success Stories](#)
- [Evaluation Methods and Results](#)

Publications and Resources

Explore tools and programs related to the SS/HS initiative that address issues such as mental health for students, and school safety.

- [Suicide Prevention and Post-Suicide Coping](#)
- [Youth and School Violence Prevention](#)

About SS/HS

Learn why SS/HS was created, how it works, and more about the program’s model.

- [History and Mission](#)


Additional SAMHSA Resources

Related SAMHSA Topics

- [Prevention of Substance Abuse and Mental Illness](#)
- [School and Campus Health](#)
- [Suicide Prevention](#)
- [Trauma and Violence](#)
- [Underage Drinking](#)

Related SAMHSA Programs & Campaigns

- [National Registry of Evidence-based Programs and Practices](#)
- [“Talk. They Hear You.”](#)
- [Too Smart to Start](#)



NATIONAL SUICIDE PREVENTION LIFELINE
1-800-273-8255 (TALK)

Technical Assistance Center

Find resources and technical assistance at the [National Resource Center for Mental Health Promotion and Youth Violence Prevention](#) to support school safety and promote the health and well-being of youth.


Apply the [Safe Schools framework](#) to your youth violence prevention program.

Project AWARE Grant Program

The [Project Advancing Wellness and Resilience Education \(AWARE\)](#) grant program is based on SAMHSA’s successful SS/HS model.

Project AWARE builds and expands the capacity of state and local educational agencies to increase awareness of mental health and substance use issues among school-age youth.

SAMHSA Bullying Prevention App



Research shows that as little as 15 minutes a day of focused conversation with a child about issues related to bullying can help build self-esteem and prevent bullying.

[Download the SAMHSA KnowBullying App](#) and start the conversation today!

Removal of the “Too Smart To Start” Website

Tag: #SMART

Summary of Findings

Between [August 15, 2017](#) and [September 16, 2017](#), SAMHSA removed the “Too Smart To Start” website. Too Smart To Start was a public initiative that provided research-based strategies and materials at the community level to help prevent underage alcohol abuse. A landing page for the initiative was also removed between [September 10, 2017](#) and [August 21, 2018](#).

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Webpage 1

Page title: Too Smart To Start

Page status: Removed

- **Before:** [August 15, 2017](#)
- **After:** [September 16, 2017](#)

URL: <https://www.toosmarttostart.samhsa.gov/>

Known archives: A public web archive of this page, collected by the Library of Congress is available but has not been captured since 2012. Search for the archived version of the page at <https://webarchive.loc.gov/>.

Description of change:

The following content was changed between [August 15, 2017](#) and [September 16, 2017](#):

1. **Removed** access to the Too Smart To Start main page and all pages in the subdomain www.toosmarttostart.samhsa.gov.
 - All toosmarttostart.samhsa.gov subdomain URLs return errors.
 - Too Smart To Start was a public initiative that [provided](#) “research-based strategies and materials to professionals and volunteers at the community level to help them conduct an underage alcohol use prevention program.”

Webpage 2

Page title: Too Smart To Start
Page status: Removed

- Before: [September 10, 2017](#)
- After: [August 21, 2018](#)

URL: <https://www.samhsa.gov/too-smart-to-start>

Known archives: No known public archive.

Description of change:

The following content was changed between [September 10, 2017](#) and [August 21, 2018](#):

1. Removed the "[Too Smart To Start](#)" page.
 - The page had previously provided information on Too Smart to Start and links to various pages within the toosmartostart.samhsa.gov domain.

Note: Between [February 22, 2019](#) and [March 1, 2019](#), a link and description for the "Too Smart To Start" site was removed from "Programs" page.

Screenshot: A capture of the [August 15, 2017](#) version of the "Too Smart To Start" main page (Webpage 1). The page was removed by [September 16, 2017](#). Captured by the Internet Archive's [Wayback Machine](#).



Removal of the “Women, Children, and Families” Website

Tag: #WOMEN

Summary of Findings

Between [January 9, 2019](#) and [March 9, 2019](#), SAMHSA removed the “Women, Children, and Families” site from its website. The site featured gender-specific resources, including trainings, publications, data, and a contact list of State Women’s Services Coordinators.

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Page title: Women, Children, and Families

Page status: Removed

- **Before:** [January 9, 2019](#)
- **After:** [March 9, 2019](#)

URL: <https://www.samhsa.gov/women-children-families>

Known archives: No known public archive.

Description of change:

The following content was changed between [January 9, 2019](#) and [March 9, 2019](#):

1. **Removed** the “Women, Children, and Families” main page and established a redirect to the “Programs” page at the URL <https://www.samhsa.gov/programs>.
 - The page was the landing page for the “Women, Children, and Families” program, which provided “resources on addressing the behavioral health and recovery of women and their families.”
 - The main page linked to five subpages:
 - (i) [Trainings](#)

- Provided a list of “trainings, conferences, and webinars that help professionals working with women and girls with mental and/or substance use disorders,” including:
 - (a) [Training Tool Box for Addressing the Gender-Specific Service Needs of Women with Substance Use Disorders](#)
 - (b) [Women Matter!](#)
- (ii) [Publications and Resources](#)
 - Provided a list of publications and resources on gender-specific treatment, some of which are still live.
 - Removed resources linked from the page include:
 - (a) [Action Steps for Improving Women's Mental Health – 2009](#)
 - (b) [SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach – 2014](#)
- (iii) [Women's Services Coordinators](#)
 - A list of contact information for Women's Services Coordinators by state.
- (iv) [Evaluations and Data](#)
- (v) [Related Links](#)

Note: Between [February 22, 2019](#) and [March 1, 2019](#), a link and description for the "Women, Children, and Families" site was removed from the “Programs” page.

Screenshot: A capture of the [January 9, 2019](https://www.samhsa.gov/women-children-families) version of the “Women, Children, and Families” program page. The page was removed by [March 9, 2019](#). Captured by the Internet Archive’s [Wayback Machine](#).

INTERNET ARCHIVE <https://www.samhsa.gov/women-children-families> Go OCT JAN FEB 09 2019 2020
50 captures 7 Dec 2014 - 18 Jul 2019

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Programs & Campaigns » Women, Children, and Families

Women, Children & Families
Tools and Resources

Treating Women, Children, and Families
Find current SAMHSA and other government agency resources on addressing the behavioral health and recovery of women and their families.

Online Course
ONLINE COURSE:
Introduction to Women and
Substance Use Disorders
CLICK HERE
for more information and to enroll.

Grants
For available funding opportunities related to treating behavioral health in women, children, and families, visit SAMHSA's [Grant Announcements](#) page.

Training, Conferences, and Webinars
Learn about [conferences, webinars, and training opportunities](#). Access two SAMHSA webinar series that provide research, best practices, and critical thinking about behavioral health, substance abuse, and wellness issues girls and women face. Also find information from past Women's Addiction Services Leadership Institutes, SAMHSA national women's conferences, and other trainings and webinars.

Publications and Resources
Learn more about [gender-specific treatment and resources for women and their families](#). Find links to information about treatment standards for women, core competencies for working with women and girls, trauma and domestic violence, family centered treatment, and other topics vital to addressing the specific treatment and recovery needs of women.

Related Links
Find [additional information](#) about women's substance use, behavioral health, treatment, family supports, trauma, and paths to recovery by visiting other SAMHSA and government websites.

Find a Women's Services Coordinator
Find contact information for [Women's Services Coordinators](#) by state.

Treatment Evaluations and Data
Explore [evaluations and data](#) from SAMHSA's National Survey on Drug Use and Health, the Treatment Episode Data Set, the National Survey of Substance Abuse Treatment Services, the Drug Abuse Warning Network, and other reports.

Addition of the “Know the Risks of Marijuana” page

Tag: #MARIJUANA

Summary of Findings

In early May 2019, SAMHSA added a new page titled, “Know the Risks of Marijuana” to its website. The page features information on the risks of marijuana use.

Change Classification

- (9) Addition of new content, section, or page

Reporting

- N/A

Change Details

Page title: Know the Risks of Marijuana
Page status: Added

- **First IAWM Capture:** [May 15, 2019](#)

URL: <https://www.samhsa.gov/marijuana>

Known archives: No known public archive.

Description of change:

The following content was changed by [May 15, 2019](#):

1. **Added** a new page titled, “Know the Risks of Marijuana” to SAMHSA’s website.
 - The page features information regarding the “negative and long-term effects” of marijuana use, a “marijuana IQ test,” statistics about the rise of use and addiction to marijuana, and links to references and relevant resources.

Note: Between [April 27, 2019](#) and [May 2, 2019](#), a link and description for the “Know the Risks of Marijuana” page were added to the “Programs” page.

Screenshot: A capture of the [May 15, 2019](https://www.samhsa.gov/marijuana) version of the “Know the Risks of Marijuana” page showing the top portion of the newly added page. Captured by the Internet Archive’s [Wayback Machine](https://www.archive.org).



APR
MAY 15
 JUN

22 captures
 15 May 2019 - 31 Aug 2019


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[Newsroom](#)
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[Programs](#) » Know the Risks of Marijuana




Learn About Marijuana Risks

Know the Risks of Marijuana

Marijuana use comes with real risks that can impact a person's health and life.

Marijuana is the most commonly used illegal substance in the U.S. and its use is growing. Marijuana use among all adult age groups, both sexes, and pregnant women is going up. At the same time, the perception of how harmful marijuana use can be is declining. Increasingly, young people today do not consider marijuana use a risky behavior.

But there are real risks for people who use marijuana, especially youth and young adults, and women who are pregnant or nursing. Today's marijuana is stronger than ever before. People can and do become addicted to marijuana.

"Approximately 1 in 10 people who use marijuana will become addicted. When they start before age 18, the rate of addiction rises to 1 in 6."

Know the risks before you use.



Learn About Marijuana and Pregnancy

Marijuana Risks

Marijuana use can have negative and long-term effects:

- 
Brain health: Marijuana can cause permanent IQ loss of as much as 8 points when people start using it at a young age. These IQ points do not come back, even after quitting marijuana.
- 
Mental health: Studies link marijuana use to depression, anxiety, suicide planning, and psychotic episodes. It is not known, however, if marijuana use is the cause of these conditions.
- 
Athletic Performance: Research shows that marijuana affects timing, movement, and coordination, which can harm athletic performance.
- 
Driving: People who drive under the influence of marijuana can experience dangerous effects: slower reactions, lane weaving, decreased coordination, and difficulty reacting to signals and sounds on the road.
- 
Baby's health and development: [Marijuana use during pregnancy](#) may cause fetal growth restriction, premature birth, stillbirth, and problems with brain development.

Marijuana Resources


[Video: Marijuana Use while Pregnant or Breastfeeding \(43 seconds\)](#)


[Video: Build a Brain \(60 seconds\)](#)


[Video: Virtual Assistant \(60 seconds\)](#)


[Quiz: What's Your Marijuana IQ?](#)


[7 Ways Marijuana Can Affect Your Brain Health \(PDF | 901 KB\)](#)

Videos

[Watch and share videos](#) on the risks of marijuana use.





Addition of the “EBP Resource Center” page

Tag: #EBPResource

Summary of Findings

In April 2018, SAMHSA added a new database hosted on a page titled, “EBP Resource Center” to its website. According to the page, the database “contains a collection of scientifically-based resources for a broad range of audiences, including Treatment Improvement Protocols, toolkits, resource guides, clinical practice guidelines, and other science-based resources.”

Change Classification

- (9) Addition of new content, section, or page

Reporting

- N/A

Change Details

Page title: EBP Resource Center

Page status: Added

- First IAWM Capture: [April 23, 2018](#)

URL: <https://www.samhsa.gov/ebp-resource-center>

Known archives: No known public archive.

Description of change:

The following content was changed by [April 23, 2018](#):

1. **Added** a new page titled, “EBP Resource Center” to the SAMHSA website.
 - The page is the landing page for the website of the Evidence-Based Practices (EBP) Resource Center, a newly created center that is, [according to its web-site](#), “part of SAMHSA’s new comprehensive approach to identifying and disseminating clinically sound and scientifically based policies, practices and programs.”
 - The landing page hosts a database of resources, which, [according to the page](#), “contains a collection of scientifically-based resources for a broad range of audiences, including Treatment Improvement Protocols, toolkits, resource guides, clinical practice guidelines, and other science-based resources.”
 - A notice posted on the “NREPP” page (#NREPP) by [August 23, 2018](#) implies that the EBP Resource Center was intended to replace NREPP.

Note: Between [March 31, 2018](#) and [April 7, 2018](#), a link and description for the “EBP Resource Center” was added to the “Programs” page.

Screenshot: A capture of the [April 23, 2018](#) version of the “EBP Resource Center” main page showing the top portion of the newly added page. Captured by the Internet Archive’s [Wayback Machine](#).

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Programs & Campaigns » EBP Resource Center

EVIDENCE-BASED PRACTICES RESOURCE CENTER

Evidence-Based Practices Resource Center

SAMHSA is committed to improving prevention, treatment, and recovery support services for mental and substance use disorders.

This new Evidence-Based Practices Resource Center aims to provide communities, clinicians, policy-makers and others in the field with the information and tools they need to incorporate evidence-based practices into their communities or clinical settings. The Resource Center contains a collection of scientifically-based resources for a broad range of audiences, including Treatment Improvement Protocols, toolkits, resource guides, clinical practice guidelines, and other science-based resources.

[Learn more about the Evidence-Based Practices Resource Center.](#)

Resources

Topic Area - All -

Populations - All - Target Audience - All -

Resource Type - All -

Sort by Title A-Z Items per page 15

Apply

A Collaborative Approach to the Treatment of Pregnant Women with Opioid Use Disorders

This manual offers best practices to states, tribes, and local communities on collaborative treatment approaches for pregnant women living with opioid use disorders, and the risks and benefits associated with medication-assisted treatment (MAT).

Topic Area: Opioid-Specific Resources
Populations: Adults, Children, Pregnant Women, Women, Youth
Target Audience: Care Providers, Clinicians, Community Organizations, Educators, Family and Caregivers, Patients, Policymakers, Prevention Professionals, Program Planners and Administrators, Public
Resource Type: Guidance or Guideline
Substances: Opioids
Conditions: Opioid Use Disorder Treatment, Substance Use Treatment

Adult Drug Court Best Practice Standards - Vol 1

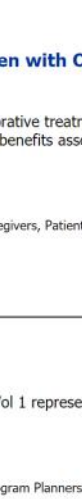
This abstract lists the standards that NADCP has developed for adult Drug Courts. Vol 1 represents the first of two parts covering best practice standards for a variety of topics.

Topic Area: Substance Use Treatment & Recovery
Populations: Adults, People in the Criminal Justice System
Target Audience: Care Providers, Clinicians, Community Organizations, Patients, Policymakers, Program Planners and Administrators
Resource Type: Guidance or Guideline
Conditions: Substance Use Treatment

Technical Assistance

- [Providers' Clinical Support System for Medication Assisted Treatment \(PCSS-MAT\)](#)
- [Addiction Technology Transfer Center \(ATTC\) Network](#)
- [Center for the Application of Prevention Technologies \(CAPT\)](#)
- [Bringing Recovery Supports to Scale Technical Assistance Center Strategy \(BRSS TACS\)](#)
- [SAMHSA-HRSA Center for Integrated Health Solutions \(CIHS\)](#)
- [National Center on Substance Abuse and Child Welfare \(NCSACW\)](#)
- [National Training and Technical Assistance Center for Child, Youth & Family Mental Health \(NTTAC\)](#)

[View more technical assistance resources on the SAMHSA Knowledge Network.](#)



NATIONAL SUICIDE PREVENTION LIFELINE
1-800-273-8255 (TALK)

NATIONAL HELPLINE
1-800-662-4357 (HELP)

Disaster Distress Helpline
1-800-985-5990

Removal of SAMHSA's "Topics" Page

Tag: #TOPICS

Summary of Findings

Between [January 9, 2019](#) and [March 18, 2019](#), SAMHSA removed the "Topics" page and its subpages from its website. The site provided information on topics "that highlight SAMHSA's efforts to prevent and reduce the impact of mental illness and substance use in America's communities."

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Page title: Topics
Page status: Removed

- **Before:** [January 9, 2019](#)
- **After:** [March 18, 2019](#)

URL: <https://www.samhsa.gov/topics> (redirects to <https://www.samhsa.gov/programs>)

Known archives: A public web archive of this page, collected by the Library of Congress, is available, but has not been captured since 2016. Search for the archived version of the page at <https://webarchive.loc.gov/>.

Description of change:

The following content was changed between [January 9, 2019](#) and [March 18, 2019](#):

1. **Removed** the "Topics" page and established a redirect to the "Programs" page at the URL <https://www.samhsa.gov/programs>.
 - The "Topics" page was the landing page for the Topics section of the SAMHSA website, which included around 150 subpages [containing information](#) on topics "that highlight SAMHSA's efforts to prevent and reduce the impact of mental illness and substance use in America's communities."
 - Many of those subpages were removed or altered. See a complete list of "Topics" pages, and their statuses, in [this spreadsheet](#).

Screenshot: A capture of the [January 9, 2019](https://www.samhsa.gov/topics) version of the “Topics” page showing an “A-Z List of All Topics.” The page was removed by [March 18, 2019](https://www.samhsa.gov/topics). Captured by the Internet Archive’s [Wayback Machine](https://www.samhsa.gov/topics).

INTERNET ARCHIVE <https://www.samhsa.gov/topics> Go DEC JAN FEB 09 2019 2020
216 captures
30 Oct 2002 - 18 Jul 2019

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Topics


Learn about the many topics that highlight SAMHSA’s efforts to prevent and reduce the impact of mental illness and substance use in America’s communities.

Featured Topics




[Prevention of Substance Abuse & Mental Illness](#)

Promoting mental health and preventing mental and substance use disorders are fundamental to SAMHSA’s mission to reduce the impact of...



[Behavioral Health Treatments & Services](#)

Learn how health care professionals address common mental illnesses and substance use disorders and how SAMHSA helps people access...



[Recovery and Recovery Support](#)

Learn how recovery-oriented care and recovery support systems help people with mental and/or substance use disorders manage their...

◀ ▶

A-Z List of All Topics

- » Alcohol, Tobacco, and Other Drugs
- » Behavioral Health Equity
- » Behavioral Health Treatments and Services
- » Criminal and Juvenile Justice
- » Data, Outcomes, and Quality
- » Disaster Preparedness, Response, and Recovery
- » Health Disparities
- » Homelessness and Housing
- » Mental and Substance Use Disorders
- » Prescription Drug Misuse and Abuse
- » Prevention of Substance Abuse and Mental Illness
- » Recovery and Recovery Support
- » School and Campus Health
- » Specific Populations
- » Suicide Prevention
- » Trauma and Violence
- » Tribal Affairs
- » Underage Drinking
- » Veterans and Military Families
- » Wellness
- » Workforce

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Removal of “Alcohol, Tobacco, and Other Drugs” Pages

Tag: #ALCOHOL

Summary of Findings

Between January 15, 2019 and January 18, 2019, SAMHSA removed the “Alcohol, Tobacco, and Other Drugs” page (Webpage 1) and its eight subpages, including the “Marijuana (Cannabis)” page (Webpage 2), from its website. The pages contained information, statistics, and links on various drugs.

Change Classification

- (5) Removing an entire webpage or document

Reporting

- N/A

Change Details

Webpage 1

Page title: Alcohol, Tobacco, and Other Drugs

Page status: Removed

- **Before:** [January 1, 2019](#)
- **After:** [February 4, 2019](#)

URL: <https://www.samhsa.gov/atod> (redirects to <https://www.samhsa.gov/find-help/atod>)

Known archives: A public web archive of this page, collected at the request of the Department of Health and Human Services, is available on Archive-It, but has not been captured [since March 2015](#).

Description of change:

The following content was changed between January 15, 2019 and January 17, 2019 (according to our web monitoring software. See the Internet Archive’s Wayback Machine captures of the page, which correspond to a wider time window, for [January 1, 2019](#) and [February 4, 2019](#)):

1. **Removed** the “Alcohol, Tobacco, and Other Drugs” page and established a redirect to <https://www.samhsa.gov/find-help/atod>, a page that provides small amounts of information about alcohol, tobacco, marijuana, and opioids, and provides links to

federal agencies and resources related to drug abuse.

- The page was the landing page for a section on alcohol, tobacco, and other drugs, which provided information, statistics, and links on drugs including alcohol, tobacco, marijuana, stimulants, hallucinogens, and opioids.
- The page linked to eight subpages, which were also removed (between January 16, 2019 and January 18, 2019, according to our web monitoring software. Links to the Internet Archive's Wayback Machine captures of the page, which correspond to a wider time window, are provided below.):
 - (i) The "Alcohol" page ([January 8, 2019](#) and [March 18, 2019](#))
 - (ii) The "Tobacco" page ([January 8, 2019](#) and [January 29, 2019](#))
 - (iii) The "Marijuana (Cannabis)" page (Webpage 2) ([January 8, 2019](#) and [January 29, 2019](#))
 - (iv) The "Stimulants" page ([January 8, 2019](#) and [May 26, 2019](#))
 - (v) The "Hallucinogens" page, ([January 8, 2019](#) and [June 18, 2019](#))
 - (vi) The "Opioids" page ([December 3, 2018](#) and [March 21, 2019](#))
 - (vii) The "Other Drugs" page ([January 8, 2019](#) and [June 5, 2019](#))
 - (viii) The "Publications and Resources" page ([January 8, 2019](#) and [June 26, 2019](#))

Webpage 2

Page title: Marijuana (Cannabis)

Page status: Removed

- **Before:** [January 8, 2019](#)
- **After:** [January 29, 2019](#)

URL: <https://www.samhsa.gov/atod/marijuana> (redirects to <https://www.samhsa.gov/find-help/atod>)

Known archives: No known public archive.

Description of change:


The following content was changed between January 16, 2019 and January 18, 2019 (according to our web monitoring software. See the Internet Archive's Wayback Machine captures of the page, which correspond to a wider time window, for [January 8, 2019](#) and [January 29, 2019](#)):

1. **Removed** the "Marijuana (Cannabis)" page and established a redirect to <https://www.samhsa.gov/find-help/atod>, a page that provides small amounts of information about alcohol, tobacco, marijuana, and opioids, and provides links to federal agencies and resources related to drug abuse.
 - (i) The page is an example of one of the eight subpages removed from the "Alcohol, Tobacco, and Other Drugs" section of the SAMHSA website.
 - (ii) The page included introductory statistics and information, as well as information organized under the headings "Surveillance," "Laws and Policies," and "Preventing Youth Marijuana Use."

Screenshot: A capture of the top portion of the [January 8, 2019](#) version of the “Marijuana (Cannabis)” page. This page was one of eight subpages removed from the “Alcohol, Tobacco, and Other Drugs” section of the SAMHSA website. Captured by the Internet Archive’s Wayback Machine.

INTERNET ARCHIVE
waybackmachine
https://www.samhsa.gov/atod/marijuana
Go NOV JAN FEB 08 2017 2019 2020
31 captures
27 Jul 2016 - 26 Jun 2019

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Topics » Alcohol, Tobacco, and Other Drugs » Marijuana (Cannabis)

Alcohol, Tobacco, and Other Drugs
Alcohol
Tobacco
Marijuana
Stimulants
Hallucinogens
Opioids
Other Drugs
Publications and Resources

Marijuana (Cannabis)

Get facts on marijuana—the most commonly used illicit drug in the U.S.—including its effects and information on marijuana surveillance, laws and policies, and prevention guides.

Marijuana, or Cannabis, refers to the dried leaves, flowers, stems, and seeds from the hemp plant *Cannabis sativa*, which contains the psychoactive (mind-altering) chemical *delta-9-tetrahydrocannabinol* (THC), as well as other related compounds. This plant material can also be concentrated in a resin called hashish or a sticky black liquid called hash oil. THC is believed to be the main chemical ingredient that produces the psychoactive effect. Marijuana is often smoked in hand-rolled cigarettes (*joints*), pipes, or water pipes (*bongs*). People also smoke it in *blunts*, which are partly or completely emptied cigars filled with marijuana. Marijuana is also mixed in food (edibles) or brewed as tea.

The short-term effects of marijuana include problems with memory and learning, distorted perception, difficulty in thinking and problem-solving, and loss of coordination. Among youth, heavy cannabis use is associated with cognitive problems and [increased risk of mental illness](#).

Learn more about [marijuana](#).

Surveillance




Monitoring trends that impact health, such as trends in substance use, is important to inform services and policy. This is especially true for marijuana given recent changes in state laws and policies. SAMHSA tracks these trends using data from the National Survey on Drug Use and Health (NSDUH). NSDUH collects information about the use of illicit drugs, alcohol, and tobacco, including marijuana, among noninstitutionalized people aged 12 or older in the United States.

Find historical NSDUH trend data from 2002 to 2014 on use, attitudes, and perceptions of marijuana at the national level, access the [surveillance summary report in the CDC Morbidity and Mortality Weekly Report](#) and [state level](#).

According to the [NSDUH 2015 annual report – 2015](#) (PDF | 2.15 MB):

- Marijuana use in the past month increased from 6.2% in 2002 to 8.3% (approximately 22.2 million people) in 2015 among people aged 12 or older.
- Marijuana use was most prevalent among people aged 18 to 25 (with 19.8% using it in the past month)
- 7.0% of people aged 12 to 17 reported marijuana use in the past month

Laws and Policies

Data and Statistics

- » [Behavioral Health Barometer – 2014](#) (PDF | 3.4 MB)
- » [Drug Abuse Warning Network \(DAWN\)](#)
- » [National Survey on Drug Use and Health \(NSDUH\)](#)
- » [Substance Abuse and Mental Health Data Archive \(SAMHDA\)](#)
- » [Treatment Episode Data Set \(TEDS\)](#)

Alteration of “Disaster Preparedness, Response, and Recovery” Page

Tag: #DISASTER

Summary of Findings

Between January 14, 2019 and January 18, 2019, SAMHSA altered the “Disaster Preparedness, Response, and Recovery” page on its website to remove information about cultural awareness and competence. It also removed three subpages related to disaster preparedness, response, and recovery. The pages contained information and links relating to SAMHSA’s efforts, grants, and resources relating to disaster preparedness, response, and recovery.

Change Classification

- (4) Altering or removing an entire pertinent section of a webpage or collection of webpages
- (5) Removing an entire webpage or document

Reporting

- N/A

Change Details

Page title: “Disaster Preparedness, Response, and Recovery”

Page status: Altered/Removed

- **Before:** [December 3, 2018](#)
- **After:** [February 12, 2019](#)

URL: <https://www.samhsa.gov/disaster-preparedness>

Known archives: A public web archive of this page, collected at the request of the Department of Health and Human Services, is available on Archive-It, but has not been captured [since March 2015](#).

Description of change:

The following content was changed between January 14, 2019 and January 16, 2019 (according to our web monitoring software. See the Internet Archive's Wayback Machine captures of the page, which correspond to a wider time window, for [December 3, 2018](#) and [February 12, 2019](#)):

1. **Altered** the “Disaster Preparedness, Response, and Recovery” page.

- (i) Altered the organization of sentences and paragraphs, and made minor grammatical changes.

- (ii) Removed the following text and links:

The SAMHSA Disaster Behavioral Health Information Series (DBHIS) [special installment on resilience and stress management](#) provides a collection of materials and tips that address resilience.

One resource available to assist in the management of stress is SAMHSA's [Disaster Distress Helpline](#) – 1-800-985-5990. The Disaster Distress Helpline provides free, confidential crisis counseling and support 24/7 to people experiencing stress, anxiety, and other depression-like symptoms.

States and local governments are working to help their residents become more resilient in order to minimize post-disaster health consequences and promote recovery.

- (iii) Added the following section and links.

Related Links

- [SAMHSA's Disaster Distress Helpline](#)
- [SAMHSA's Disaster App](#)
- [Behavioral Health Disaster Response Mobile App](#)

- (iv) Removed the following text and links:

Learn more about:

- [SAMHSA's Efforts for Disaster Preparedness, Response, and Recovery](#)
- [SAMHSA and Partner Agency Grants Related to Disaster Preparedness, Response, and Recovery](#)
- [Publications and Resources on Disaster Preparedness, Response, and Recovery](#)

Cultural Awareness and Competency

People's reactions to disaster and stress, and their coping skills, can differ based on their beliefs, cultural traditions, or economic and social status. Behavioral health workers increasingly recognize the importance of cultural competence in developing, planning, and delivering effective disaster behavioral health services.

Learn more about applying cultural awareness to disaster behavioral health planning from the following:

- [Webinar presented by SAMHSA's Disaster Technical](#)

[Assistance Center \(DTAC\)](#)

- [Webinar to assist behavioral health responders in providing culturally aware disaster behavioral health services for children and families](#)

SAMHSA provides [Tips for Talking With and Helping Children and Youth Cope After a Disaster or Traumatic Event: A Guide for Parents, Caregivers, and Teachers – 2012](#) on helping children and youth after a disaster or traumatic event. SAMHSA also provides [the guide in Spanish](#).

For more information, visit the [Disaster Preparedness and Recovery publications page in the SAMHSA Store](#).

- The “Disaster Preparedness, Response, and Recovery” page was the landing page for a section on disaster preparedness, response and recovery, which provided information about SAMHSA’s efforts, partnerships, and resources for dealing with disasters.
- The page linked to three subpages, which were removed (between January 16, 2019 and January 18, 2019, according to our web monitoring software. Links to the Internet Archive’s Wayback Machine captures of the page, which correspond to a wider time window, are provided below.):
 - (i) The “SAMHSA’s Efforts” page ([January 9, 2019](#) and [June 26, 2019](#))
 - (ii) The “SAMHSA and Partner Agency Grant” page ([January 8, 2019](#) and [June 26, 2019](#)).
 - (iii) The “Publications and Resources” page ([January 9, 2019](#) and [June 26, 2019](#)).

INTERNET ARCHIVE
Wayback Machine
https://www.samhsa.gov/disaster-preparedness
80 captures
10 Oct 2014 - 10 Aug 2019

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Topics » Disaster Preparedness, Response, and Recovery

Disaster Preparedness, Response, and Recovery

SAMHSA's Efforts

SAMHSA and Partner Agency Grants

Publications and Resources

Disaster Preparedness, Response, and Recovery

SAMHSA provides communities and responders with behavioral health resources that help them prepare, respond, and recover from disasters.

Overview

Disasters can occur naturally (such as tornadoes, hurricanes, earthquakes, floods, wildfires, mudslides, or drought) or be human-caused (such as mass shootings, chemical spills, or terrorist attacks). Preparing for, responding to, and recovering from disasters and traumatic events is essential to the behavioral health (mental health and substance use) of individuals and communities alike.

When people experience a disaster, they may experience a variety of reactions, many of which are natural responses to difficult situations. Most people show resilience after a disaster. Resilience is the ability to bounce back, cope with adversity, and endure during difficult situations. Thankfully, resilience in disaster recovery is ordinary, not extraordinary, and people regularly demonstrate this ability. Using supportive resources to address stress and other hardships is a critical component of resilience. The SAMHSA Disaster Behavioral Health Information Series (DBHIS) [special installment on resilience and stress management](#) provides a collection of materials and tips that address resilience.

It is also common for people to show signs of stress after exposure to a disaster making it important to monitor the physical and emotional health of those affected as well as those responding to the needs of others. One resource available to assist in the management of stress is SAMHSA's [Disaster Distress Helpline](#) – 1-800-985-5990. The Disaster Distress Helpline provides free, confidential crisis counseling and support 24/7 to people experiencing stress, anxiety, and other depression-like symptoms.

States and local governments are working to help their residents become more resilient in order to minimize post-disaster health consequences and promote recovery. SAMHSA's [Disaster Technical Assistance Center \(DTAC\)](#) supports SAMHSA's efforts to prepare states, territories, and tribes to deliver an effective behavioral health response to disasters. The [SAMHSA Behavioral Health Disaster Response Mobile App](#) is designed to assist those responding to disasters ensure that resources are at responders' fingertips.

Although everyone reacts differently to disasters, some of those affected may suffer from serious mental or emotional distress. These individuals may develop or experience exacerbation of existing mental health or substance use problems, including for example, post-traumatic stress disorder (PTSD). Finding treatment in a timely fashion will help individuals minimize negative outcomes. SAMHSA provides a [treatment locator](#) and trains responders how to recognize and respond to symptoms of PTSD, depression, or severe reactions.

Learn more about:

- [SAMHSA's Efforts for Disaster Preparedness, Response, and Recovery](#)
- [SAMHSA and Partner Agency Grants Related to Disaster Preparedness, Response, and Recovery](#)
- [Publications and Resources on Disaster Preparedness, Response, and Recovery](#)

Cultural Awareness and Competency

People's reactions to disaster and stress, and their coping skills, can differ based on their beliefs, cultural traditions, or economic and social status. Behavioral health workers increasingly recognize the importance of cultural competence in developing, planning, and delivering effective disaster behavioral health services.

Learn more about applying cultural awareness to disaster behavioral health planning from the following:

- [Webinar presented by SAMHSA's Disaster Technical Assistance Center \(DTAC\)](#)
- [Webinar to assist behavioral health responders in providing culturally aware disaster behavioral health services for children and families](#)

SAMHSA provides [Tips for Talking With and Helping Children and Youth Cope After a Disaster or Traumatic Event: A Guide for Parents, Caregivers, and Teachers – 2012](#) on helping children and youth after a disaster or traumatic event. SAMHSA also provides [the guide in Spanish](#).

For more information, visit the [Disaster Preparedness and Recovery publications page](#) in the SAMHSA Store.

Last Updated: 09/20/2017

BEHAVIORAL HEALTH TREATMENT LOCATOR

Disaster Distress Helpline
1-800-985-5990

**PREPARE
RESPOND
RECOVER**

Be ready.
Be prepared.
Be confident.

DISASTER Mobile App

Data and Statistics

- » [Centre for Research on the Epidemiology of Disasters Emergency Events Database](#)
- » [Disaster Declarations from the Federal Emergency Management Agency \(FEMA\)](#)
- » [Disasters and Substance Abuse or Dependence – U.S. Department of Veterans Affairs](#)

Screenshot: A capture of the [December 3, 2018](#) (previous page) and [February 12, 2019](#) (below) versions of the “Disaster Preparedness, Response, and Recovery” page. Captured by Internet Archive’s Wayback Machine.

INTERNET ARCHIVE
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Disaster Preparedness, Response, and Recovery

SAMHSA provides communities and responders with behavioral health resources that help them prepare, respond, and recover from disasters.

Disasters can occur naturally (e.g., tornadoes, hurricanes, earthquakes, floods, wildfires, mudslides, or drought) or be human-caused (e.g., mass shootings, chemical spills, or terrorist attacks). Preparing for, responding to, and recovering from disasters and traumatic events is essential to the behavioral health of individuals and communities alike.

When people experience a disaster, they may experience a variety of reactions, many of which are natural responses to difficult situations. Most people show resilience after a disaster. Resilience is the ability to bounce back, cope with adversity, and endure during difficult situations. Thankfully, resilience in disaster recovery is ordinary, not extraordinary, and people regularly demonstrate this ability. Using supportive resources to address stress and other hardships is a critical component of resilience.

It is also common for people to show signs of stress after exposure to a disaster making it important to monitor the physical and emotional health of those affected as well as those responding to the needs of others. Although everyone reacts differently to disasters, some of those affected may suffer from serious mental or emotional distress. These individuals may develop or experience exacerbation of existing mental health or substance use problems, including for example, post-traumatic stress disorder. Finding treatment in a timely fashion will help individuals minimize negative outcomes.

SAMHSA’s [Disaster Technical Assistance Center \(DTAC\)](#) supports SAMHSA’s efforts to prepare states, territories, and tribes to deliver an effective behavioral health response to disasters. The [SAMHSA Behavioral Health Disaster Response Mobile App](#) is designed to assist those responding to disasters ensure that resources are at responders’ fingertips. SAMHSA also provides a [treatment locator](#) and trains responders how to recognize and respond to symptoms of PTSD, depression, or severe reactions.



Disaster Distress Helpline

1-800-985-5990



Be ready.
Be prepared.
Be confident.

DISASTER Mobile App



Data and Statistics

- » [Centre for Research on the Epidemiology of Disasters Emergency Events Database](#)
- » [Disaster Declarations from the Federal Emergency Management Agency \(FEMA\)](#)
- » [Disasters and Substance Abuse or Dependence](#) – U.S. Department of Veterans Affairs

Related Links

- [SAMHSA’s Disaster Distress Helpline](#)
- [SAMHSA’s Disaster App](#)
- [Behavioral Health Disaster Response Mobile App](#)

Last Updated: 01/17/2019

Removal of “Homelessness and Housing” Pages

Tag: #HOMELESS

Summary of Findings

Between December 14, 2018 and December 16, 2018, SAMHSA removed the “Homelessness and Housing” page (Webpage 1) from its website. After January 9, 2019, SAMHSA also removed five subpages, including the “Trauma and Trauma-Informed Care” page (Webpage 2), from its website. The pages contained information and statistics on homelessness, its relationship with poverty and trauma, and SAMHSA’s programs, grants, and publications relating to homelessness.

Change Classification

- (5) Removing an entire webpage or document

Reporting

- N/A

Change Details

Webpage 1

Page title: Homelessness and Housing

Page status: Removed

Before: [December 10, 2018](#)

After: [December 21, 2018](#)

URL: <https://www.samhsa.gov/homelessness-housing> (redirects to <https://www.samhsa.gov/homelessness-programs-resources>)

Known archives: A public web archive of this page, collected at the request of the Department of Health and Human Services, is available on Archive-It, but has not been captured [since March 2015](#).

Description of change:

The following content was changed between December 14, 2018 and December 16, 2018 (according to our web monitoring software. See the Internet Archive’s Wayback Machine captures of the page, which correspond to a wider time window, for [December 10, 2018](#) and [December 21, 2018](#)):

1. **Removed** the “Homelessness and Housing” page and established a redirect to the “Homelessness Programs and Resources” page at the URL <https://www.samhsa.gov/homelessness-programs-resources>.

- The “Homelessness and Housing” page was the landing page for a section on homelessness and housing on the SAMHSA website, which provided information and statistics on homelessness, its relationship with poverty, trauma among the homeless, and SAMHSA’s programs, grants, and publications relating to homelessness.
- The page linked to five subpages, which were removed between January 8, 2019 and June 26, 2019. (The wide time frame reflects the sporadic captures in the Internet Archive’s Wayback Machine, for which captures are provided in parentheses below):
 - (i) The “Poverty and Housing” page ([January 8, 2019](#) and [June 26, 2019](#))
 - (ii) The “SAMHSA’s Efforts” page ([January 8, 2019](#) and [June 26, 2019](#))
 - (iii) The “Trauma and Trauma-Informed Care” page (Webpage 2) ([January 8, 2019](#) and [June 26, 2019](#))
 - (iv) The “Grants” page (March 14, 2019 and March 16, 2019 according to our monitoring software; see IAWM captures for [January 8, 2019](#) and [June 26, 2019](#))
 - (v) The “Publications and Resources” page ([January 8, 2019](#) and [June 26, 2019](#))

Webpage 2

Page title: Trauma and Trauma-Informed Care

Page status: Removed

- **Before:** [January 8, 2019](#)
- **After:** [June 26, 2019](#)

URL: <https://www.samhsa.gov/homelessness-housing/trauma-informed-care> (redirects to <https://www.samhsa.gov/homelessness-programs-resources>)

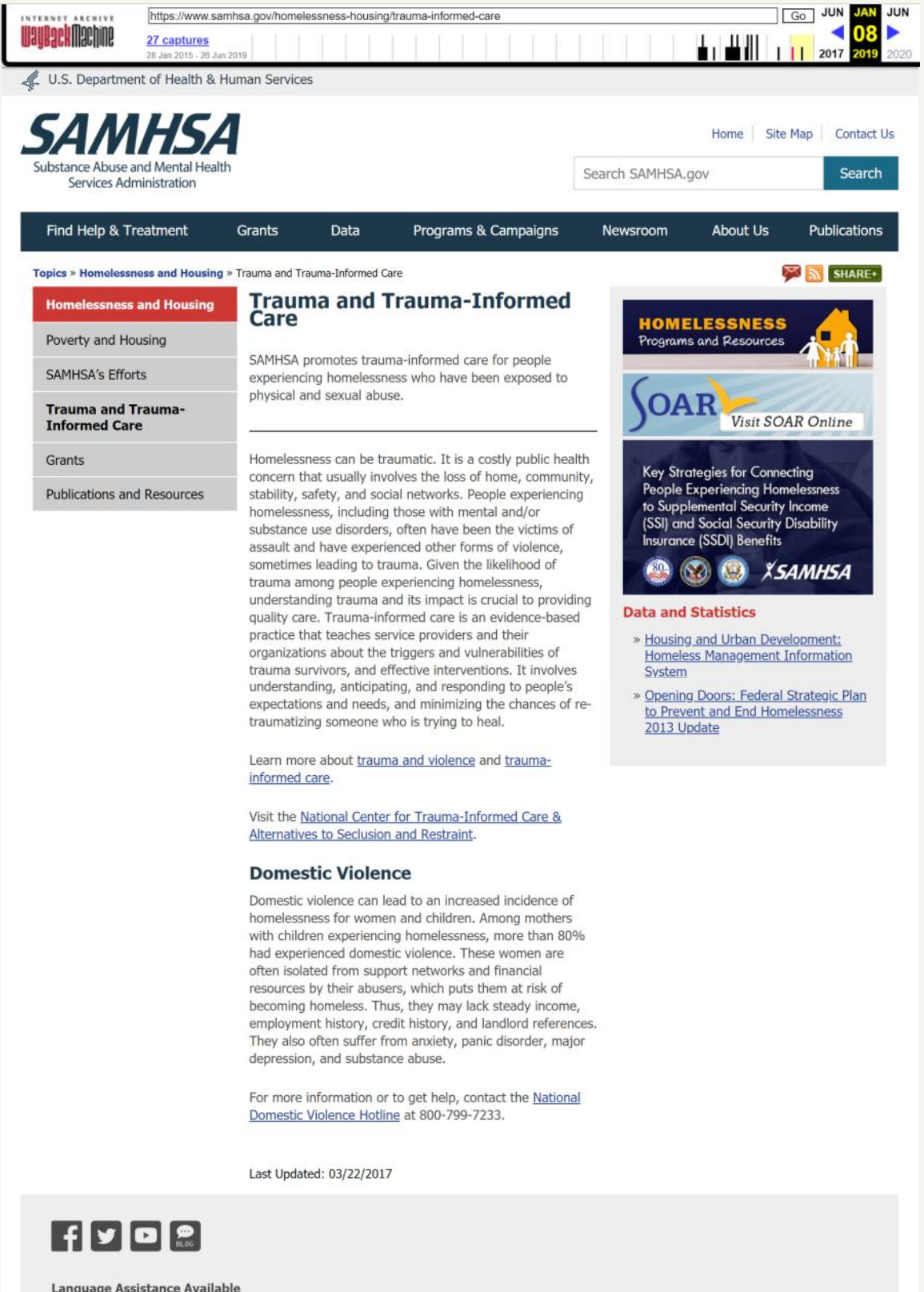
Known archives: A public web archive of this page from [February 14, 2017](#), collected at the request of the Federal Depository Library Program Web Archive, is available on Archive-It.

Description of change:

The following content was changed between [January 8, 2019](#) and [June 26, 2019](#) (the wide time frame reflects the sporadic captures in IAWM):

1. **Removed** the “Trauma and Trauma-Informed Care” page and established a redirect to the “Homelessness Programs and Resources” page at the URL <https://www.samhsa.gov/homelessness-programs-resources>.
 - The page is an example of one of the five subpages removed from the “Homelessness and Housing” section of the SAMHSA website.
 - The page included introductory information on trauma and homelessness and a section on domestic violence.

Screenshot: A capture of the [January 8, 2019](#) version of the “Trauma and Trauma-Informed Care” page. This page was one of five subpages removed from the “Homelessness and Housing” section of the SAMHSA website. Captured by Internet Archive’s [Wayback Machine](#).



Removal of “Specific Populations” Pages

Tag: #POPULATIONS

Summary of Findings

Between December 17, 2018 and December 19, 2018, SAMHSA removed the “Specific Populations” page (Webpage 1) from its website. After January 8, 2019, SAMHSA also removed five subpages, including the “Racial and Ethnic Minority Populations” page (Webpage 2), the “Age- and Gender-Based Populations” page (Webpage 3), the “Serving the Needs of Diverse Populations” page (Webpage 4), and the “Other Specific Populations” page, from its website. The pages contained information relating to different population groups, cultural awareness and competence, and SAMHSA’s publications relating to different population groups.

Change Classification

- (5) Removing an entire webpage or document

Reporting

- N/A

Change Details

Webpage 1

Page title: Specific Populations

Page status: Removed

- **Before:** [December 7, 2018](#)
- **After:** [December 21, 2018](#)

URL: <https://www.samhsa.gov/topics/specific-populations> (redirects to <https://www.samhsa.gov/behavioral-health-equity>)

Known archives: No known public archive.

Description of change:

The following content was changed between December 17, 2018 and December 19, 2018 (according to our web monitoring software. See the Internet Archive’s Wayback Machine captures of the page, which correspond to a wider time window, for [December 7, 2018](#) and [December 21, 2018](#)):

1. **Removed** the “Specific Populations” page and established a redirect to <https://www.samhsa.gov/behavioral-health-equity>.
 - The “Specific Populations” page was the landing page for a section of SAMHSA’s website about its public health mission as it relates to different

population groups including LGBTQ individuals, children, and Alaska Natives, which provided information relating to cultural awareness and competence, and SAMHSA's publications relating to different population groups.

- The "Specific Populations" page included an overview of SAMHSA's public health mission and sections on "cultural and linguistic competency," "Behavioral Health Equity," and "Behavioral Health Workforce."
- The page linked to five subpages, which were removed between January 8, 2019 and June 26, 2019. (The wide time frame reflects the sporadic captures in the Internet Archive's Wayback Machine, for which captures are provided in parentheses below):
 - (i) The "Racial and Ethnic Minority Populations" page (Webpage 2) ([January 8, 2019](#) and [April 3, 2019](#))
 - (ii) The "Age- and Gender-Based Populations" page (Webpage 3), which contained sections on "children, youth, and families," "men and women," "pregnant women and infants," "lesbian, gay, bisexual, and transgender (LGBT) individuals," and "older adults" ([March 5, 2019](#) and [March 19, 2019](#))
 - (iii) The "Serving the Needs of Diverse Populations" page (Webpage 4), which included sections on "behavioral health disparities and cultural awareness," specific populations (Minorities and American Indians and Alaska Natives), "financing the workforce," and "data on the workforce." ([January 9, 2019](#) and [June 26, 2019](#))
 - (iv) The "Other Specific Populations" page (Webpage 5) ([January 8, 2019](#) and [May 2, 2019](#))
 - (v) The "Publications and Resources" page ([January 9, 2019](#) and [June 26, 2019](#))

Webpage 2

Page title: Racial and Ethnic Minority Populations

Page status: Removed

- **Before:** [January 8, 2019](#)
- **After:** [April 3, 2019](#)

URL: <https://www.samhsa.gov/specific-populations/racial-ethnic-minority> (redirects to <https://www.samhsa.gov/programs>)

Known archives: A public web archive of this page from June 12, 2017, collected by the Library of Congress is available. Search for the archived version of the page at <https://webarchive.loc.gov/>.

Description of change:

The following content was changed between [January 8, 2019](#) and [April 3, 2019](#):

1. **Removed** the "Racial and Ethnic Minority Populations" page and established a redirect to <https://www.samhsa.gov/programs>.
 - The page is an example of one of the five subpages removed from the "Specific Populations" section of the SAMHSA website.
 - The page included information on illegal drug use, alcohol use, and substance dependence or abuse for different racial and ethnic groups.

Webpage 3

Page title: Age- and Gender-Based Populations

Page status: Removed

- **Before:** [March 5, 2019](#)
- **After:** [March 19, 2019](#)

URL: <https://www.samhsa.gov/specific-populations/age-gender-based> (redirects to <https://www.samhsa.gov/programs>)

Known archives: A public web archive of this page from [August 24, 2017](#), collected at the request of the Federal Depository Library Program Web Archive, is available on Archive-It.

Description of change:

The following content was changed between [March 5, 2019](#) and [March 19, 2019](#):

1. **Removed** the “Age- and Gender-Based Populations” page and established a redirect to <https://www.samhsa.gov/programs>
 - The page is an example of one of the five subpages removed from the “Specific Populations” section of the SAMHSA website.
 - The page included sections on mental health and substance use relating to “children, youth, and families,” “men and women,” “pregnant women and infants,” “lesbian, gay, bisexual, and transgender (LGBT) individuals,” and “older adults.”

Webpage 4

Page title: Serving the Needs of Diverse Populations

Page status: Removed

- **Before:** [January 9, 2019](#)
- **After:** [June 26, 2019](#)

URL: <https://www.samhsa.gov/specific-populations/serving-needs-diverse-populations> (redirects to <https://www.samhsa.gov/behavioral-health-equity>)

Known archives: No known public archive.

Description of change:

The following content was changed between [January 9, 2019](#) and [June 26, 2019](#) (the wide time frame reflects the sporadic captures in IAWM):

1. **Removed** the “Serving the Needs of Diverse Populations” page and established a redirect to <https://www.samhsa.gov/behavioral-health-equity>.
 - The page is an example of one of the five subpages removed from the “Specific Populations” section of the SAMHSA website.
 - The page included sections on “behavioral health disparities and cultural awareness,” specific populations (Minorities and American Indians and Alaska Natives), “financing the workforce,” and “data on the workforce.”

Webpage 5

Page title: Other Specific Populations

Page status: Removed

- **Before:** [January 8, 2019](#)
- **After:** [May 2, 2019](#)

URL: <https://www.samhsa.gov/specific-populations/other> (redirects to <https://www.samhsa.gov/behavioral-health-equity>)

Known archives: No known public archive.

Description of change:

The following content was changed between [January 8, 2019](#) and [May 2, 2019](#) (the wide time frame reflects the sporadic captures in IAWM):

1. **Removed** the “Other Specific Population” page and established a redirect to <https://www.samhsa.gov/behavioral-health-equity>
 - The page is an example of one of the five subpages removed from the “Specific Populations” section of the SAMHSA website.
 - The page included information on mental illness and substance abuse in people who live in rural areas, people experiencing homelessness, people involved with the criminal justice system, and veterans and military families.

Screenshot: A capture of the top portion of the [January 8, 2019](https://www.samhsa.gov/specific-populations/racial-ethnic-minority) version of the “Racial and Ethnic Minority Populations” page (Webpage 2). This page was one of five subpages removed from the “Specific Populations” section of the SAMHSA website. Captured by the Internet Archive’s [Wayback Machine](https://www.archive.org/web/).

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<https://www.samhsa.gov/specific-populations/racial-ethnic-minority> Go NOV JAN APR
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Topics » Specific Populations » Racial and Ethnic Minority Populations

Specific Populations

Racial and Ethnic Minority Populations

Age- and Gender-Based Populations

Serving the Needs of Diverse Populations

Other Specific Populations

Publications and Resources

Racial and Ethnic Minority Populations

Learn how SAMHSA’s programs, initiatives, and resources work to improve the behavioral health of racial and ethnic minority populations.

Racial and ethnic minorities currently make up about a third of the population of the nation and are expected to become a majority by 2050. These diverse communities have unique behavioral health needs and experience different rates of mental and/or substance use disorders and treatment access.

Communities of color tend to experience greater burden of mental and substance use disorders often due to poorer access to care; inappropriate care; and higher social, environmental, and economic risk factors.

Learn more about [behavioral health issues and diverse racial and ethnic communities](#).

African Americans

There are about 44.5 million [African Americans](#) in the United States (about 14.2% of the total population). According to data from the [National Survey on Drug Use and Health \(NSDUH\) – 2014](#) (PDF | 3.4 MB):

- The rate of illegal drug use in the last month among African Americans ages 12 and up in 2014 was 12.4%, compared to the national average of 10.2%.
- The rate of binge drinking (drinking five or more drinks on a single occasion for men) among African Americans ages 12 and up was 21.6%—compared with the national average of 23%.
- African Americans ages 12 to 20 in 2014 reported past-month alcohol use at a rate of 17.3%, compared with the national average of 22.8%. Past-month underage binge drinking was 8.5% for African American youth, while the national average was 13.8%.

Rates of mental disorders are generally low among African Americans. In 2014, 3.8% of African American adults ages 18 and older had a past-year mental illness and a substance use disorder, while the national average was 3.3%. The 2014 national average for any mental illness in the past year for adults was 18.1%, compared to 16.3% for African American adults.

[African Americans face higher rates of death from motor](#)

Find Help

BEHAVIORAL HEALTH TREATMENT LOCATOR

Data and Statistics

- » [Behavioral Health Barometer, 2014](#)
- » [Substance Use and Mental Health Indicators in the United States: Results from the 2015 National Survey on Drug Use and Health](#)

Removal of “Veterans and Military Families” Pages

Tag: #VETERANS

Summary of Findings

Between December 14, 2018 and December 16, 2018, SAMHSA removed the “Veterans and Military Families” page (Webpage 1) from its website. After January 9, 2019, SAMHSA also removed six subpages, including the “Reintegration into Civilian Life” page (Webpage 2), from its website. The pages contained information relating to substance dependency and mental illness among veterans and SAMHSA’s programs, grants, and publications relating to veterans and military families.

Change Classification

- (5) Removing an entire webpage or document

Reporting

- N/A

Change Details

Webpage 1

Page title: Veterans and Military Families

Page status: Removed

- **Before:** [December 11, 2018](#)
- **After:** [December 21, 2018](#)

URL: <https://www.samhsa.gov/veterans-military-families> (redirects to <https://www.samhsa.gov/smvf-ta-center>)

Known archives: A public web archive of this page, collected by the Library of Congress is available from May 28, 2018. Search for the archived version of the page at <https://webarchive.loc.gov/>.

Description of change:

The following content was changed between December 14, 2018 and December 16, 2018 (according to our web monitoring software. See the Internet Archive’s Way-back Machine captures of the page, which correspond to a wider time window, for [December 11, 2018](#) and [December 21, 2018](#)):

1. **Removed** the “Veterans and Military Families” main page and established a redirect to <https://www.samhsa.gov/smvf-ta-center>:

- The “Veterans and Military Families” page was the landing page for a section on veterans and military families on the SAMHSA website, which provided information relating to substance dependency and mental illness among veterans and SAMHSA’s programs, grants, and publications relating to veterans and military families.
- The main page linked to six subpages, which were removed between January 8, 2019 and August 30, 2019 (The wide time frame reflects the sporadic captures in the Internet Archive’s Wayback Machine, for which captures are provided in parentheses below.):
 - (i) The “SAMHSA’s Efforts” page ([January 8, 2019](#) and [August 30, 2019](#))
 - (ii) The “Critical Issues” page ([January 8, 2019](#) and [July 15, 2019](#))
 - (iii) The “At-Risk Populations” page ([January 8, 2019](#) and [August 30, 2019](#))
 - (iv) The “Reintegration into Civilian Life” (Webpage 2) (March 12, 2019 and March 14, 2019 according to our monitoring software; see IAWM captures for [January 8, 2019](#) and [June 26, 2019](#))
 - (v) The “Grants” page (March 13, 2019 and March 15, 2019 according to our monitoring software; see IAWM captures for [January 9, 2019](#) and [June 27, 2019](#))
 - (vi) The “Publications and Resources” page ([January 24, 2019](#) and [July 1, 2019](#))

Webpage 2

Page title: Reintegration into Civilian Life

Page status: Removed

- **Before:** [January 8, 2019](#)
- **After:** [June 26, 2019](#)

URL: <https://www.samhsa.gov/veterans-military-families/reintegration-into-civilian-life>

Known archives: A public web archive of this page, collected at the request of the Department of Health and Human Services, is available on Archive-It, but has not been captured [since March 2015](#).

Description of change:

The following content was changed between between March 12, 2019 and March 14, 2019 (according to our monitoring software; see IAWM captures for [January 8, 2019](#) and [June 26, 2019](#)):

1. **Removed** the “Reintegration into Civilian Life” page and established a redirect to <https://www.samhsa.gov/programs>.
 - The page is an example of one of the six subpages removed from the “Veterans and Military Families” section of the SAMHSA website.
 - The page included introductory information and links to programs that provide assistance for veterans returning to civilian life.

Screenshot: A capture of the [January 8, 2019](#) version of the “Reintegration into Civilian Life” page. This page was one of six subpages removed from the “Veterans and Military Families” section of the SAMHSA website. Captured by the Internet Archive’s [Way-back Machine](#)

<https://www.samhsa.gov/veterans-military-families/reintegration-into-civilian-life>
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19 Feb 2015 - 26 Jun 2019

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Veterans and Military Families

SAMHSA's Efforts
Critical Issues
At-Risk Populations
Reintegration into Civilian Life
Grants
Publications and Resources

Reintegration into Civilian Life

SAMHSA offers several paths to help ease reintegration for military service men and women with behavioral health issues.

Military service men and women returning from combat often face civilian life reintegration challenges. SAMHSA offers several pathways to ease reintegration, with an emphasis on medical, behavioral health, housing, and employment-seeking issues.

- The [Real Warriors Campaign](#) is a multimedia public awareness campaign designed to encourage help-seeking behavior among service members, veterans, and military families coping with behavioral health concerns.
- The [Resiliency Programs for Military Families](#) webpage at the [Real Warriors Campaign](#) website offers numerous programs that can help military families build resiliency and thrive under the common pressures of military family life.
- [Make the Connection](#) connects veterans and their friends and family members with information, resources, and solutions to issues affecting their lives.

Data and Statistics

- » [Treatment Episode Data Set \(TEDS\)](#)
- » [Behavioral Health, United States – 2012](#)

Last Updated: 07/02/2015

Language Assistance Available

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Alterations and Removal of “Workforce” pages

Tag: #WORKFORCE

Summary of Findings

Between January 14, 2019 and January 16, 2019, SAMHSA altered the “Workforce” page (Webpage 1) on its website. After January 8, 2019, SAMHSA also removed five subpages, including the “Diverse Populations” page (Webpage 2), from its website. The pages contained information, statistics, and links on SAMHSA’s efforts to develop a trained and culturally competent behavioral health workforce.

Change Classification

- (4) Altering or removing an entire pertinent section of a webpage or collection of webpages
- (5) Removing an entire webpage or document

Reporting

- N/A

Change Details

Webpage 1

Page title: Workforce

Page status: Altered

- **Before:** [January 10, 2019](#)
- **After:** [February 7, 2019](#)

URL: <https://www.samhsa.gov/workforce>

Known archives: A public web archive of this page, collected at the request of the Department of Health and Human Services, is available on Archive-It, but has not been captured [since March 2015](#).

Description of change:

The following content was changed between January 14, 2019 and January 16, 2019 (according to our web monitoring software. See the Internet Archive’s Wayback Machine captures of the page, which correspond to a wider time window, for [January 10, 2019](#) and [February 7, 2019](#)):

1. **Altered** the “Workforce” page.

- (i) Removed the “Overview” section heading.
- (ii) Made minor grammatical and format changes to the first two paragraphs formerly under the “Overview” heading.
- (iii) Altered the remaining paragraphs on the page:

From:

The behavioral health workforce is one of the fastest growing workforces in the country. Employment projections for 2020 based on the U.S. Bureau of Labor Statistics forecast a rise in employment for substance abuse and mental health counselors with a 36.3% increase from 2010 to 2020—greater than the 11% projected average for all occupations. This is based on an expected increase in insurance coverage for mental health and substance use services brought about by passage of health reform and parity legislation and the rising rate of military veterans seeking behavioral health services.

Serious workforce shortages exist for health professionals and paraprofessionals across the United States. For example, consider:

- In 2011, there were only 2.1 child and adolescent psychiatrists per 100,000 people and 62 clinical social workers per 100,000 people across the United States.
- 62 million people (20-23%) of the U.S. population live in rural or frontier counties; 75% of these counties have no advanced behavioral health practitioners.
- In 2012, the turnover rates in the addiction services workforce ranged from 18.5% to more than 50%.

To support an ongoing focus and discussion on addressing these challenges, SAMHSA is planning the development of regionally based workforce workgroups to allow states and stakeholders to share strategies for enhancing, developing, and financing the behavioral health workforce. These workgroups will allow for the dissemination of information, state-to-state sharing, and linkages to resources among federal, state, tribal and local partners.

To address the challenges in recruiting, training, and retaining a diverse behavioral health workforce, SAMHSA has funded a number of programs, initiatives, and technical assistance centers. For detailed information on the challenges and how SAMHSA works with federal and other partners to address them, visit the SAMHSA Administrator’s [Report to Congress – 2013](#).

Learn more about:

- [Development of Competencies and Capacities to Address Behavioral Health](#)
- [Meeting the Challenges of the Changing Environment](#)
- [Serving the Needs of Diverse Populations](#)

- [Grants Related to Workforce](#)
- [Publications and Resources on Workforce](#)

To:

Although the field is growing due to increases in insurance coverage for mental health and substance use services and the rising rate of military veterans seeking behavioral health services, serious workforce shortages exist for health professionals and paraprofessionals across the United States. To support anticipated demands, the [SAMHSA-Health Resources and Services Administration \(HRSA\) Center for Integrated Health Solutions \(CIHS\)](#) promotes the development of integrated, bidirectional primary and behavioral health services to better address the needs of people with mental health and substance use conditions. HRSA-CIHS also provides [guidelines on how to provide culturally relevant services](#).

Being culturally competent and aware is to be respectful and inclusive of the health beliefs and attitudes, healing practices, and cultural and linguistic needs of different population groups. Behavioral health practitioners can bring about positive change by better understanding the differing cultural context among various communities, and being willing and able to work within that context. For more information on this important issue, refer to the SAMHSA [Office of Behavioral Health Equity](#).

SAMHSA is at the forefront of helping the behavioral health workforce implement and use new and evolving practices and technologies. To facilitate the readiness of behavioral health organizations to compete in this environment, SAMHSA created the [BHbusiness Plus Initiative](#), which works with hundreds of behavioral health providers across the nation.

Developing the sector of the workforce trained to prevent and treat substance use disorders is one of SAMHSA's highest priorities. CSAP recognizes the need to strengthen the prevention field by increasing the number of qualified prevention professionals.

Related Links

- [Behavioral Health Workforce Education and Training \(BHWET\)](#)
- [Drug-Free Workplace Programs](#)
- [Center for the Application of Prevention Technologies \(CAPT\) Technical Assistance Tools](#)

- The “Workforce” page was the landing page for a section containing information, links, and statistics relating to the behavioral health workforce, the need for cultural competence, SAMHSA’s efforts at developing the workforce, and SAMHSA grants and publications relating to the workforce.
- The page linked to five subpages, which were removed between January 8, 2019 and June 26, 2019 (The wide time frame reflects the sporadic captures in the Internet Archive’s Wayback Machine, for which captures are provided in parentheses below.):
 - (i) The “Competencies and Capacities” page ([January 9, 2019](#) and [June 26, 2019](#))
 - (ii) The “Changing Environment” page ([January 8, 2019](#) and [June 26, 2019](#))

- (iii) The “Diverse Populations” page (January 17, 2019 and January 19, 2019 according to our monitoring software; see IAWM captures for [January 8, 2019](#) and [February 7, 2019](#))
- (iv) The “Grants” page (January 16, 2019 and January 18, 2019 according to our monitoring software; see IAWM captures for [January 9, 2019](#) and [June 26, 2019](#))
- (v) The “Publications and Resources” page (March 16, 2019 and March 18, 2019 according to our monitoring software; see IAWM captures for [January 8, 2019](#) and [June 26, 2019](#))
 - The URLs of each subpage redirect to <https://www.samhsa.gov/workforce>.

Webpage 2

Page title: Diverse Populations

Page status: Removed

- **Before:** [January 8, 2019](#)
- **After:** [February 7, 2019](#)

URL: <https://www.samhsa.gov/workforce/serving-needs-diverse-populations>

Known archives: A public web archive of this page, collected at the request of the Department of Health and Human Services, is available on Archive-It, but has not been captured [since March 2015](#).

Description of change:

The following content was changed between January 17, 2019 and January 19, 2019 (according to our monitoring software; see IAWM captures for [January 8, 2019](#) and [February 7, 2019](#)):

1. **Removed** the “Diverse Populations” page and established a redirect to <https://www.samhsa.gov/workforce>.
 - The page is an example of one of the five subpages removed from the “Workforce” section of the SAMHSA website.
 - The page included information, links, and statistics on behavioral health disparities and cultural awareness in the workforce, specific populations (children and youth, minorities, LGBT populations, and American Indians and Alaska Natives), financial issues relating to the behavioral health workforce, and data on the Workforce.

Screenshot: A capture of the top portion of the [January 8, 2019](#) version of the “Diverse Populations” page. This page was one of five subpages removed from the “Workforce” section of the SAMHSA website. Captured by Internet Archive’s [Wayback Machine](#).

SAMHSA
Substance Abuse and Mental Health
Services Administration

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Topics » Workforce » Serving the Needs of Diverse Populations

Serving the Needs of Diverse Populations

SAMHSA helps address disparities and the unique needs of diverse population groups across the nation.

Behavioral Health Disparities and Cultural Awareness

Being culturally competent and aware is to be respectful and inclusive of the health beliefs and attitudes, healing practices, and cultural and linguistic needs of different population groups. Behavioral health practitioners can bring about positive change by better understanding the differing cultural context among various communities, and being willing and able to work within that context. For more information on this important issue, refer to the SAMHSA [Office of Behavioral Health Equity](#). In addition, SAMHSA's Strategic Prevention Framework offers good guidance on [culturally appropriate practices](#).

SAMHSA-affiliated organizations focusing on cultural awareness and competency include:

- The National Network to Eliminate Disparities (NNED) in Behavioral Health is dedicated to promoting equality in behavioral health services for individuals, families, and communities. NNED, with help from SAMHSA and the National Alliance for Multi-Ethnic Behavioral Health Associations, builds coalitions of racial, ethnic, cultural, and sexual minority communities and groups dedicated to removing disparities in behavioral health care. Learn more about what [NNED offers](#) to support culturally competent practices.
- Funded by the SAMHSA Center for Substance Abuse Treatment, the [Addiction Technology Transfer Center \(ATTC\) Network's website](#) provides many resources, guides, and publications about cultural awareness.
- The SAMHSA-Health Resources and Services Administration (HRSA) Center for Integrated Health Solutions (CIHS) provides [guidelines on how to provide culturally relevant services](#).
- The National Technical Assistance Center for Children's Mental Health (TA Center) in the Georgetown University Center for Child and Human Development focuses on children and youth at risk for mental health challenges. Read about the [TA Center's resources, trainings, webinars, and initiatives](#) and about its [cultural and linguistic competency component](#).

For additional guidance on education and training,

Moving Prevention Knowledge to Practice

KNOWLEDGE APPLICATION PROGRAM
Building Science and Evidence to Support Workforce Development and Expand Treatment Capacity

Data and Statistics

- » [Report to Congress on the Nation's Substance Abuse and Mental Health Workforce Issues – 2013](#) is an overview of the facts and issues affecting the behavioral health workforce, including workforce demographic data.
- » [Vital Signs: Taking the Pulse of the Addiction Treatment Profession – 2012](#) provides an overview of the characteristics and development needs of the substance use disorders treatment workforce.

Alterations to the “Recovery Models” Page

Tag: #MODELS

Summary of Findings

Between [January 24, 2017](#) and [September 16, 2019](#), SAMHSA moved the “Recovery Models” page on its store.samhsa.gov subdomain to a new URL and successively reduced the number of publications described and linked from 39 to 5.

Between [January 24, 2017](#) and [June 26, 2018](#), SAMHSA reduced the number of publications on the page from 39 to 14. Between [June 26, 2018](#) and [February 3, 2019](#), SAMHSA removed access to the page. By [September 16, 2019](#), access to the page was returned at a new URL, <https://www.store.samhsa.gov/professional-research-topics/recovery-models>. During this transition, the number of publications described and linked to was reduced to 5.

Change Classification

- (1) Altering or removing text and non-text content
- (2) Altering or removing links
- (3) Moving an entire webpage or collection of webpages or establishing redirects
- (7) Altering or removing search engines and open data platforms

Reporting

- N/A

Change Details

Page title: Recovery Models

Page status: Moved/Altered

- **Before:** [January 24, 2017](#)
- **After:** [September 16, 2019](#)

URL: <https://www.store.samhsa.gov/professional-research-topics/recovery-models>
(replaced <http://store.samhsa.gov/facet/Professional-Research-Topics/term/Recovery-Models?pageNumber=1>)

Known archives: No known public archive.

Description of change:

The following content was changed between [January 24, 2017](#) and [June 26, 2018](#):

Screenshot: A comparison of the top portion of the [January 24, 2017](#) version (below) and the [September 16, 2019](#) (next page) version of the “Recovery Models” page showing the reduced number of publications. Captured by the Internet Archive's [Wayback Machine](#).

INTERNET ARCHIVE <http://store.samhsa.gov/facet/Professional-Research-Topics/term/Recovery-Models?pageNumber=1> Go FEB 24 APR 2015 2017 2018 12 captures 24 Jan 2015 - 3 Feb 2019

SAMHSA Substance Abuse and Mental Health Services Administration **Publications Ordering** Sign In | Create an Account | Help Publications en español My Cart 0 item(s) Advanced Search

Issues, Conditions & Disorders Substances Treatment, Prevention & Recovery Professional & Research Topics Location Series SAMHSA.gov

Publications > Professional & Research Topics > Recovery Models EMAIL PRINT SHARE

Recovery Models

(39 Products and 36 related resources)

Narrow Your Results

- For Professionals (34)
- For the General Public (5)
- By Audience
- By Population Group
- By Product Format
- By Language

Products

1-20 of 39 Sort By: Title A-Z Display per page: 20

1 2 Next

Image	Title	Publication Date	Rank out of 463 ranked products	Status
	Access to Recovery (ATR) Approaches to Recovery-Oriented Systems of Care Three Case Studies SMA09-4440 Format: Case Study, Digital Download Available ★★★★★	8/2009	Not ranked	ELECTRONIC ONLY
	Access to Recovery Implementation Toolkit SMA10-ATRKIT Format: Kit, Digital Download Available ★★★★★	11/2010	Not ranked	OUT OF STOCK
	An Introduction to Mutual Support Groups for Alcohol and Drug Abuse Substance Abuse in Brief, Spring 2008, Vol. 5, Issue 1 SMA08-4336 Format: Fact Sheet, Digital Download Available ★★★★★	6/2008	Not ranked	OUT OF STOCK
	Approaches to Recovery-Oriented Systems of Care at the State and Local Levels Three Case Studies SMA09-4438 Format: Case Study, Digital Download Available ★★★★★	8/2009	Not ranked	ELECTRONIC ONLY
	Assertive Community Treatment (ACT) Evidence-Based Practices (EBP) KIT CD-ROM/DVD Version SMA08-4345 Format: Kit, Digital Download Available ★★★★★	10/2008	Not ranked	OUT OF STOCK
	Behavioral Health in an Era of Health Reform: Challenges, Opportunities and the Need for Block Grant Redesign Presentation by Administrator Hyde, SAMHSA National Block Grant Conference, June 30, 2011 (Slides) SMA11-PHYDE063011 Format: Presentation, Digital Download Available ★★★★★	6/2011	Not ranked	ELECTRONIC ONLY
	Bringing Focus to Change: Understanding Drivers, Challenges and Opportunities Presentation by Administrator Hyde, Michigan Association of Community Mental Health Boards Spring Conference, May 17, 2011 (Slides) SMA11-PHYDE051711 Format: Presentation, Digital Download Available ★★★★★	5/2011	Not ranked	ELECTRONIC ONLY

1. **Altered** the “Products” section of the page, which displays publications tagged as “Recovery Model” publications:
 - Formerly 39 publications displayed; by June 26, 2018 only 14 displayed.

The following content was changed between [June 26, 2018](#) and [February 3, 2019](#):

1. **Removed** the “Recovery Models” page at URL <http://store.samhsa.gov/facet/Professional-Research-Topics/term/Recovery-Models?pageNumber=1>.
 - On [February 3, 2019](#), the URL returned a “Page Not Found” error.

The following content was changed between [February 3, 2019](#) and [September 16, 2019](#):

1. **Moved** the “Recovery Models” page to the URL <https://www.store.samhsa.gov/professional-research-topics/recovery-models>.
 - The “Recovery Models” page at the new URL displayed only five publications, whereas the previous page displayed 14 publications.

The screenshot shows the SAMHSA website's "Recovery Models" page. The page header includes the SAMHSA logo and navigation links. The main content area is titled "Recovery Models" and displays a list of publications. The page is captured from the Wayback Machine on September 16, 2019.

U.S. Department of Health & Human Services

SAMHSA
Substance Abuse and Mental Health Services Administration

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Search SAMHSA Publications

Issues, Conditions & Disorders | Substances | Treatment, Prevention & Recovery | Professional & Research Topics | Series | Apps

Publications Home » Professional & Research Topics » Recovery Models

Your Cart (empty)

Recovery Models

Narrow Your Results

Sort by: Publication Date | Title

1-5 of 5 results

- Audience**
 - Family & Advocates (2)
 - Law Enforcement (2)
 - Parents & Caregivers (1)
 - People in Recovery as Audience (1)
 - Prevention Professionals (2)
 - Professional Care Providers (4)
 - Program Planners, Administrators, & Project Managers (4)
 - Spanish Speakers (1)
- Population Group**
- Format**
- Language**

Publications:

- Opioid Overdose Prevention Toolkit (Spanish)**
SMA18-4742SPANISH
06/2018
- National Children's Mental Health Awareness Day 2013 Short...**
SMA13-4756
07/2013
- Illness Management and Recovery Evidence-Based Practices (...)**
SMA09-4463
03/2010
- What Are Peer Recovery Support Services?**
SMA09-4454
10/2009
- Assessive Community Treatment (ACT) Evidence-Based...**
SMA08-4345
10/2008

Removal of the “Evidence-Based Practice Resource Library” Page

Tag: #LIBRARY

Summary of Findings

SAMHSA removed access to a page titled “Evidence-Based Practice Resource Library” on its store.samhsa.gov subdomain. The page contained a list of internal and external links to EBP resources available from government agencies and non-profit organizations.

Change Classification

- (5) Removing an entire webpage or document

Reporting

- N/A

Change Details

Page title: Evidence-Based Practice Resource Library

Page status: Removed

- **Before:** [January 13, 2018](#)
- **After:** [September 25, 2019](#)

URL: <http://store.samhsa.gov/resources/term/Evidence-Based-Practice-Resource-Library>

Known archives: No known public archive.

Description of change:

1. Between [January 13, 2018](#) and [September 25, 2019](#), SAMHSA removed the “Evidence-Based Practice Resource Library” from its Store subdomain.

Screenshot: The [January 13, 2018](#) version of the "Evidence-Based Practice Resource Library" page. Captured by the Internet Archive's [Wayback Machine](#).

INTERNET ARCHIVE
Wayback Machine

<http://store.samhsa.gov/resources/term/Evidence-Based-Practice-Resource-Library>
Go
JUL 2016
JAN 13 2018
SEP 2019
16 captures
1 Feb 2016 - 25 Sep 2019

Substance Abuse and Mental Health Services Administration
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Sign In | Create an Account | Help
Advanced Search
Publicaciones en español
My Cart
0 item(s)

Issues, Conditions & Disorders Substances Treatment, Prevention & Recovery Professional & Research Topics Location Series SAMHSA.gov

Publications > Evidence-Based Practice Resource Library > Related Resources

EMAIL PRINT SHARE

Evidence-Based Practice Resource Library (37 related resources)

Narrow your results

Issues, Conditions, & Disorders +

Professional & Research Topics +

Treatment, Prevention, & Recovery +

Related Resources

1-20 of 37

California Healthy Kids Resource Center, California Department of Education
Research Validated Programs
- California Department of Education
The California Healthy Kids Resource Center was established to assist schools in promoting health literacy. Health literacy is the capacity of an individual to obtain, interpret, and understand basic health information and services and the competence to use such information and services in ways that are health enhancing.
<http://www.californiahealthykids.org>

Center for the Study and Prevention of Violence - University of Colorado at Boulder
The Blueprints Initiative sets a gold standard for implementing exemplary, research-based violence and drug programs and for implementing these programs with fidelity to the models. The work that is being conducted will help to bridge the gap between knowledge (research) and practice and inform the users of programs of the barriers that must be overcome in order to achieve maximum success.
<http://www.colorado.edu/cspv/blueprints>

Chapter 4, Examples of Research-Based Drug Abuse Prevention Programs - U.S. Department of Health and Human Services, National Institutes of Health, National Institute on Drug Abuse (HHS, NIH, NIDA)
NIDA, in cooperation with prevention scientists, presents the following examples of research-based programs that feature a variety of strategies proven to be effective. Each program was developed as part of a research study, which demonstrates that over time youth who participated in the programs had better outcomes than those who did not.
<http://www.drugabuse.gov/publications/preventing-drug-abuse-among-children-adolescents-in-brief/chapter-4-examples-research-based-drug-abuse-prevention-programs>

Chapter 5, Prevention and Intervention in "Youth Violence: A Report of the Surgeon General"
- U.S. Department of Health and Human Services (HHS)
The mission of the Surgeon General is to protect and improve the public health of the Nation, and this report was developed within the responsibilities and spirit of that mission. This chapter identifies a set of standards based on scientific consensus and applies those standards to the literature to identify with confidence general strategies and programs that work, that are promising, or that do not.
<http://www.ncbi.nlm.nih.gov/books/NBK44295/>

Child Trends: What Works Guide - Child Trends
Child Trends Lifecourse Model presents our extensive knowledge about programs found to work to enhance children's development, in a user-friendly format. This approach is built on the concept that child development is a cumulative process that begins before birth and continues into young adulthood.
<http://www.childtrends.org>

Clinical Research Unit for Anxiety and Depression - University of New South Wales and St. Vincents Hospital
Provides major focused psychological strategies shown to be evidence-based for a number of psychological disorders and included as focused psychological strategies in the [Australian Medicare Benefits Schedule] for the Better outcomes in mental health care initiative.
<https://www.crufad.org/>

Find Youth Info - Interagency Working Group on Youth Programs
Helping America's Youth is a nationwide effort, initiated by President George W. Bush and led by First Lady Laura Bush, to benefit children and teenagers by encouraging action in three key areas: family, school, and community. This Community Guide to Helping America's Youth helps communities build partnerships, assess their needs and resources, and select from program designs that could be replicated in their community. It walks community groups through the steps necessary for building strong supports for youth.
<http://findyouthinfo.gov>

Mental Health Association in New York State, Inc. - Mental Health America
This Web site was developed in order to increase awareness of, and promote the use of, evidence-based practices in New York State. Visitors to the site can search the database of programs and treatments identified as evidence-based. A brief description of the program and contact information allow users to identify programs of interest and to obtain further information for themselves.
<http://www.mhanys.org>

National Child Traumatic Stress Network: Resources on Treatments That Work - National Child Traumatic Stress Network (NCTSN)

Access your favorites and other features.
Sign In!
New customer?
Create an Account

National Suicide Prevention Lifeline

1-800-273-TALK (8256)
National Suicide Prevention Lifeline

Publicaciones en Español

Publicaciones en Español

Find Treatment

www.samhsa.gov/treatment

Treatment Locator

Alterations to the “Cultural Competence” Page

Tag: #COMPETENCE

Summary of Findings

Between [January 24, 2017](#) and [September 25, 2019](#), SAMHSA moved the “Cultural Competence” page on its store.samhsa.gov subdomain to a new URL and successively reduced the number of publications described and linked from 96 to 55.

Between [January 24, 2017](#) and [June 25, 2018](#), SAMHSA reduced the number of publications on the “Cultural Competence” page from 96 to 61. Between [June 25, 2018](#) and [February 3, 2019](#), SAMHSA removed access to the page. By [September 25, 2019](#), access to the page was returned at a new URL, <https://store.samhsa.gov/professional-research-topics/cultural-competence>. During this transition, the number of publications available was reduced from 61 to 55.

Change Classification

- (1) Altering or removing text and non-text content
- (2) Altering or removing links
- (3) Moving an entire webpage or collection of webpages or establishing redirects
- (7) Altering or removing search engines and open data platforms

Reporting

- N/A

Change Details

Page title: Cultural Competence

Page status: Moved/Altered

- **Before:** [January 24, 2017](#)
- **After:** [September 25, 2019](#)

URL: <https://store.samhsa.gov/professional-research-topics/cultural-competence> (replaced <http://store.samhsa.gov/facet/Professional-Research-Topics/term/Cultural-Competence?pageNumber=1>)

Known archives: No known public archive.

Screenshot: A comparison of the top portion of the [January 24, 2017](#) (below) and [September 25, 2019](#) (overleaf) versions of the “Cultural Competence” page showing the reduction in publications. Captured by the Internet Archive’s [Wayback Machine](#).

INTERNET ARCHIVE
waybackmachine

http://store.samhsa.gov/facet/Professional-Research-Topics/term/Cultural-Competence?pageNumber=1 Go FEB JAN APR
12 captures 24 Jan 2015 - 3 Feb 2019 2015 2017 2018

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Issues, Conditions & Disorders Substances Treatment, Prevention & Recovery Professional & Research Topics Location Series SAMHSA.gov

Publications > Professional & Research Topics > Cultural Competence EMAIL PRINT SHARE

Cultural Competence (96 Products and 145 related resources)

Narrow Your Results

For Professionals (80)
For the General Public (16)

By Audience +
By Population Group +
By Product Format +
By Language +

Products

1-20 of 96 Sort By: Title A-Z Display per page: 20

1 2 3 4 5 Next

Image	Title	Publication Date	Rank out of 463 ranked products	Status
	Improving Cultural Competence Quick Guide for Administrators Based on TIP 59 SMA16-4932 Format: Guidelines or Manual, Digital Download Available ★★★★★	4/2016	Not ranked	IN STOCK
	A Practitioner's Resource Guide: Helping Families to Support Their LGBT Children PEP14-LGBTKIDS Format: Resource Guide, Digital Download Available ★★★★★	2/2014	Not ranked	ELECTRONIC ONLY
	A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals SMA12-4104 Format: Guidelines or Manual, Digital Download Available ★★★★★	8/2012	Not ranked	ELECTRONIC ONLY
	Addressing the Mental Health Needs of Young Children and Their Families Systems of Care SMA10-4547 Format: Report, Digital Download Available ★★★★★	5/2010	Not ranked	OUT OF STOCK
	Addressing the Needs of Women and Girls: Core Competencies for Mental Health and Substance Abuse Service Professionals SMA11-4657 Format: Report, Digital Download Available ★★★★★	10/2011	71	OUT OF STOCK
	American Indian and Alaska Native Culture Card SMA08-4354 Format: Guidelines or Manual, Digital Download Available ★★★★★	3/2009	66	OUT OF STOCK
	Anger Management for Substance Abuse and Mental Health Clients: A Cognitive Behavioral Therapy Manual (Korean Version) SMA10-4615KOREAN Format: Guidelines or Manual, Digital Download Available ★★★★★	4/2008	Not ranked	ELECTRONIC ONLY
	Anger Management for Substance Abuse and Mental Health Clients: Participant Workbook (Korean Version) SMA10-4616KOREAN Format: Workbook, Digital Download Available ★★★★★	1/2010	Not ranked	ELECTRONIC ONLY
	Ayudando a niños y jóvenes con depresión mayor: Sistemas de cuidado Helping Children and Youth with Major Depression: Systems of Care (Spanish version)	1/2008	Not ranked	OUT OF STOCK

INTERNET ARCHIVE
waybackmachine
https://store.samhsa.gov/professional-research-topics/cultural-competence
Go AUG SEP OCT
1 capture
25 Sep 2019
2018 2019 2020

U.S. Department of Health & Human Services

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Substance Abuse and Mental Health
Services Administration

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Search SAMHSA Publications Search

Issues, Conditions & Disorders Substances Treatment, Prevention & Recovery Professional & Research Topics Series Apps

Publications Home » Professional & Research Topics » Cultural Competence

SHARE+

Your Cart (empty)

Cultural Competence

Narrow Your Results

Sort by: Publication Date Title

1-12 of 55 results

Audience













- ☐ American Indian & Alaska Native as Audience (1)
- ☐ Child Care Providers (1)
- ☐ College Students as Audience (1)
- ☐ Community Coalitions (1)
- ☐ Disaster Response Workers as Audience (7)
- ☐ Family & Advocates (5)
- ☐ Federal Tribal Partners (3)
- ☐ Grant Seekers & Grantees (2)

More in this category

Population Group

Format

Language

			
TIP 61: Behavioral Health Services for American Indians and...	The Comprehensive Community Mental Health Services for...	Advancing Best Practices in Behavioral Health for Asian...	Focus on Prevention
SMA18-5070 02/2019	PEP18-CMHI2016 04/2018	SMA17-5032 05/2017	SMA10-4120 03/2017
			
Spotlight: Building Resilient and Trauma-Informed...	Bullying Prevention in Indian Country	The National Tribal Behavioral Health Agenda	Suicide Prevention in Indian Country
SMA17-5014 02/2017	SMA16-4996 12/2016	PEP16-NTBH-AGENDA 12/2016	SMA16-4995 12/2016
			
In Brief: Rural Behavioral Health: Telehealth Challenges...	Guidance Document for Supporting Women in Co-ed Settings	Suicide Prevention in Alaska Report	Improving Cultural Competence
SMA16-4989 11/2016	SMA16-4979 09/2016	SMA16-4970 08/2016	SMA16-4933 04/2016

1 2 3 4 5 >

Description of change:

The following content was changed between [January 24, 2017](#) and [June 25, 2018](#):

1. **Altered** the “Products” section of the page, which displays publications tagged as “Cultural Competence” publications:
 - Formerly 96 publications displayed; by June 25, 2018 only 61 displayed.

The following content was changed between [June 25, 2018](#) and [February 3, 2019](#):

1. **Removed** the “Cultural Competence” page at the URL <http://store.samhsa.gov/facet/Professional-Research-Topics/term/Cultural-Competence?pageNumber=1>.
 - On [February 3, 2019](#), the URL returned a “Page Not Found” error.

The following content was changed between [February 3, 2019](#) and [September 25, 2019](#):

1. **Moved** the “Cultural Competence” page to the URL <https://store.samhsa.gov/professional-research-topics/cultural-competence>.
 - The “Recovery Models” page at the new URL displayed 55 publications, whereas the previous page displayed 61 publications.

Removal of SAMHSA's Archive Domain

Tag: #ARCHIVE

Summary of Findings

After [July 25, 2018](#), SAMHSA removed the archive.samhsa.gov subdomain. The site archived older publications, materials of historical or research interest, a 2013 snapshot of samhsa.gov, snapshots of other removed subdomains and websites, as well as materials specific to particular administrations.

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website

Reporting

- N/A

Change Details

Page title: SAMHSA Archive
Page status: Removed

Last Available IAWM Capture: [July 25, 2018](#)

URL: <https://archive.samhsa.gov/>

Known archives: A public web archive of this page from June 24, 2017, collected by the Library of Congress, is available. Search for the archived version of the page at <https://webarchive.loc.gov/>.

Description of change:

The following content was changed after [July 25, 2018](#):

1. **Removed** the archive.samhsa.gov domain:
 - The last available IAWM capture of the site is from [July 25, 2018](#).
 - According to the "[List of Sites](#)" page in the archive, the subdomain contained snapshots of these websites and pages, taken between 2010 and 2015:
 - [Buprenorphine](#)

- [DATM](#)
- [Disaster Distress Helpline](#)
- [DPT Site](#)
- [Knowledge Application Program \(KAP\)](#)
- [National Advisory Councils Site - 2014 Snapshot](#)
- [OAS 2010](#)
- [Partners for Recovery](#)
- [Recovery Month](#)
- [SAMHSA.gov 2013 Main Site](#)
- [Women and Children and Families](#)
- [Workplace \(DWP\) Site](#)
- [Underage Drinking 2013 Snapshot](#)
- [Underage Drinking: Speak With Them](#)
- [Underage Drinking: Talk With Them](#) (Chinese language)
- [Hablaconellos.samhsa.gov](#) (Spanish language)
- [WhataDifference](#)
- [Aceptaragnorar](#) (Spanish language)
- [WhataDifference](#) (American Indian site)
- [WhataDifference](#) (Asian American site)
- [What a Difference](#) (African American site)
- [Stopstigma.samhsa.gov](#) (Renamed [promoteacceptance.samhsa.gov](#))
- [508.samhsa.gov](#)

Note: Many of the links in the list above lead to errors.

Screenshot: A capture of the [July 25, 2018](#) version of the “SAMHSA Archive” page. Captured by Internet Archive’s [Wayback Machine](#).

INTERNET ARCHIVE
Wayback Machine
218 captures
6 Apr 2013 - 7 Aug 2018

<https://archive.samhsa.gov/> Go MAY JUN JUL 25 2017 2018 2019

SAMHSA WEB ARCHIVES

SAMHSA archive content is not current information, is not being updated, and may contain broken links.

SAMHSA Archives

What would you like to find?

Search Archives Search All SAMHSA

The SAMHSA Archives contain:

- older publications
- materials of historical or research interest
- a snapshot of sites previously taken offline and
- administration-specific materials

SAMHSA's archive content is not current information, is not being updated, and may contain broken links.
[View a List of Archived Sites](#)

Behavioral Health is Essential to Health Prevention Works Treatment is Effective People Recover

SAMHSA archive content is not current information, is not being updated, and may contain broken links.

[SAMHSA Archive Home](#) | [HHS Archive Home](#) | [List of Archived Sites](#) | [SAMHSA Main Site](#)

Removal of SAMHSA's Blog Archives

Tag: #BLOG

Summary of Findings

Between [January 10, 2019](#) and [January 18, 2019](#), SAMHSA removed its blog archives covering the period October 2010 to August 2017. As first reported in [PsychCentral](#), a dropdown menu linking to blog posts from each month was altered to include links to fewer pages hosting blog posts from each month. All URLs for pages in the format <https://blog.samhsa.gov/archive/20YY/MM>, which formerly hosted a month's worth of blog posts, for a month prior to September 2017, now return errors, as do the URLs for each blog post published in August 2017 or earlier.

Change Classification

- (5) Removing an entire webpage or document
- (6) Overhauling or removing an entire website
- (7) Altering or removing search engines and open data platforms
- (8) Altering, removing, or deleting datasets

Reporting

- PsychCentral, [SAMHSA Quietly Deleted All Blog Entries Before 2017](#) (9/24/2019)

Change Details

Page title: SAMHSA Archive

Page status: Altered

- **Before:** [January 10, 2019](#)
- **After:** [January 18, 2019](#)

URL: <https://blog.samhsa.gov/>

Known archives: A public web archive of this page from [May 25, 2018](#), collected at the request of the Federal Depository Library Program Web Archive is available on [Archive-It](#).

Description of change:

The following content was changed between [January 10, 2019](#) and [January 18, 2019](#):

1. **Altered** the “Archives” drop down menu to remove access to the SAMSHA blog archives for the months of October 2010 to August 2017.
 - Previously the dropdown menu on the right side of the page under the heading “Archives” allowed the user to navigate to pages hosting blogs from any month since October 2010.

- By January 8, 2019, the dropdown menu allowed users to navigate to pages hosting blogs from only September 2017 through January 2019.
 - (i) The URLs for each page hosting a month's worth of blogs was in the format <https://blog.samhsa.gov/archive/20YY/MM>.
 - (ii) The URLs of these pages for October 2010 through August 2017 now return errors (see, for example, the October 2016 page at <https://blog.samhsa.gov/2016/10/>).
 - (iii) These pages linked to individual blog posts, which were hosted at unique URLs. For example, the post "A personal perspective about new data on behavioral health patterns in the LGB community" was hosted at <https://blog.samhsa.gov/2016/10/13/a-personal-perspective-about-new-data-on-behavioral-health-patterns-in-the-lgb-community/>.
 - The URLs for individual blog posts from October 2010 through August 2017 return "access denied" errors.
2. **Altered** the "Categories" dropdown menu to remove most blog categories, including "Affordable Care Act," "Bullying," "Criminal and Juvenile Justice," "Health Disparities," "Health Reform," "LGBT," and "Medicaid."

Screenshot: A side-by-side comparison of the "Archives" dropdown menu on the [January 10, 2019](#) (left) and [January 18, 2019](#) (right) versions of the "SAMHSA blog" page. Captured by Internet Archive's [Wayback Machine](#).

The screenshot shows two versions of the SAMHSA blog homepage side-by-side, captured by the Wayback Machine. The left version is from January 10, 2019, and the right version is from January 18, 2019. Both pages feature the SAMHSA logo and a search bar. The main content area includes articles such as "New Year's Resolution 2019: Tobacco-Free Recovery" and "SAMHSA Launches the 2019 Communities Talk: Town Hall Meetings to Prevent Underage Drinking". The "Archives" dropdown menu is visible on both pages, showing a list of months from January 2019 down to October 2018. The right version shows a more updated list of months, including January 2019, November 2018, October 2018, September 2018, August 2018, July 2018, June 2018, May 2018, April 2018, March 2018, January 2018, December 2017, November 2017, October 2017, and September 2017.

Addition of “Practitioner Training” Section

Tag: #PRACTITIONER

Summary of Findings

By [April 7, 2019](#), SAMHSA added a new section titled, “Practitioner Training” to its website. The section features links and descriptions for “tools, training, and technical assistance to practitioners in the fields of mental health and substance use disorders.”

Change Classification

- (9) Addition of new content, section, or page

Reporting

- N/A

Change Details

Page title: Practitioner Training

Page status: Added

- **First IAWM capture:** [April 7, 2019](#)

URL: <https://www.samhsa.gov/practitioner-training>

Known archives: No known public archive.

Description of change:

The following content was changed by [April 7, 2019](#):

1. **Added** a new section titled, “Practitioner Training.”
 - The section features links and descriptions for “tools, training, and technical assistance to practitioners in the fields of mental health and substance use disorders.”
 - Some of the pages linked from the “Practitioner Training” page were previously listed on and removed from the “Programs” landing page.

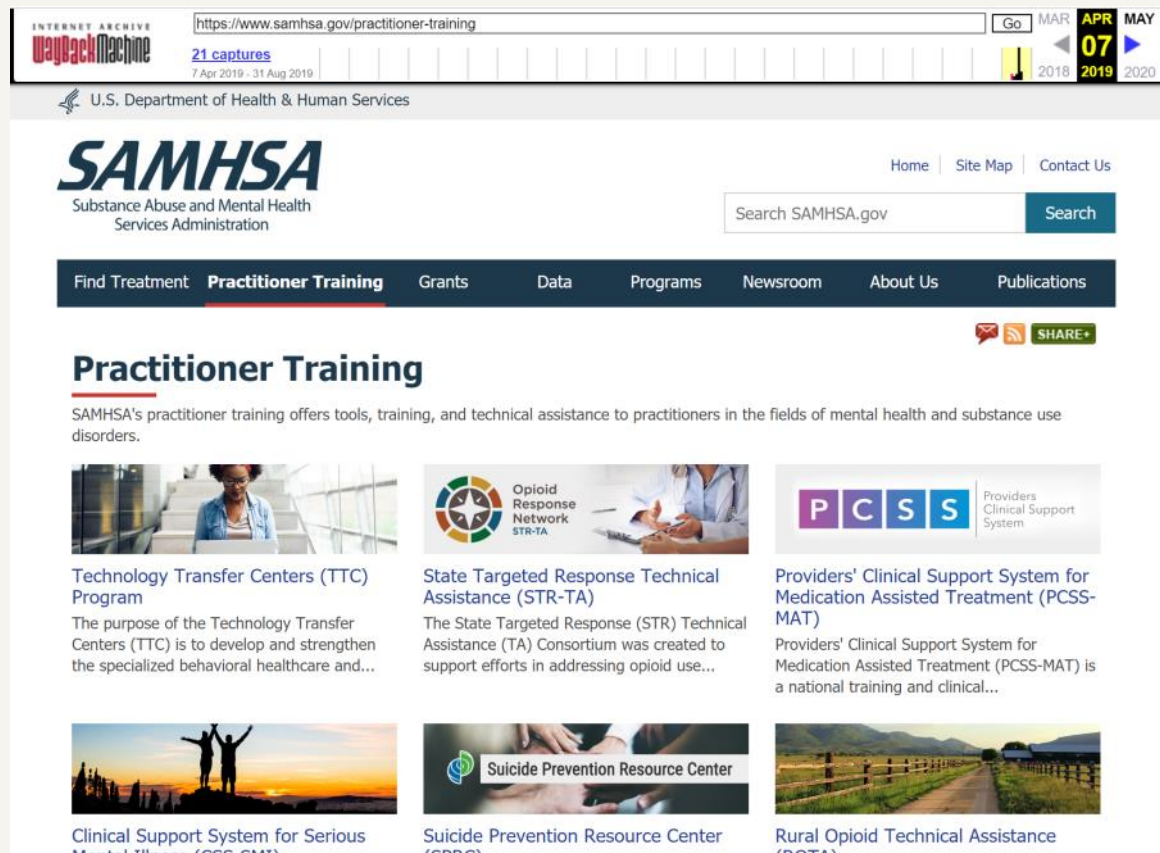
Note: Between [February 26, 2019](#) and [February 28, 2019](#), SAMHSA altered its main menu to add a link to the “Practitioner Training” landing page.

The following content was changed between [April 7, 2019](#) and [August 7, 2019](#):

1. **Altered** the body of the page by removing links and descriptions for:
 - (i) Center of Excellence for Eating Disorders (CoE-ED)
 - (ii) [First Responder Mental Health Awareness Training](#)
 - (iii) [Historically Black Colleges and Universities Center of Excellence in Behavioral Health \(HBCU-CFE\)](#)
 - (iv) [National Consumer and Consumer Supported Technical Assistance Center \(NCTAC\)](#)
 - (v) [National Network to Eliminate Disparities in Behavioral Health \(NNED\)](#)
 - (vi) [Networking, Certifying & Training Suicide Prevention Hotlines & Disaster Distress Helpline](#)

2. **Altered** the body of the page by adding a link and description for:
 - (i) [National Center of Excellence for Eating Disorders \(NCEED\)](#)

Screenshot: A capture of the [April 7, 2019](#) version of the “Practitioner Training” page showing the top portion of the newly added page. Captured by the Internet Archive’s [Wayback Machine](#).



Methodology

This report focuses on changes made to the SAMHSA website as part of an overhaul which began soon after the inauguration of President Trump, but was concentrated in January through March 2019.

Web Monitoring

Many of the changes documented in this report were discovered as part of the Web Integrity Project's routine weekly monitoring. WIP uses software that automatically crawls close to 30,000 federal government webpages every 3 to 7 days and captures the HTML code of a page each time it detects a change. A team of analysts reviews the HTML renders of each changed webpage one-by-one, in meticulous detail, making decisions about whether the change is substantial enough for further vetting. At the web monitoring team's weekly meeting, changes are discussed and decisions made about whether to further vet and fully document the change. Any documented change is reviewed by at least three analysts before it is published in any technical documentation or report.

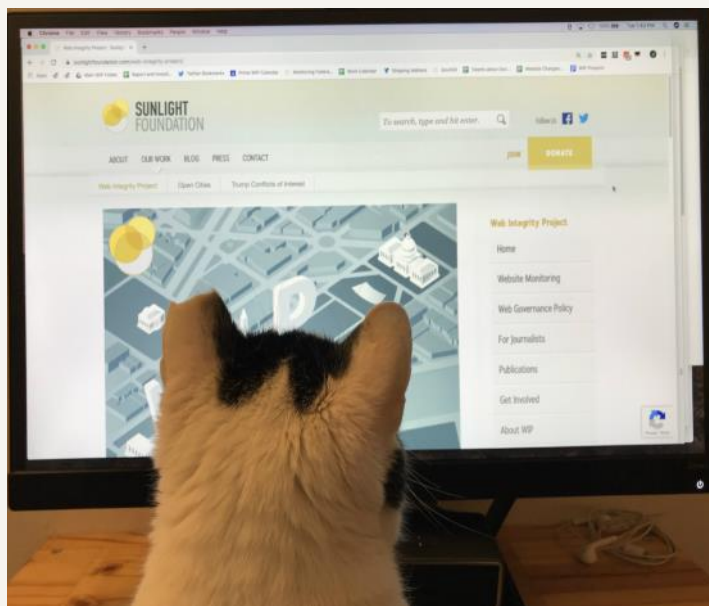
For more information on WIP's web monitoring process, see analyst Aaron Lemelin's ["The Web Integrity Project's monitoring processes reveal an increasing disparity in Spanish-language HIV/AIDS content."](#)

Since the Web Integrity Project began regularly monitoring the SAMHSA website in March 2018, we have reviewed thousands of changes to the website. Many of these changes were routine or minor — updates to source code, RSS feeds, and statistics, or the addition of a news release; a small proportion of the changes required further

vetting; and an even smaller proportion are reported here.

This report is not exhaustive of all significant or meaningful changes on the SAMHSA website since March 2018. The changes documented here were chosen because they fit within the larger website overhaul that SAMHSA was undertaking at the time.

To read our other web monitoring publications, please visit: <https://sunlightfoundation.com/web-integrity-project/publications/>.



Unofficial spokesperson, Walter, visits the Sunlight Foundation's website regularly. Be like Walter!
<https://sunlightfoundation.com/web-integrity-project/>





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