



Workforce Diversity: Characteristics of CD Clinical Staff in CD Treatment Agencies in Washington State

Results from the 2012 Behavioral Health Treatment Provider Survey

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July 2016

Background and Purpose

The Division of Behavioral Health and Recovery (DBHR) has regularly conducted a census of providers to gather information about the characteristics of treatment staff working in publicly funded chemical dependency (CD) treatment agencies in Washington State. The findings are used to identify disparities and other issues related to workforce planning and development. In 2012, the census of providers was part of the Behavioral Health Treatment Provider Survey. The survey had a section on staffing that asked agency directors to list the position, or title, of their CD clinical staff and, for each position, provide the following information about the person occupying that position: average number of hours worked per week, gross annual salary, gender, race/ethnicity, multilingual status, highest educational degree, Washington State Department of Health (DOH) credentials, training in evidence-based practice (EBP), and training in trauma-informed care. Clinical staff was defined as individuals who provide direct services such as assessment, diagnosis, and treatment to CD clients. This report summarizes the information gathered from the 2012 Behavioral Health Treatment Provider Survey about the characteristics of the CD clinical staff in publicly funded CD treatment agencies in Washington State.

The Workforce Sample

DBHR identified a population of 442 mental health (MH) and CD treatment agencies that offered DBHR-certified, publicly funded treatment services. Invitations were sent to agency directors asking them to complete the survey. The Web-based survey was launched on December 17, 2012, and closed on May 31, 2013. Out of the 442 agencies, 387, or 88 percent, completed the survey. The staffing section of the survey was offered only to CD treatment agencies and not to mental health treatment providers because it historically has been administered to CD providers by the former Division of Alcohol and Substance Abuse as part of a policy to monitor staff diversity. The survey defined CD providers as those that offer CD only or both MH and CD treatment services. Out of the 333 CD providers in the sample, 268, or 80 percent, completed the staffing section of the survey.

The 268 agencies generated a workforce sample of 1,340 full-time equivalent (FTE) positions. Since it cannot be ascertained what percentage the sample of 1,340 FTEs represents out of the undetermined number of all CD clinical staff employed in publicly funded CD treatment agencies in the state, the findings from the survey are

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generalizable only to the 80 percent of publicly funded CD treatment agencies that completed the staffing section of the survey. Despite this limitation, however, the results can be used to create a profile and help assess the level of diversity among the CD clinical workforce employed in publicly funded CD treatment agencies in Washington State.

The Workplace: Characteristics of CD Treatment Agencies

More than 60 percent of the CD treatment agencies were either independent, community-based agencies (30%) or local branches of multi-site health care organizations (32%). A third of the agencies did not fall into either of these two categories. Table 1 (Appendix, pages 6-7) shows that:

- Ninety-one percent of the agencies served adults, 49 percent served youth, and 40 percent served both adults and youth.
- Agencies were almost equally split between those providing CD treatment services only (51%) and those providing both MH and CD treatment services (49%).
- Among those providing both MH and CD treatment services, 49 percent reported having a separate program or staff for each and 39 percent a single or an integrated MH and CD program.
- Eighty-six percent of the agencies provided outpatient and 26 percent residential CD treatment services.
- Seventy-four percent reported having a process in place to assess the cultural competency of staff at their facility.
- When asked which population-specific services they provide, 39 percent of the agencies reported offering services specific to women, 37 percent to youth, and 30 percent to men. Nearly 20 percent reported providing services specific to Native American and close to 15 percent to Hispanic clients. Some of the agencies reported offering services designed for African American (8%), Asian/Pacific Islander (7%), and Gay, Lesbian, Bisexual, Transgender, and Questioning (GLBTQ) clients (8%).

Characteristics of CD Clinical Staff

The 2012 Behavioral Health Treatment Provider Survey defines clinical staff as professionals who provide direct services such as assessment, diagnosis, and treatment to CD patients. The number of CD clinical staff positions reported by the 268 responding agencies ranged from 1 to 59 FTEs, with 183 agencies (68%) listing 1-5 positions, 58 agencies (22%) 6-10 positions, and 27 (10%) 11-59 positions. Of the 1,340 FTEs, 625 (47%) were in agencies providing CD treatment only and 714 (53%) in agencies providing both MH and CD treatment services. Table 2 (Appendix, pages 8-9)

presents a profile and compares the characteristics of CD clinical staff between CD only and both MH and CD treatment agencies.

- Overall, females made up the majority of CD clinical staff, about 65 percent, and males 35 percent.
- Most were White (65%) and the rest were African-American (6%), Hispanic (5%), Native American (4%), Asian/Pacific Islander (3%), and Multiracial (4%).
- Ten percent were reported to speak a language other than English. Spanish was the most common language reported for multilingual speakers, 44 percent (see Appendix, Table 4, page 11).
- Twenty-nine percent completed a Bachelor's degree and 26 percent a Master's or Doctorate degree.
- Agencies providing both MH and CD treatment services appeared to have a significantly higher proportion of CD clinical staff with a Master's or Doctorate degree than CD only agencies (37% versus 15%).
- Sixty-nine percent of the CD clinical staff were reported to have a Chemical Dependency Professional (CDP) and 24 percent a Chemical Dependency Professional Trainee (CDPT) credential.
- CD only agencies appeared to have a significantly higher proportion of CDPs than both MH and CD agencies (74% versus 65%), but showed a significantly lower proportion of CDPTs than agencies providing both MH and CD (19% versus 27%).
- Six percent of the CD clinical staff were reported to be dually certified in MH and CD.
- Agencies providing both MH and CD appeared to have a significantly higher proportion of dually certified CD clinicians than CD only agencies (9% versus 2%).
- Seventy-two percent of the CD clinical staff were reported to have had training in at least one EBP. The more commonly reported EBP training that CD clinical staff received was in Motivational Interviewing (28%) and in cognitive behavioral therapies (18%). (See Appendix, Table 6, pages 13-14.)
- Thirty percent of the CD clinical staff were reported to have received training in trauma-informed care, but the proportion was significantly higher in agencies providing both MH and CD than in CD only agencies (44% versus 14%).
- Overall, the median salary for CD clinical staff was \$39,520, but it was higher in both MH and CD than in CD only agencies, \$40,000 versus \$37,440 (see Appendix, Table 3, page 10). The national median salary for comparable substance abuse and behavioral disorder counselors for 2012 was \$38,520¹.

CD Clinical Staff and CD Treatment Population Served²

- The majority of CD clinical staff were female serving a mostly male treatment population.
- The representation of Hispanics, Native Americans, Multiracials, and African-Americans was lower among CD clinical staff than in the treatment population served. Differences were larger in Hispanics (5.1%), Multiracials (5.1%), and Native Americans (4%) than in African-Americans (1.5%).

	CD Clinical Staff (n=1,340)		Unduplicated Count of CD Clients Admitted into Publicly Funded Treatment in State Fiscal Year 2013 (n=39,619)	
	Count	%	Count	%
Gender				
Male	470	35.1%	25,321	63.9%
Female	870	64.9%	14,361	36.2%
Race/Ethnicity				
White	875	65.3%	24,804	62.6%
African-American	79	5.9%	2,928	7.4%
Hispanic	66	4.9%	3,958	10.0%
Native American	50	3.7%	3,018	7.6%
Asian/Pacific Islander	42	3.2%	663	1.7%
Multiracial	51	3.8%	3,542	8.9%
Other/Unknown	177	13.2%	1,216	3.1%

Conclusion

This report presents a profile of the CD clinical workforce in publicly funded CD treatment agencies in Washington State. The profile can help assess the level of diversity among CD clinical professionals and identify issues that can be addressed in workforce planning and development. Results indicate that more than half of the CD clinical professionals possessed a Bachelor's or graduate degrees, but more of those with graduate degrees worked in both MH and CD than in CD only agencies. The median salary of CD clinical staff in Washington State was higher than the national median earnings for comparable substance abuse and behavioral disorder counselors by a thousand dollars. Less than 10 percent was dually certified in MH and CD. Non-Whites constituted at least a fifth of the CD clinical staff, but made up a third of the treatment population, which suggests a need for policies designed to support training, recruitment, and hiring of more non-White CD professionals.

Technical Notes

The 2012 Behavioral Health Treatment Provider Survey

The Division of Behavioral Health and Recovery launched the Web-based survey on December 17, 2012, with data collection ending on May 31, 2013. Prior to the launching, DBHR sent invitations to directors of 442 behavioral health treatment agencies in Washington State asking them to participate in the survey. The number of 442 is a population, not a random sample, of treatment facilities known to DBHR as of October 2012 to be providing publicly funded CD and MH treatment services in Washington State. The invitation explained the purpose of the survey and gave agency directors instructions on how to access the survey using the Internet. Directors were asked to complete the survey for their respective agency. The survey asked questions related to agency characteristics, treatment services, evidence-based practices, and quality improvement efforts. The last part of the survey is a section which applied only to CD treatment facilities and asked directors to list the position or title, not names, of their CD clinical staff and, for each person occupying the position, provide information on the average number of hours worked per week, gross annual salary, highest educational degree, gender, race/ethnicity, multilingual status, language spoken other than English if multilingual, Department of Health credentials, training in EBP, and training in trauma-informed care. Although the information was reported by agency directors, it is assumed that they do their best to provide the best information available about their staff. Out of the 442 agencies, 387, or 88 percent, completed the survey. There were 268 CD treatment agencies in all that completed the staffing section of the survey. This number represents 80 percent of the 333 agencies identified as CD providers in the overall sample of 442.

The 268 agencies altogether listed 1,449 CD clinical staff positions. The cases were weighted on full-time equivalency rate (FTE) since the average number of hours worked per week varies across positions. An FTE was calculated as the reported average number of hours an employee worked per week multiplied by 52 weeks and divided by 2088 hours, using the Office of Financial Management definition (<http://www.ofm.wa.gov/policy/25.10.htm>). After weighting the cases by FTE, the 1,449 positions yielded a total of 1,340 full-time equivalents (FTEs).

Appendix

Table 1
Characteristics of Publicly Funded CD Treatment Agencies Responding to the Survey

Agency Characteristics	Count (n=268)	%
<i>Type of Organization</i>		
An independent, community-based agency	81	30.2
A local branch of a multi-site health care organization	85	31.7
The main office of a multi-site health care organization	18	6.7
Other	84	31.3
<i>Population served</i>		
Adult	243	90.7
Youth	132	49.3
Adult and Youth	107	39.9
<i>Treatment Services Provided</i>		
Chemical dependency (CD) only	136	50.7
Mental Health and Chemical Dependency (MH & CD)	132	49.3
<i>If providing both CD and MH treatment services: (n =132)</i>		
Have a separate program or staff for each service	65	49.2
Have a single or integrated program or staff for both	52	39.4
Some other program	15	11.4
<i>CD Treatment Modalities Provided</i>		
Intensive Inpatient	48	17.9
Recovery House	7	2.6
Long-term residential	15	5.6
<i>Subtotal (Residential Treatment Services)</i>	70	26.1
Outpatient	230	85.8
Opiate treatment program	22	8.2
Detox services	18	6.7
<i>MH Treatment Services Provided</i>		
Crisis services	84	31.3
Freestanding evaluation and treatment	46	17.2
Group treatment services	94	35.1
Individual treatment services	124	46.3
Intake evaluation	116	43.3
Prescribing	87	32.5
Mental health services in residential settings	28	10.4
Peer support	51	19.0
Special population evaluation	62	23.1
<i>If a person is assessed with co-occurring disorders at this facility, do you:</i>		
Treat the substance abuse (SA) disorder only and refer to another facility for MH treatment	97	36.2
Treat both SA and MH disorders at this facility	133	49.6
Treat the MH disorder only and refer the person to another treatment facility for SA treatment	2	0.7
Refer to another treatment facility that specializes in COD treatment	3	1.1

Agency Characteristics	Count (n=268)	%
No, we do not assess for COD at this facility	11	4.1
Do something else	21	7.8
Not applicable	1	0.4
<i>Do you provide co-occurring disorders (COD) treatment services at this facility?</i>		
Yes	137	51.1
No	122	45.5
Don't know/Not applicable	9	3.4
<i>Do you have a process in place to assess the cultural competency of staff at this facility?</i>		
Yes	197	73.5
No	61	22.8
Don't know/Not applicable	10	3.7
<i>Population-specific services provided at this facility</i>		
Women	105	39.2
Men	79	29.5
Youth	100	37.3
Native American	52	19.4
Hispanic	38	14.2
African American	20	7.5
Asian/Pacific Islander	19	7.1
Gay, Lesbian, Bisexual, Transgender, Questioning	21	7.8
<i>Washington State Department of Social and Health Services (DSHS) Region</i>		
Region 1 (Spokane-Yakima)	70	26.1
Region 2 (Seattle-Everett)	98	36.3
Region 3 (Tacoma-Vancouver)	100	37.3
<i>Type of Agency</i>		
Community-based	220	82.1
Correctional (Department of Corrections/Juvenile Justice & Rehabilitation Administration)	48	17.9

Table 2
 Characteristics of CD Clinical Staff Reported by Publicly Funded CD Treatment Agencies*

Staff Characteristics		Treatment Provided by Agency					
		CD Only (n=625)		Both MH & CD (n=714)		Overall (n=1,340)	
		Count	%	Count	%	Count	%
Gender	Male	218 _a	34.9	252 _a	35.2	470	35.1
	Female	407 _a	65.1	463 _a	64.8	870	64.9
Race/Ethnicity	White	362 _a	57.9	513 _b	71.8	875	65.3
	African-American	40 _a	6.4	39 _a	5.4	79	5.9
	Hispanic	32 _a	5.1	34 _a	4.8	66	4.9
	Native American	19 _a	3.1	31 _a	4.3	50	3.7
	Asian/Pacific Islander	8 _a	1.3	34 _b	4.8	42	3.2
	Multiracial	15 _a	2.4	36 _b	5.0	51	3.8
	Other	2 _a	0.3	4 _a	0.5	6	0.4
	Unknown	147 _a	23.6	24 _b	3.4	171	12.8
Race/ethnicity collapsed	White	362 _a	57.9	513 _b	71.8	875	65.3
	Non-White	116 _a	18.5	177 _b	24.8	293	21.9
	Unknown	147 _a	23.6	24 _b	3.4	171	12.8
Highest Educational Degree	High school	12 _a	1.9	16 _a	2.2	28	2.1
	Some college	69 _a	11.1	40 _b	5.6	109	8.2
	Associate's degree	136 _a	21.8	153 _a	21.4	289	21.6
	Bachelor's degree	177 _a	28.3	209 _a	29.2	385	28.8
	Master's degree	89 _a	14.2	249 _b	34.9	338	25.2
	Doctorate degree	4 _a	0.6	12 _a	1.7	16	1.2
	Other	3 _a	0.5	8 _a	1.2	12	0.9
	Unknown	135 _a	21.6	27 _b	3.8	162	12.1
Highest educational degree collapsed	High school / Some college	81 _a	13.0	56 _b	7.8	137	10.2
	Associate's degree	136 _a	21.8	153 _a	21.4	289	21.6
	Bachelor's degree	177 _a	28.3	209 _a	29.2	385	28.8
	Master's / Doctorate degree	93 _a	14.8	262 _b	36.6	354	26.5
	Other/Unknown	139 _a	22.2	35 _b	4.9	174	13.0
Multilingual Status	Yes	47 _a	7.5	84 _b	11.7	131	9.8
	No	412 _a	65.8	552 _b	77.2	963	71.9
	Unknown	166 _a	26.6	79 _b	11.1	246	18.3
With CDP or CDPT Credential**	CDP	465 _a	74.4	465 _b	65.0	930	69.4
	CDPT	122 _a	19.4	193 _b	27.1	315	23.5
	No CDP/CDPT license	38 _a	6.1	56 _a	7.9	95	7.1
Dually certified MH and CD***	Yes	12 _a	1.9	66 _b	9.2	78	5.8
	No	613 _a	98.1	649 _b	90.8	1262	94.2
Trained in at least one EBP	Yes	472 _a	75.5	492 _b	68.9	964	72.0

Staff Characteristics		Treatment Provided by Agency					
		CD Only (n=625)		Both MH & CD (n=714)		Overall (n=1,340)	
		Count	%	Count	%	Count	%
	No	93 _a	14.9	97 _a	13.6	190	14.2
	Unknown	60 _a	9.6	125 _b	17.5	185	13.8
Trained in trauma-informed care	Yes	84 _a	13.5	315 _b	44.1	399	29.8
	No	273 _a	43.6	269 _b	37.7	542	40.5
	Unknown	268 _a	42.9	130 _b	18.2	399	29.8
DSHS Region	Region 1	165 _a	26.3	164 _a	22.9	328	24.5
	Region 2	179 _a	28.6	372 _b	52.0	551	41.1
	Region 3	282 _a	45.1	179 _b	25.1	461	34.4
	Overall	625	100.0	714	100.0	1340	100.0

Note: Values in the same row and subtable not sharing the same subscript are significantly different at $p < .05$ in the two-sided test of equality for column proportions. Cells with no subscript are not included in the test. Tests assume equal variances.

*The unit of analysis is one full-time equivalent (FTE). Cases were weighted on FTE to account for the varying average number of hours worked per week. The sum of the counts may not equal the total number of cases for each group because of weighting.

**CDP and CDPT refer, respectively, to Chemical Dependency Professional and Chemical Dependency Professional Trainee and are recognized as health professionals in Washington State, see <http://app.leg.wa.gov/WAC/default.aspx?cite=246-811&full=true>

***Dually certified in MH and CD means a clinical professional has both Department of Health credential in a mental health field and a CDP license.

Table 3
Median Gross Annual Salary Reported for CD Clinical Staff*

Staff Characteristics		Treatment Provided by Agency					
		CD Only (n=395)		Both MH & CD (n=445)		Overall (n=840)	
		Median	Count	Median	Count	Median	Count
Gender	Male	\$37,444	135	\$41,600	152	\$40,000	287
	Female	\$37,440	260	\$40,000	292	\$39,000	552
Race/ethnicity collapsed	White	\$37,440	305	\$40,000	320	\$39,520	625
	Non-White	\$37,440	89	\$41,600	109	\$40,000	198
	Unknown	\$48,000	1	\$33,000	16	\$33,000	17
Highest educational degree collapsed	High school/Some college	\$35,000	71	\$33,196	36	\$34,336	107
	Associate's degree	\$35,000	107	\$39,520	114	\$36,000	221
	Bachelor's degree	\$38,928	144	\$39,000	137	\$39,000	281
	Master's / Doctorate	\$41,600	71	\$44,000	142	\$44,000	213
	Other/Unknown	\$38,000	3	\$34,000	15	\$34,000	18
Multilingual Status	Yes	\$34,103	33	\$42,000	56	\$40,000	90
	No	\$37,440	338	\$40,000	349	\$39,520	687
	Unknown	\$39,000	24	\$38,000	39	\$38,000	63
With CDP or CDPT License	CDP	\$40,000	291	\$42,000	313	\$41,000	604
	CDPT	\$29,580	88	\$31,200	108	\$30,009	196
	Not CDP nor CDPT	\$42,000	16	\$48,000	23	\$43,264	39
Dually certified CD and MH	Yes	\$42,600	10	\$48,000	48	\$47,000	58
	No	\$37,440	385	\$39,930	397	\$38,875	782
Trained in at least one EBP	Yes	\$38,800	266	\$42,000	299	\$40,000	565
	No	\$35,000	79	\$35,360	76	\$35,000	155
	Unknown	\$40,000	50	\$37,440	70	\$38,056	120
Trained in trauma- informed care	Yes	\$39,000	68	\$40,800	161	\$40,000	229
	No	\$36,500	196	\$40,000	205	\$38,000	401
	Unknown	\$38,875	131	\$39,460	78	\$39,000	210
DSHS Region	Region 1	\$36,500	127	\$39,823	129	\$38,056	255
	Region 2	\$37,448	117	\$42,000	201	\$40,000	318
	Region 3	\$38,000	152	\$38,000	115	\$38,000	267
	Overall	\$37,440	395	\$40,000	445	\$39,520	840

*The unit of analysis is one FTE. Cases were weighted on FTE to account for the varying average number of hours worked per week. Note that salary information was reported only for 840 FTEs. The sum of the counts may not equal the total number of cases for each group because of weighting.

Table 4
 Languages Other than English Reported Spoken by CD Clinical Staff*

Languages Other Than English	Treatment Provided by Agency					
	CD Only (n=47)		Both MH & CD (n=84)		Overall (n=131)	
	Count	%	Count	%	Count	%
Chinese			1	1.2	1	0.8
German			4	4.7	4	3.0
Indonesian			1	1.2	1	0.8
Korean	2	4.2	1	1.2	3	2.3
Laotian			2	2.4	2	1.5
Mien			3	3.1	3	2.0
Ojibwe	1	2.1			1	0.8
Polish			1	1.2	1	0.8
Sign Language	1	2.1			1	0.8
Spanish	24	51.4	33	39.8	57	44.0
Swahili	1	2.1	1	1.2	2	1.5
Swedish	1	1.1			1	0.4
Tagalog			1	1.3	1	0.8
Tongan			1	1.2	1	0.8
Italian	1	1.1			1	0.4
Thai			2	2.4	2	1.5

*The unit of analysis is one FTE. Note that language other than English applies only to the 131 multilingual FTEs. More than one language can be specified; hence, the sum of the counts may not equal the total number of cases for each group, and the percentages may not equal 100 percent. The value of the percentages may be influenced by weighting and rounding.

Table 5
Department of Health Credentials Reported for CD Clinical Staff*

DOH Credentials	Treatment Provided by Agency					
	CD Only (n=625)		Both MH & CD (n=714)		Overall (n=1,340)	
	Count	%	Count	%	Count	%
Advanced RN Practitioner	2 _a	0.3	1 _a	0.1	3	0.2
Agency Affiliated Counselor	5 _a	0.8	70 _b	9.7	75	5.6
Certified Adviser			1 _a	0.1	1	0.1
Certified Counselor	5 _a	0.8	4 _a	0.6	9	0.7
Chemical Dependency Professional	465 _a	74.4	465 _b	65.0	930	69.4
Chemical Dependency Professional Trainee	122 _a	19.4	193 _b	27.1	315	23.5
Marriage and Family Therapist	1 _a	0.2	9 _b	1.3	10	0.8
Marriage and Family Therapist - Associate	2 _a	0.3	1 _a	0.1	3	0.2
Medical Doctor			1 _a	0.1	1	0.1
Mental Health Counselor	2 _a	0.3	39 _b	5.5	41	3.1
Mental Health Counselor - Associate	6 _a	1.0	14 _a	1.9	20	1.5
Psychologist			5 _a	0.7	5	0.4
Registered Nurse	20 _a	3.2	6 _b	0.8	26	1.9
Social Worker Associate Advanced	1 _a	0.2	3 _a	0.4	4	0.3
Social Worker	5 _a	0.8	15 _b	2.2	20	1.5
Social Worker Associate Independent	3 _a	0.5	15 _b	2.1	18	1.3

Note: Values in the same row and subtable not sharing the same subscript are significantly different at $p < .05$ in the two-sided test of equality for column proportions. Cells with no subscript are not included in the test. Tests assume equal variances.

*The unit of analysis is one FTE. Respondents can select multiple responses; hence, the sum of the counts may not equal the total number of cases for each group and the percentages may not equal 100 percent.

Table 6
EBPs Specified for CD Clinical Staff Reported to Have Received EBP Training*

Evidence-based Practices	Number of CD Clinical Staff With Training in this EBP by Treatment Provided by Agency					
	CD Only (n=472)		Both MH & CD (n=492)		Total (n=964)	
	Count	%	Count	%	Count	%
12 Step Facilitation	47	10.0	22	4.4	69	7.1
Adolescent Community Reinforcement Approach	5	1.1	6	1.2	11	1.1
Adolescent Community Reinforcement Approach with Assertive Continuing Care	1	0.2	5	1.0	6	0.6
Anger Management	3	0.6	3	0.6	6	0.6
Assertive Community Treatment	1	0.2	2	0.5	3	0.4
Brief Intervention Therapy	2	0.4			2	0.2
Brief Risk Intervention	2	0.4			2	0.2
Brief Strategic Family Therapy			1	0.2	1	0.1
Cognitive Behavioral Therapy	47	9.9	108	21.9	154	16.0
Cognitive Behavioral Therapy – Trauma Focused	1	0.2	9	1.8	10	1.0
Cognitive Behavioral Therapy Five (CBT 5)	6	1.4	1	0.2	7	0.8
Cognitive Behavioral Therapy Plus (CBT Plus)			5	1.0	5	0.5
Community Reinforcement Approach	1	0.2	2	0.4	3	0.3
Contingency Management	8	1.7	15	3.0	23	2.4
Coping Skills	9	1.9	4	0.8	13	1.3
Dialectical Behavioral Therapy	27	5.8	42	8.5	70	7.2
Eye Movement Desensitization and Reprocessing			4	0.8	4	0.4
Family Intervention for Suicide Prevention			1	0.2	1	0.1
Family Psychoeducation			1	0.2	1	0.1
Family Systems Therapy			1	0.2	1	0.1
GAIN Assessment [†]	3	0.6	10	2.1	13	1.4
Guiding Good Choices [§]	2	0.4	1	0.2	3	0.3
Illness Management and Recovery			3	0.6	3	0.3
Integrated Treatment for Co-occurring Disorders	3	0.6	25	5.1	28	2.9
Living in Balance	7	1.5	7	1.4	14	1.5
Matrix Model	35	7.4	27	5.4	62	6.4
Medication Assisted Therapy	4	0.9	6	1.2	10	1.1
Medication Management			2	0.4	2	0.2
Moral Reconation Therapy	45	9.6	27	5.4	72	7.4
Motivational Enhancement Therapy	15	3.1	10	2.0	24	2.5
Motivational Interviewing	93	19.7	172	34.9	265	27.5
Multisystemic Therapy			1	0.2	1	0.1
Rational Emotive Behavioral Therapy	1	0.2	4	0.8	5	0.5
Relapse Prevention	34	7.2	43	8.7	77	8.0
Screening, Brief Intervention and Referral to Treatment	1	0.1			1	0.1
Seeking Safety	14	2.9	26	5.3	40	4.1

Evidence-based Practices	Number of CD Clinical Staff With Training in this EBP by Treatment Provided by Agency					
	CD Only (n=472)		Both MH & CD (n=492)		Total (n=964)	
	Count	%	Count	%	Count	%
Solution Focused Therapy			1	0.2	1	0.1
Strengthening Families [§]	2	0.4	1	0.2	3	0.3
The Seven Challenges	14	3.0	17	3.5	31	3.3
Wellness Recovery Action Plan			1	0.2	1	0.1

*The unit of analysis is one full-time equivalent (FTE). Note that EBPs specified apply only to the 964 FTEs reported to have received EBP training. More than one EBP can be specified; hence, the sum of the counts may not equal the total number of cases for each group and the percentages may not equal 100 percent.

†GAIN stands for The Global Appraisal of Individual Needs, considered a best-practice assessment tool.

§These are prevention programs designed for parents and youth and are listed in the *National Registry of Evidence-based Programs and Practices*, Substance Abuse and Mental Health Services Administration (SAMHSA).

Endnotes

¹ Based on the 2012 national median earnings for substance abuse and behavioral disorders counselors in the U.S. Department of Labor, Bureau of Labor Statistics homepage: <http://www.bls.gov/oes/current/oes211011.htm>. Accessed March 31, 2014.

² Data on the number of CD treatment population for SFY 2013 were taken from The System for Communicating Outcomes, Performance & Evaluation (SCOPE-WA). Accessed June 1, 2015.