

# SF Managed Alcohol Program's Aim to Serve the Latinx Population with Severe AUD

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**Introduction:** Alcohol related mortality is increasing nationally. Latinx individuals experience worse alcohol-related health complications and mortality, face greater criminalization, and have limited access to treatment. In San Francisco, 26% of individuals with AUD receiving care within the behavioral health system identify as Latinx despite only comprising 15% of the overall population. Alcohol-attributable premature mortality ranks among the top five causes of death for Latino males in SF.

**Managed Alcohol Programs** are a harm reduction strategy to support individuals with AUD who are not interested in abstinence-based support. The primary goal of MAP is not to decrease the amount of alcohol used, rather to mitigate the health, legal, and interpersonal harms associated with unsafe alcohol. MAP programs also aim to decrease emergency care utilization, support housing stability, and improve client quality of life for participants.

**SF MAP** was created in May 2020 as a covid response program serving up to 10 individuals. The program expanded in 2023 with the goal of 20 beds with 10 earmarked to serve the Latinx/Indigenous Mayan community in San Francisco.

## Features of the San Francisco MAP Model

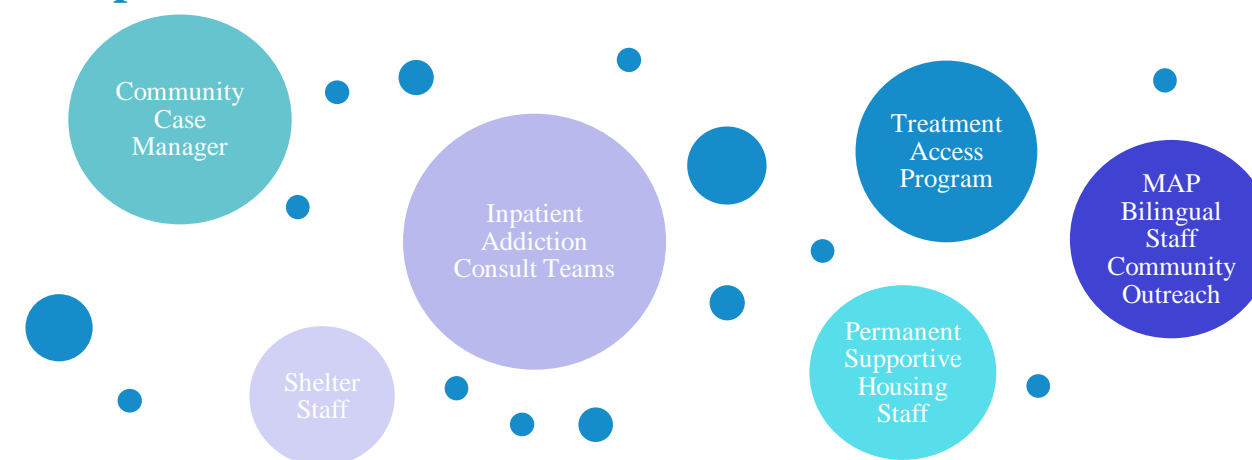


## Outreach and Recruitment

### Revised Intake Criteria:

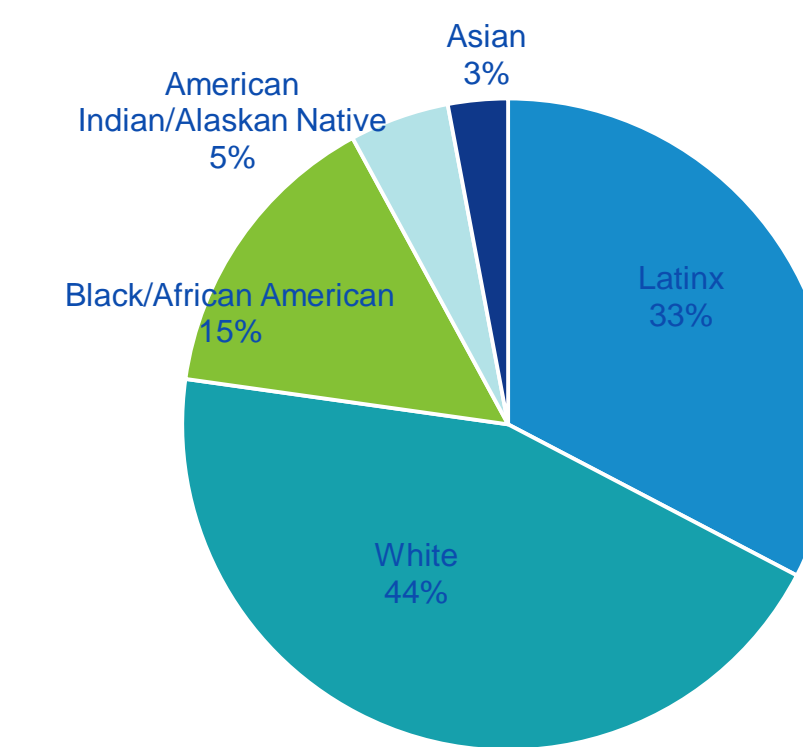


### Expanded Referral Sources and Outreach Partners



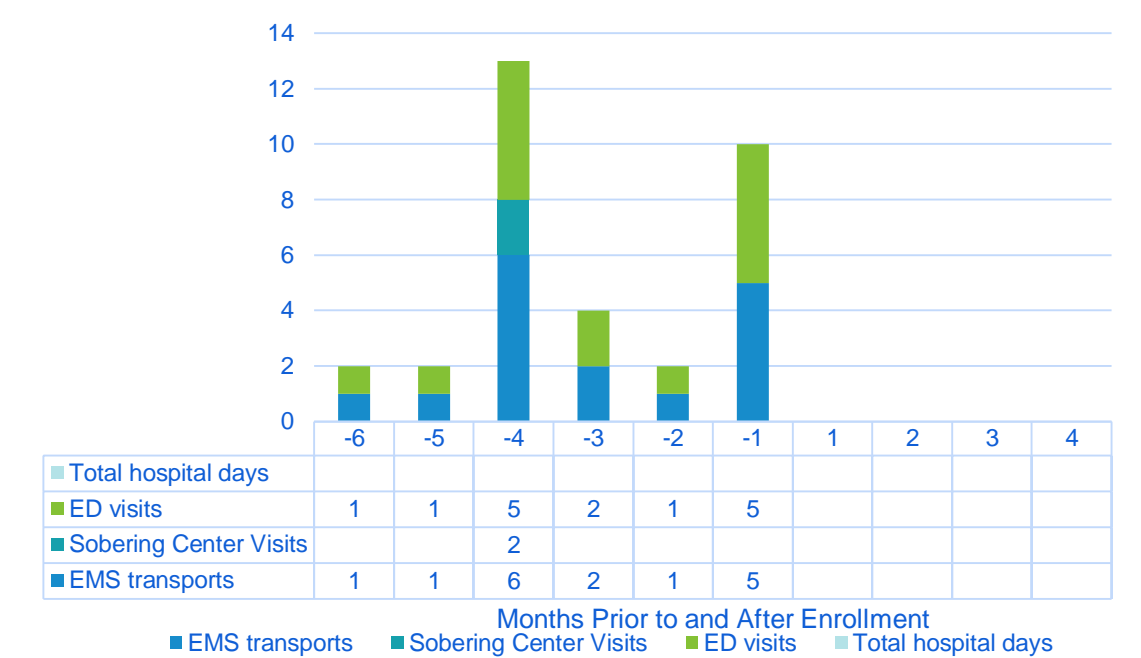
## Clients Served

**40 Unique Clients**  
**56 Discrete Episodes**  
**Median Age 55, Range 29-76**  
**88% Male Identifying**



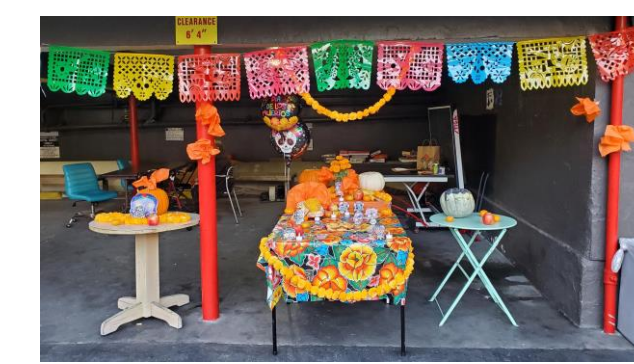
## Case Study

47M monolingual Spanish speaking Mayan, with severe alcohol use disorder and TBI. At risk of losing permanent supportive housing due to intoxication related behaviors and lack of self care. Initial goal was to cut back/stop alcohol use but has been ambivalent about taking steps in that direction. Currently working on deepening connection to primary care and intensive case management.



## Approaches to Implementing Culturally Sensitive Programming

- Needs Assessment with Community Partners**
  - San Francisco city-wide Latinx taskforce
  - Local CBO partners
  - UCSF Latino Center for Excellence
- Qualitative Assessment**
  - Partnering with qualitative research team to explore client perspectives for programmatic growth and development
- Hiring Prioritization**
  - Bilingual/bicultural special conditions for new program positions
- Language Concordant Clinical Services**
  - Integration of low barrier language concordant mental health services
- Culturally Informed Programming**
  - Client identified programs and partnerships



## Outstanding Challenges and Next Steps

- Slow process of acceptance for the MAP harm reduction model amongst both participants and community partners
- Structural inequalities around benefit and income eligibility impacting participant goals and experience
- Limited disposition options/next steps for program participants
- Development of program evaluation schema that focuses on the experience of Latinx clients

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