



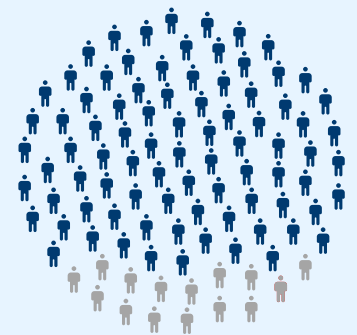
SAMHSA's Minority Fellowship Program (MFP)

As part of a broader effort to bolster the behavioral health workforce, the Minority Fellowship Program (MFP) was established by Congress in 1973 to increase the number of well-trained, culturally competent professionals in clinical practice, research, education, and policy development. Administered by the Substance Abuse and Mental Health Services Administration (SAMHSA), MFP provides funding for training, career development, and mentoring for mental and behavioral health professionals to work in underserved communities with limited access to services. Specifically, the program focuses on training students, postdoctoral fellows, and residents in culturally competent mental and behavioral health care to address the needs of underserved communities.

Barriers to Care: Cultural, Linguistic, and Financial

Provider shortages: Culturally and linguistically competent care ensures that mental and behavioral health professionals can effectively understand and address the unique cultural, linguistic, and social needs of all populations, including those who living in rural communities, where shortages of qualified providers are particularly acute. This competence helps in creating personalized treatment plans that acknowledge patients' cultural backgrounds, leading to more effective outcomes and reducing mental and behavioral health stigma.

Financial Barriers: Financial barriers are the primary reason identified that people do not enroll in graduate programs.ⁱ Among those who do undergo graduate studies, students from underresourced communities, including those who are low-income and first-generation college students, often carry a greater financial burden; they often must take on more student loans than their peers, and have more difficulty repaying their educational debt.ⁱⁱ These factors contribute to the provider shortages, particularly in underserved and rural areas.



85% of unenrolled adults cite cost as an important reason they are not pursuing a postsecondary degree, ranking financial concerns ahead of all other factors by at least eight percentage points.ⁱ

MFP Aims to:

- Increase proficiency of mental and behavioral health providers in **prevention, treatment, and recovery support** for individuals from underrepresented populations who have mental and/or behavioral health conditions and/or substance use disorders.
- Improve **access to and quality of mental and behavioral health services** among underrepresented populations.
- Provide funding for **training, career development, and mentoring** for mental and behavioral health professionals to work with diverse populations.
- Ensure **access to behavioral health services** for all Americans, regardless of language or culture, thereby reducing health disparities and improving community health and well-being.ⁱⁱⁱ

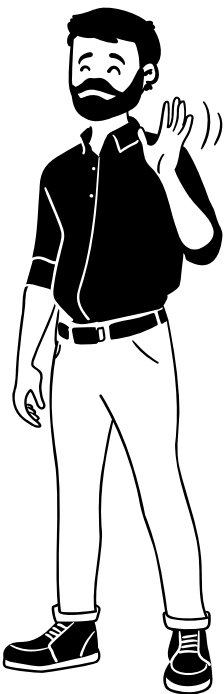
Funding History

Fiscal year	2020	2021	2022	2023	2024	2025
Enacted level (in millions)	\$14.2	\$16.2	\$16.2	\$19.4	\$19.4	TBD

Testimonial

The financial support I received after being awarded the fellowship allowed me to focus on my studies and clinical practices without having to have a side job to cover my expenses.

The MFP support helped me to stay on track, and being an MFP fellow has continued to open doors for me as an emerging practitioner.



Samuel J. Ocasio-Dominguez, PhD

ⁱ Gallup, Inc & Lumina Foundation. (2024). *Cost of college: The price tag of higher education and its effect on enrollment*. <https://www.luminafoundation.org/resource/cost-of-college/>

ⁱⁱ American Council on Education. (2019). *How Students Finance Graduate Study*. <https://www.equityinhighered.org/indicators/how-students-finance-graduate-education/>

ⁱⁱⁱ Substance Abuse and Mental Health Services Administration. (2023). *Minority Fellowship Program* (Publication No. PEP23-01-00-004). <https://library.samhsa.gov/product/minority-fellowship-program/pep23-01-00-004>