



### IN THIS ISSUE

NIH Reorganization	2
Community Prevention Day	2
Health Reform Update	3
Upcoming Events	3
Drunk Driving Data	4
Alcohol Advertising	4
Healthy People 2020	5
Teen Marijuana Use	5
Prevention Trivia	5
Tobacco	6
Employment Opportunities	6
Funding Opportunities	7

## **NPN President Participates in Prevention Strategy Stakeholder Meeting**

**O**n Wednesday, December 15, National Prevention Network (NPN) President Craig PoVey (Utah) served as a panelist in a meeting of approximately 200 participants sponsored by the Department of Health and Human Services (HHS) designed to help guide the development of a U.S. strategy on prevention. Robert Morrison, Executive Director of NASADAD, also attended the meeting.

This “Stakeholders Conference” focused on a provision in the Patient Protection and Affordable Care Act (PPACA) that calls on the creation of a National Prevention Strategy to be developed by the National Prevention, Health Promotion and Public Health Council, which is chaired by Surgeon General Regina Benjamin. The PPACA also calls on the creation of an Advisory Group composed of 25 non-federal members to help the Council develop the document – along with stakeholder meetings such as this one.

Craig PoVey served on a panel titled “Essential Partnerships” that was moderated by Mr. Max Finberg, Director of Faith Based and Neighborhood Partnerships, U.S. Department of Agriculture.

During his remarks, Mr. PoVey noted the importance and benefits of substance abuse prevention. He educated the audience about the Strategic Prevention Framework (SPF) State Incentive Grant (SIG) Model and the Center for Substance Abuse Prevention’s (CSAP) successor program, Partnerships for Success. This program emphasizes the relationship between the State and coalitions to achieve results while using the SPF model. He noted that this public health approach has been critical in addressing prevention priorities in States. It was also noted that the SPF has helped support sustainability as a key ingredient for successful prevention efforts. Finally, Mr. PoVey presented the benefits of a coordinated system of care through a strong role of the State substance abuse agency.

Continued on Page 8

### NPN Executive Committee

President	Craig PoVey
First Vice President	Janice Petersen
VP, External Affairs	L. Diane Casto
VP, Internal Affairs	Michelle Nienhuis
Past President	Debbie Synhorst
Secretary	Charlene Herst
Treasurer	Garrison Gladfelter

### NPN Regional Representatives

Northeast	Garrison Gladfelter
Southeast	Skip Forsyth
Central	Shawnie Rechtenbaugh
Southwest	Stan Paprocki
West	Charlene Herst

### NPN Committee Chairs

- Workforce Development  
Dave Bozell  
Ruth Satterfield
- Multicultural Affairs  
Stephanie McCladdie  
Stan Paprocki
- Research and Evaluation  
Rick Cady  
Garrison Gladfelter
- Public Information and Media  
Esther Betts
- Resource Development  
Mary Ann DiChristopher

## **REMINDERS FOR NPN MEMBERS**

**NPN Public Information and Media Committee Conference Call**  
Tuesday January 11, 2011 3:00 PM EST

**NPN Research and Evaluation Committee Conference Call**  
Wednesday January 19, 2011 3:00 PM EST

**2011 NPN Research Conference Planning Committee Conference Call**  
Thursday January 20, 2011 2:00 PM EST

**NPN Workforce Development Committee Conference Call**  
Thursday January 20, 2011 3:00 PM EST

**NPN Executive Committee Conference Call**  
Wednesday February 16, 2011 2:00 PM EST

## NIH Director Outlines Reorganization Plans

From a *Join Together* Article, 22 November 2010



The director of the National Institutes of Health (NIH) says that a proposal to reorganize the federal government's major research agencies on substance abuse and addictions into a single entity "makes scientific sense," and has outlined a planning process to create a new Institute for "substance use, abuse, and addiction research and related public health initiatives."

In a November 18 message sent to NIH employees and in a press release issued the same day, Francis S. Collins, M.D., Ph.D., said a new single Institute would "enhance NIH's efforts to address the substance abuse and addiction problems that take such a terrible toll on our society."

This September, an NIH expert panel recommended the reorganization to Dr. Collins. The proposal has engendered significant discussion and debate in the addictions research community. Some opponents have expressed concern that the reorganization would diminish focus on alcohol problems such as drunk driving or teenage drinking that don't necessarily involve addiction. Collins' statement last November perhaps notably used "substance use, abuse, and addiction" phrasing throughout.



Francis S. Collins

Collins said a new task force will spend several months in a top-to-bottom assessment of all 27 NIH Institutes and Centers -- including the National Institute on Drug Abuse (NIDA) and the National Institute on Alcohol Abuse and Alcoholism (NIAAA) -- to identify and recommend research programs to be moved into the proposed new Institute. The task force is expected to submit a detailed restructuring plan for the Director's consideration in the summer of 2011.

Continued on Page 8

### NASADAD Board of Directors

Flo Stein  
President  
*North Carolina*

Tori Fernandez Whitney  
First Vice President  
*District of Columbia*

Stephenie Colston  
Vice President for Internal  
Affairs  
*Florida*

Gajef McNeill  
Vice President for  
Treatment  
*Illinois*

Craig PoVey  
Vice President for  
Prevention  
*Utah*

Barbara Cimaglio  
Immediate Past President  
*Vermont*

Michael Botticelli  
Secretary  
*Massachusetts*

Karen Carpenter- Palumbo  
Treasurer  
*New York*

### NASADAD Regional Directors

Michael Botticelli  
*Massachusetts*  
Region I

Karen Carpenter-Palumbo  
*New York*  
Region II

Robin Rothermel  
*Pennsylvania*  
Region III

Cassandra Price  
*Georgia*  
Region IV

TBD  
Region V

Joe Hill  
*Arkansas*  
Region VI

Mark Stringer  
*Missouri*  
Region VII

JoAnne Hoesel  
*North Dakota*  
Region VIII

Renee Zito  
*California*  
Region IX

David Dickinson  
*Washington*  
Region X

Robert Morrison.  
*Executive Director*

## SAMHSA to Host Community Prevention Day

From a *SAMHSA Press Release*, 17 December 2010



The Substance Abuse and Mental Health Services Administration (SAMHSA) will convene its 7th Annual Community Prevention Day on February 7, 2011, in conjunction with the Community Anti-Drug Coalitions of America's (CADCA's) 21st Annual National Leadership Forum, the Nation's largest meeting for community prevention leaders, treatment professionals, and researchers.

This year's National Leadership Forum theme, "Coalitions Moving Forward: Mapping the Future," is focused on the future of alcohol, tobacco, and other drug prevention, treatment, and research. SAMHSA will offer a variety of workshops, including science-based communication and marketing approaches and strategies for working with state health departments. Other presenters will include the Ad Council, National Association of State Alcohol and Drug Abuse Directors (NASADAD), and Grantmakers in Health (GIH).

Plus, be sure to attend some of the NPN-specific workshops that will focus on topics such as "youth taking the lead in prevention" and the "intersection of prevention and recovery," among others. For further details, visit [www.cadca.org](http://www.cadca.org).



Coalitions Moving Forward:  
Mapping the Future

## NASADAD Comments on Health Record Privacy

**T**he National Association of State Alcohol and Drug Abuse Directors (NASADAD) provided comments on what privacy and security risks, concerns and benefits arise from the current state and emerging business models of personal health records (PHRs) and related emerging technologies built around the collection and use of consumer health information. NASADAD noted that for the substance abuse field, a clear understanding of the issues surrounding privacy and security of traditional health records is needed. The letter stated that “there is great benefit to including State Substance Abuse Directors at the front end of planning, particularly with the Patient Protection and Affordable Care Act (PPACA) putting an emphasis on integration of substance use disorders and mental health problems with primary care.”

Continued on Page 8

## NASADAD Comments on Draft Framework

**A** draft framework to guide the development of the National Prevention Strategy was made available for public comment from October 1 – December 5, 2010. Guided by this public input, the National Prevention Council has now developed a preliminary set of draft recommendations - overarching priorities with a focus on communities - that will greatly improve health and wellness in the United States. The final National Prevention Strategy will also include specific actions that the federal government and others in the public, private, and non-profit sectors can take to achieve these priority Recommendations. The Recommendations and Action Items in the final National Prevention Strategy will be based on evidence based interventions. It will also reflect the importance of tracking progress to ensure accountability. **The National Prevention Council is taking feedback on the Draft Strategy until January 13, 2011. To comment on the Strategy go to: [www.hhs.gov/news/reports/nphps.html](http://www.hhs.gov/news/reports/nphps.html).**

# UPCOMING EVENTS

## ON THE PREVENTION CALENDAR

**AOD Abuse Prevention and Intervention Conference**  
**HOST:** Student Affairs Administrators in Higher Education  
**DATE:** January 13-15, 2011  
**LOC:** Miami, FL  
**INFO:** <http://www.naspa.org>

**21st Annual National Leadership Forum**  
**HOST:** CADCA  
**DATE:** February 7-10, 2011  
**LOC:** National Harbor, MD  
**INFO:** <http://www.cadca.org/events/detail/forum2011>

**25th Annual Conference on Prevention of Child Abuse**  
**HOST:** Prevent Child Abuse Texas  
**DATE:** February 28– March 1, 2011  
**LOC:** Dallas, TX  
**INFO:** [www.preventchildabusetexas.org/nextconference.html](http://www.preventchildabusetexas.org/nextconference.html)

**Prevention of Youth Substance Abuse in Rural Communities Conference**  
**HOST:** Coalition for Healthy Youth  
**DATE:** March 7-11, 2011  
**LOC:** Lancaster, SC  
**INFO:** <http://www.CoalitionForHealthyYouth.org>

**DoD/ VA Annual Suicide Prevention Conference**  
**HOST:** Defense Centers of Excellence  
**DATE:** March 13-17, 2011  
**LOC:** Boston, MA  
**INFO:** <http://www.dcoe.health.mil/training/upcomingconferences.aspx>

**National Summit on Smokeless and Spit Tobacco**  
**HOST:** Texas Department of State Health Services  
**DATE:** May 10-12, 2011  
**LOC:** Austin, TX  
**INFO:** <http://www.smokelesstobaccosummit.com>

**19th Annual Meeting**  
**HOST:** Society for Prevention Research  
**DATE:** May 31– June 3, 2011  
**LOC:** Washington, DC  
**INFO:** <http://www.wix.com/sprmeeting/2011>

**NASADAD/NPN/NTN Annual Meeting**  
**HOST:** NASADAD  
**DATE:** June 7-10, 2011  
**LOC:** Indianapolis, IN  
**INFO:** <http://www.nasadad.org>

**National Rural Institute on Alcohol and Drug Abuse**  
**HOST:** University of Wisconsin– Stout  
**DATE:** June 12– 16, 2011  
**LOC:** Menomonie, WI  
**INFO:** <http://www.uwstout.edu/profed/nri/index.cfm>

**National HIV Prevention Conference**  
**HOST:** CDC  
**DATE:** August 14-17, 2011  
**LOC:** Atlanta, GA  
**INFO:** <http://www.2011nhpc.org>

**24th Annual NPN Research Conference**  
**HOST:** National Prevention Network  
**DATE:** September 20-23, 2011  
**LOC:** Atlanta, GA  
**INFO:** <http://swpc.ou.edu/npn>



## Data on Drunk and Drugged Driving

Condensed from a SAMHSA  
Press Release, 9 December 2010

**A** new survey by the Substance Abuse and Mental Health Services Administration (SAMHSA) indicates that on average 13.2 percent of all persons 16 or older drove under the influence of alcohol and 4.3 percent of this age group drove under the influence of illicit drugs in the past year.

Some of the states with the highest levels of past year drunk driving were Wisconsin (23.7 percent) and North Dakota (22.4 percent). The highest rates of past year drugged driving were found in Rhode Island (7.8 percent) and Vermont (6.6 percent).

States with the lowest rates of past year drunk driving included Utah (7.4 percent) and Mississippi (8.7 percent). Iowa and New Jersey had the lowest levels of past year drugged driving (2.9 percent and 3.2 percent respectively).

The one bright spot in the survey is that there has been a reduction in the rate of drunk and drugged driving in the past few years. Survey data indicates that the average yearly rate of drunk driving has declined from 14.6 percent to 13.2 percent, while the average yearly rate of drugged driving has decreased from 4.8 percent to 4.3 percent.

Continued on Page 8

---

## Call for Proposals

**Workshop call for proposals is now underway for the 24th Annual NPN Research Conference. The conference will be held 20-23 September 2011 in Atlanta, Georgia. Proposals must be submitted no later than 25 February 2011. For more information on submitting a proposal, please visit the conference web link at:**

**<http://swpc.ou.edu/npn/proposal.htm>**

## Alcohol Advertising Puts Youth at Risk

From a Health Canal Article, 15 December 2010

**Y**outh exposure to alcohol advertising on U.S. television increased 71 percent between 2001 and 2009, according to a report released today by the Center on Alcohol Marketing and Youth (CAMY) at the Johns Hopkins Bloomberg School of Public Health.

Despite efforts by alcohol companies to strengthen their self-regulatory standards, the average number of ads seen by youth watching television increased from 217 in 2001 to 366 in 2009, or one alcohol ad per day. "One a day is great for vitamins but not for young people being exposed to alcohol advertising," said David H. Jernigan, PhD, CAMY director. "This is a significant and troubling escalation, and shows the ineffectiveness of the industry's current voluntary standards."

In 2003, the trade associations representing beer and distilled spirits companies joined the wine industry in committing to place ads only when the underage audience composition is 30 percent or less. Their previous threshold had been 50 percent.



Youth are generally exposed to one alcohol ad per day on television

The report, which is available at [www.camy.org](http://www.camy.org), shows that the rise of distilled spirits advertising on cable television is driving the increase. Youth exposure to distilled spirits advertising grew by nearly 3,000 percent from 2001 to 2009, primarily on cable. The majority of youth exposure to alcoholic beverage advertising on cable occurred on programming that youth ages 12 to 20 were more likely to be watching than adults 21 and above.

Alcohol is the leading drug problem among youth, and is responsible for at least 4,600 deaths per year among persons under 21. In 2009, 10.4 million (27.5 percent) of U.S. young people ages 12 to 20 reported drinking in the past month, and 6.9 million (18.1 percent) reported binge drinking (defined as five or more drinks at one sitting, usually within two hours). Numerous long-term studies have determined that exposure to alcohol advertising and marketing increases the likelihood that young people will start drinking, or that they will drink more if they are already consuming alcohol.

Continued on Page 6

## Healthy People 2020 Releases New Goals and Strategies

**H**ealthy People 2020 has released new goals and strategies for substance abuse. *Healthy People* provides science-based, 10-year national objectives for improving the health of all Americans. For 3 decades, *Healthy People* has established benchmarks and monitored progress over time in order to encourage collaborations across sectors, guide individuals toward making informed health decisions and measure the impact of prevention activities.

*Healthy People 2020* continues in this tradition with the launch on December 2, 2010 of its ambitious, yet achievable, 10-year agenda for improving the Nation's health. *Healthy People 2020* is the result of a multiyear process that reflects input from a diverse group of individuals and organizations.

To view the objectives page go to the link below and then click on substance abuse:

[www.healthypeople.gov/2020/topicsobjectives2020/default.aspx](http://www.healthypeople.gov/2020/topicsobjectives2020/default.aspx)

### Prevention Trivia

#### National Institute on Drug Abuse Data

1. In 2009, how many Americans were users of psychotherapeutic drugs taken non-medically?
  - A. 1.7 million
  - B. 10 million
  - C. 7 million
  - D. 3.7 million
2. Between 1991 and 2009, prescriptions for stimulants increased from roughly...
  - A. 5 million to 40 million
  - B. 10 million to 30 million
  - C. 2 million to 12 million
  - D. 10 million to 20 million
3. All of the following are noted as possible motivations for prescription drug abuse, except?
  - A. Imitating celebrities
  - B. To get high
  - C. To counter anxiety, pain, or sleep problems
  - D. To enhance cognition

Answers: C, A, A

## Teen Marijuana Use Increases

From a NIDA Press Release, 14 December 2010

**F**ueled by increases in marijuana use, the rate of eighth-graders saying they have used an illicit drug in the past year jumped to 16 percent, up from last year's 14.5 percent, with daily marijuana use up in all grades surveyed, according to the 2010 Monitoring the Future Survey (MTF).

The survey, released at a news conference at the National Press Club on December 14, 2010, also shows significant increases in use of Ecstasy. In addition, nonmedical use of prescription drugs remains high. MTF is an annual series of classroom surveys of eighth, 10th, and 12th-graders conducted by researchers at the University of Michigan, Ann Arbor, under a grant from the National Institute on Drug Abuse (NIDA), part of the National Institutes of Health.

Most measures of marijuana use increased among eighth-graders, and daily marijuana use increased significantly among all three grades. The 2010 use rates were 6.1 percent of high school seniors, 3.3 percent of 10th -graders, and 1.2 percent of eighth-graders compared to 2009 rates of 5.2 percent, 2.8 percent, and 1.0 percent, respectively.

"These high rates of marijuana use during the teen and pre-teen years, when the brain continues to develop, place our young people at particular risk," said NIDA Director Nora D. Volkow, M.D. "Not only does marijuana affect learning, judgment, and motor skills, but research tells us that about 1 in 6 people who start using it as adolescents become addicted."

Continued on Page 7



## Report Says Tobacco Smoke Causes Immediate Damage

From a CDC Press Release, 9 December 2010

**E**xposure to tobacco smoke – even occasional smoking or secondhand smoke – causes immediate damage to your body that can lead to serious illness or death, according to a report released today by U.S. Surgeon General Regina M. Benjamin. The comprehensive scientific report - Benjamin's first Surgeon General's report and the 30<sup>th</sup> tobacco-related Surgeon General's report issued since 1964 - describes specific pathways by which tobacco smoke damages the human body and leads to disease and death.

The report, *How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease*, finds that cellular damage and tissue inflammation from tobacco smoke are immediate, and that repeated exposure weakens the body's ability to heal the damage. "The chemicals in tobacco smoke reach your lungs quickly every time you inhale causing damage immediately," Benjamin said in releasing the report. "Inhaling even the smallest amount of tobacco smoke can also damage your DNA, which can lead to cancer."

The report also explains why it is so difficult to quit smoking. According to the research, cigarettes are designed for addiction. The design and contents of current tobacco products make them more attractive and addictive than ever before. Today's cigarettes deliver nicotine more quickly and efficiently than cigarettes of many years ago.

Continued on Page 7

TV Ads

Continued from Page 4

Since 2003, industry-wide voluntary codes of good marketing practice have set a maximum for underage audiences of their advertising at 30 percent under age 21. However, the National Research Council and Institute of Medicine—as well as 20 state attorneys general—have advocated for a 15 percent standard. The alcohol industry trade press has reported that the Federal Trade Commission recently asked the industry to move from 30 to 25 percent, and that the industry has refused to do so. CAMY's analysis uses the same methodology that the FTC's Bureau of Economics has used to measure the exposure of children to food advertising.

"Alcohol companies have stepped up their advertising efforts on television—particularly on cable networks—and the result is an alarming hike in youth exposure," said Jernigan. "Industry standards need to be tightened to protect youth from alcohol marketing."

The Center on Alcohol Marketing and Youth monitors the marketing practices of the alcohol industry to focus attention and action on industry practices that jeopardize the health and safety of America's youth. The Center was founded in 2002 at Georgetown University with funding from The Pew Charitable Trusts and the Robert Wood Johnson Foundation. The Center moved to the Johns Hopkins Bloomberg School of Public Health in 2008 and is currently funded by the federal Centers for Disease Control and Prevention.

To view the full article, visit this link:

<http://www.healthcanal.com/substance-abuse/13233-Youth-Exposure-Alcohol-Ads-Growing-Faster-Than-Adults.html>

## EMPLOYMENT OPPORTUNITIES

### Program Administrator II, University of Oklahoma

This position will serve as the Regional Coordinator for the CAPT Southwest Region and will be responsible for coordinating resources to meet project objectives. The Regional Coordinator directly serves states and tribes and is also responsible for providing training and technical assistance (T/TA) to these groups. The Southwest Regional Coordinator will be expected to communicate clearly and courteously; to develop and maintain positive relationships with clients, consultants, collaborators, co-workers, field sites, and funders; and to work respectfully with SWPC, OU, CAPT, and CSAP colleagues. Position will be open until filled. To apply, visit [www.jobs.ou.edu](http://www.jobs.ou.edu), requisition no. 10700.

### Community Health Educator, The Pennsylvania State University

University Health Services (UHS) is seeking a Community Health Educator (CHE) for Individual Health Education to provide individual assessments and services for students with alcohol or marijuana policy/law violations or alcohol overdoses. Primary responsibilities include providing brief screening, individual assessment, intervention and referral. Additional responsibilities include conducting educational programming for student groups about alcohol (e.g. fraternities, sororities, Residence Hall Assistants, academic classes, etc.). The CHE is responsible for establishing and maintaining high standards for education and prevention practice within parameters set by relevant professional groups, state and federal agencies and accreditation bodies. For more information, visit [www.psu.jobs](http://www.psu.jobs). Search job # 33466.



"The increases in youth drug use reflected in the Monitoring the Future Study are disappointing," said Gil Kerlikowske, director of the White House Office of National Drug Control Policy. "Mixed messages about drug legalization, particularly marijuana, may be to blame."

Also of concern is that the downward trend in cigarette smoking has stalled in all three grades after several years of marked improvement on most measures.

Prescription drug abuse remains a major problem. Indicators confirm that nonmedical use of prescription drugs remains high.

However, the survey says binge drinking continued its downward trend. Among high school seniors, 23.2 percent report binge drinking during the past two weeks, down from 25.2 percent in 2009 and from the peak of 31.5 percent in 1998.

Overall, 46,482 students from 396 public and private schools participated in this year's survey.

Additional information on the MTF Survey, as well as comments from Dr. Volkow can be found at [www.drugabuse.gov](http://www.drugabuse.gov).

MTF is one of three major surveys sponsored by the U.S. Department of Health and Human Services (HHS) that provide data on substance use among youth. The others are the National Survey on Drug Use and Health and the Youth Risk Behavior Survey. The MTF Web site is: <http://monitoringthefuture.org>.

Tobacco smoke contains a deadly mixture of more than 7,000 chemicals and compounds, of which hundreds are toxic and at least 70 cause cancer. Every exposure to these cancer-causing chemicals could damage DNA in a way that leads to cancer. Exposure to smoke also decreases the benefits of chemotherapy and other cancer treatments. Smoking causes more than 85% of lung cancers and can cause cancer almost anywhere in the body. One in three cancer deaths in the U.S. is tobacco-related. The report describes how the delicate lining of the lungs becomes inflamed as soon as it is exposed to the chemical mixture in cigarette smoke. Over time, the smoke can cause chronic obstructive pulmonary disease including emphysema and chronic bronchitis.

"This report makes it clear – quitting at any time gives your body a chance to heal the damage caused by smoking," the Surgeon General said. "It's never too late to quit, but the sooner you do it, the better."

Copies of the full report, executive summary, and the easy-to-read guide may be downloaded at [www.surgeongeneral.gov/library/tobaccosmoke/index.html](http://www.surgeongeneral.gov/library/tobaccosmoke/index.html).

The full Press release can be accessed at the following link: [www.hhs.gov/news/press/2010pres/12/20101209a.html](http://www.hhs.gov/news/press/2010pres/12/20101209a.html)

## FUNDING OPPORTUNITIES

### **SAMHSA accepting applications for more than \$45.9 million in state and tribal youth suicide prevention grants**

The Substance Abuse and Mental Health Services Administration (SAMHSA) is announcing the availability of up to \$45.9 million in grants for cooperative agreements with state and tribal sponsored programs for preventing youth suicide. These grants will support states and tribes in developing and implementing public/private sector collaborative programs designed to help prevent youth suicides through such approaches as early intervention strategies. These efforts should involve a wide variety of youth-serving institutions including schools, juvenile justice systems, foster care systems, and substance abuse and mental health programs.

HOW TO APPLY: Required documents may be downloaded from the SAMHSA Web site at [www.samhsa.gov/grants/apply.aspx](http://www.samhsa.gov/grants/apply.aspx)

APPLICATION DUE DATE: February 16, 2011

Section 4001 of the PPACA created a National Prevention, Health Promotion and Public Health Council which includes representatives from the Department of Health and Human Services (HHS), Office of National Drug Control Policy (ONDCP) and others. The Council shall be dedicated to promoting healthy policies at the federal level. The Council will establish a national prevention and health promotion strategy and develop interagency working relationships to implement the strategy.

The Council issued an initial report on July 1st, 2010. The Council shall then issue reports annually to Congress on health promotion activities of the Council and progress in meeting goals of the national strategy. PPACA lists substance use disorders as one of the national priorities to be included in the report to Congress and the President. Specifically, the legislation states that the Strategy should contain “a list of national priorities on health promotion and disease prevention to address lifestyle modification (smoking cessation, proper nutrition, appropriate exercise, mental health, behavioral health, substance use disorders, and domestic violence screenings) and the prevention measures for the 5 leading disease killers in the United States.”

To read the Council’s initial report released in July, please see <http://www.hhs.gov/news/reports/nationalprevention2010report.pdf>.

---

## NIH

Continued from Page 2

If the NIH Director accepts the plan next summer, it moves to the desk of Health and Human Services Secretary Kathleen Sebelius, who -- if she approves the plan -- will notify Congress. Congress would then have six months during which it could block the restructuring by passing legislation; if it doesn't, NIH could then finalize the changes.

In his message to NIH employees, Dr. Collins announced a Dec. 1 "town hall" meeting of the NIAAA and NIDA staffs to provide more information and answer questions. Promising a "thoughtful, systematic" planning process that consults the stakeholders affected by the proposal, Collins also said that in the meantime, addictions research across NIH will continue "with all due speed" under the existing structure.

For more information visit the link below:  
<http://www.jointogether.org/blog/posts/2010/nih-director.html>.

## Health Records

Continued from Page 3

Furthermore, “the inclusion of substance use disorder services in the essential benefits package required to be offered at parity to medical and surgical benefits in a State Health Insurance Exchange (HIE) and the Medicaid benchmark plan under the Medicaid expansion, will make access to coverage more available.”

The letter also discussed consumer expectations about collection and use of health information. The letter noted that 42 C.F.R. Part 2 (“Confidentiality of Alcohol and Drug Abuse Records”) protects the privacy of individuals with drug and alcohol problems receiving treatment, to encourage them to seek services. Written patient content is required for information to be shared, except in cases of a medical emergency and for treatment providers that enter into agreements with billing companies and other service providers that require patient-shared information. The letter noted the importance of continuing the dialogue on 42 C.F.R. Part 2 and how it will be applied to emerging technologies.

---

## Drunk and Drugged Driving

Continued from Page 4

Twelve states have seen reductions in the levels of drunk driving and seven states have experienced lower levels of drugged driving. However according to the National Highway Traffic Safety Administration’s Fatal Accident Reporting System (FARS) census, one in three motor vehicle fatalities (33 percent) with known drug test results tested positive for drugs in 2009.

*State Estimates of Drunk and Drugged Driving* is based on the combined data from the 2002 to 2005 and 2006 to 2009 National Surveys on Drug Use and Health (NSDUH) and involves responses from more than 423,000 respondents aged 16 or over. NSDUH is a primary source of information on national and state-level use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs) and mental health in the United States.

The survey is part of the agency’s strategic initiative on behavioral health data, quality and outcomes.

A copy of the report is accessible at:  
<http://oas.samhsa.gov/2k10/205/DruggedDriving.cfm>.