July 23, 2026

NASADAD
NATIONAL ASSOCIATION OF STATE ALCOHOL AND DRUG AGENCY DIRECTORS

DC Update: West Virginia Problem Gambling Annual Report, National Deflection Week, Applications for Cohort 3 of the CoE-TFR Recovery Learning Community, and More.

Visit our Website

Problem Gambling

West Virginia Advances Comprehensive Initiatives in Problem Gambling Services

In January 2026, the West Virginia Department of Human Services (DoHS) submitted the Compulsive Gambling Report for State Fiscal Year 2025 to the West Virginia legislature. This report outlines the ongoing collaboration between the West Virginia Problem Gambling Help Network (WVPGHN) and First Choice Services (FCS), which operates the 1-800-GAMBLER helpline, and emphasizes the support provided to residents of West Virginia. The report addresses helpline resources, data, outcomes, outreach, prevention, training, and related activities. Elliott Birckhead serves as the NASADAD member. Key highlights from the report include:

- First Choice Services (FCS) operates 15 helplines and programs, managing over 200,000 calls, texts, and chats annually. These programs provide assistance to West Virginians in areas such as mental health counseling, substance use disorder

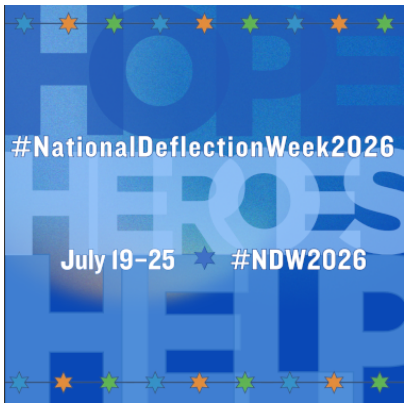
treatment, crisis and suicide-related support, social service navigation, Affordable Care Act enrollment, and employment support.

- During Fiscal Year 2025, the helpline received 4,206 total contacts, of which 1,511 were from individuals seeking assistance for gambling-related issues. This represents a 27% increase compared to the previous year.
- The West Virginia Problem Gambling Help Network (WVPGHN) provides telehealth therapy, bet-blocking tools, financial counseling through GamFin and access to the Recovery Connection application.
- Follow-up data for Fiscal Year 2025 encompassed all helpline intakes from July 2023 through June 2025. Overall, 77 to 85 percent of respondents demonstrated progress in at least one area. Among callers with usable data (n=178), 90 individuals (51 percent) showed improvement in four or more areas, including gambling behavior, financial stability, emotional well-being, problem-solving, social engagement, and family relationships.

The full report can be accessed here.

Around the Agencies

It's National Deflection Week!



National Deflection Week (NDW) is observed from July 19 to 25, 2026. This year's theme is *Innovation and Inspiration in Deflection: Highlighting Hope, Help, and Heroes in Our Field*. The global campaign recognizes progress and growth within the Deflection field. Specifically, the goals of NDW are to raise awareness and understanding of diversion, educate target audiences, showcase community diversion efforts, and highlight the work of the Police, Treatment, and Community Collaborative (PTACC).

NDAW resources, messages, hashtags, images, and a sample proclamation can be found in the PTACC's 2026 NDW Media and Social Media Guide.

ACF NOFO: Kinship Navigator Program Not Yet Title IV-E Funded

On July 20, 2026, the Administration for Children and Families (ACF) released a notice of funding opportunity for states and tribes with existing Kinship Navigator Programs (KNPs) not yet operating under Title IV-E. This funding supports the implementation and rigorous evaluation of existing KNPs to build the evidence base needed for Title IV-E Prevention Services Clearinghouse review and enable future federal reimbursement. Funded projects will administer KNP services, engage in collaborative planning, conduct evaluations, and complete a final report demonstrating positive outcomes for kinship families.

Applications are due by August 7 at 11:59 pm EST in Grants.Gov.

Additional details on the program, including eligibility and how to apply, can be found in the program's Notice of Funding Opportunity (NOFO) here.

CoE-TFR Opportunity: Applications Open for Cohort 3 Tobacco-Free Recovery Learning Community

The National Center of Excellence for Tobacco-Free Recovery (CoE-TFR) invites state public health authorities and behavioral health divisions to apply to participate in a Tobacco Free Recovery Learning Community. Five state/territory/native nation teams will be competitively selected to participate in an 18-month peer learning cohort combining in-person and virtual sessions with individualized technical assistance from experts in

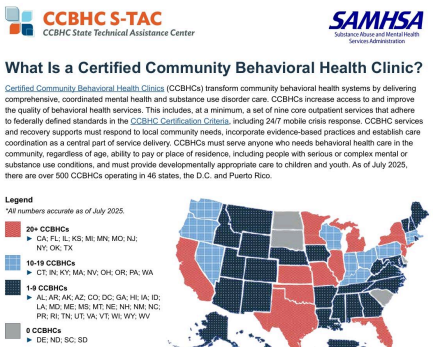
tobacco and substance use health to systems to increase access to tobacco use treatment and behavioral supports.

The initiative will support teams in mobilizing community partners, stakeholders, and people with lived experience to develop and implement a statewide tobacco-free recovery action plan to reduce the rates of commercial tobacco use among people with substance use and mental health conditions.

Applications are due **August 25, 2026**. To apply, review the Tobacco-Free Recovery Learning Community Charter, complete the application by the deadline, and finally participate in a 30-minute virtual interview with CoE-TFR staff. State alcohol and drug agencies are eligible to apply.

To learn more about this opportunity, individuals can register for the July 30 informational webinar and visit the CoE-TFR website.

SAMHSA Resource: What Is a Certified Community Behavioral Health Clinic?



In July 2026, the Substance Abuse and Mental Health Services Administration (SAMHSA) published "What Is a Certified Community Behavioral Health Clinic?" This resource summarizes the purpose, core service requirements, and impact of the Certified Community Behavioral Health Clinic (CCBHC) model in expanding access to comprehensive mental health and substance use disorder care. It details the federal certification criteria, nine required service areas, key features, national reach and outcomes, and primary funding mechanisms supporting CCBHC implementation through SAMHSA grants and Medicaid programs.

The publication can be accessed here.

Research Round-Up

Study Investigates Prevalence of Psychedelic Use and Policy Preferences Among U.S. Veterans

On June 23, 2026, RAND released a research report titled "U.S. Veterans and Psychedelics Prevalence of Use and Policy Preferences." This report presents data from the 2025 RAND Psychedelics Survey regarding the use of specific psychedelic substances and policy preferences among U.S. veterans. It also compares these findings with data from nonveterans and examines veterans' willingness to try these substances as well as their attitudes toward U.S. Department of Veterans Affairs (VA) policies on certain psychedelics. The authors report that the data indicate veterans possess "nuanced and, in some respects, distinctly favorable views toward some psychedelic substances" compared to the general public, after controlling for demographic variables such as age, sex, race, and ethnicity. Key takeaways include:

Key takeaways include the following:

- "Nearly one in four veterans supported the legal use of psilocybin mushrooms. The rates for LSD and MDMA were 11 percent and 9 percent, respectively.

- Veterans' support for the legal use of psilocybin mushrooms, LSD, and MDMA was generally similar to nonveterans' support. However, veterans were slightly more likely to support the legal use of psilocybin mushrooms and LSD than nonveterans of a similar age, gender, race, and ethnicity.

- Approximately 4.8 million veterans had used psilocybin, LSD, or MDMA in their lifetime.

- Veterans were slightly more likely to have used LSD in their lifetime than nonveterans.

- Less than 1 percent of veterans had used ibogaine or iboga in their lifetime. About 5 percent of veterans who had never used ibogaine or iboga were willing to try it.

- Nearly half of veterans were unsure whether a veteran would risk losing VA benefits if they spoke to their VA doctors about the use of psilocybin mushrooms (48 percent) or MDMA (46 percent).

- About half of veterans supported VA providing or paying for psilocybin-assisted therapy (54 percent) or MDMA-assisted therapy (45 percent) if approved by the U.S. Food and Drug Administration"

The full report can be accessed here.

Webinars to Watch

SAMHSA Webinar: Healthy Starts – Postpartum OUD Care Transitions for Mother and Infant Case

The Substance Abuse and Mental Health Services Administration (SAMHSA) is hosting a dissemination webinar titled "*Healthy Starts – Postpartum OUD Care Transitions for Mother and Infant Case,"* on July 28 from 2:00 pm to 3:15 pm ET. This session, based on SAMHSA's recent publication *Healthy Starts: Postpartum OUD Care Transitions for Mother and Infant*, will provide providers, care teams, and other stakeholders with practical strategies for coordinated postpartum care for mothers and families affected by OUD. National experts, including Caitlin E. Martin, M.D., and Meghan Masterson, will share effective strategies, promising practices, and lessons learned to improve outcomes for mothers, infants, and families. Learning objectives include:

- "Risk factors that affect women with OUD during the postpartum period and strategies that improve outcomes for mothers and infants.

- The role of medications for opioid use disorder (MOUD) in supporting recovery among pregnant and parenting women.

- Coordinated care models that help pregnant and postpartum women access treatment, recovery support, and other essential services.

- Community-based strategies that strengthen postpartum care and improve family outcomes."

Registration is available here.

988 Webinar: Integrating Perinatal Mental Health and Substance Use Care within Crisis Systems

The SAMHSA-funded 988 Crisis Systems Response Training & Technical Assistance Center will host a free webinar, "*Integrating Perinatal Mental Health and Substance Use Care within Crisis Systems*," on August 19 from 1:30 to 3:00 pm EST. This session is

intended for state crisis system leaders, 988 staff, and providers who work with pregnant and postpartum women. The webinar will address strategies for crisis systems to better identify, engage, and connect these women to care through cross-sector collaboration and integrated mental health and substance use response pathways. Learning objectives include the following:

- Describe the unique mental health and substance use risk factors associated with pregnancy and the postpartum period, including physiologic, psychosocial, and system-wide influences
- Explain how a "no wrong door" framework can strengthen coordination across crisis services, obstetric care, maternal and child health programs, behavioral health providers, and child welfare systems
- Identify at least two effective pathways for warm handoffs between 988, the National Maternal Mental Health Hotline, and local treatment and support services
- Examine an example crisis-to-treatment continuum that demonstrates cross-system collaboration and identify opportunities to adapt key elements within their own state or community

Registration is available here.
