July 30, 2026

NASADAD
NATIONAL ASSOCIATION OF STATE ALCOHOL AND DRUG AGENCY DIRECTORS

DC Update: SAMHSA Announces Release of Annual National Survey on Drug Use and Health, Study Investigates the Availability of Naloxone in Retail Pharmacies Following Introduction of Over-the-Counter Status, CAI & Opioid Response Network Webinar, and More.

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NASADAD News

NASADAD Participates in HHS Quality Pledge Event

On July 29, Executive Director Robert Morrison participated in an event led by the Department of Health and Human Services (HHS) that featured the signing of the Pledge to Advance National Behavioral Health Quality and Best Practices. The event featured Robert F. Kennedy, Secretary of HHS; Ms. Kathryn Burgum, Senior Advisor for Addiction and Recovery; Dr. Timothy Westlake, Chief of Staff of SAMHSA and Presidential nominee to serve as Assistant Secretary for Mental Health and Substance Use; Dr. Mehmet Oz, Administrator of the Centers for Medicare and Medicaid Services (CMS); and others. Morrison participated on a panel alongside other leaders of national associations related to substance use disorders and mental health to talk through opportunities to advance the pledge and promote the principles of effective service delivery:

- Timely access
- Evidence-based assessment, diagnosis, treatment, referral, and recovery support
- Measurement of quality, outcomes, accountability, and continuous quality improvement
- Patient-centered, recovery focused care

- Clinical expertise and individualized treatment decisions
- Whole person care

The Pledge is part of the Trump Administration's Great American Recovery Initiative established by Executive Order. To see the Executive Order, visit https://www.whitehouse.gov/presidential-actions/2026/01/addressing-addiction-through-the-great-american-recovery-initiative/. To see the web page dedicated to the Initiative, visit https://www.hhs.gov/recovery/index.html.

NASADAD Attends National Council on Problem Gambling Annual Conference

Robert Morrison, NASADAD Executive Director, attended the Annual Conference of the National Council on Problem Gambling (NCGP) held July 22-24 in Nashville, TN. NCPG is led by Heather Maurer, Executive Director and the Director of Policy and Partnerships is Cole Wogoman. On July 22, Rob met with the members of the National Association of Administrators for Disordered Gambling Services (NAADGS) to talk about the decision by NASADAD's Board of Directors that the Association will now be engaging in work related to problem gambling. Rob spent the remainder of the conference at sessions, including a session on the connection between gambling and suicide, and another regarding problem gambling in the NCAA, and a poster session led by Cole Wogoman regarding the Points Act (H.R. 7875) by Rep. Houchin (R-IN).

[*Pictured: Dennis Houston and Rob Morrison*]

NASADAD Attends SAMHSA Office of Recovery Convening

The SAMHSA Office of Recovery held a convening: *Opening Doors: Building Trust from First Contact to Lasting Recovery* on July 14 & 15, 2026. Melanie Whitter, Deputy Executive Director, NASADAD, attended the meeting and presented on a panel entitled *Engaging and Sustaining Recovery Across Systems: Optimizing the Client Experience in End-to-End Program Performance.* The meeting explored effective tools for engaging individuals with mental health and/or substance use conditions in treatment and recovery and promoting family involvement and support.

NASADAD Attends Roundtable at Bowen Center for Health Workforce Research and Policy, Indiana University School of Medicine

On July 22-23, Melanie Whitter, Deputy Executive Director, NASADAD, attended a Roundtable entitled *Towards Consistency for Behavioral Health Paraprofessionals* in Indianapolis, Indiana. The event was held by the Bowen Center for Health Workforce Research and Policy, Indiana University School of Medicine. This convening brought together representatives from states and national organizations to review the University of Indianapolis' research on more than 90 behavioral health paraprofessional roles and to explore shared challenges and strategies for regulation, training, and reimbursement.

NPN Conference Registration

We invite you to join us for the 2026 National Prevention Network (NPN) Conference, taking place virtually on **September 29–30, 2026.**

This year's virtual format will make it easier than ever for substance use professionals to participate, collaborate, and share strategies that strengthen prevention efforts in communities across the country. We hope you will join us for this engaging and impactful event.

Register today to secure your spot.

Problem Gambling

The Maryland Center for Excellence on Problem Gambling FY2025 Report: Impacting Communities Through Awareness, Empowerment, & Support

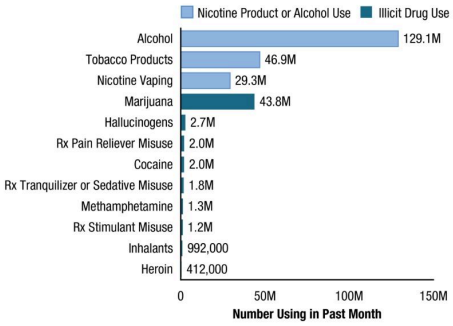
Since its establishment on July 1, 2012, the Maryland Center for Excellence on Problem Gambling has promoted healthy and informed decision-making related to gambling and problem gambling through public awareness, training and education, prevention, technical assistance to the behavioral health care system, peer recovery support, research, and public policy. The Center's Fiscal Year 2025 Annual Report, titled "*Impacting Communities Through Awareness, Empowerment, & Support*," details such activity, including legislative monitoring and testimony, expanded outreach to behavioral health and community organizations, and the provision of both virtual and in-person training. Dr. Rachel Talley serves as the NASADAD member. Key highlights from the report include:

- Peer Recovery Support Specialists at the Center assisted 613 Maryland residents. Additionally, the Prevention Program expanded from 28 to 48 grantees.
- By the end of FY2025, problem gambling treatment was available at 134 locations across 21 jurisdictions, including Telehealth-only sites, provided by 119 unique organizations. Twelve providers operated multiple locations.
- The Center's training hosted more than 4,100 attendees, delivering webinars, in-person training, college and university training, and training specific to Departments of Social Services.
- In FY2025, the 1-800-GAMBLER helpline received 1,394 contacts. Of these contacts, texts and chats accounted for 53.7% (n=749) while phone calls made up 46.3% (n=645). Of the chats and texts, 36.8% (n = 276) resulted in intakes.
- The Prevention Program engaged 161 community organizations through presentations, exhibits, and community events. Of these partners, 43 were newly established collaborations. A total of 98 material requests were fulfilled, resulting in the distribution of 65,890 printed resources.
- The Center tracked 40 bills referencing gambling introduced in the House and Senate, submitted written and oral testimony in Annapolis, created and maintained a real-time legislative tracking document distributed to two listservs with over 800 registrants, and convened bi-weekly calls to discuss significant public health legislation.

The full report can be accessed here.

Around the Agencies

SAMHSA Announces Release of Annual National Survey on Drug Use and Health



On July 27, 2026, the Substance Abuse and Mental Health Services Administration (SAMHSA) issued a press announcement and blog post regarding the release of the Annual National Survey on Drug Use and Health (NSDUH). For more than four decades, the NSDUH has been the primary source of data on self-reported mental health conditions, substance use, addiction, treatment engagement, and recovery status among individuals in the United States. The 2025 NSDUH report is based on responses from over 60,000 participants and examines trends in substance use and mental health in the U.S. population from 2021 to 2025. Key findings for 2025 are summarized below:

- Among individuals aged 12 years or older, 129.1 million reported alcohol use in the past month, 46.9 million reported using tobacco products, 43.8 million reported using marijuana, and 29.3 million reported vaping nicotine. Of those who reported alcohol use in the past month, 56.8 million (44.0%) also reported binge drinking during the same period.
- Approximately one in four Americans aged 12 years or older (69.8 million; 24.0%) reported illicit drug use. Among those reporting illicit drug use, 61.6 million used marijuana, 9.1 million used hallucinogens, 6.9 million misused prescription opioids, 4.9 million misused prescription tranquilizers or sedatives, and 4.2 million used cocaine.
- An estimated 4.3 million individuals initiated alcohol use, 4.2 million began nicotine vaping, and 2.4 million started using marijuana, making these the most commonly initiated substances.
- In the past year, approximately 45 million Americans (15.3%) aged 12 years or older met the diagnostic criteria for a substance use disorder. Of these, 26.0 million had a drug use disorder, 25.7 million had an alcohol use disorder, and 7.1 million experienced both an alcohol and a drug use disorder. Among drug use disorders, 19.3 million individuals had a marijuana use disorder, 4.5 million had a central nervous system (CNS) stimulant use disorder, and 4.0 million had an opioid use disorder.
- In the past year, approximately 16% of individuals requiring substance use treatment received services. Treatment receipt was highest among adolescents aged 12 to 17 years, with 22.8% of those in need obtaining treatment, followed by 17.1% among individuals aged 26 years or older, and 9.6% among those aged 18 to 25 years.
- Of the 7.6 million Americans who received substance use treatment in the past year, 4.4 million received outpatient treatment, 3.6 million received telehealth services, and 2.2 million received inpatient treatment.
- Among adults aged 18 years or older, 22.3 million considered themselves to be in recovery or to have recovered from a drug or alcohol use problem.

The press announcement can be accessed here.

The blog can be accessed here.

FDA News Release: FDA Accelerates Action on Treatments for Serious Mental Illness Following Executive Order

On April 24, 2026, the U.S. Food and Drug Administration (FDA) issued a news release entitled "*FDA Accelerates Action on Treatments for Serious Mental Illness Following Executive Order*." The release outlines FDA initiatives in response to an Executive Order from April 18, which directed the U.S. Department of Health and Human Services to expedite access to treatments for individuals with serious mental illness, including those with severe, complex, and treatment-resistant conditions. Subsequently, the FDA announced a series of regulatory measures to facilitate the development of serotonin-2A agonists and related products, a class of perception-altering psychedelic medications. These measures include:

- Issuance of national priority vouchers to three companies conducting research on Psilocybin for treatment-resistant depression, Psilocybin for major depressive disorder, and Methylone for post-traumatic stress disorder (PTSD).
- Authorization of an early-phase clinical study of noribogaine hydrochloride, a potential treatment for alcohol use disorder, following an Investigational New Drug (IND) submission. This represents the first instance in which the FDA has permitted a clinical study in the United States of a derivative of ibogaine, a psychoactive indole alkaloid derived from the African Tabernanthe iboga shrub.
- Imminent release of final guidance to provide recommendations to sponsors developing these products. This guidance incorporates input from public comments and outlines recommendations regarding study design, data collection and generation, patient monitoring, and the conduct of adequate and well-controlled clinical investigations.

The news release can be accessed here.

"Talk. They Hear You." Community Engagement Meeting

The Substance Abuse and Mental Health Services Administration (SAMHSA) will host a virtual community engagement meeting for the "Talk. They Hear You." campaign on August 26 at 3:00 pm. The meeting will provide campaign updates, feature a partner spotlight on the Coalition for a Drug-Free Hawaii, and include an open discussion and Q&A session on opportunities for campaign adaptation, replication, and community engagement. Attendees will hear opening remarks from Rear Admiral Chris Jones, Pharm.D., Dr.P.H., M.P.H., director of SAMHSA's Center for Substance Abuse Prevention. The agenda also includes presentations on adapting and localizing campaign materials by staff from the Coalition for a Drug-Free Hawaii and Valerie Mariano, Chief of the Community and Crime Prevention Branch of Hawaii's Crime Prevention and Justice Assistance Division, along with contributions from campaign team members and network partners.

Registration is available here.

Research Round-Up

Study Investigates the Availability of Naloxone in Retail Pharmacies Following Introduction of Over-the-Counter Status

On July 17, 2026, a group of researchers published a study in *JAMA Network* on the "*Availability of Naloxone in Retail Pharmacies Following Introduction of Over-the-Counter Status*." This cross-sectional study employed a secret shopper methodology to evaluate

same-day naloxone availability without a prescription in US retail pharmacies between January 15 and April 30, 2024. The sample consisted of 1108 pharmacies, including those from the seven largest corporate pharmacy chains and an additional stratum of other retail pharmacies. Results indicated that 61.4% of pharmacies reported same-day naloxone availability without a prescription, typically at the pharmacy counter, with a mean cost of $52.07. The study also found that corporate chains and communities with higher proportions of White residents were more likely to offer naloxone. The authors suggest that expanding pharmacist education and providing targeted support for independent and medical-affiliated pharmacies could enhance naloxone access, particularly in rural and underserved areas. Additional takeaways include the following:

- “Among the pharmacies that had naloxone available the same day, an estimated 19.73% (95% CI, 15.74%-23.71%) indicated that a prescription was required to obtain naloxone that day.”
- “For pharmacies with same-day naloxone availability, naloxone was most commonly located at the pharmacy counter (estimate, 58.14% [95% CI, 53.59%-62.68%]), followed by self-service areas (estimate, 31.74% [95% CI, 27.59%-35.89%]) and front checkout (estimate, 8.99%; [95% CI, 6.64%-11.34%])
- “When pharmacists without same-day naloxone were asked about alternative sources, approximately half provided no suggestion. Suggestions included directing callers to another pharmacy (45.84% [95% CI 37.77%-53.91%]), the public health department (3.87% [95% CI 0.48%-7.25%]), a syringe services program (0.06% [95% CI 0.00%-0.17%]), and other options (3.87% [95% CI 0.48%-7.25%]).”
- “Compared with corporate chains, food store and/or mass merchandisers (OR, 0.53 [95% CI, 0.35-0.82]), medical affiliates (OR, 0.23 [95% CI, 0.03-1.68]), and independent pharmacies (OR, 0.09 [95% CI, 0.05-0.16]) all had lower odds of same-day naloxone availability.”

The full study can be accessed here.

NDEWS Report: Special Report Top 10 US Counties per Region With the Highest Rates of EMS Encounters for Suspected Nonfatal Overdoses With MDMA

On July 24, 2026, the National Drug Early Warning System (NDEWS) released a report entitled “*Top 10 US counties per region with the highest rates of EMS encounters for suspected nonfatal overdoses with MDMA indicated in the record per 10,000 population January 1, 2023 - June 30, 2026.*” The report analyzes biospatial.io data using joinpoint regression to identify trends in emergency medical services (EMS) encounters involving suspected nonfatal overdoses with 3,4-Methylenedioxymethamphetamine (MDMA), also known as Ecstasy or Molly. Statistically significant declines in these encounters were observed nationally from January 2023 through September 2024 ($\beta = -0.01$, $p < 0.001$), in the Southern Region from July 2023 through February 2025 ($\beta = -0.06$, $p < 0.001$), and in the Northeast from March 2023 through January 2025 ($\beta = -0.04$, $p < 0.001$). No statistically significant changes were identified in the Midwestern or Western regions from January 2023 to June 2026. Additional findings are as follows:

- 16,335 nonfatal EMS encounters for suspected nonfatal overdoses with MDMA indicated in the record were recorded from January 1, 2023, to June 30, 2026, nationally. Of those encounters, 2,705 occurred in Western states, 2,557 in Midwestern states, 8,955 in Southern states, and 2,118 in Northeastern states.
- Out of the Western States (n = 2,705), the counties with the highest encounter rate per 10,000 population and ≥10 encounters are Denver, CO (2.39), San Francisco, CA (1.68), Jefferson, CO (1.37), El Paso, CO (1.03), Yellowstone, MT (0.98),

Arapahoe, CO (0.97), Adams, CO (0.92), Pueblo, CO (0.88), Bernalillo, NM (0.82), and Salt Lake, UT (0.79).

- Out of the Midwestern States (n = 2,557), the counties with the highest encounter rate per 10,000 population and ≥10 encounters are Milwaukee, WI (2.58), Peoria, IL (1.86), Hennepin, MN (1.50), St. Clair, IL (1.32), Cook, IL (1.28), DeKalb, IL (1.24), Muskegon, MI (1.15), Wyandotte, KS (1.09), Roch Island, IL (1.06), and Winnebago, IL (1.00).

- Out of the Southern States (n = 8,955), the counties with the highest encounter rate per 10,000 population and ≥10 encounters are Leon, FL (13.1), Tippah, MS (9.66), Alachua, FL (9.59), District of Columbia (7.51), Gadsden, FL (7.07), Jefferson, FL (6.88), Thomas, GA (6.76), Putnam, FL (5.21), Lowndes, MS (4.63), and Bradford, FL (4.55).

- Out of the Northeastern States (n = 2,118), the counties with the highest encounter rate per 10,000 population and ≥10 encounters are Oswego, NY (14.5), Onondaga, NY (9.89), Cayuga, NY (7.89), Jefferson, NY (5.92), Cortland, NY (5.51), Schenectady, NY (2.06), Madison, NY (1.70), Monroe, NY (1.40), Franklin, PA (1.35), and Albany, NY (1.32).

The full report can be accessed here.

Webinars to Watch

CAI & Opioid Response Network Webinar: The SUCCEED Initiative & Supporting Justice-Involved Clients with Opioid, Stimulant, and Polysubstance Use Disorders

CAI and the Opioid Response Network will host a complimentary webinar titled "*The SUCCEED Initiative: Supporting Justice-Involved Clients with Opioid, Stimulant, and Polysubstance Use Disorders*" on Tuesday, August 4, from 2:00 pm to 3:00 pm EST. This session will provide an overview of the SUCCEED Initiative, which assists organizations in equipping justice-involved clients with resources and support to self-manage opioid, stimulant, and polysubstance use as chronic conditions. Attendees will receive an introduction to the SUCCEED model, review implementation insights from current sites, and explore opportunities to participate in the upcoming SUCCEED cycle, drawing on the experiences of facilitators nationwide. Learning objectives include:

1. Describe the core components of the SUCCEED model and its approach to supporting justice-involved individuals impacted by opioid, stimulant, and polysubstance use disorders.
2. Identify strategies that organizations can use to strengthen recovery support, treatment engagement, recurrence-of-use prevention, and successful community reintegration for justice-involved populations.
3. Discuss key implementation considerations, promising practices, and lessons learned from organizations currently implementing the SUCCEED model.

Registration is available here.

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

988 CRISIS SYSTEMS RESPONSE | TRAINING & TECHNICAL ASSISTANCE CENTER
Funded by the Substance Abuse and Mental Health Services Administration

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.
