

April 23, 2020



D.C. Update: SAMHSA announces upcoming National Prevention Week, HRSA awards funding to combat COVID-19 in rural communities, and more

Visit our Website



Meet the Member

Barbara Bazron, NASADAD Member

Barbara J. Bazron, PhD is the Director of the D.C. Department of Behavioral Health, appointed by Mayor Muriel Bowser. In this role, she manages the District's recovery-oriented, integrated substance use and mental health system. Throughout her career, Dr. Bazron has used her expertise in strategic planning and organizational development to build systems of care that promote the integration of mental health and addictions services, foster equity with physical health care and address disparities in health care. Prior to her appointment, Dr. Bazron served as the Deputy Secretary of the Maryland Department of Health's Behavioral Health Administration, which is responsible for the State's services and supports for individuals with mental health and substance use disorders, including five psychiatric hospitals. Dr. Bazron is an early innovator and a published author on cultural competency in substance use and mental health. She also has clinical experience as a family therapist and as an educational diagnostician. Dr. Bazron received a Doctor of Philosophy from the University of Pittsburgh, a Master of Education from the University of Cincinnati, and a Bachelor of Arts from Oberlin College.



Capitol Hill Happenings

Congress works to pass COVID-3.5 package

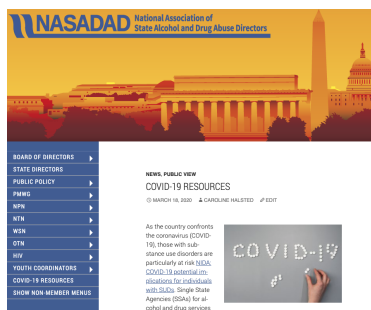
On April 21st, the Senate passed a \$484 billion coronavirus stimulus package, the “Paycheck Protection Program and Health Care Enhancement Act.” The bill primarily aims to replenish the Paycheck Protection Program for small businesses, a program that was initially authorized in the \$2.2 trillion Coronavirus Aid, Relief, and Economic Security (CARES) Act, which was signed into law on March 27th. In this bill, the Paycheck Protection Program would receive \$310 billion. Additionally, the bill includes \$75 billion the Public Health and Social Services Emergency Fund, as well as \$25 billion to expand coronavirus testing.

The \$75 billion in the Public Health and Social Services Emergency Fund is for necessary expenses to reimburse health care providers for health care related expenses or lost revenues that are attributable to coronavirus. Eligible health care providers under this section are defined as, “public entities, Medicare or Medicaid enrolled suppliers and providers, and such for-profit entities and not-for profit entities not otherwise described in this proviso as the Secretary [of Health & Human Services] may specify, within the United States (including territories), that provide diagnoses, testing, or care for individuals with possible or actual cases of COVID-19.” This funding is in addition to \$100 billion for health care providers that was appropriated in the CARES Act.

Notably, this relief package does not include any provisions related to substance use disorders. While the CARES Act was labeled the 3rd coronavirus package, this package is being called “COVID 3.5”, indicating that it is an interim bill primarily aiming to provide immediate aid to small businesses. A more comprehensive fourth legislative package—that may include a provisions to address substance use issues—is being discussed by certain lawmakers.

The Senate-passed COVID 3.5 bill now moves to the House, which is expected to vote on and pass the bill later today. The President is then expected to sign the bill into law tomorrow.

News from NASADAD



New COVID-19 resources added to NASADAD website

NASADAD continues to update resources on our COVID-19 webpage. The page provides federal guidance and actions taken by State alcohol and drug agencies to date. It is not intended to be exhaustive but is meant to highlight key actions and resources that may help other States and territories as they prepare for and respond to the virus. This week

NASADAD added the following resources:

- SAMHSA's Prescribing for OUD [FAQs](#)
- SAMHSA's domestic violence during COVID-19 [resource](#)
- CMS [guidance](#) for re-opening healthcare facilities to non-emergent non-COVID-19 healthcare visits

Cindy Seiwright elected to represent Region I on NASADAD Board of Directors

NASADAD is pleased to announce that Cindy Seiwright will now serve as Regional Director for the New England Region. Ms. Seiwright is the Director of the Division of Alcohol and Drug Abuse Programs within the Vermont Department of Health. She began her career as an emergency services worker for a

community mental health center and, for the next 20 years, worked as a psychotherapist in managed care settings as well as private practice. Ms. Seivwright's current position as a leader in State government involves the development and oversight of a comprehensive system in Vermont to address substance use disorders and an appointment to the Substance Abuse and Mental Health Services Administration's (SAMHSA) Interdepartmental Substance Use Disorder Coordinating Committee (ISUDCC).



Around the Agencies



[SAMHSA announces upcoming National Prevention Week](#)

The Substance Abuse and Mental Health Services Administration (SAMHSA) announced that [National Prevention Week](#) will be

held from May 10-16, 2020. National Prevention Week is an annual health observance dedicated to increasing public awareness of, and action around, substance use and mental disorders. As noted in SAMHSA's announcement, the primary goals of National Prevention Week are to involve communities in raising awareness; creating partnerships and collaborations with federal agencies and national organizations; and to promote and disseminate quality substance use prevention and mental health promotion resources and publications. The 2020 daily themes for this year's National Prevention Week include: preventing prescription drug and opioid misuse; preventing underage drinking and alcohol misuse; preventing illicit drug use and youth marijuana use; preventing youth tobacco use (e-cigarettes and vaping); and preventing suicide.

[SAMHSA releases resource on intimate partner violence and child abuse during COVID pandemic](#)

The Substance Abuse and Mental Health Services Administration (SAMHSA) released a new resource titled "[Intimate Partner Violence and Child Abuse Considerations During COVID-19](#)." As described in the resource, there is concern that the rate of intimate partner violence will dramatically rise as a result of social distancing and quarantine, forcing those who are experiencing violence to stay in dangerous situations. Children are also more vulnerable to abuse as research shows that increased stress levels among parents is often a major predictor of physical abuse and neglect of children. Parents also have less access to the support systems they normally rely on and with children out of school, teachers and counselors are unable to witness signs of abuse. The document includes links to other relevant SAMHSA resources as well as non-SAMHSA resources.

[DEA releases 2020 resource guide on addictive substances](#)

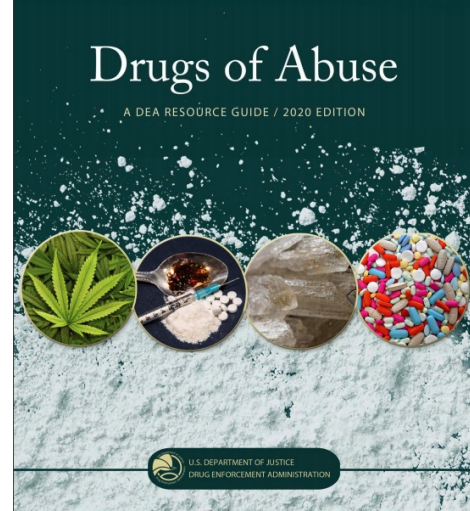
The Drug Enforcement Administration (DEA) recently released its [2020 Drugs of Abuse Resource Guide](#). The guide, as described by the DEA, delivers clear, scientific information about substances in a factual, straightforward way. The information is intended to assist parents and caregivers as they educate their children on the consequences of substance misuse. The guide covers the Controlled Substance Act, U.S. Chemical Control, and

drug classes including narcotics, stimulants, depressants, hallucinogens, steroids, marijuana, inhalants, designer drugs, and newer drugs of concern. Finally, the guide provides substance use prevention resources.

HRSA awards funding to combat COVID-19 in rural communities

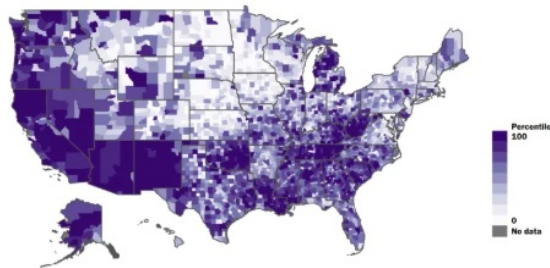
As a result of the Coronavirus Aid, Relief, and Economic Security (CARES) Act, which was signed into law on March 27th, the Health Resources and Services Administration's (HRSA) Federal Office of Rural Health Policy (FORHP) recently [awarded](#) nearly \$165 million to address COVID-19 in rural communities.

Recipients of the awards include 1,779 small rural hospitals and 14 HRSA-funded Telehealth Resource Centers (TRCs) that will provide technical assistance in rural and underserved areas. As described in the announcement, the CARES Act funding will allow hospitals maximum flexibility in how they respond to the pandemic within their communities, including the provision of testing and laboratory services as well as the purchase of personal protective equipment (PPE).



Research Roundup

Figure 3: Map of test scores and drug-related mortality rates, 2009-2014



Note: Shading is based on taking the average of the average percentile rank for 3rd-grade standardized test scores and drug-related mortality rates (of which opioids account for over 70%), each from 2009-2014. Richer colors indicate relatively worse outcomes (e.g., higher average mortality rates and lower test scores).

Source: Education data comes from the Stanford Educational Data Archive (SEDA) and drug-related mortality is from the Institute for Health Metrics and Evaluation.

B BROWN CENTER on Education Policy at BROOKINGS

Report examines correlation between opioid crisis and education outcomes

The Brookings Institute recently published a [report](#) examining the link between the opioid crisis and educational outcomes of children in hard-hit areas. Using standardized test scores and drug-related mortality

rates, researchers found strong correlations between counties with high drug-related mortality rates and counties with worse educational outcomes among young children. In addition, "hot spots" of high drug-related mortality and low-test scores were observed in the Appalachian belt, as well as parts of the Southwest and West. Finally, researchers noted that the negative education-opioid crisis relationship is larger in rural areas.

CDC releases report on methamphetamine use patterns and characteristics

The Centers for Disease Control and Prevention (CDC) released a new [Morbidity and Mortality Weekly Report \(MMWR\)](#) examining the patterns and characteristics of adult methamphetamine use from 2015 to 2018. Using data from the National Surveys on Drug Use and Health (NSDUH), researchers found that approximately 1.6 million adults, on average, used methamphetamine each year and nearly 25% of those reported injecting the substance. In addition, approximately 50% of persons using methamphetamine in the past year met diagnostic criteria for methamphetamine use disorder, yet fewer than one third of adults received substance use treatment in the past year. Results also indicated that there were high rates of co-occurring substance use or mental illness among adults using methamphetamine.

