

July 22, 2021



D.C. Update: NASADAD releases updated FY 2022 appropriations overview, CDC data reveals substantial increase in overdose deaths in 2020, and more

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Meet the Member

Beverly Johnson, Director of Prevention Services for State of Alabama

Beverly Johnson is a graduate of Auburn University at Montgomery and completed her MPA at Jacksonville State University. She has worked for the Alabama Department of Mental Health for seventeen years. Since 2016, she has served as the Director of Prevention Services. She is a member of Omicron Delta Kappa, the National Leadership Honor Society. Currently serving as the Vice President of External Affairs of the National Prevention Network Executive Committee, she has previously served as the Treasurer, Southeast Regional Representative, and Southeast Regional Representative Alternate. Under her tenure, Alabama was awarded the CADCA Outstanding State Member Award (2019). She has presented on prevention topics locally and nationally and currently serves as the Chair of the Community Engagement and Outreach Committee of the Alabama Opioid Overdose and Addiction Council.



News from NASADAD

NASADAD releases updated FY 2022 appropriations overview

NASADAD recently released an updated [appropriations overview](#) to reflect the House Appropriation Committee's release of several appropriations bills for FY 2022, including the Labor, Health and Human Services (HHS), Education, and Related Agencies funding bill, approved by the Full Committee on July 15th. Highlights of the report include:

- **Substance Abuse Prevention and Treatment (SAPT) Block Grant:** \$2.858 billion (increase of \$1 billion from FY 2021). The Committee also included a directive that would require States to spend at least 10 percent of SAPT Block Grant funds on recovery services.
- **State Opioid Response (SOR) Grant Program:** \$2 billion (increase of \$500 million from FY 2021)
- **Center for Substance Abuse Treatment (CSAT):** \$651 million (increase of \$157 million from FY 2021)
 - MAT for Prescription Drug and Opioid Addiction (MAT-PDOA): \$136.5 million (+\$45.5 million)
 - Drug Courts: \$105 million (+\$35 million)
 - Pregnant and Postpartum Women: \$49.4 million (+\$16.5 million)
 - SBIRT: \$30.5 million (+\$510,000)
 - Building Communities of Recovery (BCOR): \$20 million (+\$10 million)
- **Center for Substance Abuse Prevention (CSAP):** \$243.5 million (+\$35.3 million)
 - SPF-PFS: \$139.5 million (+\$20 million)
 - Sober Truth on Preventing Underage Drinking: \$15 million (+\$5,000,000)
 - Tribal Behavioral Health Grants: \$25 million (+\$4.25 million)
- **Center for Mental Health Services (CMHS):** \$727 million (+\$168 million)
 - Community Mental Health Services Block Grant: \$1.58 billion (+\$825 million)

In addition to summarizing recommended funding levels for HHS programs, the document outlines the House of Representatives' recommended funding levels for other NASADAD priority programs within the Department of Justice (DOJ) and the Office of National Drug Control Policy (ONDCP).

Capitol Hill Happenings

Senate Caucus on International Narcotics Control holds hearing on drug overdose crisis

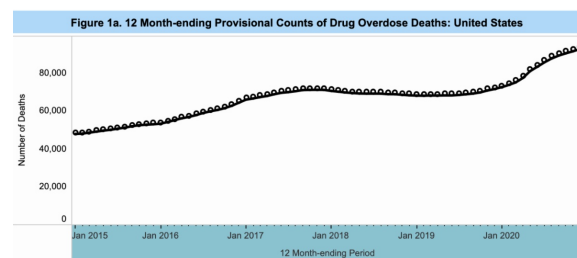
The Senate Caucus on International Narcotics Control, led by Chairman Sheldon Whitehouse (D-RI) and Co-Chairman Chuck Grassley (R-IA), recently held a hearing titled "The Federal Response to the Drug Overdose Epidemic." The hearing addressed the federal response to the surge in overdose deaths that have emerged as a result of COVID-19 and ongoing efforts to reduce the supply of substances into the country. Witnesses on the first panel included Regina LaBelle, Acting Director of the Office of National Drug Control Policy (ONDCP), Tom Coderre, Acting Deputy Assistant Secretary for Mental Health and Substance Use, and Dr. Nora Volkow, Director of the National Institute on Drug Abuse (NIDA). The second panel included Nicole Alexander-Scott, Director of the Rhode Island Department of Health, Keith Humphreys, Professor at Stanford University, and Steve Gurdak, Group Manager of the Washington/Baltimore High Intensity Drug Trafficking Areas (HIDTA) Northern Virginia Financial Initiative. To view a recording of the hearing, click [here](#).

Around the Agencies

CDC data reveals substantial increase in overdose deaths in 2020

The Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) released preliminary data on drug overdose death counts in all 50 states and the District of Columbia in 2020. The data revealed that 93,331 people died from

drug overdoses in the United States, the highest number ever recorded. Overdose deaths increased about 30% compared to the previous year, the biggest increase since 1999. According to the NCHS data, synthetic opioids and illegally manufactured fentanyl were responsible for about three fourths of overdose deaths. This provisional data will be finalized later in the year. To view NCHS



provisional data click [here](#).



National Institute on Alcohol
Abuse and Alcoholism

NIH leaders say appropriate language can reduce mental health and addiction stigma

Leaders from the National Institutes of Health (NIH) recently published an [article](#) in

Neuropsychopharmacology that addresses how using appropriate language to describe mental illness and addiction can help reduce stigma surrounding these conditions. The article notes that over a decade of research has shown that stigma contributes to negative health outcomes and can create barriers in seeking treatment for mental illness of substance use disorders. As described in the article, stigma-related bias among clinicians can contribute to a treatment-averse mindset. In addition, when a person continues to experience stigma, they may begin to internalize it, exacerbating symptoms and creating barriers to accessing treatment services. Reducing stigma by using appropriate language can help improve how people with these conditions are treated, NIH leaders say. The article points to numerous studies that reflect that using scientifically accurate terms that centralize the experience of the patient are crucial in reducing stigma.

In the News

[\\$26 billion opioids settlement announced](#)

A bipartisan coalition of State attorneys general recently announced a \$26 billion settlement with Johnson & Johnson and three of the country's largest drug distributors regarding their roles in the opioid crisis. The three drug distributors, including Cardinal Health, McKesson, and AmerisourceBergen, will be required to pay \$21 billion over 18 years and Johnson & Johnson will pay up to \$5 billion over nine years. The funding will be used to provide substance use disorder (SUD) treatment and bolster prevention efforts. As described in an [article](#) from The Hill, the settlement stems from States, cities, and counties that sued the companies over their roles in the opioid crisis and the agreement would resolve the claims of all parties involved. In addition to the payments, Johnson & Johnson will not produce any opioids for at least 10 years and the three distributors will now be required to share prescribing information.

[Associated Press story highlights benefits of family-centered treatment for pregnant and postpartum women...](#)

A July 15th story by AP titled "For pregnant women, pandemic made hunt for drug rehab harder" outlined the benefits of family treatment for pregnant and postpartum women. The article details the story of a woman in North Carolina who found help at Horizons which is a program that specializes in helping pregnant women and mothers with substance use disorders. Kody Kinsley serves as the NASADAD member and State alcohol and drug agency director in North Carolina. The program specifically allows pregnant women and mothers to bring their children to treatment in order to allow a family-centered approach. At the federal level, the Substance Abuse and Mental Health Services Administration (SAMHSA), now led by Dr. Miriam Delphin-Rittmon, provides leadership on these issues in several ways. In particular, SAMHSA's Residential Treatment for Pregnant and Postpartum Women program is housed within the Center for Substance Abuse Treatment (CSAT) led by Dr. Joseph Bullock. The program awards grants to programs that provide an array of comprehensive, family centered substance use disorder services for pregnant women and their young children. In addition, the Comprehensive Addiction and Recovery Act (CARA) created a program that allows up to 25 percent of the PPW program to support grants to State alcohol and drug agencies to support non-residential services using a family-centered approach for pregnant women and their children. To read the AP story, click [here](#).

[...As Congress continues work to elevate SAMHSA's PPW Program](#)

Congress has expressed interest in working to support SAMHSA's PPW program in different ways. For example, the House Appropriations Committee, led by Chair Rosa DeLauro (CT) and Ranking Member Kay Granger (TX) approved an FY 22 appropriations bill funding SAMHSA that proposes to increase the PPW program

from the FY 21 level of \$32.9 million to the FY 22 level of \$49.4 million (an increase of \$16.5 million). In another example, Senators Portman (OH), Whitehouse (R.I.), Klobuchar (MN), Shaheen (N.H.), Cantwell (WA) and Capito (W.V.) are lead authors of a bill titled CARA 3.0 which includes a provision that would increase the PPW program's authorization from \$29 million to \$100 million; emphasizes the benefits of the availability of medication assisted treatment (MAT) for participants; and notes the need for programs to include recovery support services. To see a Section-by-Section summary of CARA 3.0, click [here](#).

To see an overview of appropriations for FY 2022 within SAMHSA and other NASADAD priority programs, click [here](#).

Research Roundup

Use of medication-assisted treatment for opioid use disorder increases among Medicaid recipients

A [study](#) reported in the *Journal of the American Medical Association (JAMA)* and conducted by Julia Donohue, PhD, of the University of Pittsburgh Graduate School of Public Health, and her colleagues, revealed that the use of medication for the treatment of opioid use disorder (OUD) increased among Medicaid enrollees from 2014 to 2018. The data reflected that, for Medicaid enrollees in the 11 States included in this study, medication-assisted treatment (MAT) for OUD increased from 47.8% in 2014 to 57.1% in 2018. Researchers noted Medicaid expansion accounted for some of these increases. While this study did reveal an improvement in access to medications for OUD treatment, researchers also noted significant variability between States as well as gaps in treatment.

Webinars to Watch



SAMHSA ★ SMVF TA CENTER
Service Members, Veterans, and their
Families Technical Assistance Center

Upcoming Webinar: Addressing Substance Use Among our National Guard and Reserve

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Service Members, Veterans, and their Families Technical Assistance Center (SMVF TA Center) will present an upcoming webinar [Best Practices and Systems of Support: Addressing Substance Use Among our National Guard and](#)

[Reserve](#). The webinar will take place on July 26th from 1:30 to 3:00 pm E.T. and registration is now open. As described on the announcement, the webinar will discuss the best practices, programs, and policies that exist in the National Guard for identification, education, treatment, and referral of service members and families who exhibit high-risk behaviors or have been assessed to have a SUD and/or COD. The webinar is intended for federal, State, and local personnel who want to further their knowledge in addressing the needs of National Guard and Reserve service members.
