

November 30, 2023



D.C. Update: Spotlight on Outcomes: Missouri, SAMHSA Announces New Data Strategy, NIDA Study Finds Increase in Overdose Deaths Among Pregnant and Postpartum Women, and More.

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Meet The Member

Nicole Walden, SSA of Alabama, Joins NASADAD Board of Directors as Director of Region IV

We are excited to announce that Nicole Walden, SSA in Alabama, is joining the NASADAD Board of Directors as Regional Director IV. Congratulations Nicole!



Nicole Walden serves as Associate Commissioner of the Mental Health and Substance Use Division at the Alabama Department of Mental Health (ADMH). In this role, she provides oversight to ADMH State Psychiatric Hospitals, Mental Health Community Programs, Substance Use Treatment and Prevention Community Programs. Ms. Walden began at ADMH as the Adult Treatment Services Coordinator, where she worked closely with the opioid treatment programs (OTP) and other providers of substance use services. She next served as Director of Substance Use Treatment and Development for ADMH from 2017 to 2022. As part of this role, she was the chair of the Substance Use Treatment and Recovery Support Committee on the Alabama Opioid Overdose and Addiction Council. She has also been responsible for the management of Alabama's Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant and served as the subject matter expert for ADMH on substance use treatment.

Ms. Walden received her Bachelor of Science and Master's in Psychology with a clinical concentration from Jacksonville State University. She is a graduate of the Southeastern Coast Addiction Technology Transfer Center (ATTC) Leadership Institute and has been a past evaluator for certification of addiction professionals for the Alabama Alcohol and Drug Abuse Association. Ms. Walden also served as the State Opioid Treatment Authority (SOTA) for Alabama from 2019 to 2022.

Welcome Nicole!

Spotlight on Outcomes: Missouri

Missouri is reporting reductions in substance misuse rates among youth and increases in age of first use for Missourians after expanding investments in community coalitions. In the last three years, Missouri has provided 126 mini grants (\$5,000) and 21 mega grant awards (\$100,000) to community coalitions to implement data driven programming. Concurrently, Missouri has conducted workforce development and community needs assessments with accompanying trainings to address gaps, resulting in an increase in Drug-Free Communities (DFC) coalitions from 8 in 2012 to 15 in 2022. These efforts have contributed to a decline in reported prescription drug misuse among youth and a steady increase in the age of first use for Missourians of alcohol and cigarettes. Specifically, Missouri reports a decrease in youth prescription drug misuse among youths ages 12-18 from 10.1% in 2016 to 0.9% in 2022. More broadly, Missouri reports a steady increase in age of first use for Missourians for alcohol and cigarettes across the last two decades- from 12.5 in 2002 to 13.3 in 2022 for alcohol and from 12 in 2002 to 12.6 in 2022 for cigarettes. Missouri is led by NASADAD member Nora Bock, Director, [Missouri Department of Mental Health \(MODMH\)](#), and National Prevention Network (NPN) Coordinator Christine Smith, Director, Prevention and Crisis Services, MODMH.

Missouri's data on youth substance use rates and age of initiation of substance use is collected primarily through one student survey. MODMH, in collaboration with the Missouri Department of Elementary and Secondary Education and the University of Missouri–St. Louis, administers the [Missouri Student Survey \(MSS\)](#), an online, statewide survey of public school students in grades 6-12 conducted in even-numbered years. The Missouri Institute of Mental Health analyzes and reports the survey data. The MSS is funded through a combination of Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant funds and Strategic Prevention Framework- Partnerships for Success (SPF-PFS) funds.

Awards Event: Celebrate Leaders in the Substance Use Disorder Field

Please join us from 3:00 p.m. to 4:00 p.m. EST on **Monday, December 11th**, as we convene the [2023 NASADAD Virtual Awards Program](#) that will feature the winner of the 2023 Ramstad-Kennedy Award for leadership related to recovery.

The Honorable Patrick J. Kennedy, former Congressman from Rhode Island, and the founder of [The Kennedy Forum](#), will provide remarks.

Register [here](#).

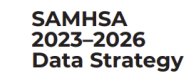
A zoom link will be sent to the corresponding email address once registration is complete.

Other awards will include:

- **NASADAD Service Award** - The award is given to a State Director (SSA) who has contributed outstanding service to the Association.
- **State Service Award** - This award goes to a State Director (SSA) who has demonstrated outstanding leadership in their respective State.
- **Henrick J. Harwood & Robert E. Anderson Service Award in recognition of distinguished Service in the field of addiction research, training, and evaluation** - This award is given to an individual or organization for exemplary work in the area of substance use disorder research, training, or evaluation.
- **Friend of NASADAD Award** - The award is given to a non-member of NASADAD to recognize outstanding service and leadership to the field of substance use disorders.

SAMHSA Announces New Data Strategy

Today, the Substance Abuse and Mental Health Services Administration (SAMHSA) announced [SAMHSA's 2023-2026 Data Strategy](#). The 2023-2026 Data Strategy is based on over 20 listening sessions with stakeholders from a variety of interest groups, including substance use and mental health professionals, and details the agency's commitment to data and evidence.



SAMHSA
2023-2026
Data Strategy



SAMHSA

The new 2023-2026 Data Strategy focuses on four priority goals:

1. Enhancing SAMHSA's ability to collect, capture and maintain high-quality data;
2. Conducting robust performance monitoring, evaluation, and surveillance;
3. Strengthening access to, utilization of, and dissemination of SAMHSA data; and
4. Expanding and strengthening SAMHSA's workforce capacity.

To achieve these priority goals, the strategy outlines specific objectives, strategies, and actions. Specifically, the Data Strategy "...calls for investments in human capital and information technology systems, increased transparency, reduced burden, and robust dissemination. The strategy incorporates principles of data quality, collaboration, and evidence-based practices."

The 2023-2026 Data Strategy can be downloaded in full, [here](#).

DOJ/CDC Funding Opportunity: Reaching Rural: Advancing Collaborative Solutions



BJA
Bureau of Justice Assistance
U.S. Department of Justice

With support from the Department of Justice's (DOJ) Bureau of Justice Assistance (BJA), the Centers for Disease Control and Prevention (CDC), and the [State Justice Institute](#), the [Institute for Intergovernmental Research \(IIR\)](#) is now seeking applications for the [Reaching Rural: Advancing Collaborative Solutions](#) program. The [Reaching Rural Initiative](#) is a one-year initiative that "...empowers rural practitioners to build deeper networks, particularly across sectors; adopt bold solutions to the persistent challenge of substance use and misuse in rural communities; and reimagine how diverse systems with different missions can engage with one another to more effectively serve justice involved individuals with substance use or co-occurring disorders." Participation includes:

- "Travel and per diem costs to participate in an orientation, a field visit to observe the implementation of evidence-informed practices in a rural setting, and a closing session at the end of the 12 months.
- Monthly mentorship and guidance aimed toward local needs.
- Monthly assignments that help participants apply core concepts to the local community or region.
- Access to a diverse network of rural peers, innovative rural communities, and technical assistance providers.
- Formal recognition for completing the planning initiative."

At completion of the planning period, participants can apply for an implementation grant of up to \$100,000 for up to 15 months to launch a project planned during the Reaching Rural fellowship. Applications are due December 15, 2023.

NIH Funding Opportunity: Screening, Brief Intervention and Referral to Treatment or Prevention for Alcohol, Tobacco, and Other Drugs Use and Misuse in Adult Populations That Experience Health Disparities

The [National Institutes of Health \(NIH\) Office of Disease Prevention \(ODP\)](#) and participating NIH Institutes, Centers, and Offices (ICOs) announced a new funding opportunity for [Screening, Brief Intervention and Referral to Treatment or Prevention \(SBIRT/P\) for Alcohol, Tobacco, and Other Drugs \(ATOD\) Use and Misuse in Adult Populations That Experience Health Disparities](#). This funding opportunity is "...seeking applications to test innovative approaches to implementing SBIRT/P for alcohol, tobacco, and other drugs (ATOD) use and misuse in adult populations that experience

health disparities.” Applicants are encouraged to include prospective tests of SBIRT/P and should leverage collaborations with relevant healthcare and community partners.

The number of awards is contingent upon NIH appropriations and submissions of appropriate applications with a maximum project period of 5 years and no limits to the application budget. The first receipt date for applications is February 5, 2024.

More information, including eligibility and application instructions can be found [here](#).

New CoE-PHI Resource: End of the COVID-19 Public Health Emergency



The Substance Abuse and Mental Health Services Administration’s (SAMHSA) Center of Excellence for Protected Health Information (CoE-PHI) recently released an updated resource on the [End of the COVID-19 Public Health Emergency](#). The resource provides a timeline of the COVID-19 public health emergency and the Office for Civil Rights’ (OCR) penalties for violating various substance use treatment privacy requirements under the Health Insurance Portability and Accountability Act (HIPAA). This particular resource is an update of guidance issued during the COVID-19 public health emergency by OCR. Key Points include:

- “OCR has resumed enforcing violations of the HIPAA rules related to the use of telehealth for the provision of behavioral health services.
- OCR has resumed enforcing violations of the HIPAA rules regarding uses and disclosures of PHI for public health activities and health oversight activities.”

The resource can be downloaded [here](#).

Research Roundup

NIDA Study Finds Increase in Overdose Deaths Among Pregnant and Postpartum Women

The National Institutes of Health’s (NIH) National Institute on Drug Abuse (NIDA) published an article on a study in *JAMA Psychiatry* on [Pregnancy and Postpartum Drug Overdose Deaths in the US Before and During the COVID-19 Pandemic](#). The study analyzed national data on cause of death, county-level health resources, and births before and during the COVID-19 pandemic- from January to June 2018 and July to December 2021. The study found that overdose deaths increased markedly in pregnant and postpartum women from early 2018 to late 2021 across all examined age, racial/ethnic, educational, and marital status groups. Other key findings include:

- Among pregnant and postpartum women aged 35 to 44, overdose mortality ratios more than tripled from 4.9 deaths per 100,000 in 2018 to 15.8 per 100,000 in 2021.
- Among pregnant and postpartum women aged 10 to 44, overdose mortality ratios almost doubled from 3.1 deaths per 100,000 in 2018 to 6.1 per 100,000 in 2021.
- Over 60% of pregnancy-associated overdose deaths occurred outside healthcare settings.
- Girls and women who died from a drug overdose during pregnancy, were more likely to be aged 10 to 34 (75.4%), be non-college graduates (72.1%), be unmarried (88.0%), and die in “non-home, non-healthcare settings” (25.9%).

The article calls for studies on the risk and protective factors of pregnancy-associated overdose mortality among people who use drugs.

CWLA Issue Brief: Transform Child Welfare Through Support for the Workforce

The Child Welfare League of America (CWLA) recently released an issue brief on [Transform Child Welfare Through Support for the Workforce](#). The brief outlines

the child welfare system, the workforce shortage, workforce development strategies, and barriers to expanding the child welfare system. The brief also offers a series of recommended policy changes and investments to support the growth of the child welfare workforce both within and outside child welfare law to ensure caseworkers have manageable workloads to avoid high turnover and vacancy rates. The brief is directed at Congress, but the strategies can be applied to State child welfare workforces.



Transform Child Welfare through Support for the Workforce

Congress should:

- Increase funding for workforce development initiatives in Title IV-B to promote recruitment, training, and retention of high-quality child welfare staff.
- Significantly increase child welfare funding for services that provide families and staff with the tools they need for success.
- Address systemic concerns that negatively impact the child welfare workforce.

Child Welfare System Transformation Starts with a Strong Workforce

A well-trained and well-staffed child welfare workforce is vital to the goals of legislators and the broader community.

All the reforms enacted by Congress in recent years, including ending victims of sex trafficking, reducing group home care, expanding kinship care, finding more foster parents, enhancing foster and adoptive parent training, increasing legal permanency through adoptions and guardianships, more direct consulting with youth in foster care, addressing substance abuse and mental health needs within families, and entering new data are all dependent on the caseworker.

Child welfare work is labor-intensive and emotionally taxing. The COVID-19 pandemic has worsened pressing issues within the workforce, with high turnover rates and rising concerns over compassion fatigue, burnout, and secondary trauma. Increased turnover rates and the resulting higher caseloads perpetuate the caseworker crisis. Studies have found that factors related to workloads such as emotional exhaustion and inadequate supervisory or administrative support also lead to increased levels of turnover.

High caseworker turnover rates negatively impact children and families. A Government Accountability Office

(GAO) analysis of 27 available Child and Family Services Reviews (CFSRs) in 2003 showed that staff shortages, high caseloads, and worker turnover were factors impeding progress toward the achievement of federal safety and permanency outcomes. The report noted that staffing shortages and high caseloads disrupt case management by limiting workers' ability to establish and maintain relationships with children and families. Research in Milwaukee and Illinois suggests that children are more likely to achieve permanence if they are assigned fewer workers over the course of their stay in foster care.

Strengthening the workforce and ensuring that caseworkers have manageable workloads will reduce incidents of child abuse, reduce the number of children going into foster care, and increase adoptions for children of all ages. A stronger workforce could also allow agencies to devote more resources to post-adoption and reunification services to strengthen permanency for children and families.

Support the Child Welfare Workforce Through Titles IV-E and IV-B

Increase funding for workforce development and training. There is currently \$20M designated for workforce development in Title IV-B, dependent upon caseworkers visiting families on a monthly basis. Once split among all the states, county and Tribal child welfare programs, this \$20M does not go nearly far enough to truly support the workforce. We recommend substantially increasing this set-aside.

Promote recruitment and retention. Recruitment and retention of qualified caseworkers is essential for establishing a well-staffed and well-trained workforce. High vacancy rates and unfilled positions lead to much higher caseloads for frontline staff and stress from high caseloads leads to high rates of turnover and burnout; these problems compound on one another.

There are several promising practices that are helping agencies address these key issues, and Congress should support states and counties in implementing and evaluating

CWLA Policy Brief • Transform Child Welfare through Support for the Workforce

CDC Report Finds Decrease in Tobacco Use Among High School Students

The [Centers for Disease Control and Prevention's \(CDC\) Office on Smoking and Health \(OSH\)](#) and the [Food and Drug Administration's \(FDA\) Center for Tobacco Products \(CTP\)](#) released a report in last week's Morbidity and Mortality Weekly Report (MMWR) on [Tobacco Product Use Among U.S. Middle and High School Students — National Youth Tobacco Survey, 2023](#). The report examined data from the [CDC's 2023 National Youth Tobacco Survey \(NYTS\)](#) to assess tobacco use patterns among middle school and high school students across the U.S. Overall, the report found that tobacco use declined among high school students from 2022 to 2023. Key findings include:

- “In 2023, 10.0% of middle and high school students reported current tobacco product use.
- From 2022 to 2023, current e-cigarette use among U.S. high school students declined from 14.1% to 10.0%.
- E-cigarettes remained the most commonly used tobacco product among youths.
- Among middle school and high school students who currently use e-cigarettes, 25.2% used e-cigarettes daily, and 89.4% used flavored e-cigarettes.”

The report attributes the decrease in youth tobacco use to public health monitoring and evidence-based tobacco control strategies and tobacco prevention policies.

Webinars to Watch

SAMHSA Webinar: Office of Recovery Quarterly Recovery Exchange Meeting



The Substance Abuse and Mental Health Services Administration's (SAMHSA) Office of Recovery (OR) is hosting a webinar as part of the [Office of Recovery Quarterly Recovery Exchange Meeting](#). This no-cost meeting is on December 7, at 1:30 pm ET. The meeting is designed to “...bring stakeholders together for an update on the goals and activities of the discussion of the OR and have dialogue with recovery leaders from across the nation.” Registration is required.

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