

September 19, 2024



D.C. Update: NASADAD Releases Issue Brief on WASLI, NASADAD Participates in SAMHSA's Walk for Recovery, PCSS-MAUD Online Module: Assessment and Management of Alcohol Withdrawal, and More.

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Meet The Member

Tony Toomer, State Opioid Treatment Authority (SOTA) for Indiana

Tony Toomer, MBA, MSW, MATS, currently serves as the Opioid Treatment Program (OTP) Manager for the Division of Mental Health Addiction (DMHA) within the Indiana Family and Social Services Administration. He also serves as the State Opioid Treatment Authority (SOTA) for Indiana.



Tony has been employed with DMHA since 1994 in various roles and brings over 30 years of experience in the mental health and substance use disorder (SUD) field. In 2017, he took the position of OTP Manager. Since then, he has led the opening of 12 new OTPs, soon to be 13 this year, bringing the total number of OTPs in Indiana to 26. Tony continues to be an advocate for reducing the stigma around medication assisted treatment (MAT) and continues to work to ensure Hoosiers have access to individualized treatment and services with respect and dignity. He is responsible for leading the creative approaches to improving access while balancing the State and Federal regulations related to MAT and OTPs.

Tony holds a master's in business administration from Anderson University, a master's in social work from Indiana University-Purdue University Indianapolis, and a master's in theological studies.

NASADAD Releases Issue Brief on WASLI

NASADAD has developed an issue brief on an *Overview of SAMHSA's Women's Addiction Services Leadership Institute (WASLI) & Considerations for Reinstating WASLI 2.0*. The brief documents the history of the program, the importance of WASLI, the benefits of the program, and offers considerations for an updated version of the institute should it be reinstated.

NASADAD has been promoting the reinstatement of WASLI, a leadership program that was funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) from 2008-2018 designed to strengthen the women's services workforce. The program's goals were to strengthen the capacity of emerging leaders to meet the prevention, treatment, and recovery needs of women with substance use disorder (SUD), develop participant's leadership skills, and create a network of the next generation of leaders in women's services.

The Senate Appropriations Committee included in its version of proposed Fiscal Year (FY) 2025 funding a directive to SAMHSA to reinstate WASLI. NASADAD applauds this action. Over the coming weeks and months, NASADAD will continue to monitor the FY 2025 appropriations process in general, and developments related to WASLI in particular.

We thank those who helped support and contribute to the development of this paper, which will be a vital resource as NASADAD continues to pursue efforts to support the reestablishment of WASLI. If you have any questions, please reach out to Rob Morrison (rmorrison@nasadad.org) and Melanie Whitter (mwhitter@nasadad.org).

The issue brief can be found on NASADAD's webpage, [here](#).

NASADAD Participates in SAMHSA's Walk for Recovery

NASADAD was honored to participate in the Substance Abuse and Mental Health Services Administration's (SAMHSA) Walk for Recovery earlier this month, celebrating the millions of lives



that have been transformed and the progress made in advancing recovery. We invite you to watch a short video capturing our involvement in this important event, reflecting our ongoing work to support those affected by substance use disorders (SUD).

The video can be viewed on NASADAD's webpage, [here](#).



Overview of SAMHSA's Women's Addiction Services Leadership Institute (WASLI) & Considerations for Reinstating WASLI 2.0

Background

Substance use during and after pregnancy can negatively impact women and their babies. Current trends show an increase in substance use related conditions in pregnant women and their newborns. Women with opioid-related diagnoses at delivery increased by 131% from 2010 to 2017. During the same period, the number of babies born with neonatal abstinence syndrome (NAS), or the signs of withdrawal that may occur in a newborn exposed to substances in utero, increased by 82% nationally.¹ Further, the changes that occur during the postpartum period can cause depression and an increased risk of substance use.² Substance use disorder (SUD) treatment for pregnant and parenting women requires that practitioners understand the biological, psychological, and social needs of this population to provide effective treatment.³

Recognizing the critical public health need to reach and provide treatment for pregnant and parenting women with an SUD, the Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant directs state alcohol and drug agencies to give preference in admission to SUD treatment, as well as provide specialized services to these populations. To support the delivery of specialized women's services and respond to challenges in the workforce (e.g., high staff turnover and keeping pace with best practices), the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Treatment (CSAT) created a customized leadership institute to strengthen the women's services workforce.

The institute, known as the Women's Addiction Services Leadership Institute (WASLI), was funded by SAMHSA from 2008-2018. Over the ten-year period, six WASLI cohorts were trained. A total of 112 emerging leaders graduated from WASLI and 56 coaches received training in executive coaching. 10 percent of the coaches were WASLI alumni. Sixty-eight percent of the participants identified as White, 25% identified as Black/African American, and roughly 10% identified as Hispanic or Latina.⁴

The goals of this comprehensive leadership program were to:

- Strengthen the capacity of emerging leaders to meet the prevention, treatment, and recovery needs of women with substance use and co-occurring mental disorders;
- Develop and improve the leadership skills of participants; and
- Create a network of the next generation of leaders in women's services.

WASLI provided an intensive and tailored opportunity to strengthen the skills of women's services professionals that had not been available in the SUD field. Since the program was discontinued, it has not been replaced with comparable investments in leadership development. The absence of this program created a significant gap in federal support to strengthen and retain the women's services workforce.

Around the Agencies

Biden-Harris Administration Announces \$17.5 Million in Awards to Support Suicide Prevention Programs

The Department of Health and Human Services (HHS), through the Substance Abuse and Mental Health Services Administration (SAMHSA), recently awarded \$17.5 million in grant funding to support suicide prevention programs. These programs seek to assist with the implementation of youth and young adult suicide prevention programs and

early intervention strategies to address suicide risk factors across a variety of youth-focused settings. These grants were awarded as part of the Biden-Harris Administration's [National Strategy for Suicide Prevention and Federal Action Plan](#). The \$17.5 million in grant funding is split between the following two programs to promote awareness and access to suicide prevention resources and services for youths:

- [“Garrett Lee Smith State/Tribal Youth Suicide Prevention and Early Intervention Program”](#)- \$15.3 million- to support states and Tribes with implementing youth and young adult suicide prevention (up to age 24) and early intervention strategies in schools, educational institutions, juvenile justice systems, substance use and mental health programs, foster care systems, pediatric health programs, and other child- and youth-serving organizations;
- [Garrett Lee Smith \(GLS\) Campus Suicide Prevention](#)- \$2.2 million- to assist colleges and universities in enhancing mental health services for all college students, including those at risk for suicide, depression, serious mental illness and/or substance use disorders that can lead to academic challenges. The GLS Campus program assists colleges and universities to identify students who are at risk for suicide and suicide attempts, increase protective factors that promote mental health, reduce risk factors for suicide, and ultimately reduce suicide attempts and deaths;”

SAMHSA’s press release announcing the funding can be found [here](#).

SAMHSA Releases "Connected and Strong" Compendium: 10 Technical Assistance Briefs to Foster Unity and Strengthen Continuity Across Crisis Response and Treatment Systems

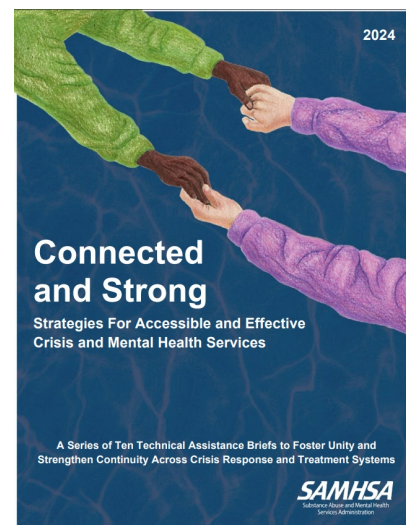
The Substance Abuse and Mental Health Services Administration (SAMHSA) recently released the [Connected and Strong Compendium: 10 Technical Assistance Briefs to Foster Unity and Strengthen Continuity Across Crisis Response and Treatment Systems](#). The compendium of ten papers, authored by subject matter experts, outlines key components and strategies to advance SAMHSA’s vision of a connected and comprehensive mental health and substance use disorder (SUD) crisis care system. Specifically, the compendium highlights specific strategies building on the core principles within SAMHSA’s [National Guidelines for Behavioral Health Crisis Care and Youth Crisis Guidelines](#) to connect fragmented crisis care systems. The papers comprising the compendium include:

- "Connected and Strong: Strategies for Accessible and Effective Crisis and Mental Health Services
- Peer Support Services Across the Crisis Continuum
- Growing and Strengthening the Behavioral Health Crisis Response Workforce
- Crisis Services: General Medical and Psychiatric Approaches to Care Delivery
- Innovative Uses of Technology to Enhance Access to Services Within the Crisis Continuum
- Crisis Systems Coordination and Collaboration: Leveraging Strengths and Opportunity of 988 and 911
- Facilitating Rapid Access to Outpatient Mental Health and Substance Use Care
- Increasing Equitable Access to Care for Co-Occurring Mental Health and Substance Use Disorders
- Intersectionality: Faith, Mental Health, and Community Partnerships
- Long COVID and High-risk Populations”

Each individual paper within the compendium can be downloaded individually, [here](#).

PCSS-MAUD Online Module: Assessment and Management of Alcohol Withdrawal

The Substance Abuse and Mental Health Services Administration (SAMHSA)-funded [Providers Clinical Support System - Medications for Alcohol Use Disorder \(PCSS-MAUD\)](#)



recently released an online training module on [Assessment and Management of Alcohol Withdrawal](#). This 1.5 hour on-demand training module is designed for clinical healthcare professionals who prescribe medications for alcohol use disorder (MAUD) in outpatient and inpatient settings and offers strategies regarding the assessment, management, and treatment of Alcohol Withdrawal Syndrome (AWS). Specifically, the module discusses the neurobiology of AWS, outpatient and hospital managements of AWS using evidence-based pharmacotherapy and behavioral therapies, and patient-centered goal setting through individualized care plans. Learning objectives include:

1. “Examine the neurobiological mechanisms underlying alcohol withdrawal syndrome.
2. Recognize the clinical signs, symptoms, and risk factors for alcohol withdrawal syndrome.
3. Determine the appropriateness of outpatient or hospital management for a given patient with alcohol withdrawal syndrome.
4. Develop a comprehensive treatment plan for a patient with alcohol withdrawal syndrome.
5. Create patient-centered goals for individuals with alcohol use disorder.”

1.5 Continuing Education (CE) credits are available upon completion of the module.

Additional trainings can be found on PCSS-MAUD’s website, [here](#).

Research Roundup

CDC Study Examines Impact of Select County-Level Factors on Suicide Rates in the US

The Centers for Disease Control and Prevention (CDC) published a study in *Morbidity and Mortality Weekly Report* on [Vital Signs: Suicide Rates and Selected County-Level Factors - Untied States, 2022](#). The study used data on suicide rates from the 2022 [National Vital Statistics System \(NVSS\)](#) to evaluate the impact of select county-level factors on suicide rates across the US. Specifically, the study compared suicide rates across three county-level factors: health insurance coverage, broadband internet access, and household income. The study found that average suicide rates were inversely related to the three county-level factors, with average suicide rates being lowest in the counties with higher health insurance coverage, broadband internet access, and household income. Other key findings include:

- “In 2022, a total of 49,476 suicides occurred in the United States.
- Suicide rates were highest in counties in the lowest tertile of health insurance coverage (16.4), broadband Internet access (19.2), and household income (15.2), followed by counties in the intermediate tertiles (14.3, 16.5, and 14.8, respectively).
- The lowest suicide rates occurred in counties in the highest tertiles (13.0, 13.3, and 13.5, respectively).
- These findings correspond to 26%, 44%, and 13% lower suicide rates in counties in the highest versus lowest tertiles of health insurance coverage, broadband Internet access, and household income, respectively.”

The study also analyzed the impact of the county-level factors on suicide rates across demographic groups.

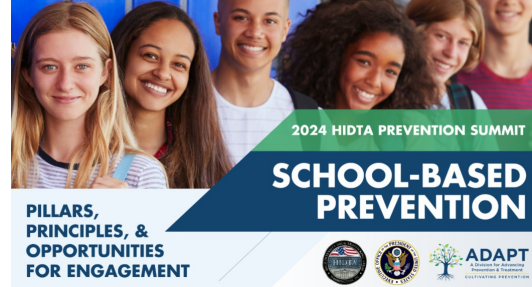
The authors call for a comprehensive approach to suicide prevention that addresses upstream community risk and protective factors to address community-specific needs that contribute to suicide risk, particularly for disproportionately affected populations.

Webinars to Watch

ONDCP Webinar: 2024 HIDTA Prevention Summit

The White House Office of National Drug

Control Policy (ONDCP)-funded Washington / Baltimore High Intensity Drug Trafficking Area (HIDTA), in collaboration with [A Division for Advancing Prevention & Treatment \(ADAPT\)](#), is hosting the [2024 HIDTA Prevention Summit](#). This no-cost, virtual summit is on October 3, from 8:30 am-5:00 pm ET. The summit will outline the fundamental pillars and principles of a school-based prevention system that builds capacity to address today's drug landscape through community partnerships with coalitions, non-profit organizations, and law enforcement. The Summit's goals include:



1. “Present advances in substance use prevention science, policy, and strategies in the context of national substance threats.
2. Illustrate the influence of positive youth experiences in preventing youth substance use and other risk behaviors.
3. Describe the fundamental components and principles of a school-based prevention system.
4. Examine key considerations for integrating fentanyl education and naloxone training into secondary schools based on the best available evidence.
5. Identify ways in which coalitions, law enforcement, and non-profit organizations can support school-based prevention efforts.
6. Discuss the impact of a multi-state social norms media campaign in middle schools and important implementation considerations.”

6.25 Continuing Education (CE) credits are available for attending the webinar.

Registration is required.

CoE-TFR Webinar: Getting to Next Level Outcomes - The Important Role that Peers Play in Supporting Tobacco-Free Recovery

The Substance Abuse and Mental Health Services Administration (SAMHSA)-funded [National Center of Excellence for Tobacco-Free Recovery \(CoE-TFR\)](#) is hosting a webinar on [Getting to Next Level Outcomes - The Important Role that Peers Play in Supporting Tobacco-Free Recovery](#). This no-cost webinar is on October 22, at 2:00 pm ET. The webinar is intended for peer support specialists, recovery coaches, and peer supervisors and will describe the critical role peers play in addressing commercial tobacco use and social norms around tobacco-free recovery in mental health and substance use disorder (SUD) settings. Learning objectives include:

- “Describe the role of a peer support specialist/peer recovery coach in a behavioral health setting
- Explore the evidence and importance of integrating peer-driven support services as part of a coordinated system of care to support people on their quit journey
- Discuss barriers, challenges, and opportunities to leverage peers to support Tobacco-Free Recovery”

Registration is required.

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