



(Clockwise, l-r) Gov. John R. Kasich, First Lady Karen W. Kasich and OhioMHAS Director Tracy J. Plouck address a crowd of more than 150 state and community leaders, prevention experts, teachers, students, parents and others at a Jan. 8 media event at West Carrollton Middle School to launch Ohio's new "Start Talking!" youth drug prevention initiative.

Kasich Administration Launches Statewide "Start Talking!" Youth Drug Prevention Initiative

As parents, and as leaders, Gov. John R. Kasich and First Lady Karen W. Kasich have heard from too many Ohioans about how drug abuse has devastated their family. That's why, on Jan. 8, the Kasichs joined with Ohio Attorney General Mike DeWine, former Cincinnati Bengal Hall of Famer Anthony Muñoz, Ohio Superintendent of Instruction Richard Ross, Ohio Department of Mental Health and Addiction Services (OhioMHAS) Director Tracy Plouck, Ohio Department of Aging Director Bonnie Burman, Ohio Department of Health Director Dr. Ted Wymyslo, Ohio Department of Public Safety Director John Born, Governor's Cabinet Opiate Action Team Director Orman Hall, Montgomery County Sheriff Phil

Plummer, recovering Ohioan Sam Buehler and parents Danielle Smoot (founder of Cole's Warriors) and Paul Schoonover (Tyler's Light) to launch **Start Talking!** — a new statewide youth drug prevention initiative that brings together proven strategies that leverage the parent-child relationship to promote frequent, ongoing conversations between kids and adults.

"Each of us as parents can do our part by talking to our children."

— Gov. John R. Kasich

The initiative is predicated on research that shows when children talk about substance abuse with parents and other adults, they

are up to 50 percent less likely to try alcohol and other drugs.

"Each of us as parents can do our part by talking to our children," said Gov. Kasich. "Start Talking! pulls together many proven strategies, giving us some very potent tools that let us come at the problem from all sides. It's a tough problem that calls for an even tougher fight. But it's a fight we must win, because our future — our children — are at stake."

The initiative encourages Ohioans to embrace four prevention-focused programs aimed at raising awareness and encouraging conversations, all in an effort to stop drug abuse before it starts.

(Continued on Page 2)



Elizabeth Ranade Janis, anti-trafficking coordinator for the State of Ohio, unveiled a new campaign to increase awareness about human trafficking Jan. 9 during the fifth annual Human Trafficking Awareness Day of activities at the Ohio Statehouse.

Kasich Administration Unveils New Awareness Campaign to Stop Human Trafficking in Ohio January is "Human Trafficking Awareness Month"

This month, Gov. John Kasich kicked off a new public awareness campaign to ramp-up Ohio's ongoing fight against human trafficking, the illegal trade of people for commercial sex or forced labor exploitation that enslaves approximately 1,000 Ohioans every year.

The new campaign, led by the Ohio Human Trafficking Task Force, gives Ohioans new resources for how they can personally help combat the problem by reporting suspicious activity. It also is aimed at connecting with trafficking victims themselves, with outreach materials in places where they are likely to see them, such as public transit sites and highway rest areas. The campaign was unveiled by Kasich Administration officials Jan. 9 at Ohio's Fifth Annual Human Trafficking Awareness Day, hosted by Rep. Teresa Fedor, D-Toledo. Details of the campaign can be found here: HumanTrafficking.Ohio.Gov.

The campaign aims to educate the public on how to recognize the signs of human trafficking, promote the appropriate method for reporting human trafficking situations, and to direct victims of human trafficking to available services and treatment, helping them to regain control of their lives.

More information:

[Press Release](#)

[Ohio's Tragic Reality Awareness Campaign Materials](#)

[Human Trafficking Toolkit](#)

[Human Trafficking Task Force Recommendations](#)

Start Talking!, cont. from Page 1

>>> **Know!** is a drug prevention and awareness partnership developed by The Drug-Free Action Alliance that targets parents and caregivers of middle school students and empowers them to raise their children substance-free. Its goal is to increase communication between parents and their children about substance abuse. This is achieved through free, twice-monthly emails that offer parent tips to families to help them talk about this subject.



>>> **Parents360 Rx** is a component of a national community education program developed by the Partnership at Drugfree.org that has demonstrated significantly increased knowledge of substance abuse among adults, thereby enhancing confidence in their ability to speak with teens about the subject. Ohio is disseminating Parents360 Rx Action Toolkits to assist parents and school leaders in hosting discussions locally to support prevention efforts in their communities.



>>> **5 Minutes for Life** is led by the Ohio State Highway Patrol and the Ohio National Guard, in partnership with high schools and the Ohio High School Athletic Association (OHSAA). Patrol and National Guard members talk to student athletes and encourage them to become ambassadors who lead peer-to-peer conversations that promote healthy lifestyles. The statewide partnership involves all 58 Patrol posts, more than 800 OHSAA-member high schools and Ohio National Guard Service members from throughout the state.



>>> **Building Youth Resiliency** and encouraging good behavioral health among young people are both essential to enhancing their ability to resist substance abuse and addiction. The Office of Ohio First Lady Karen W. Kasich, in partnership with other state agencies, is seeking applications to assist local communities in utilizing evidence-based programs to help youth resist substance use. This initiative will give communities and schools the tools to develop students' resiliency so they have the courage to push back against peer pressure.



More information about Start Talking! is available at: www.StartTalking.Ohio.Gov

Additional Resources:

[Press Release](#)

[Watch Ohio Channel coverage of media event](#)

[Photos from West carrollton media event](#)



This screenshot is from one of the new Public Service Announcements developed as part of Ohio's new "I Lost a Bet" problem gambling awareness campaign. The campaign employs humor to grab a viewer's attention and then drive him or her to the campaign website www.ilostabet.org for more information and helpful resources.

New Awareness Campaign Targets Problem Gambling

A new statewide responsible gambling campaign called I Lost a Bet launched in early January. The campaign, which primarily targets young adult males, is designed to create intrigue and utilizes humor to engage young adults, while imparting useful information about responsible gambling.

The campaign encourages individuals to access additional information via the Ohio Problem Gambling Helpline (1-800-589-9966) and an email address for help at help@ilostabet.org. Since young adults access information primarily through their phones and online, the campaign has a heavy online presence with ilostabet.org. Television ads and billboards will round out the campaign that will run through June 30, 2014. Questions about bringing the campaign to a local community? Contact Stacey Frohnafel-Hasson at: stacey.frohnafel@mha.ohio.gov.

CADCA to Honor OhioMHAS for Leadership in Prevention

OhioMHAS recently was named the 2014 recipient of the *Outstanding State Member Award* by the Community Anti-Drug Coalitions of America (CADCA). OhioMHAS is being recognized for "providing extensive support to the state's coalitions and substance abuse prevention programs" according to the award announcement. Prevention staff will receive the award Feb. 6 during CADCA's National Leadership Forum in Maryland. Click [here](#) to learn more about CADCA.

HBH Community Partnership

The Heartland Community Partnership will hold its inaugural meeting on Feb. 4 from 10 a.m. – noon at Heartland Behavioral Healthcare (HBH). This partnership, which includes HBH staff, families, peer support specialists and local NAMI affiliates, is an extension of Project #4, a statewide initiative that approaches treatment and recovery through trauma-informed care, peer support and family involvement. For more information, call 330/833-3135 and ask for Danielle Granata at ext. 1206 or Lisa Huston at ext. 1244.

Bitter Cold Start to 2014 Underscores Importance of Emergency Preparedness

While Ohioans wrestled with record low temperatures, piles of snow and roadways covered with ice that left some people stranded and caused a number of car accidents, the state's behavioral health services system was hard at work ensuring the health and safety of our most vulnerable citizens.

Boards and providers stepped up their efforts to help protect Ohioans from the deep freeze even as some communities struggled with the loss of power, loss of gas to furnish heat, water line breaks and the risk of hypothermia due to exposure. Efforts included collaborating with local emergency officials, Community Psychiatric Supportive Treat-

ment (CPST) professionals and hospitals, checking on consumers, providing assistance with utilities and providing access to shelters, recovery coaches and respite. "We all recognize the stress that extreme conditions (storms, floods, heat and frigid temperatures) can have on our individual lives," said Ron Adkins, executive director of the Gallia-Jackson-Meigs Board of Alcohol, Drug Addiction and Mental Health Services. "Emergency preparedness is simply a common sense approach to addressing some of these issues. Assessing the needs and providing our clients with options up front can often times divert crisis situations in a more efficient, compassionate manner. Whether it's a

telephone call to check their condition, assisting with the purchase of food and other essentials (medicine, utilities, etc.) or an explanation of respite options, any form of assistance is comforting to both the client and the clinician. A little extra effort can have a significant positive impact on the overall wellness of our clients."

For more resources on emergency preparedness, visit the ["Supports" section](#) of the OhioMHAS website.



ICD-10 Implementation Slated for Oct. 1, 2014

On Oct. 1, 2014, the ICD-9-CM codes used for health care diagnosing and reporting inpatient procedures will be replaced by ICD-10 codes. The transition to ICD-10 is required for all health care entities covered under the Health Insurance Portability and Accountability Act (HIPAA). This includes alcohol and other drug and mental health programs certified by the Ohio Department of Mental Health and Addiction Services (OhioMHAS) that submit health care claims to payors, including the Ohio Medicaid program, Boards that continue to receive and

process health care claims, Medicare, private insurance companies, and the Ohio Bureau of Workers' Compensation, among others. Please note, the change to ICD-10 **does not affect** CPT/HCPCS (service) coding for behavioral health care services.

Behavioral health providers have used the Diagnostic and Statistical Manual (DSM) system for diagnosing behavioral health care conditions. With the implementation of standardized code sets under HIPAA, which Ohio's public behavioral health system transitioned to in State Fiscal Year (SFY) 2004, all claims submitted to the Multi-Agency Community Services Information System (MACSIS) were processed using the ICD9-CM code set. From the agency/behavioral health professional perspective, the ICD-9-CM and DSM-IV code sets were similar enough that agencies/behavioral health professionals that continued to use DSM for diagnosing and submitted them on health care claims were still likely to be paid. With the recent publication of the DSM-V and the HIPAA transition to ICD-10, the question has arisen about how the two code sets relate to each other (Is there a crosswalk?). These questions have even been posed to the Centers on Medicare and Medicaid (CMS). You may view the questions and responses from CMS here:

- As a state Medicaid agency we have to assist our Community Mental Health/Mental Health agencies and external partners in the ICD 10 transition. What guidance could/would CMS provide to states on behavioral health mappings? [**Response.**](#)
- With ICD-10, will there be a correlation between the updated DSM code set (DSM-V)? Can you please provide guidance on how to address the differences in code sets for these Mental Health/Substance Abuse professionals that SMAs contract with for services? [**Response.**](#)

In addition to the DSM/ICD-10 issue, there is not a simple one-to-one cross walk between ICD-9-CM and ICD-10 due to increased diagnosing specificity of the ICD-10.

OhioMHAS staff have reviewed the ICD-10 coding for behavioral health conditions (F-codes) and other related conditions (Z-codes) and the impact on current coverage and payment policies, including for the Ohio Medicaid program as they relate to alcohol and other drug and mental health services. A draft ICD-10 coverage and payment analysis has been

DFAA "Big Bowl Vote" Measures Impact of Alcohol Advertising on Youth

Research shows that the more youth are exposed to alcohol in advertising, the more likely they are to consume alcohol underage. To assess the impact of advertising on youth, the Drug Free Action Alliance (DFAA) will host the [***BIG BOWL VOTE 2014.***](#)

Through a simple, two-question, student questionnaire given Monday morning following the Super Bowl, middle and high school students share their impressions about what advertisements they remember seeing and which commercial was their favorite.

DFAA staff will collect and summarize the data and release results a few days after the Super Bowl. This valuable information can then be used to educate parents, students, lawmakers and the media about the effects of alcohol advertising on youth.

Last year, more than 20,000 middle and high school students in 32 states participated in the Drug Free Action Alliance (DFAA) Big Bowl Vote 2013, which once again revealed the youth appeal of alcohol advertising.

Youth and adults can follow the discussion live and provide instant feedback during the Big Game on Twitter, using hashtag #bbv14. Download the [***Big Bowl Vote 2014 Playbook***](#) for complete details.



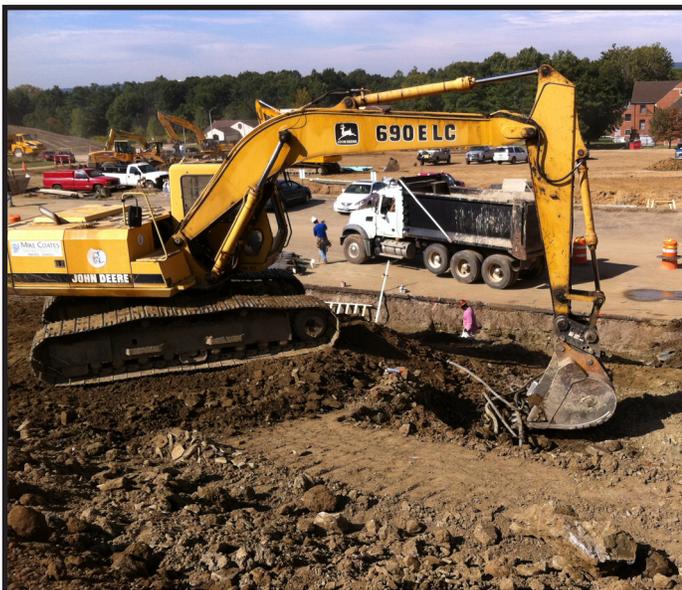
proposed and is currently being reviewed by various clinical stakeholder groups as expert clinical review is necessary to ensure that payment policies are developed in alignment with medical practice as well as ensuring availability of access to behavioral health care services.

OhioMHAS is also working with the Ohio Department of Medicaid to update the Medicaid Information Technology System (MITS) to implement ICD-10 coverage and payment policies so it will appropriately process community behavioral health care claims with ICD-10 diagnosis codes beginning Oct. 1, 2014.

For more information and updates from the Department of Medicaid, click [**here.**](#)

For more information and updates from CMS, click [**here.**](#)





Northcoast Behavioral Healthcare Hospital Project on Schedule



Despite the cold and snow, construction crews continue to make progress at OhioMHAS' Northcoast Behavioral Healthcare facility in Sagamore Hills Township. Crews broke ground on the three-year project July 18. When completed, the project will expand the hospital by more than 100,000 square feet, and will include the addition of eight new units, a new gymnasium, clinic, admissions area and dietary area. The project will also create three courtyards for patient use and renovate existing space to create a common treatment area, staff training space, police department and new lobby. Construction is on schedule for the completion of new patient units in late spring 2015. Renovation of the existing McKee Patient Area is targeted for completion in spring 2016. Click [here](#) to learn more about the six OhioMHAS-operated Regional Psychiatric Hospitals.

Pictured, clockwise: Workers use an excavator to remove the old parking lot to make way for Pods C & D of the new hospital; workers poured a concrete foundation for a fire-separation wall behind the existing, brick exterior wall of the Administrative Building in an area that will house the new patient gymnasium; crews dig trenches for underground utilities in an area that will serve as a future employee parking lot south of the McKee Building; and a blanket of snow covers the formwork for a new concrete elevator shaft, which will eventually allow visitors access to future patient unit visitation areas (the top of existing artwork on the Administration Building can be seen in the upper left).

ENGAGE Grant Seeks to Reduce Expenditures, Improve Outcomes for Youth and Young Adults

The OhioMHAS SAMHSA System of Care Expansion Implementation grant called ENGAGE (Empowering the New Generation to Achieve their Goals through Empowerment) has officially launched its new direction. ENGAGE will now work to reduce expenditures and improve outcomes related to health, educational, employment and living stability for high-risk



youth and young adults through statewide System of Care expansion of the evidence-supported, research-based High-Fidelity Wraparound (Wraparound) practice. The target population has been narrowed to include youth and young adults in transition, ages 14 through 21 years, with serious emotional disturbance, mental illness and/or co-occurring conditions (i.e., substance abuse, developmental disabilities) who are/have been involved with child welfare, juvenile justice, criminal justice, and/or been homeless. Outcomes for this very high-risk population successfully transitioning into adulthood are often quite poor. For more information about ENGAGE, view the [Executive Summary](#). For more information about Wraparound, read the [Overview](#).

News & Research Roundup

Interstate PMP Data-Sharing Technologies Assist States, Providers in Protecting Patient Health

With nearly half of state prescription monitoring programs (PMPs) sharing data via the [National Association of Boards of Pharmacy](#) (NABP) PMP InterConnect program, the system is successfully helping states in their efforts to protect patient health and lower rates of prescription drug abuse and diversion. Since its launch in July 2011, the NABP InterConnect program has enabled participating state PMPs to quickly and securely share information about controlled substance prescriptions across state lines, while ensuring individual state rules are enforced. Currently, [21 states](#), including Ohio, are sharing data.

Colorado Addiction Treatment Centers Brace for More Teens Referred for Marijuana Use

Addiction treatment centers in Colorado are bracing for an increase in teens referred for marijuana use, according to a recent [ABC News report](#). The state began legal sales of recreational marijuana for adults in December. While only people 21 and older are allowed to purchase marijuana, some experts are concerned the law will allow the drug to more easily fall into the hands of teens. Dr. Christian Thurstone, who heads the teen rehabilitation center Adolescent STEP: Substance Abuse Treatment Education and Prevention Program, said 95 percent of patient referrals to the program are for marijuana use. In preparation for the new law, Dr. Thurstone has doubled his staff. He told ABC News that marijuana can be harmful for some teens, particularly those suffering from mental illness. He said that after Colorado legalized medical marijuana in 2009, teens began to use much higher potency products. "Our kids are presenting more severe addictions; it takes them longer to get a clean urine drug screen," Thurstone told ABC. Higher-potency marijuana can increase the risk of psychotic episodes in some teens, he added. "Anecdotally, yes, we're seeing kids in treatment here who have paranoia and seeing things and hearing things that aren't there," he said. "Adolescent exposure to marijuana [raises] risk of permanent psychosis in adulthood."



Ben Court, an addictions expert at the University of Colorado Hospital Center for Dependency, Addiction and Rehabilitation, has also seen an increase in patients addicted to marijuana since the state approved medical marijuana. He says the younger people are when they start consistently using marijuana, the more likely they are to become addicted. "Most people are going to smoke weed and it's not going to be an issue, he said. "By 18 to 24, your odds are less than one in 10 that you're going to be addicted. If you start under 18, it's one in six"

Study: Drinking, Drug Use and Smoking Rates Higher in Those With Severe Mental Illness

People with severe mental illness have significantly higher rates of drinking, drug use and smoking, compared with the general population, [a new study](#) finds. The study included almost 20,000 people, about 9,000 of whom had psychiatric disorders such as schizophrenia or bipolar disorder. People with severe mental illness were about four times more likely to have four or more drinks a day, 3.5 times more likely to use marijuana at least 21 times a year, and 4.6 times more likely to use other drugs at least 10 times in their lives. Patients with severe mental illness were five times more likely to be daily smokers, compared with people who did not have a mental illness. The study found 30 percent of those with severe mental illness engaged in binge drinking, compared with 8 percent among the general population. More than 75 percent of those with mental illness smoked. Half of those with mental illness used marijuana regularly, compared with 18 percent of the general population.



Training Opportunities, cont.

Traumatic Brain Injury Conference — Jan. 24

The Ohio Department of Mental Health and Addiction Services, Cleveland Municipal Court-Veterans Docket and the Ohio Brain Injury Program are partnering to host a free “Traumatic Brain Injury Conference” on Friday, Jan. 24 at MetroHealth Medical Center in Cleveland. Presenters include John Corrigan, Ph.D., Professor, The Ohio State University and Edgardo Padin-Rivera, Ph.D., Clinical Psychologist, Louis Stokes Cleveland VA Medical Center. Lunch is on your own. Continuing Education credit hours (4.5 CEs) will be provided. Click [here](#) for more information or to register. Questions? Contact Alisia.Clark@mha.ohio.gov or Kueitling.Betts@mha.ohio.gov.

CWRU Center for Evidence-Based Practices Trainings

The Case Western Reserve University Center for Evidence-Based Practices has released its schedule of upcoming trainings. Click the links below for more information:

- Jan. 28 — [Tobacco Use Disorders: Psychosocial Interventions and Pharmacotherapy](#)
- Jan. 29 — [The Spirit of Motivational Interviewing for Peer Supporters and Recovery Coaches](#)
- Jan. 29 — [Evidence-Based Supported Employment for Peer Supporters and Recovery Coaches](#)
- Jan. 30 — [DDCAT: Stage-Wise Application Training](#)
- Feb. 4 — [Housing Training: Integrated Stage-Wise Approaches for People with Mental and Substance Use Disorders](#)
- Feb. 5 — [Foundations of Motivational Interviewing, Part 1 \(Central Region\)](#)
- Feb. 12 — [Foundations of Integrated Mental Health and Substance Abuse Assessment](#)
- Feb. 27 — [Benefits Advocacy Basics for Peer Supporters and Recovery Coaches](#)
- Feb. 27 — [Foundations of Motivational Interviewing, Part 1 \(Northeast Region\)](#)

“Marijuana Messaging & The Rocky Mountain HIDTA Report” Webinar — Feb. 11

Drug Free Action Alliance will host a free “Marijuana Messaging & The Rocky Mountain HIDTA Report” webinar from 1-2 p.m. on Feb. 11. The [Rocky Mountain High Intensity Drug Trafficking Area \(HIDTA\) report](#) was released to provide early information about the impacts of marijuana legalization in the State of Colorado. The report gives eye-opening examples of the negative consequences of marijuana legalization policies and can be incorporated into messaging that preventionists, law enforcement, health care professionals and others can use when battling pro-marijuana messaging. Click [here](#) to register.

Annual Problem Gambling Conference: Ohio’s Response to a Changing Landscape — March 4-5

For the first time, Ohio’s Annual Problem Gambling Conference will be a stand-alone workforce development event, March 4-5, 2014, hosted by the partners of Ohio for Responsible Gambling: the Ohio Casino Control Commission, the Ohio Lottery Commission, Ohio State Racing Commission and OhioMHAS. “Ohio’s Response to a Changing Landscape” is an interdisciplinary conference that will bring the latest science and strategies to the state for the goal of reducing problem gambling and treating those with gambling disorder. Keynote speakers will include Henry R. Lesieur, Ph.D., creator of the South Oaks Gambling Screen (SOGS) and gambling disorder treatment expert. Breakout sessions will highlight: community engagement, prevention and responsible gambling; co-occurring disorders and diagnosis of gambling disorder; community needs assessment; creating the continuing care plan; and development of a new Ohio Problem Gambling Resource Center. An application for continuing education credit has been submitted. Registration will be live soon. Watch the OhioMHAS website for details. Questions? Contact Stacey Frohnapfel-Hasson at 614/644-8456 or stacey.frohnapfel@mha.ohio.gov.

“We are the Majority” Youth-Led Prevention Webinar — March 11

Drug Free Action Alliance will host a free “We are the Majority” webinar from 1-2 p.m. on March 11 to introduce the Ohio Youthled Prevention Network’s (OYLPN) partnerships between youth-led substance abuse prevention programs to develop and strengthen the youth-led substance abuse prevention efforts at local, state and national levels. The “We are the Majority” message is a youth-led initiative developed by OYLPN’s Youth Advisory Council. The message educates communities that the majority of their youth do not use alcohol, tobacco and other drugs and empowers drug-free teens to be vocal about their choice not to use. Click [here](#) to register.



Training Opportunities, cont.

IDDT Implementation Strategies for Program Leaders — March 25-26

The Center for Evidence-Based Practices at Case Western Reserve University will present "IDDT Implementation Strategies for Program Leaders" in Columbus March 25-26, 2014. This training is for innovators in Ohio and throughout the nation who are implementing an Integrated Dual Disorder Treatment (IDDT) team with aspirations of high fidelity to this evidence-based practice for people with co-occurring substance abuse and mental illness. Click [here](#) for details.

Register Today! Midwest Alcohol Policy Summit — April 1-3

The premiere Midwest Alcohol Policy Summit will be held in Columbus on April 2-3, 2014, with a one-day pre-conference with dual tracks on higher education and law enforcement on April 1, 2014. The inaugural conference, with the collaboration of eight partner states, will explore progress in advancing sound alcohol policies at the local, regional and national levels. Legislative and community norms continue to shift and it is vital to equip decision makers at all levels with the most up-to-date and evidence-based resources. The summit will bring focus to the importance of alcohol policy, as well as resources for making reforms in your community. [Register online](#) by Jan. 27, 2014, to take advantage of early-bird pricing. Please direct questions about the Summit to Derek Longmeier at 614/540-9985 ext. 16 or DLongmeier@DrugFreeActionAlliance.org.

Housing Ohio 2014 — April 7-8

The Coalition on Homelessness and Housing in Ohio (COHHIO) will host its 20th anniversary Housing Ohio conference April 7-8, 2014, at the Sheraton Columbus at Capital Square. Registration will begin in mid-January. Visit www.cohhio.org for more information.

OPEC Merging with Annual Early Childhood Mental Health Conference

The OhioMHAS Office of Prevention and Wellness and the Ohio Department of Health Bureau for Children with Developmental and Special Health Needs are excited to announce that the 25th annual Ohio Prevention and Education Conference (OPEC) is merging with the Ohio Early Childhood Mental Health Conference. This conference will integrate the work of the OhioMHAS bureaus within the Office of Prevention and Wellness, the Ohio Department of Education (ODE) Center for P-20 Safety and Security, and the work of the ODH Help Me Grow Early Intervention and Home Visiting Programs to build the capacity of Ohio's prevention, early intervention and home visiting workforce. The merged conference is scheduled for June 2-5, 2014, on the campus of Ohio Wesleyan University. The Third Annual [Youth-Led Prevention PSA Contest](#) will again be a part of the event, as will recognition of this year's Prevention Champion. The conference outline will be coming soon.

Funding Opportunities

SAMHSA: Statewide Family Network Program

The purpose of this program is to enhance state capacity and infrastructure to better respond to the needs of children and adolescents with serious emotional disturbances and their families by providing information, referrals and support to families who have a child with a mental health, as well as create a mechanism for families to participate in state and local mental health services planning and policy development. The Statewide Family Network Program builds on the work of SAMHSA's Center for Mental Health Services, which helped to establish a child and family focus in programs serving children and adolescents with mental health challenges throughout the country. Click [here](#) for the announcement. Applications are due **Feb. 28, 2014**.

SAMHSA: Recovery Community Services Program-Statewide Network

The intent of this program is to further enhance the presence of recovery community organizations (RCOs) as key partners in treatment, recovery and affiliated health systems. In accordance with SAMHSA's Strategic Initiative on Recovery Support, this program aims to highlight the value of lived experience through the inclusion of addiction RCOs, which are led by those in recovery, as an organized statewide presence. Although many states have made great strides in recognizing addiction peer recovery services as viable, further efforts are required to fully optimize the potential of these services and supports. Through this program, it is expected that the infrastructure of RCOs will be strengthened and the delivery of addiction peer recovery services will be more meaningfully supported. Click [here](#) for the announcement. Applications are due **March 5, 2014**.



Funding Opportunities, cont.

SAMHSA: Statewide Consumer Network Program

The purpose of this program is to improve mental health service delivery to people with serious mental illnesses. The program seeks to enhance statewide mental health consumer-run and -controlled organizations to promote service system capacity and infrastructure development that is consumer-driven, recovery-focused and resiliency-oriented. To that end, the program goals are to enhance consumer participation, voice and empowerment statewide and to promote activities related to: partnership development, peer support, training and skills development, trauma-informed peer support, integrated care and wellness, and/or health reform as part of the recovery process for consumers. The Statewide Consumer Network program also seeks to address the needs of underserved and under-represented consumers, including those from ethnic, racial or cultural minority groups, service needs related to gender, veterans, those who have histories of chronic homelessness, those with co-occurring mental and substance use disorders, young adults, sexual orientation and gender identity minority individuals and those who have been involved in the criminal justice system. Click [here](#) for the announcement. Applications are due **Feb. 28, 2014**.

VA Offers \$600 Million in Funding to Support Services for Homeless Veteran Families

The U.S. Department of Veterans Affairs (VA) has announced the availability of up to \$600 million in grants for non-profit organizations and consumer cooperatives that serve very low-income veteran families occupying permanent housing through the Supportive Services for Veteran Families (SSVF) program. The SSVF program is designed to assist very low-income veteran families who are homeless or at imminent risk of becoming homeless. The program employs a housing-first model, an approach which centers on providing homeless veterans with permanent housing quickly and then providing VA health care, benefits and services as needed. Required services include outreach, case management, assistance in obtaining VA benefits and providing or coordinating efforts to obtain needed entitlements and other community services. Click [here](#) for more information.



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