



LEFT: OhioMHAS Medical Director Mark Hurst, M.D., and Ohio Department of Developmental Disabilities Senior Policy Advisor Pam Berry, coordinated the Trauma-Informed Care Summit. RIGHT: Social Worker Charryse Copper's smile is evidence of her resiliency following an abusive childhood and angry early adulthood. She told her story of recovery at the Trauma-Informed Care Summit.

TIC Summit Asks How Systems Can Help People Bounce Forward After Trauma

An eight-year-old girl, the oldest of four siblings, was offered up sexually to feed the habit of a drug-addicted mother. The story of her experience and subsequent journey was the cornerstone of an event that addressed the far-reaching implications of **trauma**. An audience of 250 professionals from various behavioral health disciplines attended the "Trauma-Informed Care Summit: Creating Environments of Resiliency and Hope" on June 26 in Columbus. The departments of Mental Health and Addiction Services (OhioMHAS) and Developmental Disabilities (DODD) co-sponsored the day of learning and collaboration with assistance from Raul Almazar, a senior consultant with the **National Center for Trauma Informed Care and Alternatives to Seclusion and Restraint**.

During the afternoon, attendees broke into regional work groups that immediately began building upon current practices, successes and resources that already exist. The goal was to infuse the principles of trauma-informed care among multiple systems to enhance their capacity to address behavioral health needs in their respective regions. It was stressed that the needs that must

be met are not only those of the people served, but also of the behavioral health workforce itself.

"We must make space for staff to deal with their own trauma," Almazar told attendees.

As of this *e-Update*, local individuals in five of the six regions have stepped forward to organize the first planning meeting for the regional collaboratives.

According to TIC Summit co-chairs Mark Hurst, M.D., medical director at OhioMHAS, and Pam Berry, senior policy advisor at DODD, the collaboration of individuals from different systems was impressive and provides an excellent base to build upon as OhioMHAS and DODD move forward. Moving forward was also the message from Almazar, who described resiliency not as bouncing back from adversity, but having the tools and supports to bounce forward. An example can be found in that eight-year-old girl who is now an engaging and successful woman — a veteran, a social worker and a mother — all because people in her life — a grandfather, a teacher, a therapist — sowed seeds of hope. Click **HERE** for more photos from the Summit.



TOP LEFT: Gov. John R. Kasich speaks to more than 750 attendees representing 83 counties at the Ohio Judicial Symposium on Opiate Addiction. Also pictured are (l-r) John Born, director of the Ohio Department of Public Safety, and Gary Mohr, director of the Ohio Department of Rehabilitation and Correction. In his remarks, Gov. Kasich highlighted the importance of helping Ohioans who are affected by an addiction and/or mental illness. "We're done ignoring the drug addicted and the mentally ill in this state. We're not going to save them all, but in the course of trying to save one person at a time, we not only change the world, we change ourselves." **RIGHT:** A crowd of more than 900 gathered in Columbus for Ohio's fifth annual Opiate Conference. **BOTTOM LEFT:** (l-r) Opiate Conference speaker and attendee Sarah Nerad, a person in long-term recovery and a dual Master of Social Work and Public Administration student at The Ohio State University, shares a moment with Donna Conley (center), CEO of Ohio Citizen Advocates for Addiction Recovery, and Lynette Cashaw-Davis of the OhioMHAS Office of Prevention and Wellness.

Back-to-Back Conferences Highlight Efforts to Combat Ohio's Opiate Epidemic

Two conferences drawing a combined 1,650 attendees recently were held in Columbus to increase awareness about the state's opiate epidemic and encourage communities to continue collaborative efforts to address the issue. More than 750 professionals from various disciplines related to the criminal justice field attended the Ohio Judicial Symposium on Opiate Addiction on June 30. The purpose was to facilitate more effective integration between the criminal justice and addiction treatment systems by educating judges on treatment alternatives (including Medication-Assisted Treatment) and encouraging the use of evidence-based tools (such as criminogenic risk assessment) and graduated sentencing. Municipal court and common pleas judges from 83 counties, along with a team from their

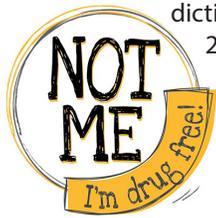
communities (including sheriffs, county commissioners, prosecutors, parole and probation officers, and others) participated. Attendees heard presentations from several judges from throughout Ohio, state agency leaders, Chief Justice of the Supreme Court The Hon. Maureen O'Connor, Attorney General Mike DeWine and Gov. John R. Kasich. The Symposium was sponsored by the Ohio Association of County Behavioral Health Authorities (OACBHA), OhioMHAS, The Supreme Court of Ohio, the Governor's Cabinet Opiate Action Team (GCOAT), the Ohio Department of Rehabilitation and Correction and the Office of Criminal Justice Services. Ongoing communications and resources related to the event will be posted on the [OhioMHAS website](#) to continue the integration momentum into State Fiscal Year 2015. The following day, about 900 profes-

sionals attended Ohio's annual Opiate Conference sponsored by OACBHA, with support from OhioMHAS and the Opportunities for Ohioans with Disabilities agency (OOD). This year's theme, "Don't Get Me Started," focused on the prescription drug abuse awareness campaign of the same name, and promoted continued collaboration within communities and engaging the state's youth to help combat Ohio's opiate epidemic. Announced at the conference were the winners of this year's Don't Get Me Started PSA and Music Video Contest. Winners were chosen by a panel of youth and youth adults, OhioMHAS Director Tracy Plouck, OOD Director Kevin Miller and GCOAT project manager Stephanie Ranade-Krider. View the winning videos [HERE](#). To view more photos from both conferences, visit the [OhioMHAS Flickr page](#).

Cuyahoga Falls Students: "Not Me — I'm Drug Free!"

"Not Me — I'm drug free!" is a Cuyahoga Falls drug prevention program that educates students about the dangers of methamphetamine and heroin addiction. Launched May 28, the initiative is a collaboration between the city of Cuyahoga Falls (including the mayor and local emergency responders), Cuyahoga Falls and Woodridge Local Schools, and Western Reserve Hospital.

Heroin is one of the most addictive and destructive drugs in the world. It's made even more dangerous because it's injected directly into the body with a syringe, which drastically increases the risk of being exposed to HIV and other



deadly diseases.

Methamphetamine, like heroin, is extremely addictive. It is also known for its devastating impact on a person's appearance. In only a few short years, meth can devastate a user's teeth, gums and skin, and potentially even kill.

By pledging to stay drug-free, students earn "free-wards" — perks from area businesses. Principals and fifth-grade teachers distributed material about the dangers of using drugs, as well as pledge cards to students before school recessed for summer vacation.

The message, according to Cuyahoga Falls Police Chief Jack Davis, is that "We, as a community, are not going to just ignore the problem, but are taking active steps to do something about it." Learn more about the initiative on [Facebook](#).



New Parents360Rx Video

The Partnership for Drug-Free Kids has released an updated [Parents360 RX](#) video featuring five families and their struggles with medicine abuse. The video is available for download in [high-definition](#) (222 MB) or [low-resolution](#) (80 MB). Parents may also sign up to receive bi-monthly [Know! Parent Tips](#) via email to help them get the facts about alcohol, tobacco and other drugs.

>>> Building Youth Resiliency Grant Supports Teen Empowerment in Norwood, Ohio

In 2012, Norwood City Schools conducted a biannual survey of students that showed the following:

- 28.8 percent of high school students used alcohol and 23.6 percent used marijuana within 30 days prior to the survey;
- 29 percent of high school juniors and seniors reported having used any illicit drug;
- First use for marijuana and alcohol is between 12-14 years of age;
- 36 percent are drinking alcohol and 31.3 percent are smoking marijuana either at home or at a friend's house.

In addition, according to Norwood Police Department reports, there have been 15 deaths due to overdoses and violence which occurred while someone was under the influence or impaired driving some of these deaths have been school-aged youth and some have been young and middle-aged adults. The

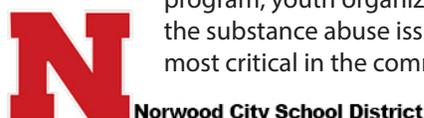
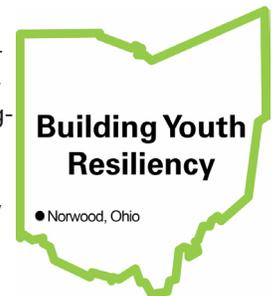
police department also reported in 2012 that there were 96 heroin-related charges in the city of Norwood.

Drug use remains a serious problem in Norwood, and unfortunately, youth have historically been underrepresented in the decision-making processes that impact community drug and alcohol prevention. That will all be changing soon thanks to a new *Teen Empowerment* program made possible by [Building Youth Resiliency funding](#) through Ohio's [Start Talking!](#) initiative. Talbert House School-Based Services and Norwood City Schools are partnering to strengthen school-based prevention and resiliency programming. A Youth Organizer Team, comprised of Norwood teens living in areas with the highest drug and alcohol use, will be given the tools needed to collaborate with city officials, community leaders and, most importantly, other youth to prevent substance use and abuse in the community. Through the *Teen Empowerment* program, youth organizers will identify the substance abuse issues they consider most critical in the community. Youth

Organizers will plan events, activities, marketing and messaging campaigns to encourage the community to start talking about the impact of substance

use and abuse. The strategies and interventions developed by the Youth Organizers will reach nearly 900 students in grades five through nine in the Norwood School District.

As part of their training, Youth Organizers will participate in the [Second Step](#) program. Second Step is identified as an evidenced-based program, which focuses on mental health promotion and substance abuse prevention. Second Step for grades five through nine addresses empathy, communication, bullying prevention, emotion management, problem solving and substance abuse prevention. This curriculum will complement existing school counseling programs in the district.



NOPH Leadership Touts Telemedicine Success

Telemedicine, an innovative model that utilizes technology to bring high-quality care to people in need in rural and underserved areas, has been gaining momentum throughout the last decade.

Northwest Ohio Psychiatric Hospital (NOPH) in Toledo recently hopped aboard the technology bandwagon, launching a telemedicine pilot project this past April. The program uses telecommunication and

information technology to help with the linkage of mental health services that patients will need upon discharge.

"By having these video conferences, it helps eliminate distance barriers and the need for community agency partners to come to the hospital for meetings," said NOPH CEO Dr. Mychail Scheramic. "Community mental health center staff can now spend less time in a car driving to meetings and more time providing care to their clients," he added, noting the hospital's telemedicine project helps mental health centers stretch their budgets by reducing travel-related expenses.

Telemedicine has considerable advantages over calling on a phone and putting those attending on speaker phone. Unlike a traditional phone conference, telemedicine provides an opportunity for the community treatment team to see a patient in addition to verbal interaction.

The technologies employed at NOPH are designed with fidelity systems that work to ensure confidentiality and protect the video conference from being seen by others. The transmission of the video and audio is encrypted, and then sent to the other site where it is decrypted. Only the transmission and receiving sites have the "key" to encrypt and decrypt the electronic data.



Dr. Scheramic



Dr. Osinowo

NOPH Chief Clinical Officer Dr. Thomas Osinowo said studies indicate telemedicine is very helpful in:

- Providing access to care and treatment in rural areas.
- Reducing travel times for clinicians and patients.
- Making access to care convenient for patients since, in many cases, patients can be in their home while having contacts with their health care professionals.

So far, the hospital has hosted 24 sessions, providing services to 14 patients. "Patients have been excited to see their community providers and their family members on the video screen while still in a secure environment at NOPH," Dr. Osinowo said.

Of the 23 counties located within the NOPH catchment area, 14 either actively participate, or have indicated an interest in taking advantage of telemedicine services.

Why Telemedicine?

- Patients from far-away counties can interact with their families, forensic monitors and case workers.
- Builds and bridges teams while promoting good service provision through increased accountability.
- Improves/expedites information gathering.
- Facilitates real-time transition and discharge planning.

Challenges:

- Some communities are still struggling to accept TeleHealth.
- Limited IT capabilities among some partners/equipment glitches.
- Change in treatment team schedule to accommodate community agencies can be challenging at times.

Future Opportunities:

- Court appearances.
- Patient consults prior to admission, potentially preventing admissions.

Department Establishes "Coalitions of Excellence" Designation for Behavioral Health Prevention

The Ohio Coalition of Excellence (OCOe) is a new designation sponsored by the Ohio Department of Mental Health and Addiction Services, designed to recognize excellence for coalitions who work in the behavioral health or a related prevention field.

Becoming an *Ohio Coalition of Excellence* illustrates that your coalition is using local data and evidence-based prevention strategies to create meaningful change in your community. *Applications* for the designation, accepted throughout the year, will be reviewed periodically by coalition leaders and experts from throughout the state, based on the review criteria and scoring rubric included in the application. Any coalition addressing behavioral health issues at a community level can apply to be an Ohio Coalition of Excellence. Behavioral health issues include, but are not limited to, substance abuse, violence and suicide. Pieces of the Ohio application process closely model the Community Anti-Drug Coalitions of America (CADCA) Coalition of Excellence process, which provides a proven framework for coalition success measures.

To be eligible, a coalition must have been in existence for a minimum of two years, demonstrate cultural competence and sustainability and complete a Kaizen Assessment (offered free to any interested coalition). Conducted by the Ohio National Guard Counterdrug Task Force, the assessment helps coalitions "diagnose" areas of functioning, which can be strengthened and helps to guide future work.

Please submit applications and questions to MHAS-OCOe@mha.ohio.gov.

Companion Courses Extend Reach, Impact of Crisis Intervention Team

Understanding the teenage mind and recognizing the signs of mental health crisis was the focus of a three-day Crisis Intervention Team (CIT) Companion Course workshop for teachers, administrators and staff of Upper Valley Career Center in Piqua. The training was presented June 10-12 by the Tri-County Board of Recovery and Mental Health Services.

The program consists of a review of mental illness types, causes and symptoms, services and resources available in the community, structured de-escalation techniques, and scenario-based training. The workshop was led by Jodi Long, LISW, LICDC, director of clinical services and evaluation and CIT coordinator for the Tri-County Board. Long was joined all three days by Mike McRill of the Sidney Police Department and Karen McRill of Sidney City Schools. Other presenters included representatives from courts, mental health providers, other law enforcement agencies and persons living with mental illness.

After two full days of presentations, the third day was spent in role-playing scenarios. Volunteers acted out scenes depicting various types of mental health crises. Teachers and staff were challenged to identify and de-escalate the situation in line with the training techniques to ensure the safety and well-being of the student in crisis, other students in the area, and the teacher and staff. While the scenarios played out, the rest of the class watched and listened via two-way video, and the actions were critiqued by mental health and law enforcement professionals.

"It's important to remember that the T in CIT stands for Team, not Training," said Long. "CIT is a system, and a process, for communication and coordination of first contact with persons in crisis. Very often, the first contact is a patrol officer, or maybe a 911 operator or — for young people — a teacher or other school official. The more those first contacts know about services available locally and how intake and assessment work and issues of patient's rights and safety, then the more likely it is that a person in crisis will get appropriate help in a timely manner. That's a good thing for everyone involved," she added.

Ohioans Shine at 2014 National Conference on Problem Gambling

The [National Conference on Problem Gambling](#) in July featured two of Ohio's brightest lights — Dr. Heather Chapman, who has a longstanding reputation of excellence in the field, and rising star Amanda Burke. Stacey Frohnafel-Hasson, OhioMHAS bureau chief of problem gambling, commented, "We are so proud of Heather for the work she does with Ohio's veterans and grateful that she constantly shares her knowledge through our regional trainings so that Ohioans with gambling disorder can receive quality treatment services. Amanda represents Townhall II in Kent as a Problem Gambling Prevention Specialist, but she is also working on her doctorate, teaching at Kent State University and serving as a model for using science to change lives for the better." Recipient of the 2014 [National Council on Problem Gambling](#) Joanna Franklin Direct Service [Award](#), Dr. Chapman serves as the director of the Gambling Treatment Program and deputy director of the Veterans Addiction Recovery Program at the Louis Stokes Cleveland Veterans Administration Medical Center. Amanda Burke presented on Using Logic Models to Create Problem Gambling Prevention Programs during the Prevention Showcase portion of the conference and was presented the People's Choice award by popular vote.

CIT is a nationally recognized program that teaches law enforcement officers safe and effective approaches to handling crisis incidents involving persons with mental illness. The CIT Companion Course for Teachers provides teachers and other school personnel with the knowledge and skills needed to respond effectively when a student is experiencing a behavioral



Nate Cade (left) of Troy portrays a student in mental health crisis as Upper Valley Career Center instructor Ralph Ash practices techniques learned during CIT Companion Course training. Others in the workshop observed the interactions through two-way video, seen in the background.

health crisis. The training is conducted under the instructional supervision of local behavioral health professionals and law enforcement officers.

While the CIT Academy for Law Enforcement is a four-day experience, Companion Courses range from one to three days, depending on the audience. Since 2006, the Tri-County Board has trained about 170 law enforcement officers, representing nearly all the departments in Darke, Miami and Shelby counties, along with many other professionals through the Companion Courses. CIT training is made possible by funds from the Tri-County mental health levy.

A CLAS(S) ACT

National CLAS Standards a cornerstone for advancing culturally, linguistically appropriate services

By: Charleta B. Tavares, Executive Director, Multiethnic Advocates for Cultural Competence, Inc. (MACC)

How can we ensure we are treating people with respect? What language should we use? Why should my organization staff and leadership reflect the populations we serve? Why do you need to ask my race and ethnicity? These and many other questions can influence our level of CLAS(S)! What is it and why is it important for our behavioral health care system — boards, providers, and staff to aspire to have a CLAS(S) ACT?

The U.S. Department of Health and Human Services' (HHS) *Office of Minority Health* published the first National Standards for Culturally and Linguistically Appropriate Services in Health Care (*National CLAS Standards*) in 2000. The Standards provided a framework for all health care organizations to better serve the nation's increasingly diverse communities. In the fall of 2010, the Office of Minority Health launched the National CLAS Standards Enhancement Initiative to revise the Standards to reflect the previous decade's advancements, expand their scope and improve their clarity to ensure understanding and implementation. The enhanced initiative, the National CLAS Standards continues in this decade as the cornerstone for advancing health equity through culturally and linguistically appropriate services.

CLAS Standards are a "collective set of CLAS mandates, guidelines, and recommendations issued by the HHS Office of Minority Health intended to inform,

guide and facilitate required and recommended practices related to culturally and linguistically appropriate health services."

The 15 CLAS(S) standards are organized by themes:

- **Principal Standard:** (Standard 1) Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.
- **Governance, Leadership, and Workforce:** (Standards 2–4) Provides guidance on developing leadership capacity in health care organizations for promoting and sustaining CLAS.
- **Communication and Language Assistance:** (Standards 5–8) Provides recommendations to health care organizations for addressing language and other communication barriers to adequately meet the needs of people with limited English proficiency.
- **Engagement, Continuous Improvement and Accountability:** (Standards 9–15) Provides a blueprint for establishing community engagement and includes recommendations on conducting community assessments.

The 15 standards that have been developed under these three themes are intended to advance health equity, improve quality and help eliminate

health care disparities by providing a roadmap for individuals and health and health care organizations to implement culturally and linguistically appropriate services. Adoption of the Standards will help advance better health and health care in Ohio and our 49 sister states. Health disparities are well documented in our state, and providing culturally and linguistically appropriate services (CLAS) is one strategy to help eliminate these abysmal statistics. When we tailor our services to an individual's culture and language preference or gather data on race, ethnicity, language, gender or other factor, behavioral/health professionals can help to improve health outcomes for racial, ethnic and cultural populations. Providing health care services that are respectful of and responsive to the health beliefs, practices and needs of these populations can help to eliminate the disparities in health care outcomes between them and their Caucasian counterparts in our behavioral/health care system.

Our goal must be health equity for all Ohioans, and we must remain vigilant in our efforts. This is not just because it is the moral, just and right thing to do, but because it will save our scarce resources and, most importantly, save lives. We will not reach health equity just by talking about the standards — we will have to act on the CLAS standards and other strategies with our stakeholders and hold each other accountable for implementing them.

New OSAM Drug Trend Data Available

The Ohio Substance Abuse Monitoring (OSAM) Network has released two new drug trend reports. *Surveillance of Drug Abuse Trends in the State of Ohio: June 2013 – January 2014* and *Unintentional Drug Overdose Deaths Reach Historic High Second Year in a Row: Fentanyl-Cut Heroin a Likely Major Contributor* are now available. OSAM consists of eight regional epidemiologists (REPIs) located in the following regions: Akron-Canton, Athens, Cincinnati, Cleveland, Columbus, Dayton, Toledo and Youngstown. The Network conducts focus groups and interviews with active and recovering drug users and community professionals to produce a snapshot of local substance abuse trends. Qualitative findings are supplemented with available statistical data such as coroner's reports and crime laboratory data that help policy makers plan appropriate prevention and intervention strategies. Click [HERE](#) to see a complete archive of OSAM-related resources.

OSAM | Ohio Substance Abuse Monitoring Network



Ohio Provider Receives Prestigious “America Honors Recovery” Award

The Cleveland-based Northern Ohio Recovery Association, Inc. (**NORA**) is this year’s recipient of the national **Faces and Voices of Recovery’s** Joel Hernandez Award. This **prestigious award** recognizes a local, state or regional recovery community organization for its success in assessing the specific needs of their community and carrying out a vision and mission of mobilizing resources within and outside the recovery community to increase the prevalence and quality of long-term recovery from addiction to alcohol and other drugs. NORA is a community-based substance abuse peer recovery support organization founded in 2004 to provide culturally relevant addiction prevention, treatment and recovery support services to youth, adults and families in northern Ohio. NORA founder and CEO Anita Bertrand-Bradley accepted the award June 25 at a luncheon in Washington, D.C.



MyCare Ohio Central, East Central and West Central Medicaid Enrollment Effective July 1, 2014

On July 1, Ohio’s integrated care delivery system began serving individuals enrolled in both Medicare and Medicaid. “MyCare Ohio” commenced operations in the Central region (covering Delaware, Franklin, Madison, Pickaway and Union counties), the East Central region (covering Portage, Stark, Summit, and Wayne counties) and the West Central region (covering Clark, Greene and Montgomery counties). Individuals with health care coverage from both Medicare and Medicaid residing in these regions will be enrolled in one of the following managed care plans (MCPs): Aetna, Buckeye, Caresource Molina or United. Eligible individuals must choose a MyCare Ohio Plan for their Medicaid benefits and may choose to receive their Medicare services from the plan. Effective Jan. 1, 2015,

individuals who have not elected to get Medicare coverage from a MyCare Ohio plan will automatically be enrolled for both Medicare and Medicaid services, unless they elect a different Medicare option. For more information, please visit the [MyCare Ohio website](#).

MyCareOhio

Connecting Medicare + Medicaid

MyCare Ohio is a new managed care program for Ohioans who receive BOTH Medicaid and Medicare benefits.

Nominations Sought for Thomas (Tom) Ramseyer Public Service Award

The House of Hope, Inc., Board of Directors is seeking nominations for its inaugural Thomas (Tom) Ramseyer Public Service Award in honor of an outstanding public servant who embodies: knowledge and commitment toward addiction recovery, courage, compassion, kindness and a collaborative spirit — all of which were hallmark qualities of Tom Ramseyer. To be a recipient of the Thomas Ramseyer Award candidates must meet the following criteria: 10 or more years of experience in the addiction recovery system, be a resident of Ohio, demonstrated leadership in the recovery field and contributed in an exemplary way towards the advancement of addiction prevention, treatment and recovery services. Two letters of recommendation supporting the nomination and detailing achievements accomplished by the nominee must be submitted by Aug. 11, 2014 to: Carolyn Ireland, executive director, House of Hope, Inc., 825 Dennison Ave., Columbus, Ohio 43215. Nominations may also be submitted via email to cireland@hofhope.org.

Psychiatric Physicians Seek Enlightenment Award Nominations

The Ohio Psychiatric Physicians Foundation (OPPF) awarded its 2013 Enlightenment Award to *The Columbus Dispatch* — for The “Mental Hell” series written by Alan Johnson and Catherine Candisky and published on the front page of the paper from May 26-28, 2013. The award selection committee stated “through a series of high-profile pieces, the journalists presented a sensible treatment of mental illness that was not gratuitous or sensational. Free of stigmatizing rhetoric, it challenged the status quo.” The Enlightenment Award recognizes outstanding activity or presentations that enhance the public’s understanding of mental disorders or decreases the stigma often associated with mental illness. Selected by judging committees of psychiatrists, the award encourages nominations of individuals, organizations, government entities, media (newspaper, radio or TV station or Internet-based communication) or a form of art. Johnson accepted the award on behalf of the newspaper at the Ohio Psychiatric Physician Association (OPPA) Annual Psychiatric Update on March 16, 2014. **Nominations for 2014** are now being accepted. Nominations will be accepted from individuals or organizations and must be received no later than Jan. 15, 2015. For more information please visit the foundation [website](#).



News & Research Roundup

New National Drug Control Strategy Emphasizes Opioid Addiction

The [2014 National Drug Control Strategy](#), released earlier this month, emphasizes the nation's growing problem of opioid addiction. The plan calls for increased access to the opioid overdose medication naloxone. The strategy does not change the federal government's stance on marijuana. Among the challenges the nation faces, according to the policy statement, are "the declining perceptions of harm — and associated increases in use — of marijuana among young people. These challenges have gained prominence with the passage of state ballot initiatives in 2012 legalizing marijuana in the states of Colorado and Washington." The updated policy calls for reforms to the criminal justice system that provide alternatives to incarceration, and effective interventions to get people the treatment they need. The policy "rejects the notion that we can arrest and incarcerate our way out of the nation's drug problem," Michael Botticelli, acting director of National Drug Control Policy said in a [blog post](#). "Instead, it builds on decades of research demonstrating that while law enforcement should always remain a vital piece to protecting public safety, addiction is a brain disorder — one that can be prevented and treated, and from which people recover."

Partnership for Drug-Free Kids: New Name, Same Mission

The Partnership at Drugfree.org is now the Partnership for Drug-Free Kids. Partnership executives say the new name more clearly reflects the Partnership's mission to reduce teen substance abuse and support families impacted by addiction. Through a [revamped website](#), toll-free telephone helpline (1-855-DRUGFREE) and a variety of communication vehicles, the Partnership remains committed to being the place where families find answers. The website continues to offer the same informative, science-based resources visitors have come to rely upon, as well as many new features — including a new interactive online community where individuals can post memorials, chat with experts, talk to others on forums and more.



National Report: 80 Percent of Adults with Serious Mental Illness Unemployed

A new, national report from the National Alliance on Mental Illness (NAMI) — [Road to Recovery: Employment and Mental Illness](#) — finds that 80 percent of individuals receiving public mental health services are unemployed. The report found that about 60 percent of individuals with mental illness want to work, and two-thirds can successfully hold down a job if given appropriate support. But, fewer than 2 percent of people in the nation's public mental health system receive this help — a cost-effective program called [supported employment](#) — due to funding challenges. In 2003, statistics found that about 23 percent of people who received public mental health services were unemployed. This year, only 17.8 percent of them have full-time jobs.

Study: Safety Warnings About Antidepressants Linked With Increase in Suicide Attempts

After health officials warned antidepressant use could lead to an increased risk of suicidal thoughts among young people, there was a rise in suicide attempts in this age group, according to a [new study from the Harvard Medical School](#). Doctors may have avoided prescribing antidepressants after media reports of the warnings by the Food and Drug Administration (FDA). This could have led to an increase in depressed children and teens who were untreated, the researchers report in [BMJ](#). In 2004, the FDA required warnings about the link between antidepressants and an increased risk of suicidal thoughts and behaviors in children and teens to be printed on antidepressant drug labels. The warnings were expanded in 2007 to include young adults. Previous research indicated use of antidepressants decreased after the warnings were issued, but other treatments for depression, such as therapy, did not increase. The study looked at data from health care organizations that provide care to about 10 million people. They found after the warnings were issued, use of antidepressants fell 31 percent among teens, 24 percent among young adults and 15 percent among adults. During the same period, there was an increase in the number of teens and young adults who received medical care for overdosing on psychiatric medications, which the researchers said indicated an increase in suicide attempts. These overdoses rose by 22 percent among teens and 34 percent among young adults. There was no change among adults, and no change in completed suicides.

Article Examines How Psychotropic Drugs Affect Men and Women Differently

A [recent article in Scientific American](#) examines how prescription painkillers, antidepressants and other psychotropic medications impact men and women differently. According to the article, women are now almost twice as likely to be prescribed psychotropic medication, and that research suggests that their different hormones, body composition and metabolism may make them more sensitive to certain drugs. The article also noted that women are between 50-75 percent more likely to experience side-effects. Last year, the FDA announced the first gender-specific dosing guidelines for a psychopharmaceutical after the sleep medicine Ambien was found to be doubly potent for women. Click the link to read about other medications that are known to affect men and women differently.

News & Research Roundup, cont.

New Report about the Voice of Suicide Attempt Survivors

Suicide attempt survivors are emerging with a collective voice and cohesive framework for shaping the future of suicide prevention. The National Action Alliance for Suicide Prevention's *The Way Forward: Pathways to hope, recovery, and wellness with insights from lived experience (The Way Forward)* sets the stage for a constructive collaboration in developing new, more effective means for reducing suicide attempts and deaths. It does so by providing recommendations based on evidence-based practices, which incorporate personal lived experience of recovery and resilience. Read the [press release](#) and [report](#).

SAMHSA: Rise in Methamphetamine-Related Hospital Emergency Department Visits

U.S. emergency departments reported a sharp increase in methamphetamine-related visits between 2007 and 2011, according to a [new Substance Abuse and Mental Health Services Administration \(SAMHSA\) report](#). The SAMHSA report found meth-related visits increased from about 68,000 in 2007, to almost 103,000 in 2011—the latest year for which data is available, according to a [press release](#). Meth-related emergency room (ER) visits increased sharply among people ages 25 to 34 and those 55 and older. The report found in 2011, 62 percent of meth-related ER visits also involved other drugs. Marijuana was the drug most likely to be combined with meth, followed by alcohol. Meth has a high potential for abuse and addiction, according to SAMHSA. The drug can lead to a range of physical and mental health issues, including severe dental problems, anxiety, confusion, insomnia, mood changes and violent behaviors.



Study: Cannabis May Trigger Paranoia In Vulnerable People

A [new study](#) published in the July 15 edition of the journal *Schizophrenia Bulletin* suggests “cannabis may trigger paranoia in vulnerable people by causing negative affect and anomalous experiences.” In the 82-participant study, researchers used the psychoactive ingredient in cannabis — delta-9-tetrahydrocannabinol (THC) — to trigger paranoia in volunteers who were vulnerable to the experience, reporting at least one paranoid thought in the past month as measured on the Paranoid Thoughts Scale Part B. Other participants received a placebo. According to the authors, the study revealed that “THC caused a significant increase in negative affect and anomalous experiences, relative to placebo, and this increase was sufficient to account for the entire increase in paranoia.”

Smoking Tied To Increased Suicide Risk

According to a study published in the July 16 edition of journal *Nicotine & Tobacco Research* “smoking and suicide may be more closely related than previously thought.” Study authors found that smoking may increase a person's risk for suicide, but high cigarette taxes and smoking restrictions in public places lower that risk. After analyzing suicide rates across the U.S. between 1990 and 2004, researchers found that “states that introduced higher taxes on cigarettes and stricter rules to limit smoking in public places saw suicide rates decline up to 15 percent, relative to the national average.”

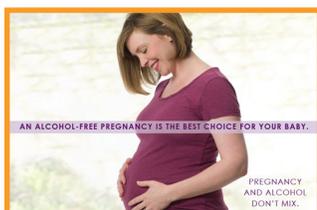


Counseling Via Telephone Could Cut Prescription Painkiller Use

A new study, published in the [Journal of the American Medical Association](#), found that people with chronic pain who received counseling from a nurse over the phone were able to reduce their dose of pain medication. Study authors say the findings suggest “telecare” could reduce the risk of prescription drug abuse and accidental overdoses.

Social Media Guidelines for Mental Health Promotion and Suicide Prevention

The [Entertainment Industries Council's TEAM Up](#) has released guidelines for communicating about mental health and suicide on social media to reduce stigma, increase help seeking behavior and prevent suicide. Get the social media guidelines [here](#).



CDC Releases New FASD Materials

The Centers for Disease Control and Prevention ([CDC](#)) has developed a variety of new materials that address fetal alcohol spectrum disorders (FASD). Available for [free download](#), the set includes a brochure, posters and social media tools.

Training Opportunities

Generation Rx University Conference — Aug. 5-7

Registration is now open for the [2014 Generation Rx University Conference](#) to be held Aug. 5-7 at The Ohio State University Blackwell Inn & Conference Center. Cost is \$250 for general attendees and \$150 for current students.

2014 Addiction Studies Institute — Aug. 6-8

The Ohio State University Wexner Medical Center Talbot Hall will host the 2014 Addiction Studies Institute Aug. 6-8 at the Greater Columbus Convention Center. The Institute is the largest midwest conference of its kind, providing an array of dynamic educational choices for the chemical dependency counselor, social worker, prevention specialist, criminal justice professional, clergy, physician, marriage and family therapist, nurse and other health care specialists. Sessions range from entry-level to advanced. See details and register online at the [Institute website](#).

25th Annual UMADAOP State Conference — Aug. 12-15

Ohio's Urban Minority Alcoholism and Drug Abuse Outreach Programs (UMADAOP) will host the 25th Annual State UMADAOP Conference "Providing Leadership, Voice and Service" Aug. 12-15 at the Ramada Hotel and Conference Center, 3536 Secor Road, Toledo, Ohio 43606. The UMADAOP conference is hosted annually for professionals who work in the fields of substance abuse prevention, treatment, recovery, re-entry, social work, education, youth services and faith-based institutions. Click [here](#) for complete details or contact Margaret Levesque at 419.255.4444, ext. 206.

MACC 2014 Training Conference — Sept. 4-5

Multiethnic Advocates for Cultural Competence (MACC) will host its 2014 Training Conference "Heading Downstream: ACA Meets Cultural Competence" Sept. 4-5 at the Quest Conference Center, 8405 Pulsar Place, Columbus. The conference will focus on health and behavioral health integration and in eliminating disparities across communities and systems. The audience mainly consists of behavioral health and social services providers and administrators, advocates, consumers and family members. Conference registration and more information will be available soon at www.maccinc.net.

Save the Date! National Loss Team Conference — Sept. 9-10

The Ohio Suicide Prevention Foundation, in partnership with the National Loss Team Committee, will host the [2014 National Loss Team Conference](#) "Postvention, It's About Time!" Sept. 9-10 at the Embassy Suites Hotel — Columbus Airport. Frank Campbell, Ph.D., will serve as keynote. Click the link for online registration. For more details, contact Carolyn Givens at 614.429.1528 or carolyngivens@ohiospf.org.

Mental Health America Annual Conference — Sept. 10-12

Mental Health America (MHA) will host its 2014 Annual Conference at the Sheraton Atlanta Hotel in Atlanta, Ga., Sept. 10-12. This year's conference, [Parity and the Affordable Care Act: Bridging Gaps to Advance Mental Health](#), will examine progress in implanting these two important pieces of legislation, assess gaps and challenges related to behavioral health, and identify the programs and policies needed to fill them.

2014 Coalition Academy — Sept. 23

The Coalition for a Drug-Free Greater Cincinnati. Butler County Alcoholism Council and OhioMHAS will host the 2014 Coalition Academy "Empowering Prevention" on Sept. 23 at the Great Wolf Lodge in Mason, Ohio. Kevin Sabet will provide keynote remarks. Cost is \$60; \$35 for member coalitions of CDFGC. Lunch is included with [registration](#).

NAADAC 2014 Annual Conference and 40th Anniversary Celebration — Sept. 26-Oct. 1

NAADAC, the Association for Addiction Professionals, will host its [2014 Annual Conference and 40th Anniversary Celebration](#) Sept. 26-Oct. 1 in Seattle, Wash. NAADAC will celebrate 40 years of advocacy, education and service to the addiction-focused profession with six days of presentations, two days of exhibits, a new two-day gambling track and a 40th anniversary celebration. [Register online](#).

Training Opportunities, cont.

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:

Sept. 11 — [*A Breath of Fresh Air: Promoting Health-Behavior Change Among People with SPMI \(Akron\)*](#)

Oct. 14-15 — [*2014 Evidence-Based Practices Conference*](#)

Maryhaven: Free Prevention Foundations Trainings

Maryhaven Gambling Intervention Program is sponsoring a series of free alcohol and drug prevention classes for prevention specialists, social workers, nurses and addiction counselors. Presenter Jim Ryan, OCPS II, will provide a total of five trainings covering Prevention Foundations One and Two along with all six domains. The courses, which include continuing education credits, are solid preparation for working in the field and for taking the test for the prevention credential. The maximum number per class is 40. Please email Jenny Campbell-Roux at jcampbell-roux@maryhaven.com or call 937.681.9477 to reserve a place in the class. Classes are planned for Aug. 18, Sept. 12, Oct. 17 and Nov. 7. All classes are from 9 a.m. to 1 p.m.



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