

Meeting of the Center for Substance Abuse Prevention (CSAP) National Advisory Council (NAC)

SAMHSA Headquarters
Conference Room 5A04

August 21, 2019
9:30 am – 5:00 pm



SAMHSA
Substance Abuse and Mental Health
Services Administration

888-398-6901

Public Passcode:

2559379

Public Agenda

- 9:30 a.m.** **Call Meeting to Order**
Matthew J. Aumen, Designated Federal Officer, CSAP NAC
- 9:30 a.m.** **Welcome, Introductions, and Opening Remarks**
Johnnetta Davis-Joyce, Council Chair; and Director, CSAP
- 9:45 a.m.** **Approval of April 2019 Meeting Minutes**
CSAP NAC Members
- 10:00 a.m.** **Division Director Updates**
CSAP Division Directors
- 10:45 a.m.** **Break**
- 11:00 a.m.** **Division Director Updates (continued)**
CSAP Division Directors
- 12:00 p.m.** **Lunch on Own**

Public Agenda (continued)

- 1:00 p.m.** **NAC Workforce Recommendations Discussion**
- 1:45 p.m.** **Marijuana Issues Discussion**
Patricia Santora, Public Health Analyst, CSAT
Nel Nadal, Lead Public Health Analyst, CSAP
- 2:45 p.m.** **Break**
- 3:00 p.m.** **HIV Issues Discussion**
Morris Flood, Public Health Advisor, CSAP
Judith Ellis, Lead Public Health Advisor, CSAP
- 4:00 p.m.** **CSAP Future Direction/ Activities**
Johnnetta Davis-Joyce
- 4:45 p.m.** **Public Comment**
- 4:50 p.m.** **Wrap-up**
- 5:00 p.m.** **Adjournment**

Call Meeting to Order

Matthew J. Aumen
Designated Federal Officer
CSAP NAC

CSAP National Advisory Council Meeting
Rockville, MD — August 21, 2019



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Welcome, Introductions, and Opening Remarks

Johnnetta Davis-Joyce
Council Chair and Director
CSAP

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Approval of April 2019 Meeting Minutes

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Division Director Updates

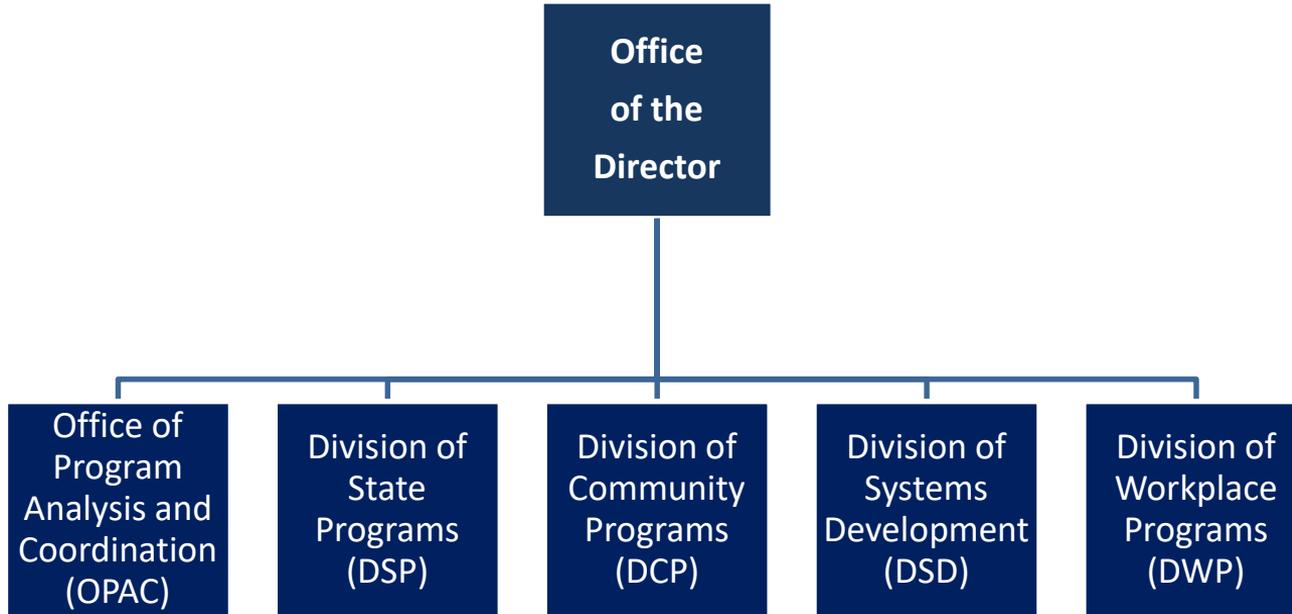
CSAP Division Directors

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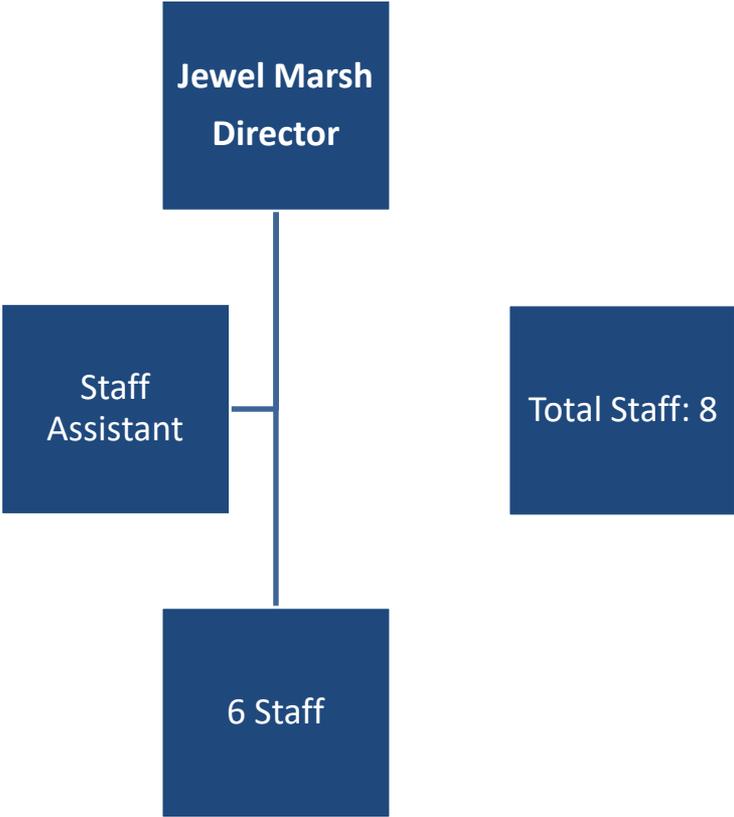
CSAP Organizational Chart



Office of Program Analysis & Coordination Mission

Support Center by providing guidance in administration, analysis, planning and coordination of programs, consistent with agency policies. Represent Center in policy, planning, budget formulation and execution, and internal and external requests.

OPAC Organizational Chart



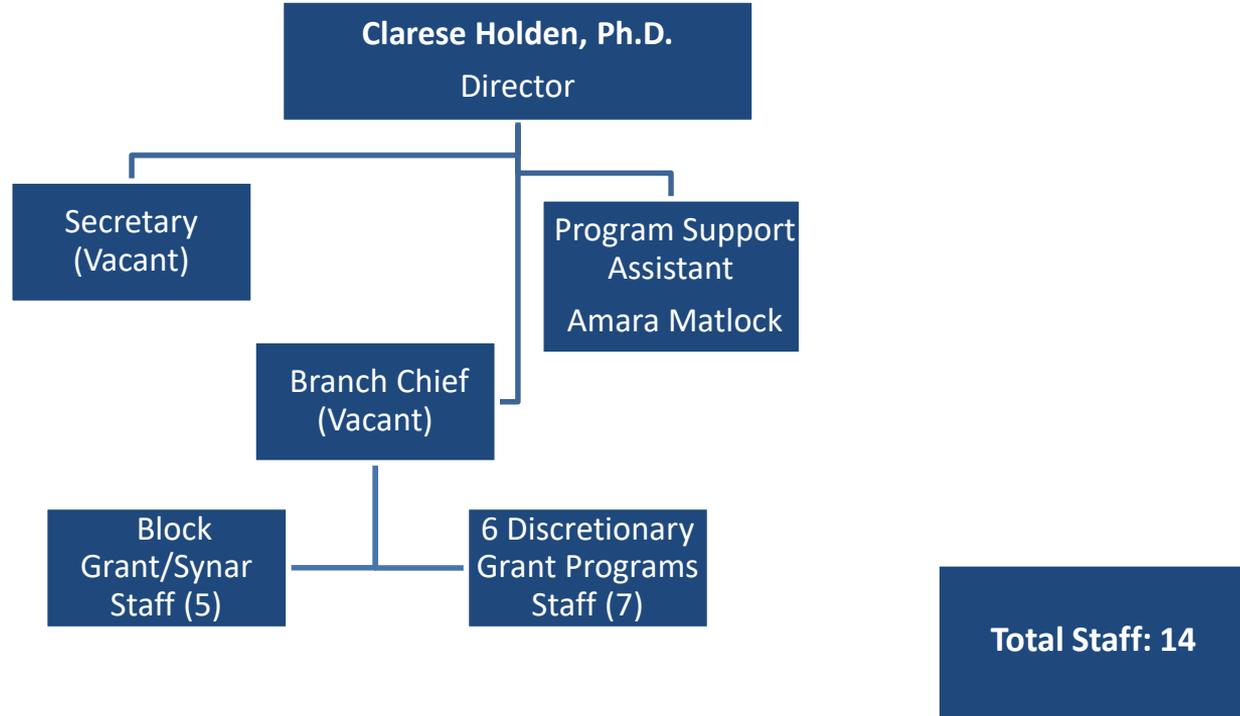


- CSAP budget
- Grant coordination
- Contract coordination
- CSAP National Advisory Council

Division of State Programs Mission

Through collaborative efforts, help states, Pacific Jurisdictions, US territories, tribes, the District of Columbia and communities use substance abuse prevention science and data-driven programming to address substance use and misuse. Using evidence-based programming, strive to promote healthier and safer environments for families and communities across the country.

DSP Organizational Chart



Historically, CSAP's state efforts are known for two large programs:

- Discretionary grants portfolio and the across Centers (CSAP/CMHS) Tribal Behavior Health/Native Connections Grant.
- Substance Abuse Block Grant 20% set-aside for substance abuse prevention across Centers (CSAP/CSAT) also includes the Synar regulations/Statue (program).
- Strategic Prevention Framework – Partnerships for Success (SPF-PFS) grants that target alcohol, prescription drugs, opioids, and other state and community priorities.

DSP Work (continued)

Due to the opioid crisis, DSP has seen an increase in funding to be distributed to states and communities. Also, an increase in the number of grantees DSP currently monitors.

- SPF Rx
- FR-CARA (currently monitored by C
- PDO
- OD Access to Treatment
- SPF-PFS



Break (Morning)

10:45 a.m. – 11:00 a.m.
(Scheduled)

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Division Director Updates (Continued)

CSAP Division Directors

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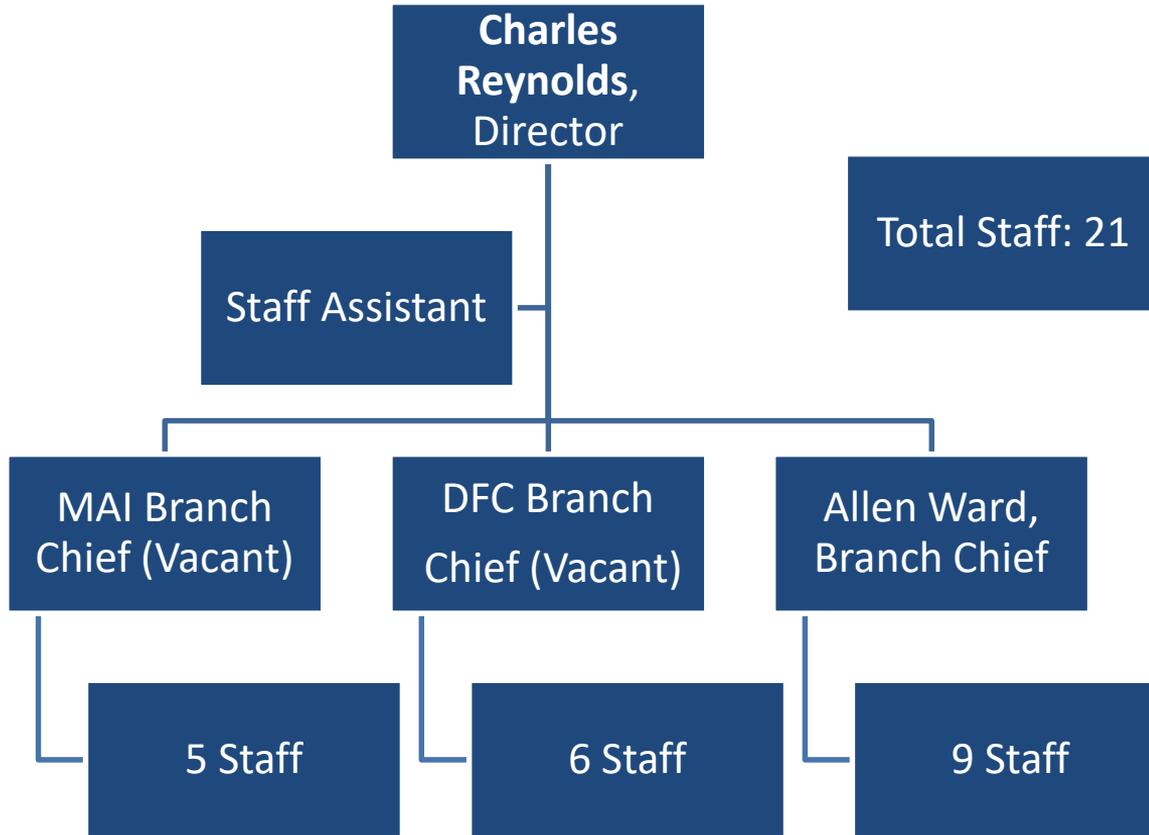


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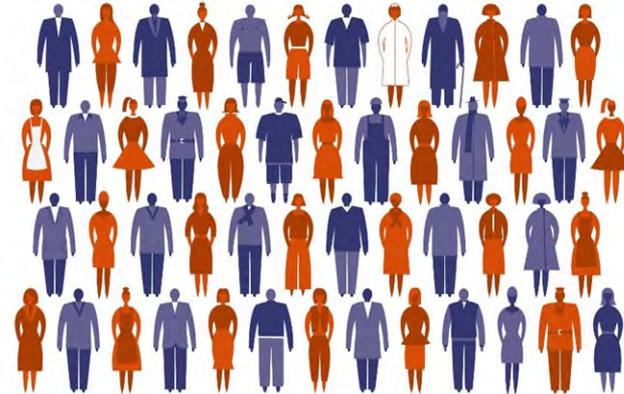
Division of Community Programs Mission

Help communities develop, implement, and sustain comprehensive community-based substance use and misuse prevention and early intervention strategies, programs, and support. Promote positive mental health and the prevention of substance abuse and mental illness, particularly in non-traditional settings.

DCP Organizational Chart



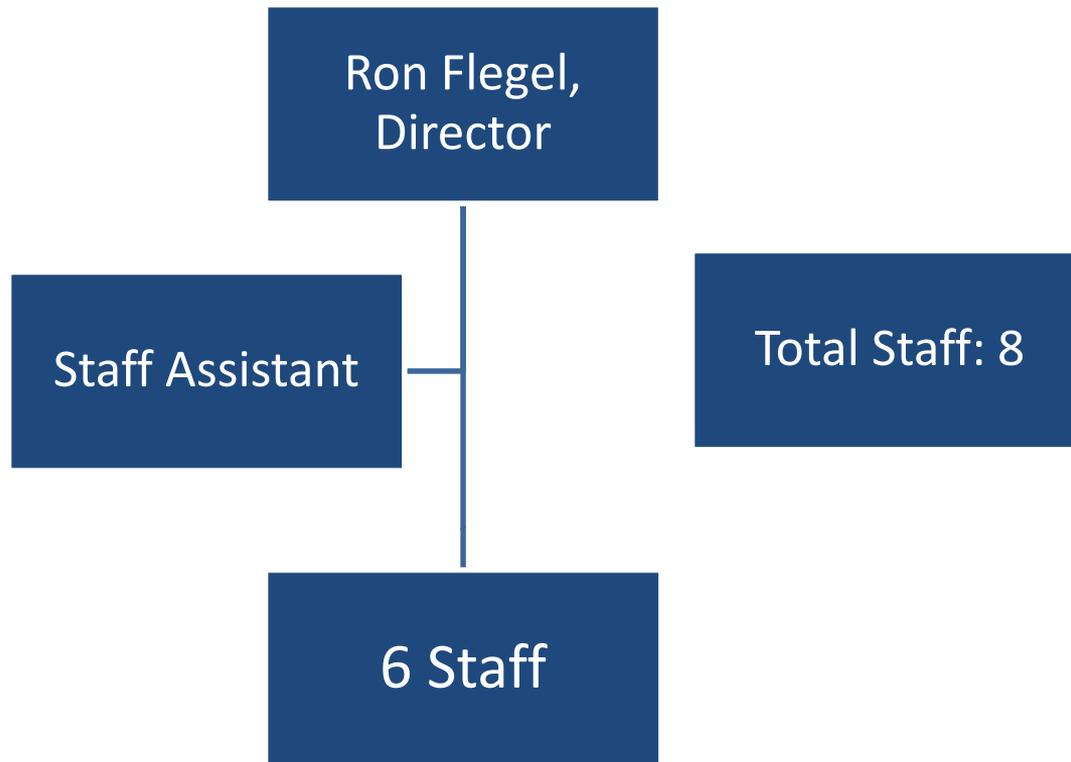
- ONDCP Programs
 - 731 Drug-Free Communities & DFC Mentoring grants
 - 55 DFC-CARA grants to address local opioid drug crisis
- SAMHSA Programs
 - 99 STOP Act grants
 - Supplement to DFC program
 - 122 Minority AIDS Initiatives
 - Focused on preventing spread of HIV & Hepatitis
 - 50 First Responders CARA
 - The purpose of program is to allow 1st responders & key community members to administer a drug or device approved for emergency treatment of opioid overdose



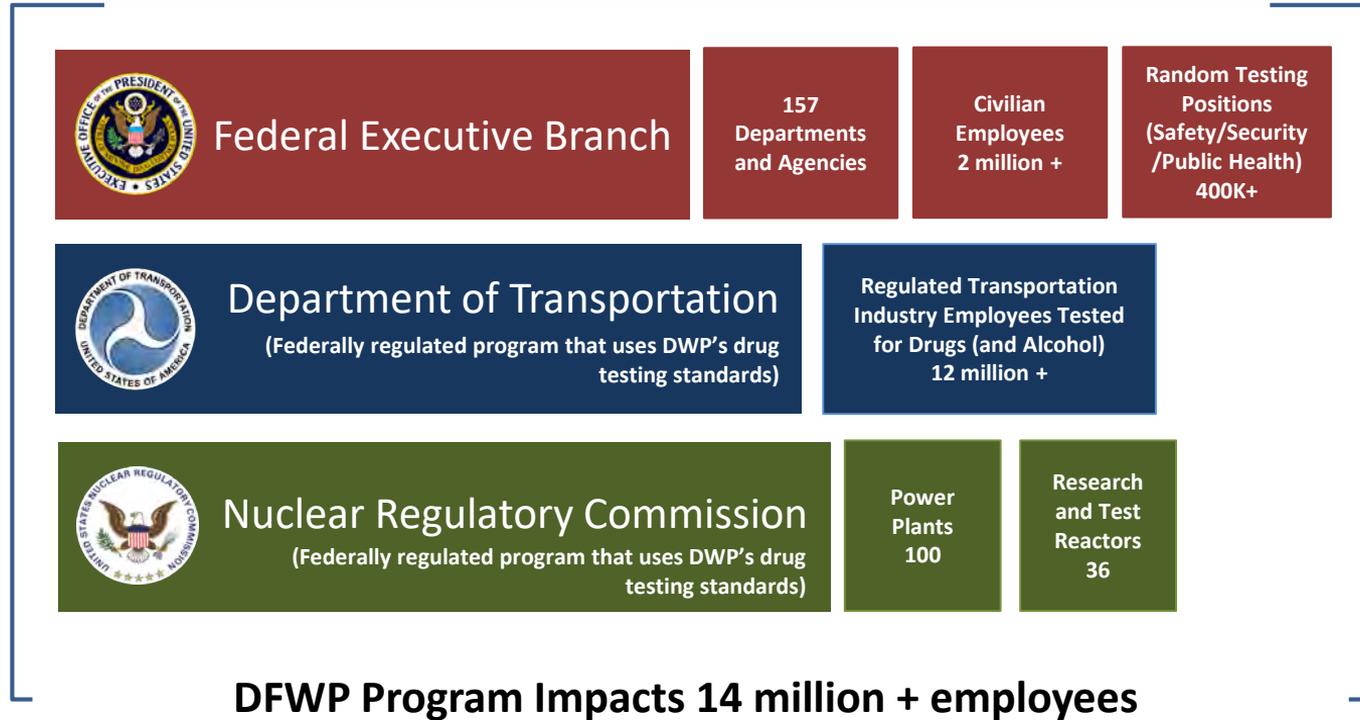
Division of Workplace Programs Mission

Promote safer, healthier and more productive workplaces through the prevention of illicit drug use and prescription drug misuse, federal drug-free workplace programs, the establishment of scientific and technical standards for laboratory collection and the testing of specimens, and the promotion of prevention through EAP and other programs.

DWP Organizational Chart



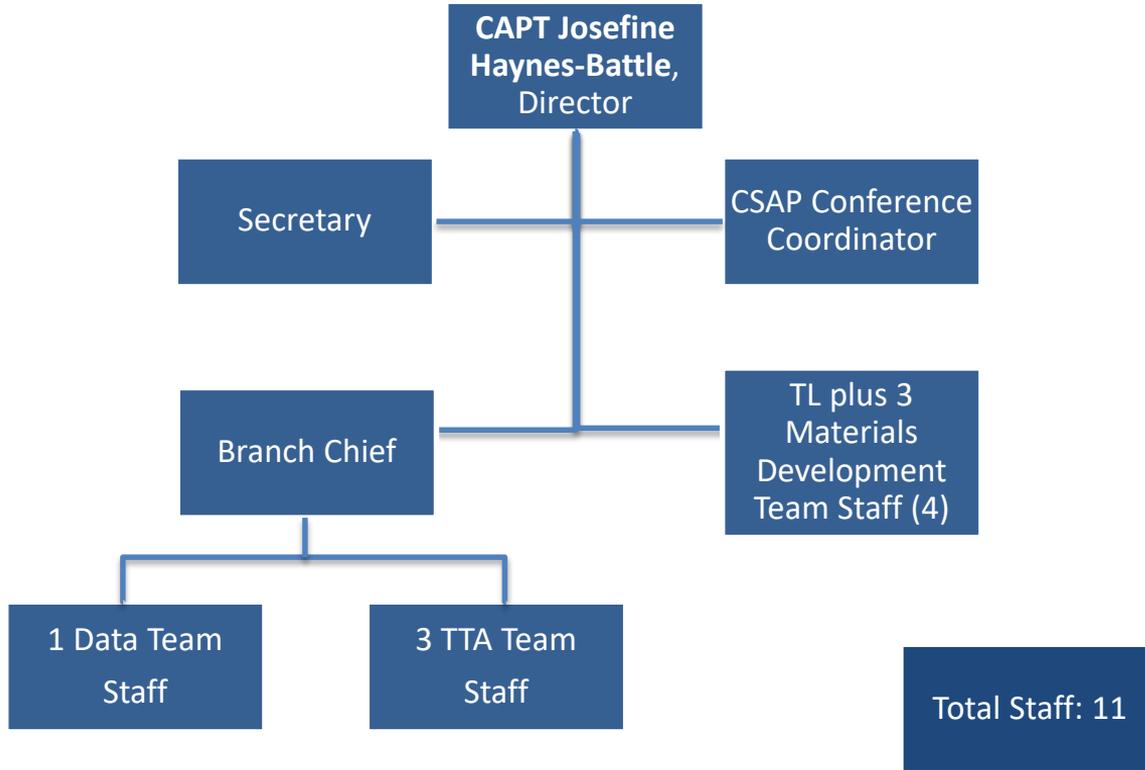
DWP Work



Division of Systems Development Mission

Through collaboration, build systems capacity, transfer knowledge, develop and disseminate resources, and evaluate programs to promote wider adoption and practical application of effective substance use/misuse prevention practices.

DSD Organizational Chart



DSD Work

- Contracts Management
 - National media campaign, public education initiatives, and resource development
 - Collaboration with CSAT and CMHS on state liaison and tribal technical assistance and training
- Grants monitoring
- Participant Protection
- CBHSQ coordination (cross-site/SPARS)
- Special projects



By Your Side – 60 Second Video



<https://youtu.be/kMOXX7OUC8A>

Questions and Discussion (Morning)



Lunch on Own

12:00 p.m. – 1:00 p.m.
(Scheduled)

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NAC Workforce Recommendations Discussion

CSAP NAC Members

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Marijuana Issues Discussion

Patricia Santora

Public Health Analyst, CSAT

Nel Nadal

Lead Public Health Analyst, CSAP

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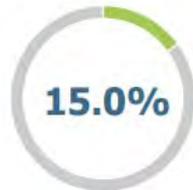


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Marijuana Prevention Efforts

Marijuana Use (NSDUH)

Past-Year Marijuana Use among People Aged 12 or Older in the United States, by Gender, Race/Ethnicity, and Age (2017)



Among people aged 12 or older in the U.S. in 2017, **15.0%** (or **40.9 million**) used marijuana in the past year.

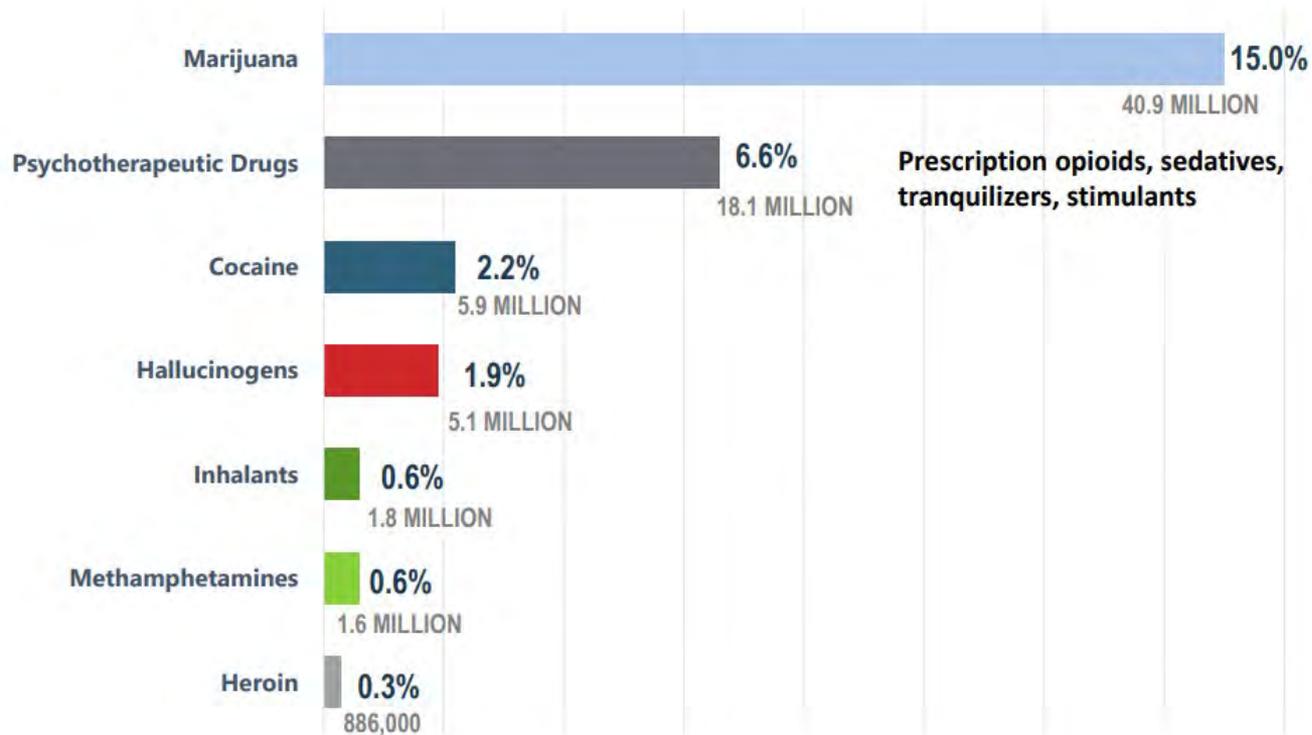
Past-year marijuana use was lower among females aged 12 or older than their male counterparts.

Compared to the national average, past-year marijuana use was higher among non-Hispanic white, black, and American Indian or Alaska Native people and among those aged 18-44, and was lower among non-Hispanic Asian and Hispanic people, and among those aged 12-17 and 45 or older.



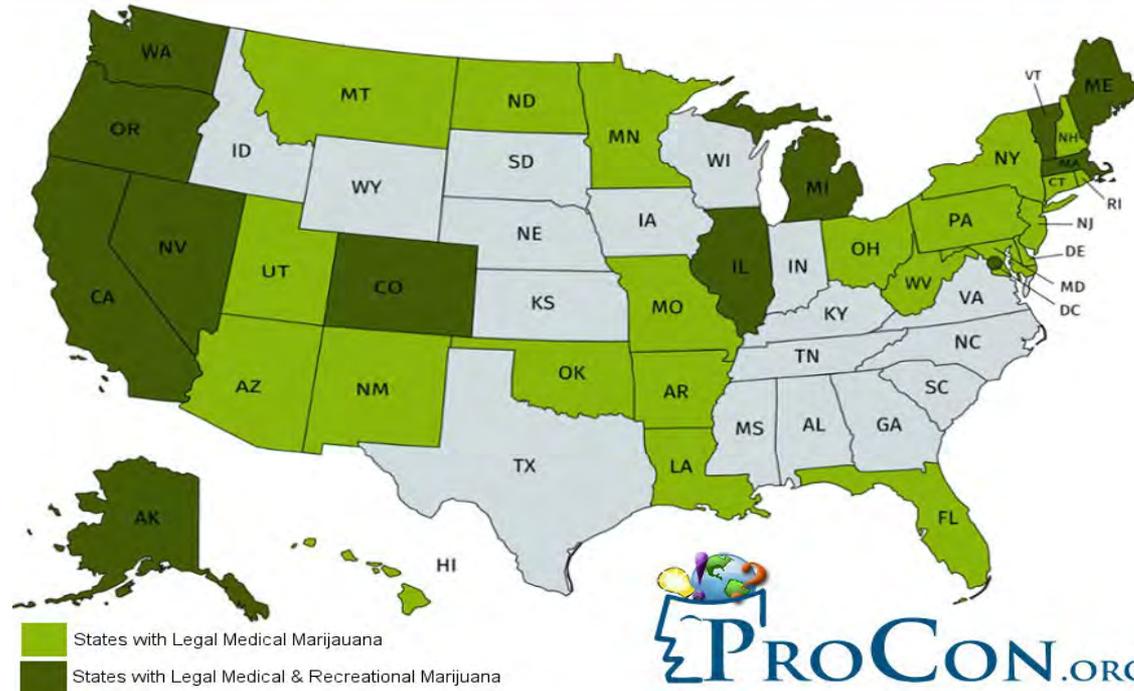
Marijuana Prevalence vs. other illicit drugs

PAST YEAR, 2017, 12+



Marijuana Policies (July 2019)

33 Legal Medical Marijuana States & DC
11 Legal Recreational Marijuana States & DC



Marijuana Use in Legalized States

Past year Marijuana use among persons aged 12 or older residing in states with legal medical and recreational Marijuana use, by state: percentages and estimated numbers (in thousands), annual averages based on 2012-2013, 2013-2014, 2014-2015 and 2015-2016 NSDUHs. (Range: 13-25%)

State	Effective Date	2012-13 %'s	2012-13 #'s	2013-14 %'s	2013-14 #'s	2014-15 %'s	2014-15 #'s	2015-16 %'s	2015-16 #'s
Alaska	02/24/2015	19.69%	114	19.6%	114	21.92%	127	23.00%	134
California (revised penalties)	11/19/16;	13.89%	4,384	14.49%	4,633	15.25%	4,936	16.23%	5,296
Colorado (2012 – revised penalties; 2014 – commercial sales)	12/10/2012 01/01/2014	18.92%	814	20.74%	909	23.09%	1,033	23.12%	1,057
District of Columbia	02/26/2015	21.02%	116	21.70%	121	23.51%	134	24.68%	142
Maine (grow & possess)	01/30/2017	16.24%	186	19.55%	224	19.69%	227	19.81%	228
Massachusetts	12/15/2016	15.57%	885	17.23%	989	18.26%	1,058	18.64%	1,088
Nevada	01/01/2017	14.10%	324	13.01%	304	12.95%	309	13.13%	319
Oregon	03/29/2016	19.03%	630	19.39%	649	19.42%	359	22.70%	783
Washington	12/06/2012	17.48%	1,008	18.92%	1,105	17.49%	1,037	18.93%	1,140

What We Know about Adolescent Marijuana Exposure

- Marijuana adversely influences learning. Chronic use is linked to decline in IQ, poor school performance, and increased drop-out rates that jeopardize professional and social achievements, and life satisfaction (Meier et al, 2012)
- Adolescent marijuana use is associated with other substance use (Jones and McCance-Katz, 2018)
- Marijuana use has been associated with abuse of prescription pain medications (Olfson et al, 2017)
- Increased risk of addiction (compared to adults)

What We Know about Adolescent Marijuana Exposure (continued)

- Marijuana use is linked to earlier onset of psychosis in youth known to be at risk for psychotic illness (McHugh et al, 2017)
- Exposure to marijuana in adolescence is associated with an increased risk for later psychotic disorder in adulthood (D'Souza et al, 2016)
- Higher rates of school suspensions and expulsions (Colorado and Washington State, 2018)
- Higher rates of car crashes (Colorado and Washington State, 2018)

SAMHSA Efforts to Address Marijuana Use

Learn About Marijuana Risks



Marijuana and Pregnancy



**HELP YOUR KIDS STAY SAFE,
BEYOND THE KITCHEN.**

Teach them to make safe choices every day.

Marijuana can be harmful for a child's growing brain. It's important to talk with your children from a young age about what marijuana is and how it can be harmful to their developing brain. For tips on how—and when—to begin the conversation, visit:

www.underagedrinking.samhsa.gov



TIPS for TEENS

MARIJUANA

THE TRUTH ABOUT MARIJUANA

SLANG: WEED/POT/GRASS/REEFER/
GANJA/MARY JANE/BLUNT/JOINT/TREES

GET THE FACTS

MARIJUANA AFFECTS YOUR BRAIN. Tetrahydrocannabinol (THC), the chemical responsible for most of marijuana's psychological effects, affects brain cells throughout the brain, including cells in circuits related to learning and memory, coordination, and addiction!

MARIJUANA AFFECTS YOUR SELF-CONTROL. Marijuana can seriously affect your sense of time and your coordination, impacting things like driving.

MARIJUANA AFFECTS YOUR LUNGS. Marijuana smoke deposits four times more tar in the lungs and contains 50 percent to 70 percent more cancer-causing substances than tobacco smoke does.

MARIJUANA USE IS NEGATIVELY LINKED WITH OTHER ASPECTS OF YOUR HEALTH. Chronic marijuana use has been linked with depression, anxiety, and an increased risk of schizophrenia in some cases.

MARIJUANA IS NOT ALWAYS WHAT IT SEEMS. Marijuana can be laced with substances without your knowledge! "Blunts"—hollowed-out cigars filled with marijuana—sometimes contain crack cocaine.

MARIJUANA CAN BE ADDICTIVE. Not everyone who uses marijuana becomes addicted, but some users develop signs of dependence.

? Q&A

Q. ISN'T SMOKING MARIJUANA LESS DANGEROUS THAN SMOKING CIGARETTES?

A. NO. Both marijuana and cigarette smoke can be harmful. More research is needed to fully understand the connection between marijuana and long-term effects such as cancer.

Q. CAN PEOPLE BECOME ADDICTED TO MARIJUANA?

A. YES. Marijuana use can lead to a marijuana use disorder, which takes the form of addiction in severe cases.

Q. WHAT ARE THE OTHER RISKS ASSOCIATED WITH MARIJUANA USE?

A. In addition to the physical and mental risks associated with marijuana use, people who use marijuana have also reported less academic and career success, as well as lower life satisfaction and more relationship problems.

THE BOTTOM LINE: Marijuana affects the development of teen brains. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust if you have questions.

LEARN MORE: Get the latest information on how drugs affect the brain and body at teens.drugabuse.gov.

TO LEARN MORE ABOUT MARIJUANA, CONTACT:
SAMHSA
1-877-SAMHSA-7 (1-877-726-4727)
(English and Español)
TTY 1-800-487-4885
www.samhsa.gov
store.samhsa.gov



Marijuana Use during Pregnancy

- Marijuana is the most widely used illicit drug during pregnancy, and its use is increasing.
- Marijuana use more than doubled among pregnant women from 3.4% (78,000) in 2015 to 7.1% (161,000) in 2017 (NSDUH, 2017).
- A growing number of states are legalizing marijuana for medicinal or recreational purposes, and its use by pregnant women could increase even further.
- Legalization of marijuana use gives the false impression that marijuana is safe, and perceptions of harm associated with its use are decreasing among women, men and adolescents.

CSAP Grant Programs Relevant to Marijuana

- Substance Abuse Prevention and Treatment Block Grants
- Strategic Prevention Framework – Partnership for Success Grants
- Drug-Free Communities Grants

Marijuana Discussion Questions

- What are your impressions regarding the impact of marijuana laws in your states on individuals living in those states, particularly youth?
- What approaches do you believe would be most effective at addressing prevention and the health risks of marijuana - with schools, parents, youth, etc.?

Break (Afternoon)

2:45 p.m. – 3:00 p.m.
(Scheduled)

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HIV Issues Discussion

Morris Flood

Public Health Advisor, CSAP

Judith Ellis

Lead Public Health Advisor, CSAP

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HIV/AIDS and Substance Abuse Prevention

HIV/AIDS as a Federal Priority

President's Initiative: Ending the HIV Epidemic: A Plan for America

GOAL:

75%
reduction in new
HIV infections
in 5 years
and at least
90%
reduction
in 10 years.

HIV Statistics

- In 2016, approx. 1.1 million people aged 13 and older had HIV in the U.S. (CDC)
- 2017 number of new HIV diagnoses: 38,739
- 1 in 10 new HIV infections occurs among people who inject drugs

HIV & Substance Use: NSDUH Data

- **22.7%** of those living with HIV/AIDS have a substance use disorder compared to 7.4% of the general population
- Illicit drug use disorders are present in 2.8% of the general population compared to **14.5%** of those living with HIV/AIDS.

SAMHSA Efforts to Address HIV

- SAMHSA Minority AIDS Initiative
- MAI Service Integration
- MAI: Substance Use Disorder Treatment for Racial/Ethnic Minority Populations

SAMHSA MAI Grants

- **CSAP** - Total Grants: 142 (100 in designated eradication areas)
- **CSAT** - Total Grants: 118 (82 in designated eradication areas)
- **CMHS** - Total Grants: 18 (10 in designated eradication areas)

SAMHSA Publications

THE CASE FOR BEHAVIORAL HEALTH SCREENING IN HIV CARE SETTINGS



SAMHSA-HRSA CENTER for INTEGRATED HEALTH SOLUTIONS



integration.samhsa.gov



**Drugs,
Alcohol
and
HIV/AIDS**

A Consumer Guide



www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

HIV Discussion Questions

- How may CSAP expand its prevention work and communications among populations at risk for HIV?
- What are effective SUD prevention programs for these populations?
- What are related issues CSAP needs to take into account?

CSAP Future Direction/ Activities

Johnnetta Davis-Joyce

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SAMHSA Overview

- Only federal agency dedicated solely to mental and substance use disorder service delivery in the U.S.
- 21st Century Cures Act
- Mission: reduce the impact substance abuse and mental illness on America's communities
- One of 11 HHS agencies/departments
- Mental and substance use disorders programs/policy
- Assistant Secretary for Mental Health and Substance Use, Elinore McCance-Katz, M.D., Ph.D.



SAMHSA Overview (cont'd)

- General organization:
 - OAS: Office of the Assistant Secretary for Mental Health and Substance Use
 - CSAP: Center for Substance Abuse Prevention
 - CSAT: Center for Substance Abuse Treatment
 - CMHS: Center for Mental Health Services
 - CBHSQ: Center for Behavioral Health Statistics and Quality
- Funding (block grants, contracts, cooperative agreements)
- Grant information
 - [samhsa.gov](https://www.samhsa.gov/grants) “grants” tab ([grants.gov](https://www.grants.gov) for all federal grants)
 - [samhsa.gov](https://www.samhsa.gov/data) “data” tab
- Products and resources
 - store.samhsa.gov
 - [samhsa.gov/technology-transfer-centers-ttc](https://www.samhsa.gov/technology-transfer-centers-ttc)



To improve behavioral health through evidence-based prevention approaches.

Work with federal, state, public, and private organizations to develop comprehensive prevention systems by:

- Providing national leadership in the development of policies, programs, and services to prevent the onset of illegal drug use, prescription drug misuse and abuse, alcohol misuse and abuse, and underage alcohol and tobacco use.
- Promoting effective substance abuse prevention practices that enable states, communities, and other organizations to apply prevention knowledge effectively.

SAMHSA and CSAP's Critical Focus Areas

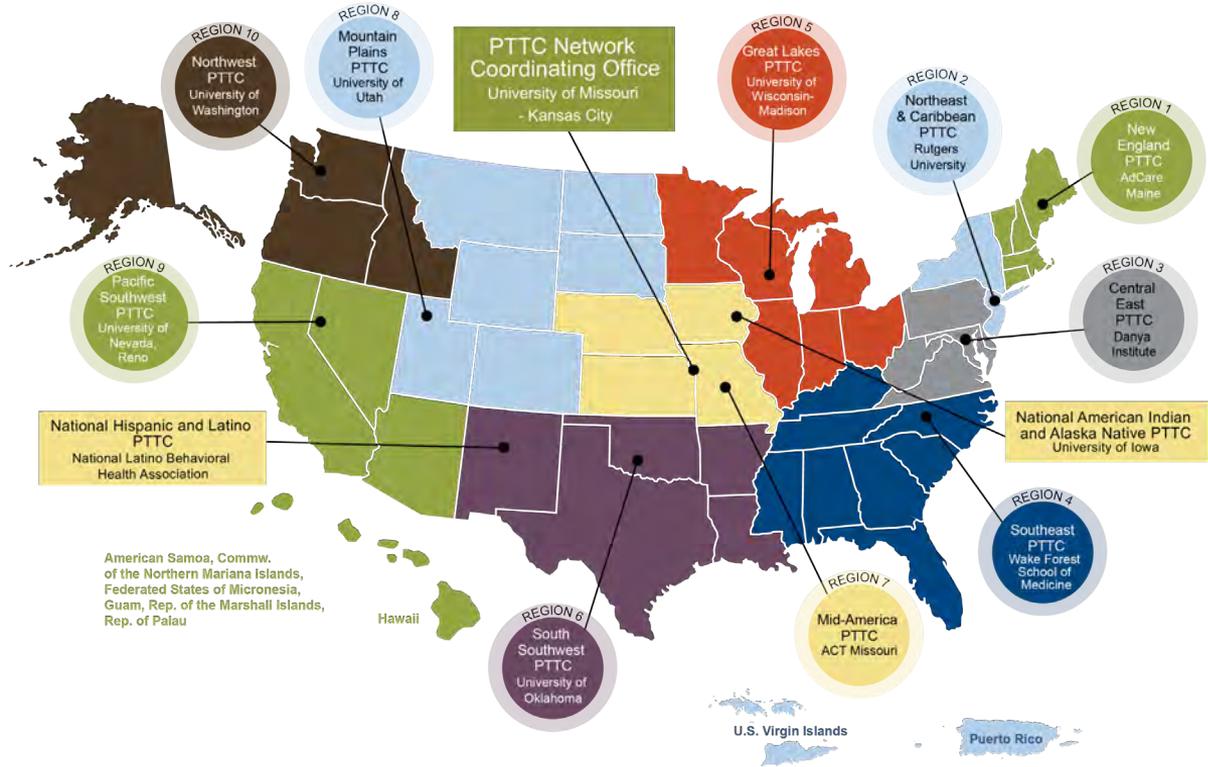
- All programs and policies are evidence-based
- All our work is data-driven
- We are addressing communities at-large

EVIDENCE-BASED PRACTICES RESOURCE CENTER



PTTC Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

PTTC Network



PTTC Focus Area Working Groups

- Marijuana Risk
- Data-Informed Decisions
- Evidence-Based Interventions
- Community Coalitions and Collaborators
- Opioid Education
- Trauma and Drug Exposed Children
- Addressing Culturally and Linguistically Appropriate Practices

Select Planned Projects Across Network

Presentation on Shaping Substance Abuse Prevention Programs for Minorities: Focusing on Latino Youth

Providing marijuana prevention presentation for Choose to Be Healthy Coalition

Webinar series on Implementing Evidence-Based Prevention Approaches; Drug Overdoses; Emerging Drug Trends

Training on De-escalating the Opioid Crisis; and Overview of secondary prevention approaches

Presentation on Making Healthy Choices Easier Choices: The Role of the Strategic Prevention Framework in Creating Health-promoting Environments for Youth

Role Call Videos Series: Substance Abuse Prevention Skills Training 2019 update



PTTC

Prevention Technology Transfer Center Network
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Select Planned Projects Across Network (continued)

Approaching Juvenile Justice through a Resiliency Lens - training

Resource toolkit - "Connecting Prevention Specialists to Native Communities"

Webinar series: Informing Prevention: Understanding Adolescent Development

Training series on EBIs to Prevent Adolescent Opioid Misuse

Cannabis use and Child Safety – training for Child Protection Services



PTTC

Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

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SAMHSA's Prevention Day

- The Power of Prevention: Prevention Happens Here
- February 3, 2020
- Planning now for plenaries, workshops, and institutes

National Prevention Week



May 10-16, 2020

How the NAC and CSAP Can Work Together

- Grant directions and review
- Collaborate on ideas for publications and TA
- Provide input on grant programs
- Promote evidence-based programming and materials
- Use and promote NSDUH data

Questions and Discussion (Afternoon)



Public Comment

4:45 p.m. – 4:50 p.m.
(Scheduled)

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Wrap-Up

4:50 p.m. – 5:00 p.m.
(Scheduled)

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ADJOURNMENT

5:00 p.m.
(Scheduled)

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THANK YOU!

SAMHSA's mission is to reduce the impact of substance abuse and mental illness in America's communities.

www.samhsa.gov

1-877-SAMHSA (1-877-726-4727 – 1-800-487-4889 (TDD))