GLS Youth Suicide Prevention

Implementation Team – Be the 1 Carroll County – February 19, 2024, 12:00-1:00pm

Register in advance for this meeting: <u>https://us02web.zoom.us/meeting/register/tZMscumvpzsoH9fCbMtMlsm7ce7NPMn74aDy</u>

Beyond the GLS Grant – Youth Suicide Prevention in Carroll County NH

Minutes

-Introductions of team members around the table:

Mckenzie Webb	Care Liaison, Northern Human Services, <u>mwebb@northernhs.org</u>
Crystal Sawyer	Executive Director of Carroll County Adult Education <u>csawyer@nhadulted.org</u>
Amanda Goddu	Outpatient LICSW, Huggins Hospital agoddu@hugginshospital.org
Heather Clogston	Prevention Coordinator, NH Department of Education, <u>heather.m.clogston@doe.nh.gov</u>
Sarah Cain	Community Engagement Coordinator, New Futures, <u>scain@new-futures.org</u>
Catalina Kirsch	Continuum of Care Coordinator, C3PH, catalina.kirsch@graniteuw.org
Emily McArdle	Young Adult Outreach, C3PH, <u>u25carrollcounty@outlook.com</u>

Our Garrett Lee Smith Grant with NAMI NH, known also as the NH Nexus Project 2.0, 2020-2025, has ended. This group will determine next steps for continued work on youth suicide prevention in Carroll County NH.

Today's meeting we aim to give a broad overview of where we would like to go from here.

Grant Objectives

Торіс	Discussion	Action steps, by whom, by when?
New home for this group?	 Shall this group become a subcommittee of another existing initiative? CC Responds to SUD CC Youth SMP Veterans Coalition The group agrees that interweaving Be the 1 with CC Responds to SUD or other substance use prevention initiatives makes sense or continue to meet but every other month. Discussion about involvement with local school districts. Could check in with 	Group agrees that interweaving with CC Responds to SUD makes sense or Be the 1 could continue meeting every other month. Catalina will discuss with Jen. Could also create a schedule of guest speakers. C3PH will reach back out to schools to invite them to these meetings and share resources (including links to the meeting minutes and social media
	schools about what they're seeing for mental health/suicide trends at district-	

	 wide meetings. Partnerships with local school districts have faded over time, although on the positive side, schools have updated their protocols, worked with NH Rapid Response, and SAU 9 had created a Behavioral Health Collaborative. Schools' needs grew higher, they turned inward, and they may have less capacity for community coalitions, plus there has been a lot of turnovers at schools. This could be a good time to reach out to schools to those who were involved before (to see if they now have capacity to become involved again) and to new staff, describe what we do and how we want to support their efforts- would like to have something concrete to offer them. Ensure that resources and the meeting minutes are available to schools even if they can't attend the meetings and that people are aware of them. Guest speakers about mental health and SUD were found to be helpful, along with updates from the hospitals. 	pages)- Could use Emily's list of school administrators. Meeting minutes can be found on the C3PH website, <u>here</u> and resource guides can be found <u>here</u> . Resources can also be found on the C3PH and U25 social media accounts and Linktrees (links to resources): C3PH <u>Facebook</u> , <u>Instagram</u> , and <u>Linktree</u> U25 <u>Facebook</u> , <u>Instagram</u> , and <u>Linktree</u>
Goals and objectives for 2025	 What will the goals and objectives of the group be for 2025? Events, info, resources sharing among providers Awareness raising, community Communication and collaboration among providers Guest speakers, trainings Student voice, getting to y Prevention and postvention Focus on young adults Survivors of Suicide Loss Discussion about involvement with local schools/student groups- Jen and Emily going to CC Adult Ed to talk about mental health and substance use prevention/resources and the YRBS- Could do something similar with student groups, e.g. KHS GSA- Could be a guest speaker at one of their meetings or do activities with them. There is a state-wide push for the YRBS-Could use this group as a vehicle to move that work forward and talk about the importance of the YRBS with schools and students. 	C3PH will discuss more involvement in local schools/student groups, plus how to incorporate YRBS data/information into outreach.

Who should be	Brainstorm list of stakeholders who we would like	
at the table?	at the table.	
	 Reach back out, rebooting, inviting new people from school leadership Local legislators- C3PH will be doing advocacy work this spring to inform local legislatures about public health issues so they have the background information to make informed decisions. C3PH is also working on doing outreach to employers about our initiatives and how we can work together to serve each other's goals- A lot of employers employ young people. The Ossipee Area and MWV Chamber of Commerce business expo/meetings are a great way to connect with employers. 	C3PH will reach out to school administrators to invite them to the group and share resources/info. C3PH can continue to attend Chamber of Commerce events to connect with employers.
Format for meetings - Day, time, frequenc y - In - person or virtual - Format of agenda	 Catalina will discuss with Jen about how often to meet- Possibly every other month at the same day/time. Create a schedule of guest speakers. 	
Updates	 Sarah/New Futures: The YRBS bill (HB 446) looked like it was going well, but then an amendment was added to make it opt-in, which would make it difficult to get data. Unsure if there will be another hearing about it. This is a great time to email your legislators or write an opt-ed about the importance of the YRBS. Learn more at https://new-futures.org/YRBS#action Bill about setting up 988 crisis centers (SB255), including centers specifically for youth, was looking good but one of the sponsors may be getting cold feet. Learn more here https://new-futures.org/988 	If you're interested in getting involved with these bills or advocacy, contact Sarah at <u>scain@new-futures.org</u> Follow <u>https://new- futures.org/current-legislation</u> to keep up with current legislation and lend your voice.

-	Variety of bills about LGTBQ+ related	
	issues- learn more here <u>https://new-</u>	
	futures.org/LGBTQ	
Heathe	er/DOE:	
-	Upcoming MTSS-B Framework Training for	
	NH School Level Teams:	
	https://nhmtssb.org/wp-	
	content/uploads/2025/02/MTSS-B-	
	Framework-2025-Spring-Training-	
	<u>flyer_2_6_25.pdf</u>	
-	Save the date: Spring Prevention	
	Conference on May 12, with JSI and DHHS:	
	https://drugfreenh.org/event/2025-nh-	
	prevention-conference/ and	
	https://nhpreventionconference.org/	
-	The Youth Suicide Prevention Assembly is	
	going to be absorbed into the Youth	
	Suicide Prevention Council, if you're	
	interested reach out to Heather (she's co- chair) and she can connect you to Susan	
	Ward or Catherine Cox to join.	
-	Know and Tell Training at NHED in March	
	being held in collaboration with Granite	If you're interested in joining the Youth Suicide Prevention Council,
	State Children's Alliance: KNOW & TELL	reach out to Heather at
	Training 3.26.2025	heather.m.clogston@doe.nh.gov
Mcken	zie/Northern Human Services:	
-	Mckenzie's role as the Care Liaison will	
	continue through Oct. 1 (they received a	
	no-cost extension and funding from a	
	different area was diverted to her). She	Contact Mckenzie to learn more about
	covers Carroll, Coos, and upper Grafton	here role or for referrals:
	Counties and can receive referrals from	mwebb@northernhs.org , also see info
	anywhere (hospitals, schools, therapists,	at
	Northern Human Services, etc.). She works	https://www.c3ph.org/intitiatives/you th-suicide-prevention/Care-Liaison-
	with high-risk youth and young adults and	Program
	their caregivers/supports for up to 3	
	months to lower their risk, work on	Amanda and Mckenzie will connect.
	establishing coping skills, trigger	
	identification, and connect them to	
	services.	
-	Mckenzie also accepted a part-time	
	position as an Assertive Community Treatment (ACT) Coordinator, which is	
	similar to the Liaison role but for ages 18+.	
Amand	la/Huggins:	

	 Have been seeing a lot of stressors in individuals who identify as LGBTQ+ lately, especially in regions that may not be as welcoming- this is a population that may need additional support. Huggins has a free to the public diabetes support group, that also focuses on the mental health aspect, 4th Wednesday of the month, FMI: www.hugginshospital.org/resources/supp ort-groups 	C3PH has an LGBTQ+ resource guide that can be found <u>here</u> NH Outright is a great resource (changing name from Seacoast Outright)- <u>https://www.seacoastoutright.org/</u> White Mountains Pride Festival will be in June, youth can be involved/volunteer and C3PH will be there: /www.whitemountainspride.com/
Jennifer Thomas Jennifer.thomas@	graniteuw.org	

Catalina Kirsch catalina.kirsch@graniteuw.org

Awareness Campaigns

February

- Black History Month
- National Eating Disorder Awareness Feb 26- Mar 1
- Teen Dating Violence Awareness Month

March

- Self-Harm Awareness Month
- Disability Awareness Month
- World Teen Mental Wellness Day
- Transgender Day of Visibility

April

- National Counseling Awareness Month
- Stress Awareness Month
- April 16 World Semicolon Day

May

- Mental Health Awareness Month

Find more online at https://my.nami.org/NAMI/media/NAMInet/Outreach- Partnerships/Awareness-Calendar-2024-25.pdf https://www.samhsa.gov/newsroom/observances/suicide- prevention-month . https://988lifeline.org/promote-national-suicide-prevention-month/ health literacy resources for health professionals	
 Resources attached to share: 1. Magnify Voices Expressive Art Contest 2025 flyer 2. NH MHCAP Educators Wellness ECHO. See flyer. 2 pages 3. Alternative Peer Groups 4. Online Narcan training and distribution order 5. Anti Oppressive Practices Child Behavioral Health ECHO 6. Carroll County Veterans Coalition Creative Arts Contest 7. Carroll County Veterans Coalition Conference 8. Adult Mental Health First Aid Training 9. Resources from NH Bureau of Drug and Alcohol Services (BDAS) 10. See list of resources at https://www.c3ph.org/resource-center/resource-guides 11. See list of resources at https://linktr.ee/c3phnh 	Catalina with send the MCAP flyer to Crystal as a PDF. Flyers can also be found in our flyers folder <u>here</u>

SUBMISSIONS ARE NOW OPEN Artwork Deadline 04/20/2025

SEVENTH ANNUAL



The Magnify Voices Expressive Art Contest recognizes and celebrates the creativity of youth. Submit your artwork and help raise awareness about the vital importance of mental health for all!

- Open to NH students grades 5-12
- 12 finalists art appears in planner and cash prize
- Celebration Date: Wednesday, May 21, 2025



Questions? Reach out to: <u>magnifyvoices@gmail.com</u>





(603) 650-4741

Provider-to-provider child psychiatry support

Dartmouth Health Children's. Consults are available to primary care providers that care for children NH MCAP is your connection to provider-to-provider support from the Child Psychiatry team at and adolescents in NH and are provided by phone, during regular business hours.

HOW IT WORKS

behavioral health concern managing a pediatric PCP needs support

general and include diagnosis, be patient-specific or more medication, and other Support needs may treatment options.



(603) 650-4741 to schedule call the Access Line at a provider to provider PCP or support staff phone consultation

demographic data, a direct line to the PCP (back office or cell), and Be prepared to provide patient scheduling availability.



Psychiatrist returns call at scheduled time to **Child & Adolescent** complete consult

within 1-3 business days and last about 15 minutes. PCPs can bill for time spent preparing and Most consults are scheduled completing the consult.



A summary of the consult is sent

to include in the patient chart.

Health Children's Health Child

Policy and Practice



This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$850,000 with 20% financed by nongovernmental sources. The contents are those of the authors and do not necessarily represent the official views of, nor an endorsement by, HRSA, DHHS, or the U.S. government. For more information, please visit HRSA.gov.





Provider-to-provider child psychiatry support

Frequently Asked Questions

Q. What kind of questions can providers call NH MCAP Access Line about?

A. The Dartmouth Health Children's Child and Adolescent Psychiatrist that supports the Access Line can answer mental health questions about assessment, diagnosis, and treatment planning including medication management or other treatments. Examples include questions about specific medication dosing or side effects and help with differential diagnoses or appropriate levels of care.

Q. What's the best way to frame my question?

A. Prior to speaking with the Dartmouth Health Children's Child and Adolescent Psychiatrist we will collect some basic intake data. During the consultation, it is helpful to understand what you are looking for help with and what you have tried so far.

Q. What is the average wait time to speak with a Child and Adolescent Psychiatrist?

A. Most consults are available within 2 days of request, depending on the overall volume of requests.

Q. How long will a call take?

A. The average consultation takes about 15 minutes, but you will get as much consultation as you need.

Q. What if I need a response right away?

A. The NH MCAP Access Line is not a crisis service, but NH does have resources to help! NH Rapid Response Access Point (833-710-6477) is a 24-hour service that can help you and your patient determine next steps which may include phone support, dispatch of a Rapid Response Team, or referral to an Emergency Department. More information can be found here: <u>Acute Crisis Care | Children's Behavioral Health Resource Center (nh.gov)</u>

Q. How do I bill for this?

A. Interprofessional telephone/internet Electronic Health Record Consultation code 99452 may be reported by the treating/requesting physician, NP, or PA for 16-30 minutes in a service day preparing for the referral and/or communicating with the consultant.

Q. How does NH MCAP manage patient data?

A. Patient data and recommendations made during the consultation are recorded in Dartmouth Health's secure, HIPAA protected electronic health record and e-faxed to the requesting provider following the consult. All data used by NH MCAP for program evaluation is de-identified.







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Alternative Peer Groups

Supporting One Another to Make Healthy Choices about Substance Use

What Are Alternative Peer Groups?

Creating Connections NH is building supportive recovery communities called Alternative Peer Groups (APGs) for youth and young adults with substance use challenges. APGs offer young people a chance to connect at least once a week with peers in an environment that is fun, safe, substance-free, and recovery-focused.

APGs Provide...

- Connection through a supportive peer environment
- Fun, substance free activities
- Sense of belonging
- Focus on health and wellness

More Than Just Meeting Up

- APG Facilitators are trained recovery support professionals
- Youth help choose fun group activities that match their interests
- Opportunities for family/ caregiver involvement

Connect with a Group Near You

Southern NH

Revive Recovery (Nashua) reviverecovery.org | 888.317.8312

Seacoast Area

Safe Harbor Recovery Center (Portsmouth) granitepathwaysnh.org | ph. 603.570.9444

Live Free Recovery (Dover, Somersworth) livefreerecovery.com | ph. 603.702.2461

Franklin/ Tilton/ Concord/ Plymouth

Archways of Greater Franklin and Plymouth archwaysnh.com | ph. 603.286.4255

Carroll County

Kingswood Youth Center (Carroll Cty. South) zachary.porter@thekyc.org | ph. 603.569.5949

Terra Equine Center (Carroll County North) ph. 603.487.6745





IOD.CBH@unh.edu

iod.unh.edu/creating-connections-nh

Creating Connections NH is a project of the UNH Institute on Disability (IOD).

The IOD promotes full access, equal opportunities, and participation for all persons by strengthening communities and advancing policy and systems change, promising practices, education, and research. *Supported by funding from the NH Department of Health and Human Services.*

HELP CREATE A SAFER COMMUNITY LEARN ABOUT THE OPIOID EPIDEMIC



Rhode Island Institutional Review Board

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Anti-Oppressive Practices in Behavioral Health for Children, Adolescents, and Youth ECHO

Series Topics:

- Overview of power, privilege, and oppression
- Power dynamics within practice
- Beyond stereotypes: deepening understanding of personal and cultural diversity

And more!

Audience:

Social workers, occupational therapists, nurses, clinical supervisors, students, and all behavioral health professionals Tuesdays 12:30pm - 1:30pm via Zoom

October 29th November 12th December 3rd February 11th March 11th April 8th

Register Here

Questions? Please contact: Cait.mcallister@unh.edu

Institute for Health

Policy and Practice



University of New Hampshire

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LET YOUR CREATIVITY SHINE THROUGH THIS COMPETITION TO HONOR SERVICE MEMBERS, VETERANS, AND THEIR FAMILIES. PLUS, THE TOP 3 FINALISTS WILL WIN A PRIZE!

The Carroll County Veterans Coalition is hosting a Creative Arts Contest for our 2nd Annual Conference. Youth and young adults are encouraged to submit a creative piece of work that honors service members, veterans, and their families. Examples of creative work:

- Thank you letters
- Poems
- Essays
- Art (paintings, drawings, sculptures)
- Digital art (krita.org is a free platform)
- Videos (short films, songs)
- Any other medium of expression!









jennifer.thomas@graniteuw.org







Join us to:

- Raise awareness on the need to identify SMVF and provide culturally appropriate resources
- Learn about resources in the community
- Engage with other SMVF and community service providers
- Learn more about SMVF mental health and suicide prevention

Saturday, March 22, 2025, 1100–1400 hours (snow date March 29th) North Conway Community Center 78 Norcross Circle, North Conway, NH 03860



Register to have a table here: <u>https://forms.gle/EuZbtFchPd7SZ5GF7</u>



AMHFA is an evidence based prevention program taught by certified instructors. FMI: www.mentalhealthfirstaid.org/about/

Objectives:

- Learn how to safely and responsibly identify and address a potential mental health or substance use challenge.
- Improve understanding of mental health and substance misuse.
- Learn how to create an action plan to keep a peer safe and refer to appropriate resources

Audience:

First responders, dispatchers, school administrators, nurses and general public

REGISTER

https://forms.gle/MmVTGSCTQBDAYqVV6



Peer to peer support!



0830 - 1600 hours



Friday March 14th, 2025

Carroll County Annex Meeting Room (Behind Mountain View Nursing Home) County Farm Road, Ossipee, NH 03864



jennifer.thomas@graniteuw.org

Register here: <u>https://forms.gle/MmVTGSCTQBDAYqVV6</u>

Becoming a Mental Health First Aid (MHFA) Instructor

Friday, February 21, 2025 from 2:00pm - 3:00pm

Learn more about becoming a Mental Health First Aid (MHFA) Instructor, and empower your community to tackle mental health and substance use challenges head-on with an evidence-based, nationally recognized program.

During the webinar we'll discuss:

-What to expect from a MHFA class.

-The role of a MHFA Instructor.

-An overview of our Instructor certification process.

Trauma-Informed Drug Testing in Child Welfare: START's Approach

Wednesday, February 26, 2025 from 12:00pm - 1:30pm

An all-new "virtual workshop" designed for shared learning and practice improvement, participants in the workshop will:

- Understand trauma-informed care principles
- Become familiar with START's new drug testing standards for parents in child welfare that are grounded in trauma-informed care principles
- Become trauma-informed in approaching parents who have substance use challenges

Who Should Attend: Child welfare and treatment providers who want to improve trauma-informed practices in child welfare and those who may want to implement START, and all START affiliates.

RECORDINGS

Impact of Firearm Violence on Youth

During this webinar, researchers from University of California, Davis and Northwestern University discussed new findings that explore the nature and dynamics of childhood exposure to gun violence in US cities; the impact of firearm exposure on youth mental health and on future adult experiences of gun violence; and the impact of "collective efficacy" on firearm violence exposure for youth.

12th Annual Vermont Center on Behavior and Health (VCBH) Conference - Tobacco Use: Intersections with Other Addictions, Chronic Disease, and Health Disparities

Our theme for this year's conference is Tobacco Use: Intersections with Other Addictions, Chronic Disease, and Health Disparities. Cigarette smoking alone, directly contributes to risk for a myriad of chronic diseases causing almost 500,000 premature deaths in the U.S. annually. Smoking and other tobacco use disproportionately impacts certain subpopulations including those with other addictions, contributing to health disparities.

Many of the presentations over the next two days will also examine sex and gender differences as tobacco use among women often carries the additional risk of multigenerational adverse health effects and disproportionately impacts certain subgroups of women including those residing in rural regions, those who have other addictions or are socioeconomically disadvantaged, and those who have multiple risk factors (i.e., cumulative vulnerability). Advancing scientific understanding of these important topics provides the opportunity to continue reducing the terrible burden that tobacco use has on U.S. and global population health. Access pdf version of the conference brochure <u>here</u>.

Data Driven Partnerships: Understanding the Military's Role in Substance Use Prevention Partnerships, A 2-Part Series

Part 1 of this series delves into the multifaceted impact of military installations on community health and prevention efforts by studying the use of both quantitative and qualitative data for decision making. Part 2 of this series explores the role military prevention professionals play in fostering healthier communities and how to effectively partner with them to mutually improve outcomes through data sharing.

Data Driven Partnerships: Part 1 (recording) View Resources

This training session focuses on the multifaceted impact of military installations on community health and prevention efforts by studying the use of both quantitative and qualitative data for decision making. <u>Data Driven Partnerships: Part 2</u> (recording) <u>View Resources</u>

The session will highlight the data sources these professionals utilize in their work and provide strategies for engaging them in community prevention work.

Digging into the Bio-Psycho-Social: Addressing the Holistic, Multifaceted Needs of Individuals in Treatment and Recovery

Our understanding of the brain has exponentially expanded over the past few decades. This extraordinary growth in knowledge has led to research illuminating specific brain areas involved in addiction with the hope that novel medications and targeted neurologic interventions can treat substance use disorders. Expansion of life-saving medications to treat Opioid Use Disorder has been a necessary public health priority. As important as these efforts have been, people are more than their brains and addiction is a multifaceted disorder. The biopsychosocial model is a framework that considers the important biological, psychological, and social factors that contribute to addiction. This talk will review the biopsychosocial model and address the critical domains necessary for comprehensive recovery.

Professionals and Community Members as Recovery Allies

Family members, friends, neighbors, professionals, and other community members play a critical role as allies in supporting recovery. Research shows that creating a meaningful life in recovery requires access to healthcare, safe and affordable housing, educational opportunities that may have been missed during periods of drug use, and employment that allows people in recovery to support themselves and their families and contribute to society. Recovery capital refers to the resources, both internal and external, that an individual can draw upon in order to overcome substance use and maintain recovery. The session will begin with a presentation on the recovery ecosystem and recovery capital and will then identify real world examples of ways allies in communities have supported recovery by changing the community environment and creating opportunities to boost recovery capital.

Understanding Trauma and Trauma-Related Disorders

When it comes to recognizing and addressing trauma and trauma-related disorders, it's important to separate fact from fiction. Post-traumatic stress disorder (PTSD), for example, is often associated exclusively

with the horrors of war, but it's a myth that only veterans of combat develop the condition. In reality, PTSD can impact anyone who has witnessed or experienced traumatic, life-threatening, or life-changing events. Misconceptions also surround dissociative identity disorder (DID), once known as multiple personality disorder. While misleading media portrayals might suggest that most people with DID jump between personas and personalities, in reality, only a very small portion of those with the disorder exhibit this behavior. So how can we learn to recognize the symptoms of psychological trauma? What are the best options for effective treatment? And how can we best understand if we have experienced a traumatic event?

SAMHSA's National Training and Technical Assistance Center for Early Serious Mental Illness (ESMI TTA Center) Clinical High Risk for Psychosis Overview Webinar Recording

This webinar provides an overview of clinical high risk (CHR-P) for psychosis and CHR-P programs. Dr. Jason Schiffman, Director of the PREVENT Lab at the University of California, Irvine provides an overview of CHR-P and moderates a panel composed of SAMHSA clinical high risk for psychosis grantees to discuss their experiences and challenges with program implementation as well as practical solutions and resources to advance clinical high risk for psychosis programming.

SAMHSA's Center for Financing Reform & Innovation (CFRI) Financing Measurement-Based Care in Community Behavioral Health Settings

Measurement based care (MBC) for behavioral health care is a clinical process that uses standardized measurements to track a client's progress over time that inform shared patient-provider treatment planning and decision-making. One significant challenge to the broader adoption of MBC is financing. This report uses analyses based on discussions with payers, policy makers, financing experts, and providers and an environmental scan to explore MBC reimbursement options and to identify challenges and potential solutions for increasing use of MBC across diverse community behavioral health care settings. View the recorded webinar, presentation slides, and report.

RESOURCES

NCSMH & NCTSN Resources for National Events

The National Child Traumatic Stress Network (NCTSN) and National Center for School Mental Health (NCSMH) have compiled a list of resources to help victims, families, and communities cope with grief and other emotions related to recent national events. Along with the resources below, we hope you take time to prioritize care for yourself and your loved ones, and that you can continue to effectively support your students, staff, and communities:

- <u>Supporting Students, Staff, Families, and Communities Impacted by Violence</u> by NCSMH
- Helping Students Cope with the Preparation and Aftermath of Natural Disasters by NCSMH
- <u>Resources in Response to the New Year's Truck-Ramming Attack in New Orleans</u> from NCTSN
- <u>Resources in Response to the California Wildfires</u> from NCTSN
- <u>Wildfire Resources</u> from NCTSN
- Additional Resources:
- <u>CA Wildfires and Indigenous Sources of Knowledge</u> by Learning for Justice
- <u>Understanding the Impacts of Natural Disasters on Children</u> from the Society for Research in Child Development

• <u>Behavioral Health Conditions in Children and Youth Exposed to Natural Disasters</u> by the Substance Abuse and Mental Health Services Administration (SAMHSA)

Best Practice Guide to Telehealth for Emergency Preparedness

Telehealth is important for providing medical care during an emergency, such as a pandemic or natural disaster. Providers can use telehealth to perform quick assessments, triage patients, and deliver patient care. Integrating telehealth into emergency preparedness plans is essential. This best practice guide provides detailed information and resources on using telehealth for emergency preparedness. Use this best practice guide to learn how to integrate telehealth into emergency preparedney preparedness plans.

Resources for National Human Trafficking Prevention Month

Federal laws, such as the Preventing Sex Trafficking and Strengthening Families Act, the Justice for Victims of Trafficking Act, and the Trafficking Victims Prevention and Protection Reauthorization Act, help lay the groundwork for how child welfare and other agencies should respond and collaborate to establish prevention programs. During National Human Trafficking Prevention Month, use these resources from <u>Child</u> <u>Welfare Information Gateway</u> to learn more about the risk factors and signs of trafficking and sexual exploitation and best practices in identifying, responding, and supporting children who are or are at risk of experiencing trafficking or sexual exploitation as well as their families.

Publications:

- Human Trafficking and Child Welfare: A Guide for Caseworkers
- Human Trafficking and Child Welfare: A Guide for Caseworkers [Spanish] (new!)
- Human Trafficking and Child Welfare: A Guide for Child Welfare Agencies
- Definitions of Human Trafficking
- Human Trafficking: Working With Faith-Based Groups
- **Resources:**
- Trafficking and Sexual Exploitation

- Reducing the Use of Congregate Care
- <u>Trauma-Informed Practice</u>
- <u>Safety and Risk</u>
- <u>Prevention</u> Partner Resources:

• <u>Sex Trafficking Prevention (Capacity Building Center for Tribes)</u> - Explore different ways to respond and better understand sex trafficking with these tools, examples, and information for agencies.

• Interactive Tools to Support Child Welfare Workers in Their Response to Human Trafficking (The Administration for Children and Families) - Access two new microlearnings developed for frontline professionals who work with children to strengthen screening for human trafficking and safety planning. These 30-minute modules are designed for quick, digestible, and interactive training.

• <u>New Opportunities: A National Strategy to Prevent Homelessness (Chapin Hall)</u> - Learn about the longterm drivers of youth homelessness, the conditions that trigger it, missed opportunities, and recommendations for changes in policy, research, and practice with a national strategy informed by Chapin Hall's Voices of Youth Count study to prevent homelessness.

Mental Health America's Breaking the Algorithm: Redesigning social media for youth well-being

Mental Health America's latest report, Breaking the Algorithm: Redesigning social media for youth wellbeing, dives deep into how social media is impacting young people's mental health, relationships, and daily lives. This report brings together insights from over 900 survey respondents, focus groups with young people, and conversations with our youth co-researchers to explore:

• The dual nature of social media as both a connector and a source of harm.

facing substance use and co-occurring mental health challenges.

- How algorithms shape youth experiences, often without their full understanding or consent.
- Why it's critical to empower young people with tools, education, and a voice in the systems that shape digital worlds.

Center for Addiction Recovery Support (CARS) - National Peer-Run Training and Technical Assistance In collaboration with <u>SAMHSA's Office of Recovery</u>, the CARS program aims to expand access to culturally responsive training and technical assistance for addiction recovery support services nationwide. CARS is led by <u>One World Recovery Network (OWRN</u>), a Peer-Led Recovery Community Organization. CARS expands upon the previous work done by the Peer Recovery Center of Excellence (PRCOE); and is committed to expanding recovery support resources for all communities. Visit the new website to access Technical Assistance, Resource Directories, and Helpful Tools! The Center for Addiction Recovery Support (CARS) provides essential training and technical assistance (TTA) to help organizations better support individuals

SAMHSA Integrating Behavioral Health Services Within Specialty Practices Serving Adults and Pediatric

Populations

SAMHSA has issued two new papers on integration of behavioral health care in specialty care settings such as oncology and gastroenterology clinics. One paper focuses on care for adults and the other pediatric populations. The two papers discuss examples of integrated care models, key components of integrated care models and examples. The goal of these papers is to help ensure patients in these specialty care settings have access to behavioral health care. This content is undergoing Section 508 remediation. If you need assistance to access this file, please contact <u>508@samhsa.hhs.gov</u>. Integrating Behavioral Health Services Within Specialty Practices Serving Adults Integrating Behavioral Health Services Within Specialty Practices Serving Pediatric Populations

SAMHSA Clinical Advisory: Considerations for Genetic Testing in the Assessment of Substance Use Disorder Risk

SAMHSA has released this Clinical Advisory, providing critical insights for the equitable and person-centered implementation of this emerging intervention. This Advisory examines the role of genetic testing in assessing SUD vulnerability and outlines the current limitations of these technologies.

SAMHSA Releases Documents Supporting SUPTRS Block Grant Awardees

SAMHSA published five documents to promote the integration and advancement of promising practices in SUD treatment. These documents provide guidance to states and providers as they bolster their behavioral health infrastructure. Today's publications include:

- <u>Advancing Equity in SUD Treatment Behavioral Health Resource</u>
- Improving Data Collection & Reporting Resource Document Learning Collaborative Resource Document
- <u>Medications for Opioid Use Disorder: An Effective Treatment for Justice-Involved Persons Reentering the</u> <u>Community Brief Reference Document</u>
- Mobile Medication Units and Health Clinics Issue Brief
- <u>Innovative and Holistic Programs that Offer Medications for Opioid Use Disorder to Pregnant and</u> Parenting Women Issue Brief

SAMHSA Releases Recovery Fact Sheets

SAMHSA has released two recovery fact sheets designed to empower individuals navigating mental health and substance use services and expand the adoption of recovery-oriented services and supports in state, local and community behavioral health settings. <u>Housing Supports Recovery and Well-Being: Definitions and Shared Values</u> summarizes the role that housing plays in supporting recovery for recovery and housing leaders. <u>Countering Discrimination and Improving Recovery Supports Across Court, Corrections, and Reentry Settings</u> highlights and addresses public misconceptions and misperceptions linking mental health and substance use conditions with crime rather than recognizing systemic barriers to accessing needed care.

SAMHSA DAWN National Estimates from Drug-Related Emergency Department Visits, 2023

The Drug Abuse Warning Network (DAWN) National Estimates from Drug-Related Emergency Department Visits, 2023 report provides weighted national estimates. The frequency of substance-related visits increased by 5.8 percent compared to estimates in 2022. Rates of all substance-related ED visits from participating hospitals were highest among individuals with the following characteristics: males (2,668 per 100,000), individuals who were not Hispanic or Latino (2,391 per 100,000), and Black individuals, after accounting for the underlying population (4,053 per 100,000 versus 1,736 per 100,000 in the next highest subpopulation). The top substances reported were alcohol, cannabis, opioids, methamphetamines, cocaine, and benzodiazepines.

SAMHSA Substance Use Disorder Treatment Month Toolkit

SAMHSA has released a toolkit for the first Substance Use Disorder Treatment Month, to be observed January 2025. Treatment Month raises awareness of the benefits and availability of evidence-based

treatments for people with a substance use disorder; addresses barriers to treatment, including stigma; and normalizes seeking help. The toolkit includes information about weekly themes, social media graphics and messaging, a webinar background, and resources that public health organizations, treatment providers, professional associations, and others can use to spread awareness of Treatment Month. Visit <u>SAMHSA.gov/SUDTM</u> to check out our toolkit and resources, and watch the Substance Use Disorder Treatment Month 2025 video <u>here</u>.

Biden-Harris Administration Awards 14 States and Washington, D.C. with CCBHC Medicaid Demonstration Planning Grants for Expanding Access to Mental Health and Substance Use Disorder Services

The Ripple Effect: How Your Dry January Impacts Family, Friends, and Community

January is the Perfect Time to Pursue Treatment for a Substance Use Disorder

As He Concludes His Second Tenure, 21st U.S. Surgeon General Issues Parting Prescription for America

U.S. Surgeon General Issues New Advisory on Link Between Alcohol and Cancer Risk

FDA recommends changes to labeling for transmucosal buprenorphine products indicated to treat opioid use disorder

FDA weighs novel pain drug amid opioid crisis

Reported use of most drugs among adolescents remained low in 2024

U.S. retail sales data show 86% of e-cigarette sales are for illegal products

Brain structure differences are associated with early use of substances among adolescents

Top Findings on Addiction in 2024 from Psychology Today

The Public Policies That Really Help Prevent Suicide

Suicide rate among veterans held steady in 2022 with guns accounting for most deaths, VA's latest report concludes

Veteran suicides often follow complaints of chronic pain, insomnia and physical problems, report finds

Primary Care Can Play Key Role in Suicide Prevention

CFPB finalizes rule barring medical debt from credit reports

In New Year, Medicaid to Cover Addiction and Healthcare Services Youth Transitioning Out of Prison and Jail

9 States Poised To End Coverage for Millions if Trump Cuts Medicaid Funding

Commitment to an Ethnic/Racial Identity Can Be a Stress Buffer Against Discrimination

Homelessness Prevention Series: Spotlight on Older Adults

The Number of Homeless People in the U.S. Has Increased

US HUD Federal Government Announces Significant Efforts to Reduce Homelessness

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