



Substance Use & Injury Connection

The purpose of this newsletter is to share bimonthly updates on activities across CSTE programs, our members, and our partners focused on substance use and injury surveillance and epidemiology. Features include highlights of CSTE Subcommittee activities and member accomplishments related to substance use and injury topics. If you have suggestions for content or updates to include, please submit them to Mia Israel at misrael@cste.org. To access the Substance Use & Injury Connection archives, visit <https://www.cste.org/page/substanceuseinjury>.

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CSTE Updates



This section includes updates and opportunities relevant to substance use and injury epidemiology across CSTE programs.

Nonfatal Opioid Overdose Standardized Surveillance Case Definition Implementation Guide Workgroup

CSTE seeks STLT members with overdose surveillance experience to serve on an interim workgroup for the development of the Nonfatal Opioid Overdose (NFOO) Standardized Surveillance Case Definition Implementation Guide. The CSTE 2019 [Nonfatal Opioid Overdose Standardized Surveillance Case Definition](#) provides an opportunity to build upon the current framework for opioid surveillance at state, local, tribal and territorial health departments by developing a case definition. These definitions focus on ascertaining cases from a variety of sources, including case reporting by clinicians. We expect the workgroup to launch in April 2020. If you are interested in joining the workgroup, please complete the [interest form](#) no later than **Monday, March 23**.

RFP Opportunity: Injury Special Emphasis Report Tools

CSTE is seeking a technical contractor to develop injury surveillance Special Emphasis Report tools for use by state health departments. The full RFP can be found [here](#), and applications are due **by 5:00 pm ET on Wednesday, March 25**.

RFP Opportunity: Drug Overdose Regional Surveillance Workshops

CSTE is seeking a consultant or consultant to support development of Drug Overdose Regional Surveillance Workshops. Duties include adapting the existing curriculum and materials for local jurisdictions, facilitating workshops, and developing a final report. The full RFP can be found [here](#), and applications are due **by 11:59 pm ET on Wednesday, March 25, 2020**.

CSTE Chronic Disease Subcommittee Call to Discuss BRFSS NOFO Updates on Wednesday, March 25

CDC will be issuing a three-year NOFO to fund BRFSS as an open competitive procurement. Historically, only state health agencies or their designees have been eligible to apply for these funds reflecting the essential partnership between state health agencies and CDC. The BRFSS NOFO is anticipated to be released at the end of March 2020 and will be due at the end of May 2020. The CSTE Chronic Disease Subcommittee will be hosting a call that is open to epidemiologists, BRFSS coordinators and other public health professionals at state agencies on **Wednesday, March 25 at 3 pm ET**. This call provides an opportunity for stakeholders to share

anticipated challenges, ideas, and strategies for state health agencies in preparation of application development for this newly revised NOFO.

Please contact Nikka Sorrells at nsorrells@cste.org for the WebEx information.

Join the National Syndromic Surveillance Program Community of Practice (NSSP CoP)

CSTE is excited to engage with and provide support to the syndromic surveillance community. CSTE's facilitation of the [NSSP CoP](#) offers a unique opportunity for members to expand their knowledge and practice of syndromic surveillance methods. If you're interested in learning more about the NSSP CoP and related activities, visit CSTE's [NSSP CoP landing page](#). If you're interested in joining the community and/or its related groups, please email syndromic@cste.org.

CSTE Health Disparities Subcommittee Co-Chair Positions Open

The Health Disparities Subcommittee is seeking new co-chairs to assume leadership by June 2020. The subcommittee's mission is to address health disparities at the STLT-level using best epidemiology practices. CSTE subcommittee co-chairs must be active members.

If you're interested in filling this role, please send a resume and statement of interest to Alesha Thompson at athompson@cste.org.

CSTE Marijuana Subcommittee Approves Name Change to CSTE Cannabis Subcommittee

The CSTE Marijuana Subcommittee recently approved a name change to the CSTE Cannabis Subcommittee to be more inclusive of the emerging issues in cannabis-related public health surveillance.

To learn more about Cannabis Subcommittee activities, please contact Mia Israel at misrael@cste.org.

Get Involved



The following groups may be of interest to our CSTE Substance Use and Injury members with ongoing activities related to substance use and injury topics. To join one of the CSTE Subcommittees, make sure you are logged into your CSTE member account, click the link to the Subcommittee page, and click "Join Group" under the group name. To join one of the workgroups, contact CSTE staff to be added to the email list and receive meeting information.

CSTE Subcommittee Highlight

Beginning in the early 1990s, CSTE has collaborated with the National Institute for Occupational Safety and Health (NIOSH) to build capacity to conduct surveillance of occupational injuries and illnesses and related prevention activities at the state level. Since 1997, the CSTE Occupational Health Subcommittee has met regularly with NIOSH staff to advance the aim of building state occupational public health programs. CSTE's work is an important building block in creating safer and healthier workplaces.

Members of the CSTE Occupational Health Subcommittee have in the past expressed interest in integrating the latest in data visualization practices into their state occupational health surveillance work. In response to the growing interest, the subcommittee is developing a webinar series as a way for states to learn more about best practices on data visualization along with being introduced to data visualization tools such as Tableau.

The first webinar was scheduled on March 4th, and you can access the [recording here](#) and [slides here](#). If you are interested in joining the Occupational Health Subcommittee, please contact Song Xue at sxue@cste.org.

The following CSTE Subcommittees and Workgroups have ongoing projects and/or discussion topics related to substance use and injury:

- [Alcohol Epidemiology](#)

- Call Schedule: Monthly, 1st Thursdays at 1:00 pm ET
- **Health Disparities**
 - Call Schedule: Bimonthly, 4th Thursdays at 2:00 pm ET
- **Injury Epidemiology and Surveillance**
 - Calls scheduled as needed
 - **Injury Surveillance Workgroup**
 - Call schedule: Monthly, 1st Wednesday of the month at 2:00 pm ET
 - CSTE Contact: Mia Israel, misrael@cste.org
 - **Technical Assistance for Drug Overdose Surveillance Workgroup**
 - Calls scheduled as needed
 - CSTE Contact: Danielle Boyd, dboyd@cste.org
- **Cannabis**
 - Call Schedule: Bimonthly, 4th Thursday of the month at 1:00 pm ET
- **Maternal and Child Health**
 - Call Schedule: No call schedule
 - **Neonatal Abstinence Syndrome (NAS) Workgroup**
 - Call schedule: Bimonthly, 3rd Tuesday of the month at 2:00 pm ET
 - CSTE Contact: Nikka Sorrells, nsorrells@cste.org
- **Mental Health**
 - Call Schedule: Bimonthly, 1st Thursdays of the month at 3:00 pm ET
- **Occupational Health Surveillance**
 - Calls scheduled as needed.
 - **Healthy Aging Workgroup**
 - Call schedule: Calls scheduled as needed
 - CSTE Contact: Song Xue, sxue@cste.org
- **Overdose**
 - Call Schedule: Bimonthly, 2nd Thursday of the month at 1:00 pm ET
- **Prescription Drug Monitoring Program**
 - Call Schedule: Bimonthly, 4th Thursday of the month at 1:00 pm ET
- **Substance Use & Mental Health**
 - Call Schedule: Calls scheduled quarterly
- **Substance Use and Mental Health Indicators**
 - Call Schedule: Bimonthly, 3rd Monday of the month at 1:00 pm ET
- **Tribal Epidemiology**
 - Call Schedule: Calls scheduled quarterly
 - **Tribal Data Workgroup:** Calls scheduled monthly

- **Tribal Suicide Workgroup:** Calls scheduled monthly
- CSTE Contacts: Alyaa Altabbaa, altabbaa@cste.org or Jessica Arrazola, jarrazola@cste.org

Member Spotlight



This section highlights CSTE member projects and accomplishments in the areas of substance use and injury epidemiology, allowing readers to learn more about their colleagues in the field. Contact Mia Israel at misrael@cste.org with questions or to nominate yourself or others to be featured.



Casey Lyons, MPH, CPH is the opioid program evaluator at the Southern Plains Tribal Health Board, one of 12 federally mandated Tribal Epidemiology Centers focused on improving public health training and infrastructure in Indian Country. The Southern Plains Tribal Health Board serves 44 tribes across Oklahoma, Kansas, and Texas and aims to bring a cultural lens to all of their education and outreach efforts. With their CDC-funded Opioid Overdose in Tribal Communities grant, her team is working to build peer recovery support services in tribal communities, increase naloxone and PMP training for community members and their healthcare providers, and increase access to accurate data for tribes in the SPTHB's catchment area.

Previously, Casey managed opioid-related data programs for the Maryland Prescription Drug Monitoring Program within the Maryland Department of Health. Her role there required collaborating across the department to develop novel opioid surveillance protocols using PDMP,

medical examiner, syndromic, behavioral health treatment and EMS data sources. Casey is always happy to chat about substance use, mental health, surveillance and evaluation, especially with other early career epidemiologists!

Partner Announcements



This section includes announcements relevant to our substance use and injury members from CSTE partners. Contact Mia Israel at misrael@cste.org if you would like to submit an announcement.

Substance Use and COVID-19 Guidance

The National Institute on Drug Abuse (NIDA) recently released [a reminder](#) that people with substance use disorder may be particularly vulnerable for COVID-19. Additionally, the Substance Abuse and Mental Health Services Administration (SAMHSA) posted [COVID-19 guidance](#) providing potential flexibility for Opioid Treatment Programs (OTPs).

[Creating a Stronger Data Infrastructure for Suicide Prevention](#)

The Suicide Prevention Resource Center hosted a webinar on February 25 focused on [Data Infrastructure: Recommendations for State Suicide Prevention](#), a newly released supplement to the Infrastructure Recommendations. Participants learned about six concrete recommendations for creating infrastructure to support data-driven decision-making in suicide prevention. Presenters from Colorado and Texas shared examples of their states' data infrastructure. The webinar recording and slides are now available.

Journal of Cannabis Research Call for Papers

The Editors of [Journal of Cannabis Research](#) seek manuscripts for their new collection on the topic of hemp. They are interested in both original research and review papers, especially those that address developing medical and commercial uses of hemp and hemp products (such as cannabidiol) or differences between hemp and psychoactive cannabis.

Specific topics of interest include, but are not limited to: History, ethnobotany and domestication; Genetics, genomics, breeding, and synthetic biology; Plant Biology; Chemistry of hemp; CBD : medical effects, production and regulation; Hemp production and management; Fibre hemp; Seed and oils; New materials developed from hemp; Plant-microbe interactions; and Current status: regulation and policy. You can find out more and submit papers at this [website](#).

CDC: Drug Free Communities and Comprehensive Addiction Recovery Act Local Drug Crisis Grant Programs

White House Office of National Drug Control Policy (ONDCP) Director Jim Carroll announced the Fiscal Year (FY) 2020 Drug-Free Communities (DFC) Support Program's Notice of Funding Opportunity Announcement (NOFO), which begins this year's process of awarding funds to community coalitions focused on preventing youth substance use.

The National Center for Injury Prevention and Control (NCIPC) is currently funding drug overdose prevention programs in all 50 states, Washington DC, and four territories. NCIPC will now serve as the day-to-day managers of ONDCP's Drug-Free Communities (DFC) and the Comprehensive Addiction and Recovery Act Local Drug Crisis (CARA) grant programs. Visit the [official press release](#) to learn more.

Network for Public Health Law: Legality of Dispensing Naloxone to Minors in Maryland

Maryland now permits naloxone to be prescribed and dispensed to individuals who are not themselves at risk of overdose but may be in a position to assist those who are and provides for a statewide standing order that authorizes any Maryland-licensed pharmacist to dispense naloxone to "any individual" in the state. This [fact sheet](#) examines whether minors are included in the definition of "any individual" under the law.

Substance Abuse Journal Article: Regional and Temporal Effects of Naloxone Access Laws on Opioid Overdose Mortality

From Abstract: "Previous studies on whether NALs are effective in reducing opioid overdose mortality found somewhat contradictory results. Our study attempts to provide a more definitive answer to this question by utilizing an approach that matches NAL vs non-NAL states and stratifies by US region and years of implementation."

Authors concluded that naloxone access law effects have reduced fatal opioid-related overdose in western states but minimal or no effects for other regions. You can find out more and access the article [here](#).

JAMA Network: Association of Medicaid Expansion with Opioid Overdose Mortality in the United States

Researchers utilized data from 3109 counties within 49 states and the District of Columbia from January 1, 2001, to December 31, 2017 to examine whether Medicaid expansion is associated with

county × year counts of opioid overdose deaths overall and by class of opioid. Medicaid expansion was associated with reductions in total opioid overdose deaths and deaths involving heroin and synthetic opioids other than methadone. Expansion was associated with increased mortality involving methadone. Authors state the findings suggest that expanding eligibility for Medicaid may help to mitigate the opioid overdose epidemic. Access the article [here](#).

All In: Join an Affinity Group

Affinity groups offer peer-to-peer networking and serve in an informal advisory structure for All In to plan content on topic-specific areas. These groups provide a deep dive into Community Collaborative Dashboards, Data Law, Health and Housing, and Substance Use Data Sharing, Integration and Planning. To sign up for the affinity groups, please fill out this [survey](#). Once you complete the survey, you will be invited to join the All In online community groups to participate in discussions and drive next steps. Four groups have been convened thus far through phone calls and in-person meetings.

CDC: Brain Injury Awareness Month

Brain Injury Awareness Month is recognized every March. It provides an important opportunity to bring attention to the prevention of traumatic brain injury (TBI) and to promote strategies to improve the quality of life for people living with TBI and their loved ones. TBIs affect the lives of Americans of all ages. Anyone can experience a TBI, but data suggest that children and adults 65 and older are at greatest risk. Visit CDC's [webpage](#) to get the latest information on preventing TBIs and helping people recognize, respond, and recover if a TBI occurs.

Network for Public Health Law Webinar: The Public Health Impacts of Legalized Sports Betting

The NPHL will be holding this webinar March 19th from 1:00 PM – 2:30 PM ET.

In 2018, the Supreme Court issued a decision that allowed states to legalize sports betting. Since then, 14 states have legalized sports betting and, despite estimates that problem gambling has about twice the rate of suicide attempts as other addictions, few have included provisions to support problem gambling treatment. This panel will discuss policy and programmatic efforts to support people struggling with problem gambling as states are legalizing sports betting at a breakneck pace.

Find more information and register [here](#).

CDC Data Brief: Drug Overdose Deaths in the United States, 1999 – 2018

Using data from the National Vital Statistics System, researchers found that in 2018, there were

67,367 drug overdose deaths in the United States, a 4.1% decline from 2017 (70,237 deaths). The rate of drug overdose deaths involving synthetic opioids other than methadone (drugs such as fentanyl, fentanyl analogs, and tramadol) increased by 10%, from 9.0 in 2017 to 9.9 in 2018. Access the brief [here](#).

National Indian Health Board: Public Health Training E-Course

The National Indian Health Board (NIHB) is pleased to announce the release of an interactive e-course: Public Health Training. This e-course is intended to educate Tribal leaders and Tribal Advisory Committee (TAC) members on public health topics and provide information, including best practices, to support consultation on public health topics.

This course is part of NIHB's aim to strengthen the public health infrastructure of Tribal Nations; ensure a competent, current, and connected Tribal public health system; and improve the delivery of essential public health services through capacity-building. The training is publicly available to all interested people at no cost. Learn more about the course [here](#).

Resources



This section contains resources that might be valuable to substance use and injury epidemiologists.

1. "CSTE ICD-10-CM Injury Surveillance Toolkit: Guidance and Methods for Applied Injury Epidemiologists" available at <https://resources.cste.org/Injury-Surveillance-Methods-Toolkit/>
2. "CSTE Recommended Surveillance Indicators for Substance Abuse and Mental Health, Version 3" available for download at https://www.cste.org/resource/resmgr/crosscuttingi/CSTE_Substance_Abuse_and_Men.pdf
3. "Evaluation of a Mobile Device Survey System for Behavioral Risk Factors (SHAPE): App Development and Usability Study," Oakley-Girvan et al., available at https://formative.jmir.org/2019/1/e10246/?utm_source=TrendMD&utm_medium=cpc&utm_campaign=JMIR_Formative_Research_TrendMD_0
4. "Smart(phone) Approaches to Mobile App Data Collection," Miller et al., available at <https://www.surveypractice.org/article/4943-smart-phone-approaches-to-mobile-app-data-collection>.

5. “The Effect of Incomplete Death Certificates on Estimates of Unintentional Opioid-Related Overdose Deaths in the United States, 1999-2015” available online at *Public Health Reports*: <http://journals.sagepub.com/doi/10.1177/0033354918774330>
6. “Development of Indicators for Public Health Surveillance of Substance Use and Mental Health” available online at *Public Health Reports*: <http://journals.sagepub.com/doi/10.1177/0033354918784913>
7. “ICD-10-CM Official Guidelines for Coding and Reporting FY 2019 (October 1, 2018 - September 30, 2019)” available online from CDC and NCHS: <https://www.cdc.gov/nchs/icd/data/10cmguidelines-FY2019-final.pdf>
8. “Fact Sheet: Overdose Reporting Requirements” available from The Network for Public Health Law: https://www.networkforphl.org/resources_collection/2017/12/06/896/fact_sheet_overdose_reporting_requirements?blm_aid=263195
9. “Proposed Framework for Presenting Injury Data Using the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD–10–CM) Diagnosis Codes” available online from NCHS: <https://www.ncbi.nlm.nih.gov/pubmed/26828779>
10. “The Transition from ICD-9-CM to ICD-10-CM: Guidance for Analysis and Reporting of Injuries by Mechanism and Intent (ISW9), 2016” available online from Safe States Alliance: <https://www.safestates.org/general/custom.asp?page=ISWReports>

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