Sherry Frizell began her tenure with IDPH 23 years ago. Sherry worked in several different bureaus prior to beginning her current Program Planner position in the Division of Behavioral Health in 2005.

One of Sherry's main tasks is acting as contract manager for many of the Division's substance abuse prevention and treatment programs. She participates in contracting, including creating competitive application documents in accordance with IDPH and State of Iowa requirements and assuring appropriate and timely contract execution. Sherry tracks and monitors contract reimbursements through the SharePoint system and has conducted numerous webinars to assist contractors in navigating SharePoint.

Sherry is responsible for gathering fiscal information for the annual Substance Abuse Prevention and Treatment Block Grant application to SAMHSA, reporting actual expenses and projecting anticipated expenditures.

Sherry also leads IDPH's Anatomical Gift Public Awareness program. In close collaboration with the Iowa Donor Network, hospitals and non-profit entities are awarded grants to increase public knowledge of the anatomical gift program, with the majority of the program's funding expended to reimburse certain out-of-pocket expenses for transplant recipients and donors.

Sherry is happiest when surrounded by family, good friends, her cats, and dogs that she has “borrowed.”

**Director's Corner**

The following information was excerpted from the State of Iowa Outcomes Monitoring System Year 14 Evaluation Trend Report, published by the University of Iowa.

IDPH has worked with the Iowa Consortium for Substance Abuse Research and Evaluation at the University of Iowa on the Outcomes Monitoring System project (OMS) since 1999. In addition to annual OMS Reports, the Consortium also provides annual trend reports.

The OMS gathers data on substance abuse treatment outcomes in Iowa. Randomly selected clients from 23 IDPH-funded substance abuse treatment agencies are contacted for follow-up interviews by Consortium staff members. Interviews occur approximately six months after clients’ discharge from the treatment program.

The 2012 OMS trend report examines outcomes for clients admitted to substance abuse treatment between July 1, 1999 and December 31, 2011.

**Key points:**

- The two most often reported primary substances at admission and follow-up through all years were alcohol and marijuana.
- **Abstinence** at follow-up has ranged from 41% to 59% over all years.
- Approximately 60% of clients reported **arrests** at admission each year.
- Hospitalizations after treatment due to substance abuse related problems are reduced to one third (4%) of the pre-treatment hospitalization rate (12%).

However, over all years, fewer than 20% of clients reported arrests six months following treatment discharge.

- Compared to admission, more clients are employed six months following discharge from treatment. Over all years, an average of 67% of clients reported employment at follow-up compared to an average of 48% indicating employment at admission.

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New ATTC for Iowa

On October 1, 2012, the Substance Abuse and Mental Health Services Administration (SAMHSA) realigned the Addiction Technology Transfer Center (ATTC) Network regions to align with other U.S. Department of Health and Human Services (HHS) regions. With this change, Iowa became part of Region 7, along with Kansas, Missouri and Nebraska. Region 7 receives ATTC services from the Mid-America ATTC, at the University of Missouri-Kansas City, School of Nursing.

Pat Stilen, LCSW, is Director of the Mid-America ATTC. Pat has 30 years of experience in the field and has provided oversight and direction for projects at Mid-America since 1999. Her previous experience includes Clinical Trainer and Provider Relations for Magellan Behavioral Health; Executive Director of the Nebraska SUD training organization; and Executive Director of a women’s residential program in Omaha. Pat has been lead author on national curricula and chaired the NIDA/ATTC Blending Team on Motivational Incentives. Heather Gotham, PhD, is an associate research professor and clinical psychologist with expertise in evaluation, evidence-based practices, and technology transfer. Associate Director, Jan Wrolstad, M.Div., is a trainer on LGBTQI and motivational incentives and assists in curricula development. Alex Barajas-Muñoz, a doctoral student in counseling/psychology, provides training on clinical and cultural awareness topics.

Mid-America ATTC staff have met with state leaders in Iowa to plan potential collaboration for the coming year. Priority areas will likely include continued development of co-occurring capability, healthcare reform, medication assisted treatment, military issues, and telehealth options. Mid-America ATTC will provide trainers for and exhibit at the 2013 Governor’s Conference on Substance Abuse. For more information about Mid-America ATTC, visit their website at www.attcnetwork.org/midamerica.

SBIRT Update: Sioux City

SBIRT is an IDPH SAMHSA grant-funded project to implement Screening, Brief Intervention and Referral to Treatment services.

Sioux City’s SBIRT project is a collaboration between Jackson Recovery Centers and Siouxland Community Health Center. As with other SBIRT sites, health center staff provide screenings and brief interventions for individuals with possible substance use problems. Embedding SBIRT into general health care services is intended to normalize substance use issues and treat them like other health-related concerns. A substance abuse professional is co-located at the health center to provide brief treatment if needed, or to assist in making a referral for more intensive treatment services.

Cindy Kelly Retires

In case you haven't heard, Cindy Kelly has retired from IDPH after 30 years of service. Cindy began her work with the State as a prevention consultant with the Iowa Department of Substance Abuse, before it merged with IDPH in 1986. Cindy has served as training manager for the Division of Substance Abuse, bureau chief for the Bureau of Prevention and Training, and, more recently, as a program licensure surveyor.

Cindy says she'll miss the great people and programs she's worked with over the years but it's time to enjoy retirement!

Raising Awareness about Problem Gambling

A new health promotion campaign was launched in December to help Iowans evaluate their gambling behavior. The campaign -- “Get Help Before You Go Too Far” -- is in response to the 2011 Gambling Attitudes and Behaviors Study which found that approximately 13% of adult Iowans had experienced one or more symptoms of pathological or problem gambling in the previous 12 months, or thought they might have a gambling problem.

Viewers of the :30 television spot or web banners will be referred to www.1800BetsOff.org and 1-800-BetsOff to take the three-question Brief Biosocial Gambling Screen. Iowans who answer “yes” to any of the questions will be encouraged to call 1-800-BetsOff or contact the IDPH gambling treatment provider in their area for help and further evaluation.

Contact Mark Vander Linden at mark.vanderlinden@idph.iowa.gov for more information.

IDPH Receives Adolescent Treatment Grant

IDPH was recently awarded a three-year, $1 million SAMHSA State Adolescent Treatment Enhancement and Dissemination grant. Iowa’s project is entitled Families in FOCUS.

Through a competitive RFP process, IDPH selected two providers -- Prairie Ridge in Mason City and Youth and Shelter Services in Ames -- to serve as learning laboratories or FOCUS Centers of Excellence. Both programs will implement evidence-based practices and provide expanded services to youth and their families. Learning lab activities will be expanded to other providers in year two of the project.

For more information about Families in FOCUS, contact Lonnie Cleland at 515-281-3763 or at Lonnie.Cleland@idph.iowa.gov.
Juvenile Justice Reform Project

The Iowa Department of Human Rights Division of Criminal and Juvenile Justice Planning (CJJP) has received a three-year, $750,000 grant from the federal Office of Juvenile Justice and Delinquency Prevention. Implementation of specific evidence-based approaches and cost measurement tools will help juvenile court services in the 1st, 3rd, and 6th judicial districts determine the effectiveness of program services and match the right programs to the right juvenile offender at the right times.

Through the Standardized Program Evaluation Protocol and the Results First cost-benefit analysis model, Iowa’s juvenile justice system will measure the effectiveness of current program services against delinquency and program research, and allow policymakers to test different combinations of programs and policies to make the best use of taxpayer dollars, while improving public safety.

CJJP administrator, Paul Stageberg, Ph.D, states “Implementation of these tools will give juvenile courts a clearer picture of the programs that work with juvenile offenders and which programs are cost effective. Even more exciting is that programs will be identified that will reduce recidivism and be more effective for certain types of juvenile offenders.”

CJJP is partnering with the chief Juvenile Court Officers, the Iowa Collaboration for Youth Development, and the Iowa Department of Corrections in implementing the Juvenile Justice Reform Project.

National Drug Facts Week

National Drug Facts Week is an opportunity for teens to interact with scientists and other experts about drug abuse.

You can support National Drug Facts Week by hosting and promoting an event between January 28 and February 3, 2013. The National Institute on Drug Abuse (NIDA) has a toolkit with step-by-step suggestions for planning and promoting your event.

To learn more about National Drug Facts Week or to access the toolkit, visit the NIDA website at http://drugfactsweek.drugabuse.gov/.

Technical Assistance - Multi-Occurring Services

Through a continuing contract with the Iowa Department of Human Services, Dr. Ken Minkoff and Dr. Christie Cline are available to provide in-person technical assistance in 2013.

There are several opportunities available to receive direct guidance, information, and personalized training. The technical assistance can help an agency, program, or local collaborative get started, develop ongoing quality assurance processes, and establish timelines. Upon completion of the in-person technical assistance, each organization will receive a written report and suggestions for additional efforts toward becoming more multi-occuring capable.

For more information, contact Mary Mohrhauser at 515-242-5881 or at MMohra@dhs.state.iowa.us.

beSomebody Campaign

“beSomebody” is a social norming campaign initiated by Siouxland CARES in Woodbury County that focuses on good citizenship, role modeling, reducing bullying, and eliminating substance abuse. The initiative was the result of community leaders coming together to talk about the problems of substance abuse and related violence issues. Their belief and their message is that somebody must communicate positive and uplifting messages to young people, young adults, and parents.

The beSomebody campaign uses both traditional and social media, such as billboards, newsletters, public service radio announcements, video contests, and texting to communicate their positive and empowering message.

Fast Facts from the Consortium

Alcohol Use among Older Adults

Epidemiological studies of alcohol misuse in older adults typically use one of two strategies to identify problem alcohol use: the amount of alcohol consumed or clinical diagnoses of abuse or dependence. The amount of alcohol consumed can evaluate hazardous drinking levels and is usually assessed through questionnaires or interviews. Ideally, clinical diagnoses are derived using structured interviews based on DSM-IV criteria. While other methods such as screening tools are available, they usually over-identify cases and thus may not be ideal for estimating the prevalence of problems in a population.

Over 50% of the US adult population drinks alcohol at least monthly. The prevalence of people who drink any alcohol goes down with age, but between approximately 4% and 14% of older adults appear to be in a hazardous drinking range. Much of this (percent) difference occurs because of variations in the definitions of hazardous use in this population. Adding a “no more than” qualifier to a specified number of drinks (e.g., two or three) on a given day can have a dramatic effect on the prevalence estimate. For example, an older person might drink rarely over the month, but indulge in drinking three cans of beer or 3 glasses of wine at a special event. Using average drinks per day, this person is well within the moderate use category. But adding a maximum of two drinks a day to the criterion makes the same person a hazardous drinker. Thus, the range, 4% to 14%, represents a continuum of hazard. Considering the actual number of affected people in the United States, there are between 1.6 million very hazardous to at least 5.6 million hazardous older drinkers.

Excerpted from a book chapter currently being written by Stephan Arndt, PhD and Susan Schultz, MD, University of Iowa.

Watch for more “fast facts” from the Iowa Consortium for Substance Abuse Research and Evaluation at the University of Iowa.
Disaster Distress Hotline

When a tragic event happens, many people experience strong emotions which can elicit memories of past loss and grief.

SAMHSA, the federal Substance Abuse and Mental Health Services Administration, offers assistance to those in need through the Disaster Distress Helpline, the nation’s first permanent hotline dedicated to disaster crisis counseling. This free, confidential, and multilingual support service is available 24 hours a day, 7 days a week via telephone (1-800-985-5990) and SMS (Text “TalkWithUs” to 66746 or, for Spanish-speakers, Text “Hablanos” to 66746). Callers are connected to trained and caring professionals who provide confidential counseling, referrals, and other needed support services.

In addition, SAMHSA’s Disaster Technical Assistance Center (DTAC) has free downloadable resources about coping with grief, how to talk with children and youth about disasters and traumatic events, and other helpful materials.

For more information, visit the DTAC website at http://www.samhsa.gov/dtac/dbhis/, email DTAC at DTAC@samhsa.hhs.gov, or call the toll-free hotline at 1-800-308-3515.

Disaster Self-Care Quick Tips
1. Take care of yourself
2. Reach out to friends and family
3. Talk to your children
4. Get enough “good” sleep
5. Know when to ask for help

State of Iowa Youth Advisory Council

The State of Iowa Youth Advisory Council (SIYAC) is a non-partisan policy-advising body comprised of 21 voting members and three non-voting members. In 2009, SIYAC became a statutory responsibility of the Iowa Department of Human Rights’ under Iowa Code 216A.140.8 with oversight by the Iowa Collaboration for Youth Development. SIYAC was originally established as a vehicle for youth to provide input to the Governor, General Assembly, and state and local policymakers on issues of interest to youth.

SIYAC members are young people between the ages of 14 and 20 from across Iowa. The council strives to be representative of all Iowa youth.

SIYAC has taken on two very important partnerships this past year and plans to take on more as the 2013 legislative session unfolds. SIYAC has partnered with IDPH to provide input to and to promote the Your Life Iowa program. Implemented by Boys Town through a contract with IDPH, Your Life Iowa provides resources to prevent teen bullying and suicide. The program includes a hotline, text to chat, as well as a website of helpful resources for both teens and adults.

Policy-makers have recognized the importance of a “go-to” resource where youth, parents, and educational professionals can find the answers they need to prevent bullying. SIYAC is promoting Your Life Iowa by spreading the word about the program throughout the state, and by helping IDPH write its first legislative report on the program.

SIYAC has also partnered with the Iowa Youth Congress (IYC) on legislative bills to define cyber-bullying and to require the use of motorcycle helmets. SIYAC plans to help the IYC develop position statements and support related bills as they move through the 2013 Legislature.

SIYAC has flourished this year in many areas and plans to continue with successes throughout the following year. For more information about SIYAC, go to www.icyd.iowa.gov/SIYAC. 

For more information about the Division of Behavioral Health, visit www.idph.state.ia.us/bh

For questions related to “A Matter of Substance,” contact the editors: Kevin Gabbert (kevin.gabbert@idph.iowa.gov) or Julie Hibben (julie.hibben@idph.iowa.gov)