

# Effective Models to Address Mental Health and Substance Use Disorders

STRATEGIES FOR SUCCESSFUL AND EQUITABLE ABATEMENT USING OPIOID SETTLEMENT DOLLARS



DECEMBER 5, 2024  
1:00-3:30 PM ET

NATIONAL  
ACADEMIES

Sciences  
Engineering  
Medicine

THE FORUM ON MENTAL HEALTH  
AND SUBSTANCE USE DISORDERS

**Attendee Packet**  
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**Effective Models to Address Mental Health and Substance Use Disorders:  
Strategies for Successful and Equitable Abatement Using Opioid Settlement Dollars**

**December 5, 2024**

**1-3:30 PM ET**



**WELCOME**

<b>1:00 PM ET</b> (5-min)	<b>Margarita Alegría, PhD</b> Professor, Department of Psychiatry Harvard Medical School Chief, Disparities Research Massachusetts General Hospital <i>Forum Co-chair</i>
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**EFFECTIVE AND COST-EFFECTIVE  
MHSUD MODELS OF CARE IN DIFFERENT SETTINGS**

<b>1:05 PM ET</b> (30-min)	<b>Sarah Wakeman, MD</b> Senior Medical Director for Substance Use Disorder at Mass General Brigham Medical Director for the MGH Substance Use Disorder Initiative Director of the Program for Substance Use and Addiction Services, MGH Division of General Internal Medicine  <b>Michael Dennis, PhD</b> Senior Research Psychologist Director, Lighthouse Institute Chestnut Health Systems
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**EVIDENCE FROM MEDICARE/MEDICAID  
1115 WAIVER SUCCESSES**

<b>1:35 PM ET</b> (15-min)	<b>Danielle Daly, PhD</b> Director of the Division of Monitoring and Evaluation Center for Medicaid and CHIP Services
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**SPENDING ABATEMENT DOLLARS: STATE EXAMPLES**

<p><b>1:50 PM ET (45-min)</b></p>	<p><b>Moderator: Yngvild Olsen, MD, MPH</b> Director of the Center for Substance Abuse Treatment Substance Abuse and Mental Health Services Administration</p> <p><b>Katie Greene, MPP</b> Project Director, Public Health National Academy for State Health Policy</p> <p><b>Jim Wilkerson, LCPC</b> Statewide Opioid Settlement Administrator Administrator of Gambling Programs Illinois Department of Human Services</p> <p><b>Kelly Crosbie, MSW, LCSW</b> Director Division of Mental Health, Developmental Disabilities, and Substance Use Services North Carolina Department of Health and Human Services</p>
	<p><b>PANEL DISCUSSION</b> <b>USING DOLLARS TOWARD MORE EFFECTIVE TREATMENT</b></p>
	<p><b>Moderator: Bradley D. Stein, MD, PhD</b> Director, Opioid Policy Tolls, and Information Center Senior Physician Policy Researcher Rand</p>
	<p><b>Lisa Saldana, PhD</b> Senior Research Scientist Lighthouse Institute Associate Director Chestnut Health Systems</p> <p><b>Brendan Saloner, PhD</b> Bloomberg Associate Professor of American Health Johns Hopkins Berman Institute of Bioethics</p>
<p><b>AUDIENCE Q&amp;A</b></p>	
<p><b>3:00 PM ET (20-min)</b></p>	<p><b>Moderator: Rosalie Liccardo Pacula, PhD</b> Professor and Elizabeth Garrett Chair in Health Policy, Economics &amp; Law Health Policy and Management Department, Sol Price School of Public Policy Research Fellow, Schaeffer Center for Health Policy &amp; Economics Co-Director Institute for Addiction Sciences Policy Affinity Group</p>

	University of Southern California <i>Forum Co-chair</i>
<b>REFLECTION</b>	
<b>3:20 PM ET</b> (10-min)	<b>Carlos Blanco, MD, PhD</b> Director, Division of Epidemiology, Services, and Prevention Research National Institute on Drug Abuse <i>Forum member</i>
<b>3:30 PM ET</b>	<b>ADJOURN</b>

***Effective Models to Address Mental Health and Substance Use Disorders:  
Strategies for Successful and Equitable Abatement Using Opioid Settlement Dollars***

**December 5, 2024**

**1pm—3:30pm ET**

**Rationale**

The DSM-5 considers opioid use disorder (OUD) and other substance use disorders (SUDs) as mental health conditions that affect a person's brain and behavior. The neurological impacts on the brain make it difficult for some consumers to control their subsequent use of substances. OUD and SUDs are preventable and treatable conditions. However, increased prescription and availability of opioids in the 1990s triggered an opioid epidemic that has killed nearly one million Americans between 1999 through 2020 according to the CDC.

As a result of these deaths and the enormous societal costs imposed by the opioid epidemic, numerous local and state jurisdictions engaged in litigation against opioid manufacturers and distributors, resulting in two separate Master Settlement Agreements (one in 2021 and the other in 2022) totaling \$56 billion to be allocated to these participating jurisdictions for damages. The majority of the funds must be used for abatement of the opioid epidemic, addressing present and future harms from opioid misuse, including expanding the treatment infrastructure to address OUD.

While numerous guides have been produced providing evidence-based strategies by experts in the field, the question on how best to use these funds to set up and sustain evidence-based treatment models for addiction have not been carefully considered in many jurisdictions, nor has the importance of integrating this care with mental health needs. As the settlement dollars are beginning to flow to jurisdictions, there is an urgent need to discuss promising models of care and the infrastructure needed to support the delivery of these models of care.

Discussion topics may include:

- Policy implications of selected abatement interventions
- The importance of effective, affordable treatment for reducing future harms
- Effective care models for OUD/SUD
- How care models can integrate mental health services and social determinants of health, and improve outcomes
- Addressing equity issues in access to effective, affordable, and appropriate treatments
- Measuring performance for addiction treatment, inclusive of equity and mental health concerns

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## Speaker and Moderator Roster

### **Margarita Algeria, PhD**

Professor, Department of Psychiatry  
Harvard Medical School  
Massachusetts General Hospital

### **Carlos Blanco, MD, PhD**

Director, Division of Epidemiology, Services,  
and Prevention Research  
National Institute on Drug Abuse,  
NIH

### **Kelly Crosbie, MSW, LCSW**

Director, Division of Mental Health,  
Developmental Disabilities, Substance  
Use Services  
North Carolina Department of  
Health and Human Services

### **Danielle Daly, PhD**

Division Director at Centers for  
Medicare and Medicaid Services

### **Michael Dennis, PhD**

Director, Lighthouse  
Institute, Research  
Division of Chestnut  
Health Systems

### **Katie Greene, MPP**

Project Director, National Academy for  
State Health Policy

### **Yngvild K. Olsen, MD, MPH**

Director, Center for Substance  
Abuse Treatment

### **Rosalie Liccardo Pacula, PhD**

Professor  
Elizabeth Garrett Endowed Chair in  
Health Policy, Economics, and Law  
University of Southern California

### **Lisa Saldana, PhD**

Senior Research Scientist  
Associate Director, Lighthouse Institute  
Chestnut Health Systems

### **Brendan Saloner, PhD**

Professor of American Health in  
Addiction and Overdose  
Department of Health Policy  
Management  
John Hopkins Bloomberg School of  
Public Health

### **Bradley Stein, PhD, MPH**

Director, RAND Opioid Policy Center of  
Research Excellence

### **Sarah E. Wakeman, MD**

Senior Medical Director for Substance Use  
Disorder, Medical Director, Substance Use &  
Addiction Services  
Associate Professor of Medicine at Harvard  
Medical School  
Mass General Brigham

### **Jim Wilkerson, MS**

Interim State Opioid Settlement Administrator  
Illinois Department of Human Services, Division  
of Substance Use Prevention and Recovery

## Speaker Bios

**Margarita Alegría, PhD**, is the Chief of the Disparities Research Unit at the Massachusetts General Hospital and a Professor in the Departments of Medicine and Psychiatry at Harvard Medical School. From 2002-2015 she was the Director of the Center for Multicultural Mental Health Research at Cambridge Health Alliance, and was previously the Director of the Center for Evaluation and Sociomedical Research at the University of Puerto Rico. Dr. Alegría has been a Professor in the Department of Psychiatry at Harvard Medical School since 2004. Throughout her career, she has remained dedicated to generating knowledge that can be used to increase equity in health outcomes and healthcare services for disadvantaged and minority populations. Dr. Alegría's research has integrated three methods: a multidisciplinary and multisectorial approach to research; a multi-level framework which gives necessary consideration to environmental and social context, the individual and family system; and a strong focus on which aspects of culture and context need to be addressed to improve health, as well as service delivery for diverse populations. Dr. Alegría is currently the Principal Investigator (PI) of three National Institutes of Health (NIH)-funded research studies: Building Community Capacity for Disability Prevention in Minority Elders; Mechanisms Underlying Racial/ Ethnic Disparities in Mental Disorders; and The Impact of Medicaid Plans on Access to and Quality of Substance Use Disorder (SUD) Treatment. She is also the PI of a grant funded by the William T. Grant Foundation, entitled Using the Experience of Majority and Minority Status Through Photovoice. Dr. Alegría has published over 200 papers, editorials, intervention training manuals, and several book chapters, on topics such as improvement of health care services delivery for diverse racial and ethnic populations, conceptual and methodological issues with multicultural populations, and ways to bring the community's perspective into the design and implementation of health services. Dr. Alegría obtained her B.A. in Psychology from Georgetown University in 1978 and her Ph.D. from Temple University in 1989.

**Carlos Blanco, PhD**, is the Director of the Division of Epidemiology, Services, and Prevention Research at the National Institute on Drug Abuse (NIDA), a component of the National Institutes of Health. Dr. Blanco is a national known expert in the epidemiology and treatment of addictive disorders with and without comorbid disorders. His accomplishments include, among others, a detailed examination of the course and stages of substance use disorders, the development of methods to quantify the generalizability of clinical trials, the development and testing of interventions that combine motivational interviewing with cognitive-behavioral therapy to improve retention and outcome in individuals with addictive disorders, and the creation of a virtual map of psychiatric disorders, based on empirical data, to guide research into the causes of mental disorders. Prior to joining NIDA, Dr. Blanco was Professor of Psychiatry at Columbia University Medical Center and a Research Psychiatrist at the New York State Psychiatric Institute. He is a graduate of Universidad Autónoma de Madrid (Spain) and completed his psychiatry residency at Columbia University, where he also completed a research fellowship. Dr. Blanco has authored over 200 peer-reviewed publications.

**Kelly Crosbie, MSW, LCSW**, brings over 30 years of experience in providing and managing public services and supports for people with mental health and substance use issues, intellectual and developmental disabilities, and brain injury. In her current role as the Director of the NCDHHS Division of Mental Health, Developmental Disabilities, and Substance Use Services (DMH/DD/SUS), Kelly oversees the public community-based system for mental health, intellectual and other developmental disabilities, substance use, and traumatic brain injury in North Carolina. For the past 13 years, Kelly has served in multiple leadership roles within NC DHHS, including Assistant Director

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of Behavioral Health at NC Medicaid, Chief Operating Officer of NC Medicaid, and the Chief Quality and Population Health Officer at NC Medicaid. Kelly is proud to be a licensed clinical social worker and person with lived experience.

**Danielle Daly, PhD**, is the Division Director for the Division of Demonstration Monitoring and Evaluation at CMS. She holds a PhD from the University of the Sciences in Philadelphia, and has spent more than 10 years in health services research aimed at underserved and vulnerable populations. Her division at CMS focuses on establishing the monitoring and evaluation expectations for states' section 1115 demonstrations, and working with states to execute the expectations. In that role, her division also oversees and directs federal monitoring and evaluation activities related to section 1115 demonstrations, including but not limited to SUD section 1115 demonstrations.

**Michael L. Dennis, PhD**, is a senior research psychologist and director of the Lighthouse Institute (Research Division) of Chestnut Health Systems in Bloomington, IL.

**Katie Greene, PhD**, is a director at the National Academy for State Health Policy (NASHP), where she works on projects related to substance use and public health, including public health modernization and immunization. Prior to joining NASHP in April 2022, Katie worked as an assistant research director at the Duke-Margolis Center for Health Policy and a program director for the National Governor's Association (NGA), where she supported governors in the public health response to the COVID-19 pandemic and co-led a joint health and public safety opioid response team. Previously, Katie served as senior policy advisor and associate director of the Office of Intergovernmental and Public Liaison at the White House Office of National Drug Control Policy and deputy director of Federal Relations for Arizona Governor Janet Napolitano. She holds an MPP from the Princeton School of Public and International Affairs and a BA from Duke University.

**Yngvild K. Olsen, MD, MPH**, serves as the Director for the Center for Substance Abuse Treatment (CSAT). She has a long history of working within the addiction treatment field to expand access to care and enhance quality. Dr. Olsen has held numerous senior volunteer leadership positions in the field of addiction medicine. These have included vice president of the American Society of Addiction Medicine, president of the Maryland Association for the Treatment of Opioid Dependence, and president of the Maryland/DC Society of Addiction Medicine. She also has served on the boards of the National Council on Alcohol and Drug Dependence-Maryland, and Stop Stigma Now, and as a clinical expert to the Providers Clinical Support System (PCSS). After graduating from Harvard Medical School, Dr. Olsen completed residency training in internal medicine and served as primary care chief resident at Boston Medical Center. She completed a Fellowship in General Internal Medicine at Johns Hopkins, during which time she received a Master in Public Health degree from the Johns Hopkins Bloomberg School of Public Health. Dr. Olsen has written and lectured extensively on opioid use disorder and its treatments, the stigma of addiction, the integration of behavioral health and medical care, and clinical and policy solutions to the overdose epidemic. She draws inspiration from the opportunity to provide care for people with substance use disorders as an addiction medicine specialist and general internist.

**Rosalie Liccardo Pacula, PhD**, holds the Elizabeth Garrett Chair in Health Policy, Economics & Law at the Sol Price School of Public Policy, University of Southern California and is a Senior Fellow with the Leonard D. Schaeffer Center for Health Policy & Economics, where she co-directs the RAND-

USC Schaeffer Opioid Policy Tools & Information Center of Excellence (OPTIC) in addition to leading numerous National Institute of Health funded studies examining the impact of federal, state and local laws on the supply, demand and access to treatment for intoxicating substances. Previously she spent 21 years at the RAND Corporation, serving as co-director of RAND's Drug Policy Research Center for 15 of those years, working on drug policy studies for the U.S. Office of National Drug Control Policy, U.S. Centers for Disease Control and Prevention, European Commission, and the U.K. Home Office. She served on NIDA's National Advisory Council Cannabis Policy Workgroup (2017), the Substance Abuse and Mental Health Services Administration (SAMHSA's) technical advisory committee on preventing cannabis use among youth (2020-present), the World Health Organization's Technical Expert Committee on Cannabis Use and Cannabis Policy (December 2019-2020), the National Academy of Sciences, Engineering and Medicine Committee on the Review of Specific Programs in the Comprehensive Addiction and Recovery Act (2021 – present), the CDC's National Injury Prevention's Board of Scholarly Counsellors (2021-present), and is currently President of the International Society for the Study of Drug Policy (2019-present). Dr. Pacula is a graduate from the Santa Clara University and received her doctorate in economics from Duke University.

**Lisa Saldana, PhD**, is the Associate Director and Senior Research Scientist at Chestnut Health Systems Lighthouse Institute and Director for the Center for Implementation Science at Lighthouse Institute. She has a research emphasis on advancing the use of evidence-based practice in public serving systems. A clinical psychologist by training, she is an NIH-funded implementation scientist focused on the development, evaluation, and implementation of prevention-focused EBPs. Lisa has led a multidisciplinary team of researchers and together during their time at Oregon Social Learning Center (OSLC), they developed the Stages of Implementation Completion ®(SIC) and Cost of Implementing New Strategies (COINS) tools that have been widely adopted to measure, track, and facilitate implementation process, milestones, and resource use for different behavioral and physical healthcare programs worldwide. Lisa is the developer of the Just Care for Families continuum of care service model providing prevention and intervention to families, addressing the social determinant of health needs for parents experiencing or at-risk for opioid and methamphetamine use disorders. While at OSLC, she and her team also developed and implemented the Families Actively Improving Relationships (FAIR) ® evidence-based model, an integrative treatment for child welfare involved families and the R3 supervisor implementation strategy for the child welfare workforce. She serves as a mentor to many emerging scientists with an interest in implementation science and evidence-based practice, particularly in her role as Core Faculty with the Implementation Research Institute (IRI) an R25 at Washington University. She has the privilege of collaborating with investigators and community partners throughout the country on a number of federally funded projects.

**Brendan Saloner, PhD**, is a Bloomberg Professor of American Health in Addiction and Overdose in the Department of Health Policy and Management. One strand of his research focuses on access and quality of care for people with mental health and substance use disorders. He received an early career award from the National Institute on Drug Abuse (NIDA) to study the effects of Medicaid expansion under the Affordable Care Act on treatment for opioid use disorder. He co-leads the Johns Hopkins team under the Bloomberg Overdose Prevention Initiative, a \$120 million investment in overdose reduction focused on seven states. A second strand of his research focuses specifically on health care for people in the criminal legal system. He has received grants from NIDA and Arnold Ventures to investigate medications for opioid use disorder among incarcerated

people. He is currently evaluating the statewide expansion of addiction treatment in Maryland county detention facilities. Finally, Professor Saloner maintains an active research program in bioethics. He led a Making a Difference grant supported by the Greenwall Foundation to study resource allocation in jails and prisons during the COVID-19 pandemic. He received the Greenwall Faculty Scholars Award in 2023 for a project focused on ethical issues related to mandated addiction treatment for people in the criminal legal system. Professor Saloner is extensively involved in mentorship and teaching, and directs the PhD program in Health Policy and Management.

**Bradley D. Stein, MD, PhD, MPH** is a practicing psychiatrist and a Senior Physician Policy Researcher at the RAND Corporation. A health services and policy researcher and clinician experienced in working with individuals with substance use disorders, Dr. Stein's research activities focus on better understanding and improving the quality of care provided to individuals with mental health and substance abuse disorders being treated in community settings. In recent years, much of Dr. Stein's work has focused on the opioid crisis, serving as PI or co-PI on twelve federal and privately funded studies related to the opioid crisis, and he is currently the Director of the NIDA funded Opioid Policy, Tools, and Information Center of Research Excellence. Dr. Stein has also worked in the area of school mental health, developing, evaluating, implementing, and disseminating a school-based intervention for students exposed to trauma and violence as well as a school-based suicide intervention program's implementation. In addition, he has examined the mental health and substance abuse care of a broad range of Medicaid enrollees, including children and adults with depression, children with ADHD, children with autism, children receiving psychotropic medications, and individuals with opioid use disorder and other substance use disorders. Dr. Stein previously served as the Senior Director of Research, Evaluation, and Outcomes at Community Care Behavioral Health, a large non-profit academically affiliated managed behavioral health organization. He has testified to Congress on issues related to the opioid crisis, as well as publishing multiple peer reviewed articles in a range of journals including the Journal of the American Medical Association, Health Affairs, the Milbank Quarterly, and the Journal of the American Academy of Child and Adolescent Psychiatry on topics related to access to and quality of treatment for mental health and substance use disorders, and the effects of state and federal policies on such treatment.

**Sarah E. Wakeman, MD** is the Senior Medical Director for Substance Use Disorder at Mass General Brigham in the Office of the Chief Medical Officer, Medical Director for the Mass General Hospital Program for Substance Use & Addiction Services, program director of the Mass General Addiction Medicine fellowship, and an Associate Professor of Medicine at Harvard Medical School. She received her A.B. from Brown University and her M.D. from Brown Medical School. She completed residency training in internal medicine and served as Chief Medical Resident at Mass General Hospital. She is a diplomate and fellow of the American Board of Addiction Medicine and board certified in Addiction Medicine by the American Board of Preventive Medicine. She served on Massachusetts' Governor Baker's Opioid Addiction Working Group. Nationally, she serves on the American Society of Addiction Medicine Ethics Committee. Clinically she provides specialty addiction and general medical care in the inpatient and outpatient setting at Mass General Hospital and the Mass General Charlestown Health Center. Her research interests include evaluating models for integrated substance use disorder treatment in general medical settings, low threshold treatment models, recovery coaching, physician attitudes and practice related to substance use disorder, and screening for substance use in primary care.

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**Jim Wilkerson, MS** serves as the Interim State Opioid Settlement Administrator (SOSA) overseeing the Office of the Opioid Settlement Administration (OOSA) for the Illinois Department of Human Services, Division of Substance Use Prevention and Recovery (IDHS/SUPR). Jim holds a master's degree in Rehabilitation Counseling from the University of Illinois, Urbana-Champaign, and is a Licensed Clinical Professional Counselor in Illinois. He is an Adjunct-Professor teaching at Millikin University, a 2021 Operational Research Society Griffiths Medal winner, and an Institute on Rehabilitation Issues (IRI) Scholar.

## Readings and Resources

Centers for Medicare & Medicaid Services. 1115 Demonstration Federal Evaluation & Meta-Analysis. <https://www.medicaid.gov/medicaid/section-1115-demonstrations/1115-demonstration-monitoring-evaluation/1115-demonstration-federal-evaluation-meta-analysis/index.html>

Illinois Opioid Settlements Initiative. <https://www.ilopioidsettlements.com/>.

KFF. Find Out How Much Opioid Settlement Cash Your Locality Received.

<https://kffhealthnews.org/news/article/lookup-how-much-opioid-settlement-cash-by-locality/>.

KFF. Section 1115 Medicaid Waiver Watch: A Closer Look at Recent Approvals to Address Health Related Social Needs. <https://www.kff.org/medicaid/issue-brief/section-1115-medicaid-waiver-watch-a-closer-look-at-recent-approvals-to-address-health-related-social-needs-hrsn/>.

Just Care for Families. <https://justcareforfamilies.org/>.

National Association of Counties. Promising Practices for Collaboration on State and Local Opioid Settlement Spending: Case Studies from Colorado, Indiana, Minnesota, North Carolina, and Virginia. [https://www.naco.org/sites/default/files/2024-06/NACo\\_NASHP\\_State%20Local%20Case%20Studies\\_v2.pdf](https://www.naco.org/sites/default/files/2024-06/NACo_NASHP_State%20Local%20Case%20Studies_v2.pdf).

NIH HEAL Initiative. Overdose Crisis Community Decision Tool. <https://hcs.rti.org/decision-tool.html>.

North Carolina Department of Health and Human Services. NC Opioid Settlement Resources. <https://www.ncdhhs.gov/about/department-initiatives/overdose-epidemic/nc-opioid-settlement-resources>.

RAND. 2023. Expert Views on State Policies to Improve Engagement and Retention in Treatment for Opioid Use Disorder. [https://www.rand.org/pubs/external\\_publications/EP70324.html](https://www.rand.org/pubs/external_publications/EP70324.html).

RAND. 2019. Where Science Says to Spend any U.S. Opioid Settlement Money. <https://www.rand.org/pubs/commentary/2019/12/where-science-says-to-spend-any-us-opioid-settlement.html>.

SAMHSA's Strategic Plan, 2023-2026, <https://www.samhsa.gov/sites/default/files/samhsa-strategic-plan.pdf>.

SAMHSA Webinar: Examining the Use of Braided Funding for Substance Use Disorder Services (YouTube) <https://www.youtube.com/watch?v=gX9cgi8ZbQE>.

Scott CK, Dennis ML, Grella CE, Mischel AF, Carnevale J. The impact of the opioid crisis on U.S. state prison systems. *Health Justice*. 2021 Jul 24;9(1):17. <https://pubmed.ncbi.nlm.nih.gov/34304335/>.

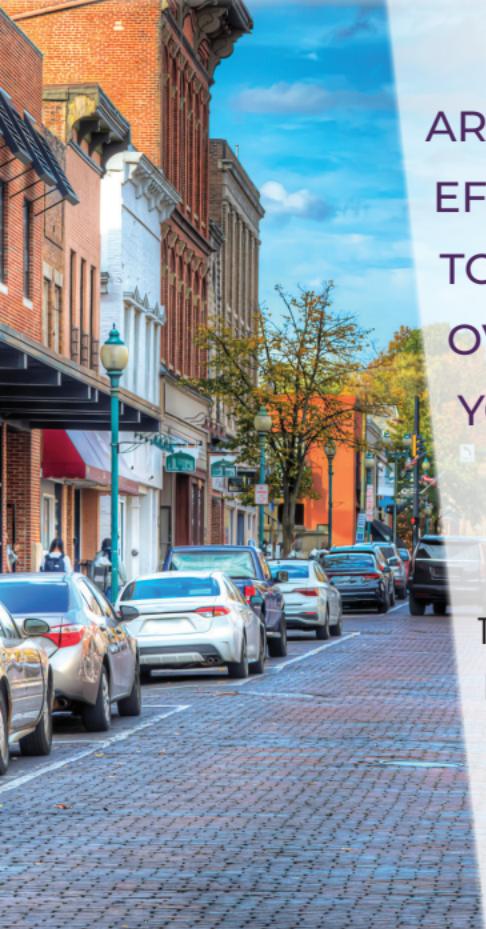
Scott CK, Dennis ML, Grella CE, Kurz R, Sumpter J, Nicholson L, Funk RR. A community outreach intervention to link individuals with opioid use disorders to medication-assisted treatment. *J Subst Abuse Treat*. 2020 Jan;108:75-81. <https://pubmed.ncbi.nlm.nih.gov/31399271/>.

## Readings and Resources

Sharfstein JM, Olsen Y. How Not to Spend an Opioid Settlement. JAMA Health Forum. 2020 Jan 23;1(1):e200025. <https://pubmed.ncbi.nlm.nih.gov/36218535/>.

Vital Strategies. Opioid Settlement Funds: State-Level Guides for Community Advocates. <https://www.vitalstrategies.org/resources/opioid-settlement-funds-state-level-guides-for-community-advocates/>.

<https://www.opioidsettlementtracker.com/settlementspending>.



# ARE YOU SEEKING EFFECTIVE STRATEGIES TO REDUCE OPIOID OVERDOSE DEATHS IN YOUR COMMUNITY?

The **Overdose Crisis Community Decision Tool** is a free web-based tool that assists community decision-makers and leaders in selecting strategies to reduce opioid overdose deaths.

## What does the tool provide?

- » A **customized list of evidence-based strategies to reduce opioid overdose deaths** matched to your community's goals, needs, and resources.
- » **Practical guidance and resources for getting started.**
- » **Real-world examples from the HEALing Communities Study** of how communities put overdose reduction strategies into practice.

NIH  
**HEAL**  
INITIATIVE

HEALing Communities Study

[hcs.rti.org](http://hcs.rti.org)



## Who can benefit from the tool?

- Members of community coalitions and settlement council.
- Elected officials and leaders involved in opioid overdose reduction planning.
- Anyone responsible for decisions related to the use of funds designated for the overdose crisis response.
- People interested in learning about effective strategies to reduce opioid overdose.

## Scan here to access the tool:



This tool was developed through the National Institutes of Health's HEALing Communities Study. For more information, visit [hcs.rti.org](http://hcs.rti.org).

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ENDING THE OPIOID OVERDOSE EPIDEMIC, TOGETHER.

## FORUM ON MENTAL HEALTH AND SUBSTANCE USE DISORDERS

Behavioral health and substance-related disorders affect approximately 20 percent of Americans. Of those with a substance use disorder, approximately 60 percent also have a mental health disorder. These disorders account for a substantial burden of disability, have been associated with an increased risk of morbidity and mortality from other chronic illnesses, and can be risk factors for death by suicide, incarceration, and homelessness. They can compromise a person's ability to seek out and afford health care, and to adhere to care recommendations.

Those with mental health conditions, particularly serious disorders, and their advocates face numerous barriers to receiving quality care. Studies suggest that one-third to one-half or more of people with serious mental health disorders do not receive treatment. The most common reason for not seeking care is inability to pay. Also, fear of discrimination in housing, employment, military service, and other arenas can deter people from seeking or continuing care.

The goal of reducing reliance on long-term inpatient care in separate institutions has been more fully realized than the goal of providing adequate treatment and services in the community. Nearly 90 million Americans live in areas with a shortage of mental health professionals.

Another barrier to care is adequate training and other support for primary care providers in recognizing mental health and substance use disorders and appropriately managing patient care through direct services, referral, and collaboration. Often evidence-based psychosocial interventions are not even available as part of routine clinical care, due to issues of access to quality care, training, insurance coverage, and fragmentation of care.

The Health and Medicine Division of the National Academies of Sciences, Engineering, and Medicine's [Forum on Mental Health and Substance Use Disorders](#) provides a structured environment and neutral venue to discuss data, policies, practices, and systems that affect the diagnosis and provision of care for mental and substance use disorders, including for substance-related and addictive conditions. Its activities, which will focus on adults, will facilitate sustained attention to these conditions throughout the Academies.

### PUBLIC WORKSHOPS

#### **[Addressing Workforce Challenges Across the Behavioral Health Continuum of Care: A Workshop](#)**

July 10-11, 2024

A National Academies of Sciences, Engineering, and Medicine planning committee will organize and host a hybrid public workshop to explore the workforce needs and challenges in different settings across the continuum of behavioral health care.

#### **[Workshop on Essential Health Care Services Related to Anxiety and Mood Disorders in Women: A Workshop](#)**

April 29-30, 2024

The National Academies of Sciences, Engineering, and Medicine hosted a two-day public workshop which featured invited presentations and panel discussions on topics such as: Essential health care services related to anxiety and mood disorders in women based on currently available evidence; preparing for and prioritizing the provision of essential health care services

related to anxiety and mood disorders in women; and health disparities related to anxiety and mood disorders in women.

**Workshop on Identifying and Managing Veteran Suicide Risk in Non-VA Healthcare Settings: A [Workshop](#)**

May 23, 2023

The National Academies held a one-day hybrid public workshop on May 23 to explore issues related to identifying and managing suicide risk for veterans who receive care outside of Veterans Health Administration facilities. Sessions focused on examining the experiences of veterans in seeking care; understanding the policy context; exploring the landscape of veteran health care and suicide risk; and discussing best practices, knowledge gaps, and challenges for the assessment and mitigation of suicide risk.

**Addressing the Rising Mental Health Needs of an Aging Population: A [Workshop](#)**

May 15-16, 2023

A National Academies of Sciences, Engineering, and Medicine planning committee organized and hosted a public workshop to explore the current state of mental health care for older adults in the United States and potential strategies to address the mental health needs and challenges of our aging population.

**Improving Access to High-Quality Mental Health Care for Veterans: A [Workshop](#)**

April 20-21, 2023

A planning committee of the National Academies of Sciences, Engineering, and Medicine will organize and conduct a public workshop to explore the current landscape for veterans' access to mental health care services in the United States, including the use of telehealth services. The workshop will consider ways to improve veterans' timely access to high-quality care for mental health conditions.

**Early Interventions for Psychosis: First Episodes and High-Risk Populations: A [Workshop](#)**

July 11, 2022

This workshop explored the deficiencies in the behavioral health system with a focus on early intervention for psychosis and featured experts examining the data on the epidemiology and outcomes for people at high risk for psychosis and those who have experienced a first episode of psychosis, and considered ways to improve the care and outcomes for these individuals.

**Innovative Data Science Approaches to Assess Suicide Risk in Individuals, Populations & Communities: Current Practices, Opportunities, and Risks: A [Workshop](#)**

April 28, May 12, June 30, 2022

This virtual workshop featured national experts examining data science techniques and real-time data sources to identify, predict, support, and refer individuals to appropriate care and services. Presentations explored risks and unintended consequences of leveraging AI/ML algorithms, privacy, and confidentiality; and evidence, research, and program evaluation gaps to measure effectiveness of data science techniques in upstream suicide interventions.

**Suicide Prevention in Indigenous Communities: A [Workshop](#)**

April 22, May 13, June 10, 2022

This virtual workshop featured subject matter experts examining risk and protective factors in Indigenous populations; effective suicide prevention policies and programs; culturally appropriate and sensitive approaches to prevention strategies; existing data systems and how these data can

be used for tracking suicide rates; and gaps and challenges in providing continuum of substance use and mental health services in multiple health care settings.

An interactive overview can be found [here](#).

**Strategies and Interventions to Reduce Suicide: A [Workshop](#)**

June 22, July 28, 2021

Reducing suicide-related mortality is a global imperative declared by The World Health Organization. The suicide prevention movement has been gaining momentum as organizations, advocates, and others have increasingly collaborated on effective strategies. Health care settings provide an important opportunity for suicide intervention and prevention but cannot yet fully manage suicide risk due to a lack of training, knowledge gaps, and reimbursement challenges. School, workplace, and community-based interventions can help reduce the incidence of suicidal behavior, as can better access to care and reduced access to lethal means of suicide.

The persistent trends in suicide necessitate action among mental health care providers and payers, researchers, and community leaders. This virtual workshop featured national subject matter experts discussing strategies to improve access to effective interventions to prevent suicide.

**Mental Health and Substance Use Disorders in the Era of COVID-19: With a Special Focus on the Impact of the Pandemic on Communities of Color: A [Workshop](#)**

November 23, December 3, and December 14, 2020

The COVID-19 pandemic has created both short-term and long-term negative consequences for behavioral health outcomes. The National Academies of Sciences, Engineering, and Medicine's Forum on Mental Health and Substance Use Disorders hosted a virtual public workshop with a special focus on the impact of the pandemic on communities of color that examined how COVID-19 has revealed and exacerbated mental health and substance use disorders, the impact of COVID-19 on access to mental health care and service delivery, and the behavioral health impact of COVID-19 on the health care workforce.

**Caring for People with Mental Health and Substance Use Disorders in Primary Care Settings: A [Virtual Workshop](#)**

June 3, July 29, August 26, 2020

The Forum hosted a virtual public workshop that examined approaches to facilitate the delivery of essential components of care for people with mental health and substance use disorders in primary care settings using three illustrative conditions (depression, alcohol use disorders, and substance use disorders). Workshop sessions explored the landscape of evolving models of care, barriers and potential solutions to the implementation of the essential components of care, improving the workforce, and addressing financing and policy incentives to support the provision of the essential components of care.

**Key Policy Challenges and Opportunities to Improve Care for People with Mental Health and Substance Use Disorders: A [Workshop](#)**

October 15-16, 2019

Individuals with mental health and substance use disorders, particularly those with the most serious conditions, face substantial obstacles to receiving effective, evidence-based care. The Forum's initial workshop took a broad approach to examine several related overarching topics, including the importance of shared decision-making, the essential components of care for people with mental health and substance use disorders, translating knowledge into practice, using data to improve care delivery, and developing the workforce to provide high-quality care.

## WEBINARS

### **988: It is NOT just a number Series**

#### **Webinar 1: Providing a Consistent, Systemic Framework for Crisis Response Services**

January 20, 23, 2023, October 3, 2023

The first webinar presented an overview of the 9-8-8 implementation landscape, how mental health and crisis services need to be viewed as a utility and public good for counties to adopt and implement.

#### **Webinar 2: State and Local Exemplars**

The second webinar featured 9-8-8 implementation examples at the state and local level sharing challenges, best practices, and gaps. Other topics included state insurance coverage, learning from 911 and working with law enforcement, rural and urban challenges, how children and youth can use 988, and developing a workforce to create a robust continuum of care.

#### **Webinar 3: Data Collection and Developing Metrics**

The third webinar focused on collecting data and developing metrics to help inform 988 implementation and improvement efforts. This webinar featured state and local examples to provide an overview on available data and impact.

#### **Effective Models to Address Mental Health and Substance Use Disorders: Strategies for Successful and Equitable Abatement Using Opioid Settlement Dollars: A Webinar**

The webinar will highlight strategies for successful and equitable abatement for state and local jurisdictions receiving opioid settlement dollars. Discussion topics may include policy implications of selected abatement interventions, effective care models for opioid use disorder and substance use disorder, and addressing equity issues in access to effective, affordable, and appropriate treatments.

## COLLABORATIVE WORKSHOPS

### **Applying Neurobiological Insights on Stress to Foster Resilience Across the Lifespan: A Workshop**

March 24 - 25, 2025

A planning committee of the National Academies of Sciences, Engineering, and Medicine will host a 1.5-day public workshop that brings together leaders and experts across sectors and disciplines (e.g., neuroscience, psychology, neurodevelopment, public health, medicine, and education) to explore the application of neurobiological insights on stress for building resilience.

### **Addressing the Impact of Tobacco and Alcohol Use on Cancer-Related Health Outcomes: A Workshop**

March 17-18, 2025

The use of both alcohol and tobacco has independent and synergistic health effects, including links to many different cancers. There is a clear need to better understand the impact of dual use on cancer incidence and outcomes, to improve public education, and to develop oncology clinical practice guidelines for patients who use alcohol and tobacco. This workshop will examine the current state of the science and explore strategies to reduce tobacco and alcohol use to lower cancer risk and improve health outcomes.

**Artificial Intelligence in Education and Mental Health for a Sustainable Future: A [Workshop](#)**

May 30, 2024

The workshop consisted of two parts: AI in mental health and well-being and AI in education. Participants reviewed AI tools, applications, and strategies in education and mental health and the implications for sustainable development. Discussions included knowledge gaps between academia and the private sector, as well as opportunities and key priorities for promoting sustainability, including startup and local perspectives.

**Harm Reduction Services for People Who Use Drugs: Exploring Data Collection, Evidence Gaps, and Research Needs: A [Workshop](#)**

January 30-31, 2024

A planning committee of the National Academies of Sciences, Engineering, and Medicine organized and conducted a two-day virtual public workshop that brought together data experts, program implementers and evaluators, and other key interested parties to explore data collection efforts, evidence gaps, and research needs on harm reduction for people who use drugs (PWUD). The workshop examined harm reduction strategies and services that aimed to: prevent overdose and infectious disease transmission; enhance the health, safety, and wellbeing of PWUD; and offer low-threshold options for accessing substance use disorder treatment. Such strategies and services include syringe services programs; providing fentanyl and xylazine test strips; distributing naloxone and other reversal medications; and facilitating connections to social services for PWUD in need of medical services, stable housing, food-assistance, or employment.

**Community Safety as a Social Determinant of Health: A [Workshop](#)**

December 6-7, 2023

This workshop brought together researchers, practitioners, leaders, and others with expertise in violence prevention and promoting community safety to (1) define community safety, (2) examine the landscape of threats to safety affecting specific populations, (3) explore attributes of physical spaces and social structures that create and reinforce safer communities, and (4) discuss frameworks for reimagining public safety, and related policy and programmatic interventions.

**Supporting the Health and Well-Being of Gender Diverse Youth: A [Workshop](#)**

April 25, 2023

The Forum for Children's Well-Being hosted a one-day public workshop to explore the health and well-being of gender diverse youth. It examined how this growing population is currently faring and featured expert presentations and lived experience perspectives.

**Methadone Treatment for Opioid Use Disorder: Examining Federal Regulations and Laws: A [Workshop](#)**

March 3-4, 2022

Opioid use disorder (OUD)—a chronic brain disease caused by prolonged use of prescription opioids, heroin, or other illicit opioids—imposes heavy costs on individuals, their families, and society. Methadone is one of three safe and highly effective medications that are already approved by the U.S. Food and Drug Administration to treat OUD; however, stringent laws and regulatory policies pose substantial barriers to provision of and access to treatment. This two-day public workshop will bring together experts and key stakeholders to examine the current federal regulatory and legal landscape regarding provision of and access to methadone for the treatment of OUD.

**Community Interventions to Prevent Veteran Suicide: The Role of Social Determinants: A Workshop**

March 28-29, 2022

The National Academies of Sciences, Engineering, and Medicine will appoint a planning committee to organize an open, three-day virtual workshop to gain a better understanding of social determinants influencing the recent increase in suicide risk and how currently available practice guidelines can inform community-level preventive interventions, particularly those targeting veteran populations. The workshop will address: (1) the relevant social, cultural, and economic factors driving changes in suicide risk among veterans and (2) ways that current best practices for suicide prevention and treatment can be applied at the community level.

**The Interplay Between Environmental Exposures and Mental Health Outcomes: A Workshop**

February 2-3, 2021

There is growing evidence that the environment can play an important role in mental health—yet research into the effects of environmental stressors rarely focuses on behavioral and mental health outcomes. This virtual workshop brought together experts in mental health and environmental health research to explore emerging research on the relationship, harmful or beneficial, between environmental factors and mental health. This workshop is a collaboration between the National Academies' Standing Committee on the Use of Emerging Science on Environmental Health Decisions in collaboration with the Forum on Mental Health and Substance Use Disorders, the Forum on Neuroscience and Nervous System Disorders, and the Board on Behavioral, Cognitive, and Sensory Sciences.

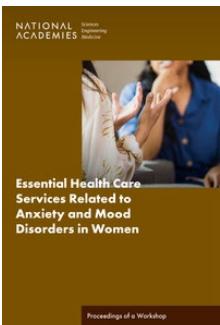
**FORUM PUBLICATIONS****Artificial Intelligence in Education and Mental Health for a Sustainable Future: Proceedings of a Workshop—in Brief**<https://nap.nationalacademies.org/catalog/27995>

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## Community Safety as a Social Determinant of Health: Proceedings of a Workshop—in Brief

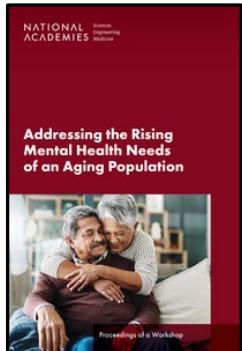
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## Addressing the Rising Mental Health Needs of an Aging Population

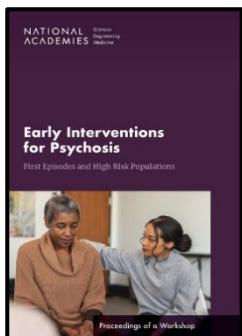
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## Early Interventions for Psychosis- First Episodes and High-Risk Populations

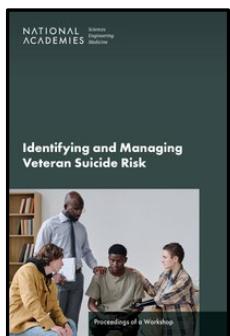
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## Identifying and Managing Veteran Suicide Risk

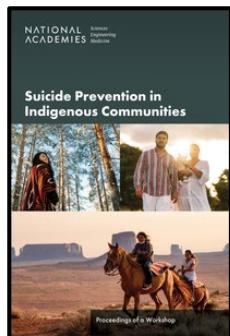
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### Suicide Prevention in Indigenous Communities

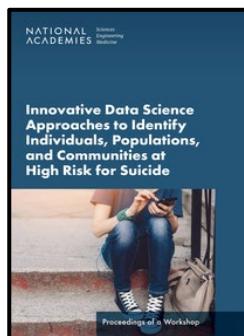
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### Innovative Data Science Approaches to Identify Individuals, Populations, and Communities at High Risk for Suicide

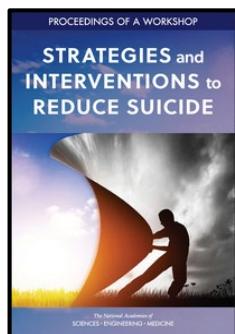
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### Strategies and Interventions to Reduce Suicide

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### The Interplay Between Environmental Exposures and Mental Health Outcomes

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## Mental Health and Substance Use Disorders in the Era of COVID-19

### The Impact of the Pandemic on Communities of Color

#### Proceedings of a Workshop

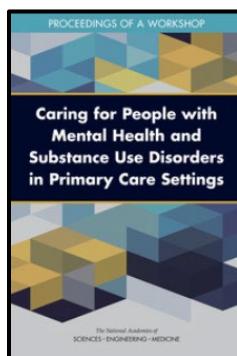
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## Caring for People with Mental Health and Substance Use Disorders in Primary Care Settings

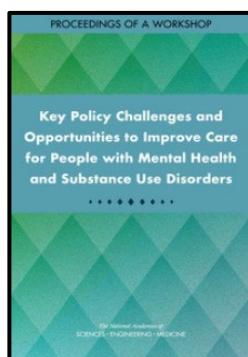
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## Key Policy Challenges and Opportunities to Improve Care for People with Mental Health and Substance Use Disorders

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## NAM PERSPECTIVES PAPERS

### Components of the Next Generation of Integrated Care

<https://nam.edu/components-of-the-next-generation-of-integrated-care/>

Integrated care, or when behavioral health and primary care providers work as a team to address patient concerns, allows for easier access to care, the potential for more effective care coordination, the use of an integrated medical record, and the inclusion of a range of other care providers. This approach to comprehensive care has existed since the 1990s, and the authors envision what needs to be improved or added to carry integrated care into its “next generation.”

### Improving Behavioral Health Services in the Time of COVID-19 and Racial Inequities

<https://nam.edu/improving-behavioral-health-services-in-the-time-of-covid-19-and-racial-inequities/>

The emergence of coronavirus disease 2019 (COVID-19), coupled with the increasing awareness of racial inequity in the United States, as sparked by the killing of George Floyd at the hands of police officers, has led to a moment of reckoning regarding health inequities in the United States.

## FORUM MEMBERSHIP

**MARGARITA ALEGRÍA** (Co-Chair), Harvard Medical School  
**ROSALIE LICCARDO PACULA** (Co-Chair), University of Southern California  
**PATRICIA AREÁN**, National Institute of Mental Health (NIMH)  
**KIRSTEN BERONIO**, Center for Medicaid and CHIP Services, (CMS)  
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**MATTHEW TIERNEY**, University of California, San Francisco School of Nursing, (*Representing the American Psychiatric Nurses Association*)  
**HALAEVALU VAKALAHİ**, Council on Social Work Education  
**AARON WEINER**, Bridge Forward Group and University of Illinois at Urbana-Champaign, (*Representing the American Psychological Association*)

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Centers for Disease Control (CDC)	Substance Abuse and Mental Health Services Administration (SAMHSA)
Council on Social Work Education	
Hogg Foundation for Mental Health	
National Association of Addiction Treatment Providers	

## FORUM STAFF

**Alexandra Andrade**, Director, Forum on Mental Health and Substance Use Disorders  
**Adaeze Okoroajuzie**, Senior Program Assistant  
**Sharyl Nass**, Senior Board Director, Board on Health Care Services

## PREVENTING DISCRIMINATION, HARASSMENT, AND BULLYING: POLICY FOR PARTICIPANTS IN NASEM ACTIVITIES

The National Academies of Sciences, Engineering, and Medicine (NASEM) are committed to the principles of diversity, inclusion, integrity, civility, and respect in all of our activities. We look to you to be a partner in this commitment by helping us to maintain a professional and cordial environment. **All forms of discrimination, harassment, and bullying are prohibited in any NASEM activity.** This policy applies to all participants in all settings and locations in which NASEM work and activities are conducted, including committee meetings, workshops, conferences, and other work and social functions where employees, volunteers, sponsors, vendors, or guests are present.

**Discrimination** is prejudicial treatment of individuals or groups of people based on their race, ethnicity, color, national origin, sex, sexual orientation, gender identity, age, religion, disability, veteran status, or any other characteristic protected by applicable laws.

**Sexual harassment** is unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature that creates an intimidating, hostile, or offensive environment.

**Other types of harassment** include any verbal or physical conduct directed at individuals or groups of people because of their race, ethnicity, color, national origin, sex, sexual orientation, gender identity, age, religion, disability, veteran status, or any other characteristic protected by applicable laws, that creates an intimidating, hostile, or offensive environment.

**Bullying** is unwelcome, aggressive behavior involving the use of influence, threat, intimidation, or coercion to dominate others in the professional environment.

### REPORTING AND RESOLUTION

Any violation of this policy should be reported. If you experience or witness discrimination, harassment, or bullying, you are encouraged to make your unease or disapproval known to the individual at the time the incident occurs, if you are comfortable doing so. You are also urged to report any incident by:

- Filing a complaint with the Office of Human Resources at 202-334-3400 or [hrservicecenter@nas.edu](mailto:hrservicecenter@nas.edu), or
- Reporting the incident to an employee involved in the activity in which the member or volunteer is participating, who will then file a complaint with the Office of Human Resources.

Complaints should be filed as soon as possible after an incident. To ensure the prompt and thorough investigation of the complaint, the complainant should provide as much information as is possible, such as names, dates, locations, and steps taken. The Office of Human Resources will investigate the alleged violation in consultation with the Office of the General Counsel.

If an investigation results in a finding that an individual has committed a violation, NASEM will take the actions necessary to protect those involved in its activities from any future discrimination, harassment, or bullying, including in appropriate circumstances **the removal of an individual from current NASEM activities and a ban on participation in future activities.**

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Information contained in a complaint is kept confidential, and information is revealed only on a need-to-know basis. NASEM will not retaliate or tolerate retaliation against anyone who makes a good faith report of discrimination, harassment, or bullying.

# National Academies Diversity, Equity, and Inclusion Statement

We, the National Academies of Sciences, Engineering, and Medicine (the National Academies), value diversity among our staff, members, volunteers, partners, vendors, and audiences. We recognize that talent is broadly distributed in society and that many perspectives enhance the quality of our work and drive innovation and impact.

We pledge to cultivate a workplace culture and climate that promotes inclusion, belonging, accessibility, and anti-racism; upholds equity; and values the participation of all who are engaged in advancing our mission. The National Academies' mission is to provide independent, trustworthy advice and facilitate solutions to complex challenges by mobilizing expertise, practice, and knowledge in science, engineering, and medicine. By embracing the values of diversity, equity, and inclusion in our programs, institutional policies and practices, and products, we will be able to better advise the nation on the most complex issues facing society and the world.

## **Guiding Principles:**

The following diversity, equity, and inclusion principles guide our work at the National Academies:

1. Integrate diverse perspectives and experiences into our programs, institutional policies and practices, and products.
2. Foster a culture of inclusion where all staff, members, and volunteers have full access to participation and feel welcomed, respected, valued, and a sense of belonging.
3. Approach scientific endeavors with a consideration of diversity, equity, and inclusion frameworks.
4. Cultivate mutually beneficial diverse partnerships and collaborations with a variety of communities, including, but not limited to, marginalized and underrepresented communities.

Our institutional strategy for putting these values and principles into practice are outlined in the [National Academies DEI Action Plan](#), a comprehensive five-year plan that charts a path toward achieving our diversity, equity, and inclusion goals. The DEI Action Plan is one of many ways that we commit to systems of accountability and transparency to uphold these principles and allow for continuous learning and improvement.