State and Research University Partnerships in the Opioid Crisis

Duke University
May 1, 2018
8:30 - 4:00 pm
Providing Support Services for Children in Households with Substance Use

Discussion Synopsis

- Children are affected in many ways and at many points of development including:
  - Prematurely, bonding, school readiness, taking care of a parent
- Most mothers and fathers are scared of asking for help because they are afraid their children will be taken away
  - Help, don’t criminalize
- Community-based resources are the most important, and take time to understand that community’s demographics
  - Every community is different based on race and culture (African-American, American-Indian/Alaskan Native)
- Family-centered evidence-based programs work on prevention to infants in addition to treatment of children
- Public schools are playing more of a role
  - More than just “don’t do drugs”
Providing Support Services for Children in Households with Substance Use

Key Takeaways for Partnerships

- Decriminalize opioid addiction because parents are unavailable to their children if they’re jailed
- Cross boundaries and borders
  - Rural areas need help, connects to public health, healthy food and food deserts
- Collaborate with information and funding
  - Focus on wrap-around services, go into the community
- Reduce the stigma of opioid addiction
  - “It’s a choice”, “It’s a sin”, “It’s a moral failing”
Assisting State Officials with Data Science Inquiries

Discussion Synopsis

- Drug related deaths, not just opioid deaths have risen.
  - Hyper focus on opioid
- With the support of legislatures, CH55 linked different data sources to one warehouse.
  - Sustained by volunteers
- Reports for opioid deaths are incomplete or have different standards.
  - Accounting for error shows that opioid deaths are a lot higher.
- Current data does not support a longitudinal analysis for local communities.
  - Local practitioners want to know what interventions work
- Stakeholders have different scopes and interests. Partnerships require time and money.
Assisting State Officials with Data Science Inquiries

Key Takeaways for Partnerships

● Create an infrastructure to streamline data
  ○ Academics can support practitioners with this effort
● Keep data from previous years. Make notes about changes to data collection.
  ○ Local organizations update the data and discard old data
● Create incentives to merge stakeholder interests.
  ○ Example: Academics who access CH55 must submit a report
● Clarify the classification for opioid deaths
  ○ Some deaths because of infections related to opioid use
  ○ Presence of multiple drugs during time of death
● Formalize a feedback loop with legislators, academics, and practitioners.
Discussion Synopsis

- Treatment programs are spreading, but abuse is rising across the country.
- Traditional law enforcement has not been effective.
  - Arrest/incarceration of minor drug offenders does not address the problem.
- There are barriers to accessing MAT.
  - It can be difficult to access buprenorphine in NC.
- A connection to treatment can be established immediately after overdose.
  - Connections to treatment can be made in the ER.
- Individuals who abuse opioids are often marginalized.
  - Individuals do not receive social support that they need.
Law enforcement officials need more tools and options to be effective
  ○ Law Enforcement Assisted Diversion

Different models for MAT
  ○ ED MAT programs, ‘Hub and Spoke’ programs, Project Echo

Expansion of treatment
  ○ Connection of specialty treatment and mainstream treatment to increase accessibility

Safe injection sites address marginalization of opioid abusers
  ○ Facilitate participation in drug treatment programs and supportive networks

All stakeholders should be engaged when treatment programs are planned
  ○ Programs will be more successful if more people are invited to the table
Providing a System of Care in Underserved and Rural Communities

Discussion Synopsis

- "Rural" does not mean "white."
  - When you say "rural," people immediately have a picture in their mind.
- Barriers include access to care, housing, employment, transportation, and disconnected resources.
  - Some of the problems are unique to rural areas, some are not.
- The opioid crisis is a national debate that is experienced and addressed locally.
- Should we even consider the opioid crisis in an urban versus rural framework?
- Stigma is a large on-the-ground barrier in rural communities.
- We can't get overwhelmed by the magnitude of the problem.
Providing a System of Care in Underserved and Rural Communities

Key Takeaways for Partnerships

- **Remember the value of listening.** Qualitative data can be persuasive, but needs to resonate with the community and policymakers.
  “Know the right questions to ask -- and send the right people to ask those questions”
- **Reframe prevention - not just DARE in school.**
  “Everyone needs to feel empowered.”
- **We need more money - for resources, for treatment, for the uninsured.**
  But we can’t wait for someone to solve this problem. Get creative.
- **Consider leveraging the faith-based community.** Re-energize grassroots organizations that worked on the “first wave.”
- **Consider that there is incredible resilience in these communities.**
- **Remember to engage the family.**