Rural America and the Opioid Crisis

February 21, 2018
The Addiction Policy Forum is a diverse partnership of organizations, policymakers, and stakeholders committed to working together to elevate awareness around addiction, and to improve programs and policy through a comprehensive response that includes prevention, treatment, recovery, and criminal justice reform.

We envision a world where fewer lives are lost and help is readily available for the millions of Americans affected by addiction every day.
Network of Families

Families Network

4 Million

1,400+
Strategic Initiatives

Translation of Science
Policymaker Engagement
Community Building
Education and Awareness
Emergency Response

Addiction A to Z
Focus on Innovation
CARA Working Group
CARA Family Day
Forum Series
State and Local Blueprints
Families Committee
Train the Trainer
State Captains/Affiliates
#144aDay
Video Explainers
Rx Safety and Disposal
Crisis Center/800 Number
ED Post-Overdose Protocol
Patient Portal
The Problem
Substance abuse has had a devastating impact on families in the United States.

According to the Centers for Disease Control, 174 people per day die of drug overdoses while admissions to treatment for prescription opiates has increased 500 percent.

We can do better.

- In 2015, 21.7 million people in the United States needed substance use disorder treatment, but only 11% received it.
- Over 23 million Americans are in recovery from addiction to alcohol & other drugs.
- Abuse of tobacco, alcohol, and illicit drugs is costly to our Nation, exacting more than $700 billion annually in costs related to crime, lost work productivity and health care.
- Fifty percent of people incarcerated are classified as being dependent on drugs.
6 Key Elements of a Comprehensive Response

**Criminal Justice Reform**
Provide evidence-based treatment in the jails and prisons and expand alternatives to incarceration to treat individuals in communities.

**Law Enforcement**
Improve coordination between law enforcement and the treatment community so police can better connect individuals with substance use disorders to drug treatment.

**Prevention**
Expand prevention and education efforts aimed at teens, parents, other caretakers.

**Treatment**
Expand evidence-based treatment nationwide including medication-assisted treatment (MAT).

**Overdose Reversal**
Expand the availability of naloxone to law enforcement agencies, first responses and families to help in the reversal of overdoses to save lives.

**Recovery Support**
Expand recovery services to support individuals in recovery, including resources in high schools, institutions of higher learning, and nonprofit organizations.
8 PRIORITIES TO ADDRESS ADDICTION IN AMERICA

1. Help Families in Crisis
2. Expand Treatment
3. Drive Discovery
4. Expand Recovery Support
5. Prevent Addiction
6. Protect Children Impacted
7. Reframe Criminal Justice
8. Advocate and Educate
Provider and Services Database Emergency Medicine Initiative
Pennsylvania’s Medication Assisted Treatment Pilot Program for Justice-Involved Individuals: Achieving Better Outcomes for Incarcerated and Reentering Society with a Substance Use Disorder Treatment System

Purpose
Pennsylvania’s Medication Assisted Treatment (MAT) Pilot Program for Justice-Involved Individuals is a program focused on achieving better outcomes for individuals experiencing substance abuse issues who are incarcerated or reentering society following a period of incarceration within a Pennsylvania Department of Corrections (PA DOC) facility. The PA DOC and Secretary, John Wetzel, took seriously their responsibility for addressing the barriers to their inmates’ successful post-incarceration. The PA DOC decided to try a different approach to keeping incarcerated individuals sober and away from drugs. For other diseases, medication is a normal part of treatment. Medication assists people in becoming and staying healthy, but for some reason medication had not been transferred into an approach at DOC for the treatment of those with the disease of addiction. The idea of using the system they had created for the past decade at the prison as a new, not a cure, and that its traditional approach to addressing alcohol and drug addiction was insufficient.

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Hub & Spoke, Vermont
Streamlining opioid use disorder and integration into medicine

How It Works

**Goal:** Create a coordinated, reciprocal clinical connection between specialty addiction treatment centers and general medical practice.

**Provides MAT** for individuals with opioid addictions, **creates a framework for integrating treatment** for addiction into general medicine, and **expands recovery support and continuum of care** needed to improve outcomes.

“**Hubs**” are specialized intensive treatment centers that work in coordination with general medicine and other supports locally to create a continuum of care.

“**Spokes**” offer individuals a three-person primary care team, with a clinician or counselor, nurse and physician. Together, this team uses a multipronged approach, which includes the use of general medicine along with a continuum of care for recovery support.

Demonstrating Success

Since the implementation, Vermont has improved access to care and the integration of addiction treatment into healthcare.

Participants report improved functioning after discharge.

Vermont has continued to see a decline in all age groups reporting misuse of prescription pain relievers in the past year.

At the same time, the number of people in the state receiving treatment for opioid abuse and dependence has significantly increased.

For more information:
START, Kentucky
(Sobriety Treatment and Recovery Teams)
Child Welfare intervention to parents with substance use disorders and services for the family.

How It Works

Goal: Help families with parental substance abuse and child abuse/neglect achieve sobriety. Keep children safe and reduce placement in state custody and keeping children with their families when appropriate.

Pairs social workers with a family mentor to work in collaboration with the families, providing:

- Peer support
- Intensive treatment
- Child welfare services

Each START team has up to four specially trained caseworkers from Child Protective Services and a family mentor.

Each team member conducts multiple visits each month to their assigned families.

Together, the START team creates a customized service plan based on the family’s needs.

Demonstrating Success

Effective at improving outcomes for mothers. Mothers who participated in START achieved sobriety at nearly twice the rate of mothers treated without START (66 percent and 37 percent, respectively).

Effective at keeping children at home. Children of participating families were half as likely to be placed in state custody as compared with children in a matched control group (21 percent and 42 percent, respectively).

Significant outcomes in cost-effectiveness—for every $1.00 spent on START, Kentucky avoided spending $2.22 on foster care.

For more information:
State Chapters

1. Connecticut
2. Illinois
3. Maryland
4. Massachusetts
5. Minnesota
6. New Hampshire
7. New York
8. Ohio
9. Virginia
10. Wisconsin
Advocate and Educate
THANK YOU