

An aerial photograph of the Duke University campus in Durham, North Carolina. The Christ the King Cathedral is the central focus, with its tall, ornate Gothic spires reaching towards the sky. The surrounding campus features various academic buildings, green spaces, and a mix of architectural styles. The background shows rolling hills under a clear sky.

# **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.**

# Embedding Networks for Treatment after Overdose

## 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

# Embedding Networks for Treatment after Overdose

## Key Takeaways for Partnerships

- **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.**