

Rural Prevention and Treatment of Substance Abuse Toolkit

September 18, 2017

Tricia Stauffer, MPH

NORC Walsh Center for Rural Health Analysis

Rural Health Outreach Tracking and Evaluation Program

- Funded by the Federal Office of Rural Health Policy (FORHP)
- NORC Walsh Center for Rural Health Analysis
 - Michael Meit, MA, MPH
 - Alana Knudson, PhD
 - Alycia Bayne, MPA
- University of Minnesota Rural Health Research Center
 - Ira Moscovice, PhD
 - Amanda Corbett, MPH
 - Carrie Henning-Smith, PhD, MSW, MPH
- National Organization of State Offices of Rural Health
- National Rural Health Association

Rural Health Outreach Tracking and Evaluation Program

- Rural Health Outreach and Tracking Evaluation is designed to monitor and evaluate the effectiveness of federal grant programs under the Outreach Authority of Section 330A of the Public Health Service Act
- Outreach Authority grantees have sought to expand rural health care access, coordinate resources, and improve quality

Overview of 330A Outreach Authority Grant Programs

- Grant programs operate under the authority of Section 330A
 - Delta State Rural Development Network Grant Program
 - Rural Opioid Overdose Reversal Grant Program
 - Rural Benefits Counseling Program
 - Rural Health Care Coordination Network Partnership
 - Rural Health Care Services Outreach Grant Program
 - Rural Health Network Development Planning Grant Program
 - Rural Health Network Development Program
 - Rural Health Information Technology Workforce Program
 - Rural Network Allied Health Training Program

Evidence-Based Toolkits for Rural Community Health

- Access to Care for Rural People with Disabilities
- Care Coordination Toolkit
- Community Health Workers Toolkit
- Diabetes Prevention and Management Toolkit
- Health Networks and Coalitions Toolkit
- Health Promotion and Disease Prevention Toolkit
- HIV/AIDS Prevention and Treatment Toolkit
- Obesity Prevention Toolkit
- Oral Health Toolkit
- Services Integration Toolkit
- Tobacco Control and Prevention Toolkit

[Rural Health](#) > [Community Health Gateway](#)

Evidence-Based Toolkits for Rural Community Health

Step-by-step guides to help you build effective community health. Resources and examples are drawn from evidence-based and promising programs. By learning from programs that are known to be effective, you can make the best use of limited funding and resources.

Rural Community Health Toolkit



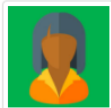
Start here for a guide to building rural community health programs to address any type of health issue. Learn how to identify community needs, find evidence-based models, plan and implement your program, evaluate results, and much more.

Access to Care for Rural People with Disabilities



Learn about approaches rural communities can use to improve access to care for people with disabilities.

Community Health Workers Toolkit



Learn about roles community health workers (CHWs) fill, as well as CHW training approaches.

Care Coordination Toolkit



Find models and program examples for delivering high-quality care across different rural healthcare settings.

Diabetes Prevention and Management Toolkit



Find resources and best practices to develop diabetes prevention and management programs in rural areas.

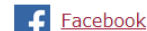
ABOUT THE EVIDENCE-BASED TOOLKITS

The Rural Community Health Gateway's evidence-based toolkits showcase program approaches that you can adapt to fit your community and the people you serve, allowing you to:

- Research approaches to community health programs
- Discover what works and why
- Learn about common obstacles
- Connect with program experts
- Evaluate your program to show impact

These toolkits are made available through the NORC Walsh Center for Rural Health Analysis and the University of Minnesota Rural Health Research Center in collaboration with the Rural Health Information Hub. Funding is provided by the Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration.

SHARE THIS PAGE



Evidence-Based Toolkit on Substance Abuse

- Rural communities are implementing programs to prevent and treat substance abuse
- These programs aim to:
 - Prevent substance abuse
 - Increase access to treatment and support services
 - Increase collaboration among organizations in the community
 - Provide education and training
 - Increase coordination of care
 - Reduce stigma
- Toolkit is designed to disseminate promising and evidence-based practices and resources

Goals of the Substance Abuse Toolkit

- Project Team
 - Deborah Backman, Alycia Bayne, Alana Knudson, Molly Powers, Tricia Stauffer
- Project Goals
 - Identify evidence-based and promising models that may benefit grantees, future applicants, and rural communities
 - Document the scope of their use
 - Build the toolkit

Project Activities

- Reviewed FORHP grantees' applications and literature to identify evidence-based and promising models
- Conducted telephone interviews with five FORHP grantees funded in FY2012, 2014, and 2015; four other rural communities; and 11 experts in the field
- Developed a toolkit with resources about how to plan, implement, and sustain programs
- Toolkit is available on the Rural Health Information Hub Community Health Gateway:

<https://www.ruralhealthinfo.org/community-health/substance-abuse>



Rural Prevention and Treatment of Substance Abuse Toolkit



Formerly the Rural Assistance Center

[About RHIhub](#) | [Contact Us](#)   

- Online Library ▾
- Topics & States ▾
- Community Health Gateway ▾
- Tools for Success ▾
- RHIhub Publications & Updates ▾

↓ IN THIS TOOLKIT Modules

- 1: Introduction
- 2: Program Models
- 3: Program Clearinghouse
- 4: Implementation Considerations
- 5: Evaluation Considerations
- 6: Sustainability Considerations
- 7: Dissemination
- About this Toolkit

[Rural Health](#) > [Community Health Gateway](#) > [Evidence-Based Toolkits](#) > [Rural Prevention and Treatment of Substance Abuse Toolkit](#)

Rural Prevention and Treatment of Substance Abuse Toolkit



Welcome to the Rural Prevention and Treatment of Substance Abuse Toolkit. This toolkit provides evidence-based examples, promising models, program best practices, and resources that can be used by your organization to implement substance abuse prevention and treatment programs.

There are seven modules in this toolkit. Each module contains resources and information that your organization can use to develop, implement, evaluate, and sustain rural programs to prevent and treat substance abuse. There are more resources on general community health strategies available in the [Rural Community Health Toolkit](#).






RHIhub This Week

Sign-up to receive our [weekly newsletter](#):

RELATED RHIhubCONTENT

- [Substance Abuse in Rural Areas Topic Guide](#)

SHARE THIS PAGE

-  [Facebook](#)
-  [Twitter](#)
-  [LinkedIn](#)
-  [Google+](#)
-  [Email](#)

Organization of the Toolkit

↓ IN THIS TOOLKIT Modules

1: Introduction

2: Program Models

3: Program Clearinghouse

4: Implementation
Considerations

5: Evaluation Considerations

6: Sustainability
Considerations

7: Dissemination

About this Toolkit

2: Program Models

- Medication Assisted Treatment
- Behavioral Therapy
- Harm Reduction
- Care Delivery
- Peer-based Recovery Support
- Prevention

Substance Abuse Program Models in Rural Communities

Medication Assisted Treatment

- MAT is the use of pharmacological medications, combined with counseling and/or behavioral therapies, to treat substance abuse

Substance Abuse Program Models in Rural Communities

Behavioral Therapy

- Change behaviors related to substance abuse
- Teach life skills that help people to better cope with situations that may lead to substance abuse and relapse

Substance Abuse Program Models in Rural Communities

Harm Reduction

Strategies to reduce the harmful consequences associated with substance abuse:

- Screening, Brief Intervention, and Referral to Treatment
- Naloxone expansion
- Prescription drug monitoring programs
- Proper drug disposal programs
- Drug courts



Harm Reduction Models

Screening, Brief Intervention, and Referral to Treatment (SBIRT)

- Evidence-based approach to screening patients for substance abuse, providing intervention and referral if necessary, and providing follow-up.

Harm Reduction Models

Naloxone Expansion in Rural Communities

- Increase the availability and use of naloxone
- Technical assistance and education for stakeholders
 - Health care providers, emergency department staff, pharmacies, care managers, law enforcement, first responders, community members
- Community-wide trainings on recognizing an overdose
- Coalition building and community engagement
- Federal Office of Rural Health Policy's Rural Opioid Overdose Reversal Program

Harm Reduction Models

Prescription Drug Monitoring Programs

- Electronic databases that keep track of prescribing and dispensing of controlled prescription drugs.
- Varies by state

Harm Reduction Models

Syringe Services Programs

- Increased rates of drug injection in suburban and rural areas
- Effective in reducing transmission rates of HIV and Hepatitis C

Harm Reduction Models

Proper Drug Disposal Programs

- Prescription opioids can be beneficial for pain management – not everyone will develop harmful behaviors
- Unused portions of these medications should be disposed of safely
- Recommended by experts to reduce illicit drug use and unintentional poisoning
- Benefits the environment

Harm Reduction Models

Drug Courts

- Alternatives to jail for people with substance abuse issues
- Offenders are closely supervised: drug testing and treatment are required
- Strong evidence that drug courts reduce drug use and reduce drug-related recidivism in adults

Substance Abuse Program Models in Rural Communities

Care Delivery Models

- Integration of mental health services in primary care settings
- Telehealth
- Continuing care
- Case management



Substance Abuse Program Models in Rural Communities

Peer-based Recovery Support Model

- Non-clinical support services provided by peers who have training and personal experience with substance abuse
- Two promising models:
 - Peer Specialist Programs
 - Mutual Support Groups/Self-Help Programs

Substance Abuse Program Models in Rural Communities

Prevention Model

Helping individuals to develop knowledge and skills, or changing environmental and community factors that affect a large population

- Universal, selective, indicated preventive interventions
- Programs in schools, workplaces, and communities



Substance Abuse Program Models in Rural Communities

Prevention Model

- Prevention Programs
- Community Coalition Prevention Models
- Prevention Policies

Other Modules in the Toolkit

↓ IN THIS TOOLKIT Modules

1: Introduction

2: Program Models

3: Program Clearinghouse

4: Implementation
Considerations

5: Evaluation Considerations

6: Sustainability
Considerations

7: Dissemination

About this Toolkit

2: Program Models

- Medication Assisted Treatment
- Behavioral Therapy
- Harm Reduction
- Care Delivery
- Peer-based Recovery Support
- Prevention

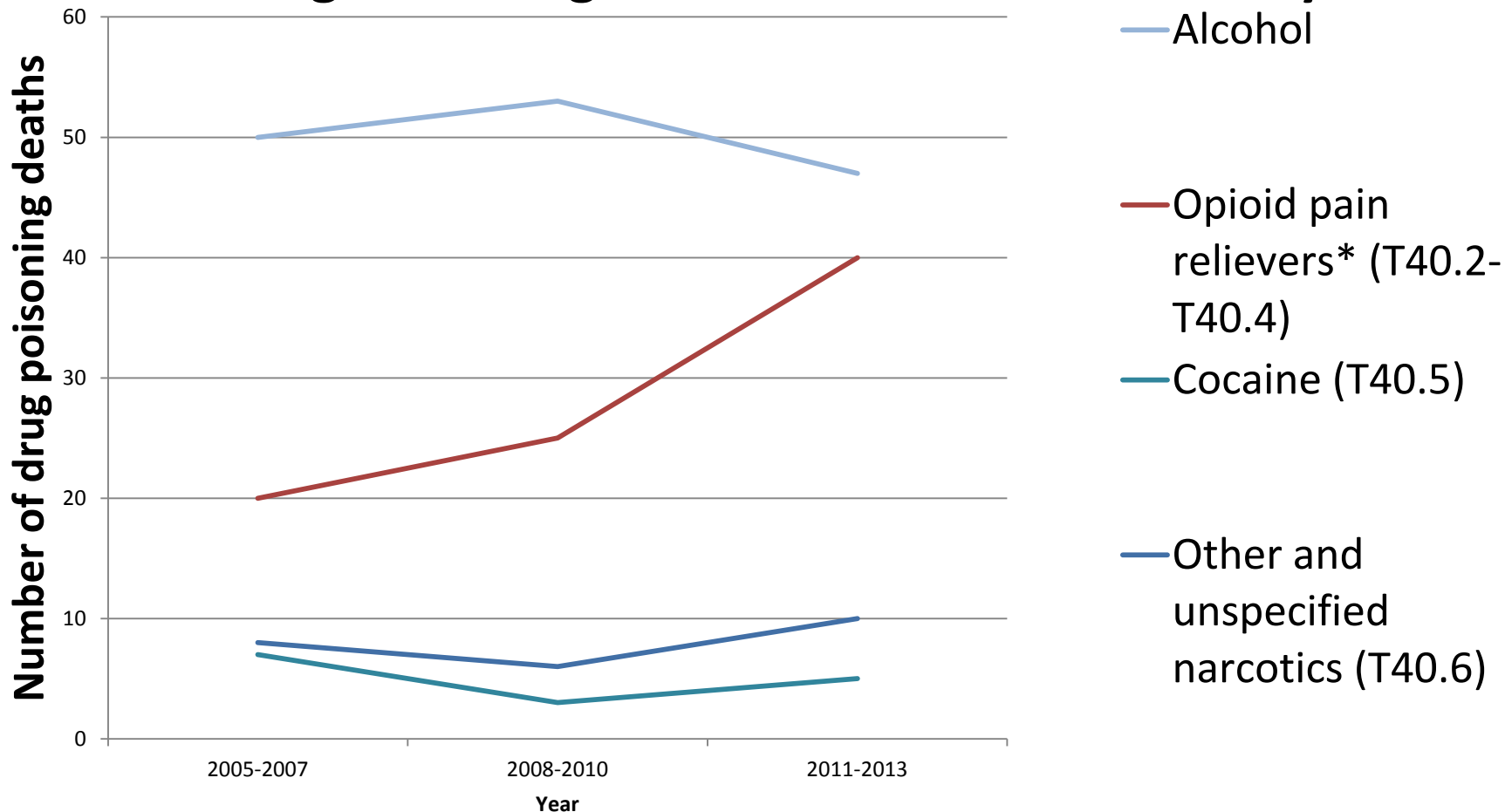
Program Clearinghouse: Examples

Naloxone Expansion in Rural Communities

- San Luis Valley Area Health Education Center's Naloxone – Education – Empowerment – Distribution Program (SLV NEED)
- Project VIBRANT (Vance Initiating Bringing Resources and Naloxone Training)

Program Clearinghouse: SLV NEED

Drug Poisoning Deaths in the San Luis Valley



(Region 8 Colorado Department of Public Health and Environment -2014)



Program Clearinghouse: SLV NEED

- Narcan Nasal Kits Distributed
 - Law enforcement and first responders
 - Participating Pharmacies
 - Independent pharmacies on board
 - Chain pharmacies – no
 - Standing orders and Clinic Pharmacy
 - Community Education
 - Media and marketing – posters, brochures, articles
 - Radio interviews
 - Newspaper press releases

Program Clearinghouse: SLV NEED

Challenges

- Identifying key partners
- Injectable vs nasal
- Encouraging independent pharmacies to participate
 - Standing orders available from Medical Director at CO Department of Public Health and Environment
 - No loss of income because kits are provided for free
- Community stigma

Program Clearinghouse: SLV NEED

- 24 signed Memorandum of Understanding
 - Police and county sheriff departments
 - Hospitals, health clinics, independent pharmacies
 - Local institutions of higher learning
 - Local homeless shelter
- Trainings
 - 52 trainings completed
 - 560 individuals trained (133 law enforcement, 427 community members)
- 15 lives saved due to SLV NEED

Program Clearinghouse: Project VIBRANT

- **Purpose:** Project V.I.B.R.A.N.T is a collaborative partnership across many different local agencies in Vance County to prevent overdose and save lives through the distribution of overdose rescue kits containing naloxone, a medicine that reverses opiate/opioid overdoses.

Program Clearinghouse: Project VIBRANT

2015-2016

- Over 1,300 naloxone reversal kits distributed in Vance County
- 110 reported reversals in Vance County

2016-2017

- To date - 272 kits distributed to 175 people in Vance and Granville Counties
- 34 successful overdose reversals in both counties

- Statewide standing order for Naloxone
- Identification of Referral Pathways to Treatment and Counseling
- Treatment Center Guide

Lessons Learned

- Rural communities have fewer treatment facilities, mental health providers, and other services
- People who live in rural communities may experience longer travel distances to treatment
- Stigma is a barrier to recovery
- Community partnerships are critical to success
- The Surgeon General's 2016 *Report on Alcohol, Drugs, and Health* is an important resource and calls for a public health-based approach

Contact Information

Tricia Stauffer, MPH

Principal Research Analyst

Walsh Center for Rural Health Analysis

(312) 325-2528 | stauffer-patricia@norc.org

www.ruralhealthinfo.org