

Opioid Crisis Lunch Series: Racial Disparities in Substance Use Crises Responses

Goals

- 1. To help Durham officials better understand the range of resources at Duke upon which they can draw.
- 2. To alert Duke researchers to the issues facing Durham policymakers in order to sharpen the relevance of our research and engagement.
- 3. To engage in conversations that will lead to evidence-informed policy solutions to address issues within this field.

Key Takeaways

On Friday, December 7th, a small group of Durham County representatives, healthcare managers, community leaders, and Duke researchers met to discuss ways to address racial disparities in Durham. The group was convened for the purpose of offering Duke's expertise to assist the county in identifying the causes of the racial disparities in opioid substance use outcomes.

At the moment, disparities in overdose ED visits is a primary area of concern. One particular avenue for collaboration was presented by attendees from the Durham District Attorney's and Sheriff's offices. These offices are undergoing paradigm shifts by working in tandem to encourage pre-arrest diversion and MAT utilization. The District Attorney's office is pursuing data-driven, evidence-based approaches to achieve this mission working with Duke Law.

This document provides a brief overview of the key issues covered in Friday's meeting and suggestions presented by researchers who offered time and support to address the outlined issues. If you have questions about this meeting, please contact <u>Patience Wall</u> at Duke Policy Bridge.

Top Issues and Concerns Identified by Durham County Officials and Community Representatives

- We need more metrics on race and age in relation to ED visits for overdose.
 - o Durham has experienced an increase in ED visits for overdose among senior citizens.
- We need more treatment options and improved screening processes for navigating individuals when entering and leaving the county jail and emergency department.
 - In particular, it is difficult to locate services for residents who do not have insurance or Medicaid.
 - We also have issues with awareness, provider biases, and community training.
- Sharing data records between the jail and healthcare facilities is a challenge.
 - o Maintaining patient confidentiality is a key concern here.
- It is important to ensure that waivers for treatment will not be used as tools of coercion.
- One of our largest providers, Lincoln Community Health, is overburdened.
- There is a lack of money and resources that is available in other states and localities due to their Medicaid expansion.
- Locating primary treatment organization data is a challenge.
- We need assistance improving the screening tool used at the detention center facility
 - o There is also an interest in screening for residents who are at risk but not utilizing MAT.





- Prevention needs to be an important focus area using case studies in schools and peer support in the form of parent and youth training.
 - Reaching at-risk individuals before they enter the criminal justice system is a goal under this overarching focus.
- We have issues maintaining a steady supply of medications particularly when pharmaceutical companies will not manufacture some medications for months at a time.
- Alcohol combined with opioids may also be fueling the overdose rates in African-American communities.
- We should be mindful of the current development of high-rises and Durham's history of displacing people of color from neighborhoods.
- We should be mindful of how certain policies may counter the intentions behind the NC "Good Samaritan Law."
 - There are racial disparities in drug-induced homicide prosecutions in other states. The fear of prosecutions keeps many drug users from calling 911.

Possible Solutions and Resources at Duke

- We can research racialized outcomes in drug-using mothers who are referred to medical treatment vs. punitive resources.
 - o These outcomes are present in national data and may also be present in Durham.
 - Keisha Bentley-Edwards has offered to assist attendees with acquiring data on this phenomenon.
- There is a screening tool on opioid-use dependence that the detention center could use.
 - o Lauren Brinkley-Rubinstein has access this resource.
- We could increase fentanyl education and testing strips in the broader community.
 - o Illicitly manufactured fentanyl is linked to the higher death and overdose rates in the African-American community.
 - o <u>Lauren Brinkley-Rubinstein</u> is conducting research on this phenomenon in Durham.
- A Duke interdisciplinary research team compiled primary treatment organization data from Duke Health System, Alliance Behavioral Health, and others.
 - o Nicole Schramm-Sapyta has access to this data and can assist others with utilizing it.
- We could investigate grant opportunities for treating substance use disorders in jail under the ADA using the infrastructure currently in place for medical treatment of other disorders
 - O Substance use disorders fall under the ADA disability list.
 - o Michele Easter can assist others in identifying these funding resources.
- We could utilize SBIRT (Screening, Brief Intervention, and Referral to Treatment) to meet the needs of individuals across the spectrums of age and needs.
 - o <u>Wanda Boone</u> has used this method and can help assist others.
- The county and city could establish a method of recording equitable processes and regulations that are currently underway and on the horizon to increase the chances of future sustainability.
 - o Ajenai Clemmons can be contacted to elaborate on this policymaking approach.

Next Steps: Where Additional Time and Expertise Would Be Useful and Collaborative

- Identifying funding resources for MAT and ongoing peer support programs in Durham
- Policy Bridge's continued engagement and efforts to facilitate conversations on social determinants of health and implicit bias in Durham
- Friday's meeting attendees can send recommended criminal justice policies to Assistant District Attorney Alyson A. Grine.
- Friday's meeting attendees can join Durham Join Together to Save Lives task force meetings.

