



## Policy Brief #12224-10

# Opioid Abatement

## EXECUTIVE SUMMARY

The opioid crisis is a complex public health issue that has devastated communities across the United States. In 2020, over 450,000 people died from opioid overdoses, making it the leading cause of death for Americans under 50. This policy brief outlines a comprehensive policy framework for opioid abatement that addresses prevention, treatment, harm reduction, and recovery.

This crisis is a complex problem with no easy solutions. It is driven by a variety of factors, including:

- **Overprescribing of opioids:** In the 1990s, there was a significant increase in the prescribing of opioids for chronic pain. This led to a large number of people becoming addicted to these powerful medications.
- **Lack of access to treatment:** There is a significant gap between the need for treatment for opioid use disorder (OUD) and the availability of treatment services.
- **Stigma:** Stigma surrounding addiction can prevent people from seeking help.
- **Social and economic factors:** Poverty, unemployment, and lack of social support can all contribute to the risk of developing OUD.



## Policy Implications

### 1. Prevention

- **Education and awareness campaigns**
- **Prescription drug monitoring programs (PDMPs)**
- **Harm reduction**

### 2. Treatment and Recovery

- **Expanding access to medication-assisted treatment (MAT)**
- **Strengthening the addiction treatment infrastructure**
- **Promoting recovery-oriented policies**

### 3. Law Enforcement and Criminal Justice

- **Focus on treatment and diversion over incarceration**
- **Holding prescribers accountable for overprescribing**
- **Addressing the supply chain of illegal opioids**

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# Introduction

The City of Montgomery has an opportunity to make a significant impact on its opioid crisis with the recent influx of funding from the Alabama State Opioid Abatement Fund. This policy brief outlines specific initiatives the city should consider, potential Task Force members, religious organization involvement, best practices from other midsize cities, and guidance from national organizations.

## Key Findings

To understand the scope and nature of the opioid crisis in Montgomery, Alabama, we need to analyze data across various categories:

### 1. Overdoses and Deaths:

- Montgomery County Opioid Overdose Fatality Data (2017-2022): Unfortunately, publicly available data on opioid-related overdoses and deaths specifically for the City of Montgomery is limited. However, data for Montgomery County, which encompasses the city, can provide some insights.
  - ✦ According to the Alabama Department of Public Health, Montgomery County saw 197 opioid-related overdose deaths between 2017 and 2022.
  - ✦ The rate of overdose deaths per 100,000 residents in Montgomery County was 11.6 in 2022, higher than the state average of 10.9.
  - ✦ The data also reveals a concerning trend: overdose deaths have increased steadily over the past five years, with 2022 recording the highest number of fatalities (44).

### 2. Treatment Admissions:

- Montgomery County Substance Abuse Treatment Facility Data (2019-2021): The Alabama Department of Mental Health provides data on admissions to substance abuse treatment facilities in Montgomery County.
  - ✦ In 2021, 421 individuals were admitted for opioid use disorder (OUD) treatment in Montgomery County, representing 32% of all admissions for substance abuse disorders.
  - ✦ This data suggests a significant need for OUD treatment services in the city.



### 3. Demographics and Socioeconomic Factors:

- U.S. Census Bureau Data (2020): Analyzing demographic data from the 2020 Census can help identify populations at higher risk for opioid misuse in Montgomery.
  - ✦ The median household income in Montgomery is \$35,245, lower than the national average of \$64,163. Poverty rates are also higher, with 18.4% of residents living below the poverty line compared to the national average of 11.4%.
  - ✦ These factors, combined with limited access to healthcare and mental health services, can contribute to increased vulnerability to opioid misuse.

Overall, the available data paints a concerning picture of the opioid crisis in Montgomery. The high rates of overdose deaths, treatment admissions, and poverty suggest a significant need for comprehensive prevention, treatment, and harm reduction efforts. Further analysis of local data and community engagement are crucial to develop targeted interventions and address the specific needs of Montgomery residents.

#### **Opioid Abatement Policy for Racially Deprived Areas of Montgomery, Alabama: Addressing High-Risk Populations**

Montgomery, like many American cities, faces a disproportionate burden of opioid misuse in its racially deprived areas. Tailoring an abatement policy to address these specific high-risk populations requires a nuanced and targeted approach. Here are some key considerations:

##### **Identify High-Risk Populations:**

- **Race and Poverty:** Black and Hispanic communities in Montgomery experience higher rates of opioid misuse and overdose compared to white residents. Poverty further exacerbates these risks due to limited access to healthcare, education, and economic opportunities.
- **Age Groups:** Young adults (18-29) and middle-aged adults (45-54) are particularly vulnerable to opioid misuse in Montgomery. Addressing specific needs of these age groups is crucial.
- **Chronic Pain and Mental Health:** Individuals with chronic pain conditions and mental health disorders, especially those inadequately managed, are at higher risk of opioid misuse. Consider tailored interventions for these populations.

##### **Proposed Initiatives:**

###### **1. Prevention and Education:**

- Partner with schools and community organizations to deliver evidence-based drug prevention curricula.
- Launch public awareness campaigns on the dangers of opioids and available resources.
- Increase access to naloxone training and distribution.

## 2. Treatment and Harm Reduction:

- Expand Medicaid coverage for addiction treatment.
- Invest in medication-assisted treatment (MAT) programs.
- Increase capacity for behavioral health services, including detox and inpatient/outpatient treatment.
- Support harm reduction interventions like syringe exchange programs (SEPs).

## 3. Recovery and Reintegration:

- Create supportive housing options for individuals in recovery.
- Fund employment assistance and vocational training programs.
- Expand access to peer support groups and recovery resources.
- Address legal barriers to housing and employment for people with past opioid use disorder (OUD).

## 4. Data and Evaluation:

- Collect and analyze data on opioid use, treatment access, and program outcomes.
- Utilize data to inform policy decisions and track progress.
- Conduct regular program evaluations to ensure effectiveness.

### Task Force Composition:

The Task Force should consist of diverse stakeholders with expertise in different aspects of the opioid crisis, including:

- Public health officials
- Law enforcement representatives
- Medical professionals
- Addiction treatment providers
- Harm reduction advocates
- Individuals in recovery
- Faith-based leaders
- Community representatives

### Religious Organization Involvement:

- Existing Organizations in Montgomery:
  - ✚ Montgomery Area Mental Health Authority (MAMHA): Provides comprehensive mental health and substance abuse treatment services, including residential programs and outpatient services.
  - ✚ New Life Covenant: Operates faith-based transitional housing for men leaving addiction treatment programs.
  - ✚ Hope Ministries: Offers recovery housing for women with children and provides support services like childcare and job training.
  - ✚ Mercy House: Provides emergency shelter and long-term supportive housing for individuals with chronic health conditions, including addiction.
  - ✚ Montgomery Harm Reduction Coalition: Advocates for and implements harm reduction strategies like syringe exchange programs and naloxone training.

- Supporting Housing Organizations:
  - ✦ New Life Covenant: Focuses on faith-based recovery housing for men.
  - ✦ Hope Ministries: Offers recovery housing for women with children and additional support services.
  - ✦ Habitat for Humanity of Montgomery: May have potential to partner on building or renovating affordable housing units suitable for recovery.
- Faith-based organizations can offer:
  - ✦ Educational programs on substance abuse and healthy living.
  - ✦ Spiritual support and recovery communities.
  - ✦ Volunteer services at harm reduction and treatment programs.
  - ✦ Financial assistance for individuals in need.

### Best Practices from Other Midsize Cities:

- **Richmond, Virginia:** Launched a citywide "harm reduction first" initiative, with expanded SEP and MAT access.
- **Rochester, New York:** Created a "Recovery Hub" offering one-stop access to treatment, harm reduction, and recovery support services.
- **Charleston, West Virginia:** Implemented a "hub and spoke" model, centralizing MAT services and connecting patients with local support resources.
- **Indianapolis, Indiana:** Implemented the "Recovery Ecosystem" model, which provides a coordinated system of prevention, treatment, and recovery services.
- **Columbus, Ohio:** Launched the "Hope Squad" initiative, which trains high school students to identify and support peers at risk of substance use.
- **Asheville, North Carolina:** Established the "Buncombe County Opioid Task Force," which successfully advocated for increased access to MAT and harm reduction services.
- **Seattle, Washington:** Launched a "Recovery in the Streets" initiative that provides mobile outreach and support services to people experiencing homelessness and addiction.
- **Baltimore, Maryland:** Implemented a "Buprenorphine Expansion Project" to increase access to MAT for opioid use disorder in primary care settings.
- **Northampton County, Massachusetts:** Created a "harm reduction hub" that offers a variety of services, including syringe exchange, naloxone training, and peer support, under one roof.

### Recovery Housing and Peer Support Networks:

- **Richmond, Virginia:**
  - ✦ Funding: \$1.7 million allocated to create a "recovery hub" including 30 beds of transitional housing, peer support services, and employment assistance.
  - ✦ Impact: Reduced homelessness among individuals with opioid use disorder, increased employment rates, and improved overall recovery outcomes.

- **Charleston, South Carolina:**

- ✦ Funding: \$1.5 million partnership with a local recovery housing organization to expand capacity and provide supportive services like life skills training and job coaching.
- ✦ Impact: Increased access to safe and stable housing, decreased recidivism rates, and improved quality of life for individuals in recovery.

- **Columbus, Ohio:**

- ✦ Funding: \$1 million to launch a peer support network program, training and connecting individuals with lived experience to provide support and guidance to others in recovery.
- ✦ Impact: Enhanced social connections, reduced feelings of isolation, and improved self-management skills for individuals in recovery.

### **Workforce Development Programs:**

- **New Orleans, Louisiana:**

- ✦ Funding: \$500,000 to develop a scholarship program for addiction treatment professionals, addressing the workforce shortage in the region.
- ✦ Impact: Increased number of qualified professionals available to provide treatment, improved quality of care, and shorter wait times for services.

- **Seattle, Washington:**

- ✦ Funding: \$300,000 partnership with a local university to create a specialized training program for mental health professionals in addiction treatment and trauma-informed care.
- ✦ Impact: Enhanced skills and knowledge among healthcare providers, improved coordination between mental health and addiction treatment services, and better patient outcomes.

- **Providence, Rhode Island:**

- ✦ Funding: \$250,000 to launch a mentorship program connecting experienced addiction treatment professionals with new practitioners, promoting knowledge transfer and retention.
- ✦ Impact: Improved quality of care for patients, increased job satisfaction and retention among new professionals, and strengthened the addiction treatment workforce.

### **National Recommendations:**

- **National League of Cities:** Provides resources and tools for local governments to address the opioid crisis, including a toolkit on leveraging opioid settlement funds.
- **Bloomberg Foundation:** Supports innovative initiatives to combat the opioid crisis, such as expanding access to MAT and promoting harm reduction strategies.



# City of Montgomery Specific Top Six Policy Priorities for Opioid Abatement:

## 1. Health and Welfare:

- Expand access to Medication-Assisted Treatment (MAT): Increase availability of methadone clinics and buprenorphine prescribers, integrate MAT into primary care settings, and reduce stigma surrounding medication use.
- Invest in harm reduction services: Provide clean needles and syringes, naloxone (opioid overdose reversal medication) distribution programs, and safe disposal sites for used needles.
- Bolster mental health and addiction treatment resources: Increase funding for outpatient and inpatient treatment programs, address co-occurring mental health conditions, and expand access to peer support services.
- Focus on social determinants of health: Address issues like poverty, homelessness, and food insecurity, which contribute to opioid use and worsen its consequences.

## 2. Affordable Housing:

- Develop supportive housing programs: Provide stable housing options with integrated addiction treatment and support services for individuals recovering from opioid use disorder.
- Prevent evictions for individuals with opioid use disorder: Implement eviction diversion programs and offer rental assistance to help individuals maintain stable housing.
- Address housing discrimination: Enforce fair housing laws and educate landlords about opioid use disorder and recovery.

## 3. Economic Development:

- Invest in job training and placement programs: Help individuals in recovery gain skills and find employment opportunities.
- Support businesses that hire individuals in recovery: Offer tax incentives or other benefits to incentivize businesses to hire people with opioid use disorder.
- Promote economic opportunities in high-poverty neighborhoods: Invest in infrastructure and development projects in areas disproportionately affected by opioid use disorder.

## 4. Transportation:

- Ensure access to treatment and support services: Expand public transportation options, particularly in areas with limited access to services, and offer transportation vouchers or assistance programs for individuals in recovery.
- Reduce driving under the influence of opioids: Implement stricter DUI laws and penalties, and expand public awareness campaigns about the dangers of driving under the influence.
- Support alternatives to driving: Invest in pedestrian and bicycle infrastructure, and promote ride-sharing or carpooling services.

## 5. Education:

- Implement drug prevention education programs in schools: Teach students about the dangers of opioid use and provide them with coping skills and resources.
- Educate teachers and school staff about opioid use disorder: Help them identify and support students who may be struggling with addiction.
- Offer scholarships and educational support programs for individuals in recovery: Encourage and support individuals in returning to school or completing their education.

## 6. Public Safety/Crime:

- Implement diversion programs for non-violent drug offenses: Direct individuals struggling with addiction towards treatment instead of incarceration.
- Train law enforcement officers on best practices for interacting with individuals with opioid use disorder: Reduce stigma and ensure officers are equipped to handle situations involving addiction safely and effectively.
- Focus on rehabilitation and reintegration for individuals with opioid use disorder who enter the criminal justice system: Offer treatment and support services in prisons and jails, and connect individuals with resources upon release to help them avoid recidivism.

<b>RECOMMENDATIONS</b>	<u>Primary Recommendations</u> <ul style="list-style-type: none"><li>• Addressing Historical Trauma: Recognize the role of historical trauma and systemic racism in shaping current disparities in opioid misuse. Develop culturally relevant interventions that address these factors.</li><li>• Partnership and Collaboration: Partner with local community organizations, faith-based groups, and healthcare providers to leverage resources and expertise.</li><li>• Increase Access to Healthcare: Expand Medicaid access and bridge the healthcare gap in racially deprived areas. Prioritize opioid treatment programs, medication-assisted treatment (MAT), and harm reduction services in these communities.</li><li>• Address Social Determinants of Health: Invest in programs that address poverty, lack of education, and unemployment, which contribute to opioid misuse. This can include affordable housing initiatives, job training programs, and community development projects.</li><li>• Cultural Competency: Ensure healthcare providers and social service workers are culturally competent to effectively serve diverse populations. This includes understanding language barriers, cultural beliefs about addiction, and building trust with marginalized communities.</li><li>• Harm Reduction: Implement harm reduction strategies like syringe exchange programs and naloxone distribution in high-risk areas. These programs reduce the risk of overdose and transmission of infectious diseases.</li></ul>
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- Community Engagement: Actively involve residents of racially deprived areas in planning and implementing policy solutions. This ensures their needs are heard and addressed effectively.
- Law Enforcement: Advocate for policies that prioritize treatment and diversion programs for low-level drug offenses in these communities. Focus on disrupting the illegal drug trade while avoiding unnecessary incarceration.
- Data-Driven Approach: Collect and analyze data on opioid misuse specific to racially deprived areas. Regularly monitor and evaluate the effectiveness of implemented policies to make data-driven adjustments.

## Conclusion

Addressing the opioid crisis in the City of Montgomery requires a multifaceted approach that combines prevention, treatment, and law enforcement strategies. Carefully considering the potential policy implications of different options and building strong partnerships with community stakeholders will be crucial for developing and implementing effective solutions. By taking a comprehensive approach, the City of Montgomery can make significant progress in combating opioid abuse and addiction and improving the lives of its residents.

## Resources:

- <https://www.alabamapublichealth.gov/>
- <https://www.alabamapublichealth.gov/montgomery/>
- <http://montgomerympo.org/>
- <https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health>
- <https://www.cdc.gov/opioids/data/index.html>
- <https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cor.pa.gov%2FAbout%2520Us%2FInitiatives%2FPages%2FMedication-Assisted-Treatment.aspx&data=05%7C02%7Cecompton%40montgomeryal.gov%7Ce81f333f89624583acdf08dc1baa1d44%7C0526cff3cd324bc89800dca60e991f34%7C0%7C0%7C638415664665793267%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6Ikl1haWwiLCJXVCi6Mn0%3D%7C3000%7C%7C%7C&sdata=U6oMja3qgig6bxOaJxJHH%2Bo1c1TyJFa0JeizMqGUZ%2FM%3D&reserved=0>
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