



Innovations & Implications: Responding to Your Community's Changing Needs

Jane Casarez
Mark Pilon

August 14, 2024

Introductions



Jane Casarez
Community Impact NC



Mark Pilon
Mountain Projects, Inc.

Disclaimer: The views, opinions, and content expressed in this presentation are those of the speakers and do not necessarily reflect the views, opinions, and policies of the Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, or the U.S. Department of Health and Human Services.



Objectives

- *Discuss where overdose prevention falls on the continuum of care model
- *Describe how coalitions can address overdose prevention while not losing sight of their primary substance use prevention efforts
- *Engage a diverse membership across sectors to incorporate overdose prevention efforts
- *Enhance the work of your coalition/agency using impact and lessons learned from North Carolina communities that are successfully blending primary prevention and overdose prevention initiatives

Who Are We?



Our Mission:

To work in partnership with communities to bridge gaps through direct support, evidence-based and innovative practices, and policy to minimize and prevent the harm caused by substance misuse.

We work in partnership with NC DHHS and other statewide providers to facilitate projects and provide direct support to substance use prevention coalitions



Grants to Prevent Prescription Drug/Opioid Overdose-Related Deaths

- SAMHSA grant awarded to the state of North Carolina
- Selected 11 communities to receive funding for 5 years
- Allowable strategies:
 - Naloxone distribution (required)
 - Naloxone training (required)
 - Prescriber and Dispenser Education/Training
 - NC LYM Campaign
 - Paramedicine
 - Linkages to treatment/recovery services
- * Of the 11 subrecipients, 8 are historically primary prevention providers and 2 are health departments that serve as fiscal agents for prevention coalitions

Overdose Prevention and Harm Reduction

Harm Reduction: a range of practices, public health policies, and/or laws designed to lessen the negative consequences associated with various human behaviors, both legal and illegal

Harm Reduction for substance use: a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use

Overdose Prevention: both a prevention and a harm reduction strategy

Definition: National Harm Reduction Coalition- <https://harmreduction.org>

Harm Reduction

Everyday Harm Reduction

Sun Screen

Fire
Extinguishers

Seat belts

Bicycle
Helmets

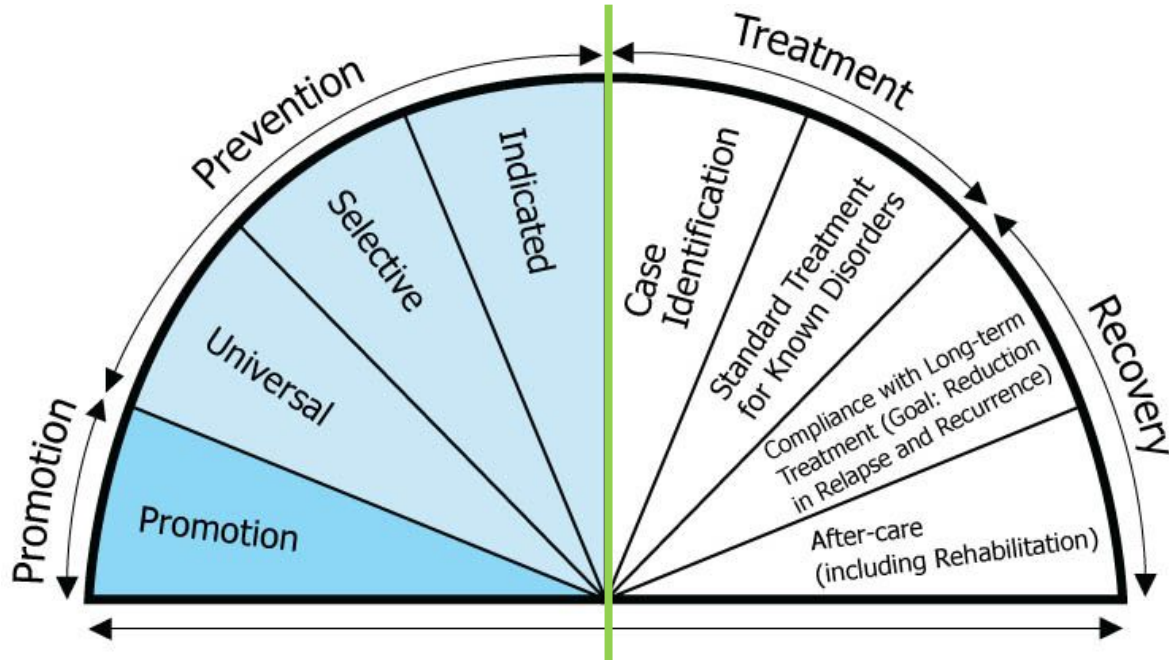
Designated
driver

Condoms

Nicotine
patches/gum

AEDs in
public places

Overdose Prevention



Overdose Prevention/Harm Reduction

Individual	Community	Structural
Safe storage and disposal initiatives	Opioid safety education and awareness	Insurance coverage of naloxone
Co-dispensing naloxone	Community-based naloxone training & distribution	Good Samaritan Law
Having naloxone on hand	Post-overdose response teams/leave behind program	Diversion programs
Promoting never using alone	Drug testing services & Syringe exchange programs	Legalized harm reduction practices

Prevention and Harm Reduction Go Hand in Hand

Shared Goal of Reducing Harm

Education and Awareness

Access to Resources and Support

Comprehensive Approach

Public Health Impact

Prevention

Prevent Substance Use Initiation

Risks of substance use and overdose

Promote access to prevention services and other resources aimed at preventing substance misuse

CSAP 6
CADCA 7

Decrease new cases of substance use disorder, Influence risk and protective factors, address ACEs and SDOH

Harm Reduction

Minimizing negative consequences and risks

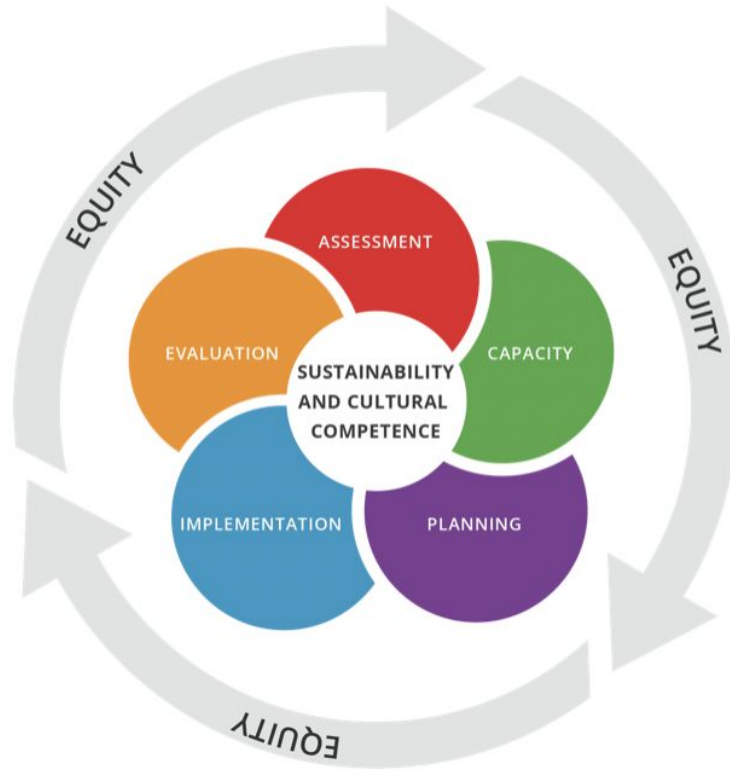
Practical knowledge on how to prevent and respond to overdoses

Promote access to life saving tools, addiction treatment, housing support, mental health support

Syringe Service, HIV/HCV Testing, Naloxone Distribution and Training, Reentry

Reduce negative health consequences and fatalities, address SDOH, increase access to care

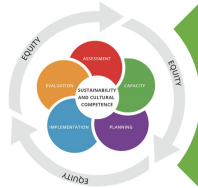
Strategic Prevention Framework



Where Do Primary Prevention and Harm Reduction Intersect



Education and
Awareness



Comprehensive
Approach

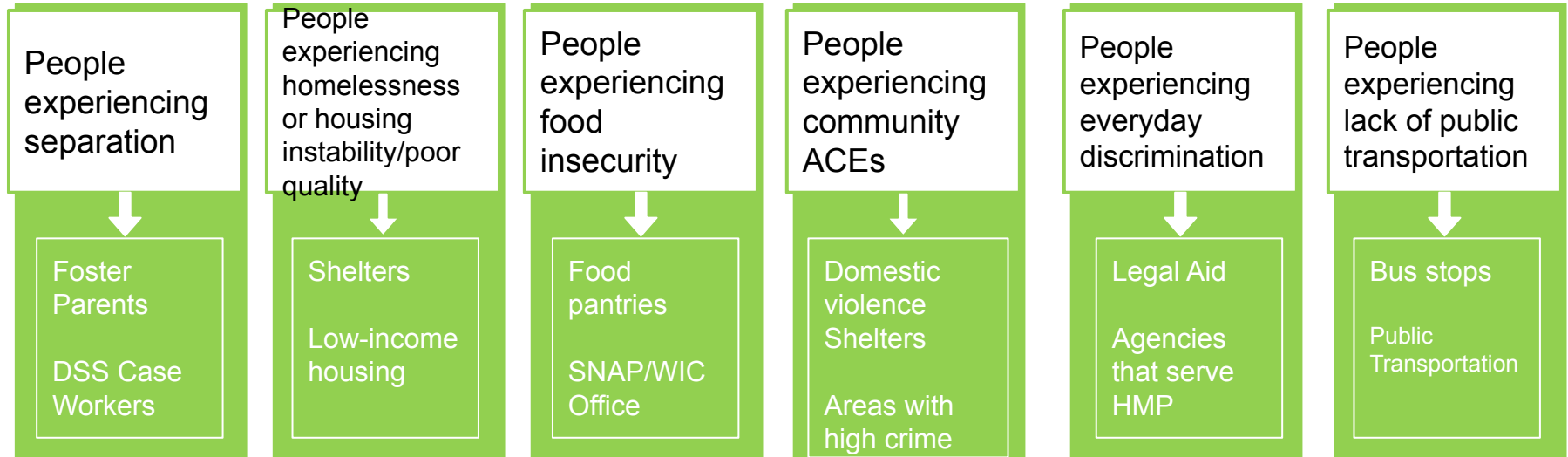


Access to Resources
and Other Supports

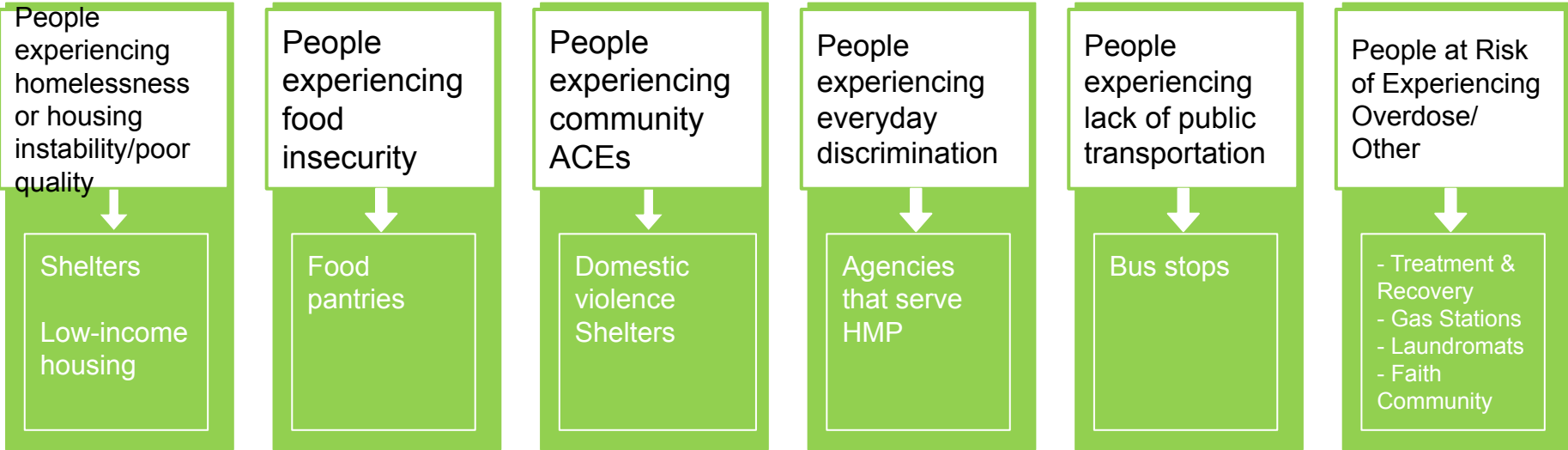
Blending Your Efforts

Education & Awareness	Comprehensive Approach	Access to Resources & Other Supports
Naloxone Training	Community-based naloxone distribution	Include services across the continuum of care on all resource guides
Educating on dangers of use, pressed pills, etc.	Lockbox & Chemical Disposal Kit Distribution	Create better systems for referrals & linkages to care
LYM	Drug Take Back Initiatives	Co-dispensing policies
Safer prescribing		
Stigma reduction efforts		

Engaging Diverse Stakeholders to Offer Naloxone Training



Engaging Diverse Stakeholders to Increase Naloxone Access



Lessons Learned

Collaborate

Meet Your Community Where They Are

Lean on Your Partners

Innovate

Slow and Steady

Impacts in North Carolina

	Baseline (10/2022)	Now (as of 02/29/24)
New Partnerships	NA	37
Naloxone Training	0 First Responders 48 Community Member	256 First Responders 3,137 Community Members
Naloxone Distribution	355 kits	8,962 kits
Lockbox Dissemination	1,722 lockboxes	4,246 lockboxes
Chemical Disposal Kit Dissemination	1,694 kits	3,944 kits
Referrals to Treatment/Recovery	287 referrals to services	915 referrals to services
Engagements in Treatment/Recovery	102 individuals engaged in services	714 individuals engaged in services



**MOUNTAIN
STRONG**

Building Resilience | Reducing Substance Misuse

Mark Pilon
Mountain Projects, Inc.
Preventionist

Who Are We?



Mountain Projects Community Action Agency is a non-profit organization. We help disadvantaged families, the elderly and others, by encouraging and supporting independence and self-sufficiency, and by providing assistance with emergencies and unmet basic human needs.



Our mission is to increase resilience in our youth, families, and communities through targeted efforts at reducing substance misuse and other risky behaviors.

North Carolina



Photo Credit: Wikipedia

Region A

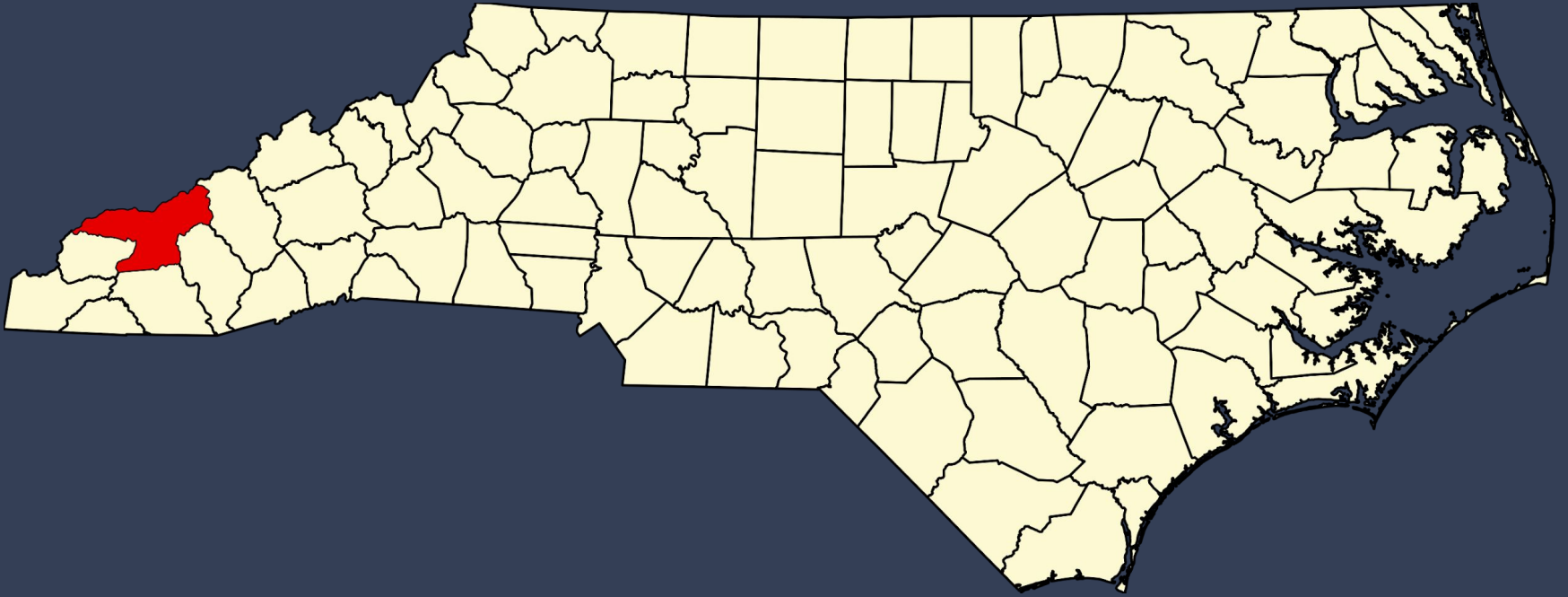


Photo Credit: Wikipedia

Swain County

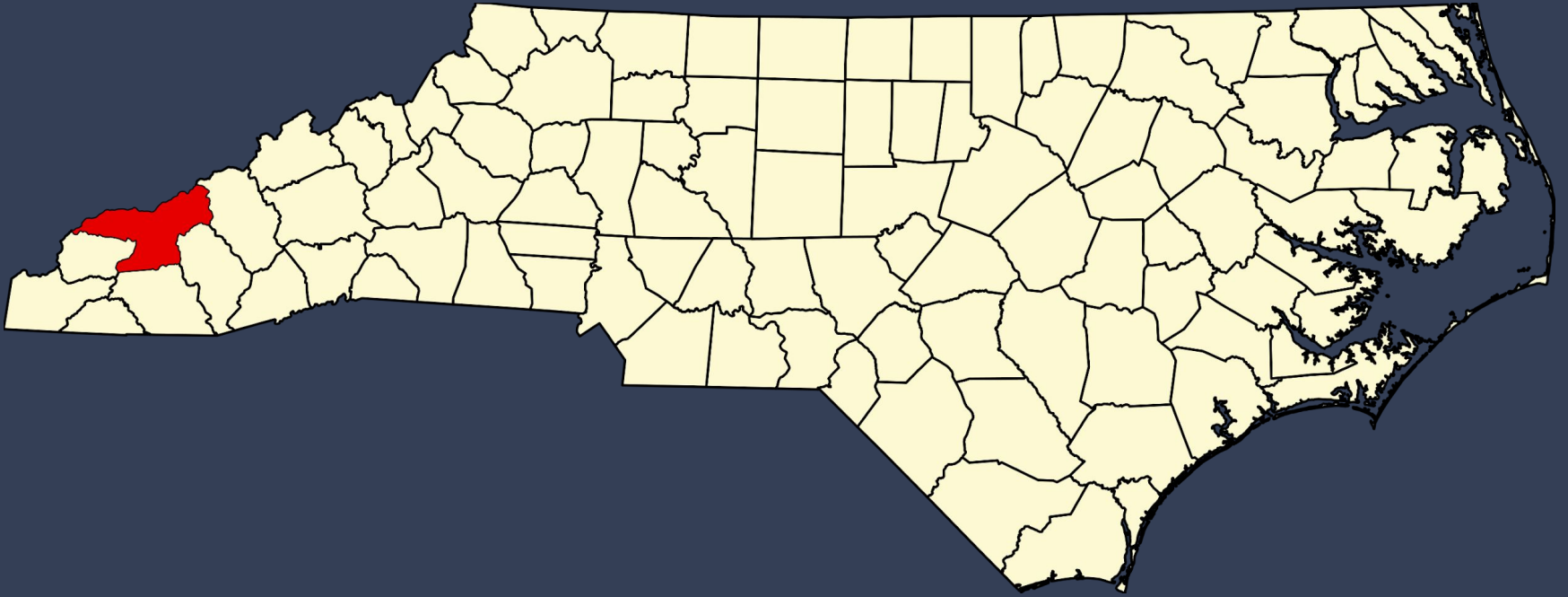
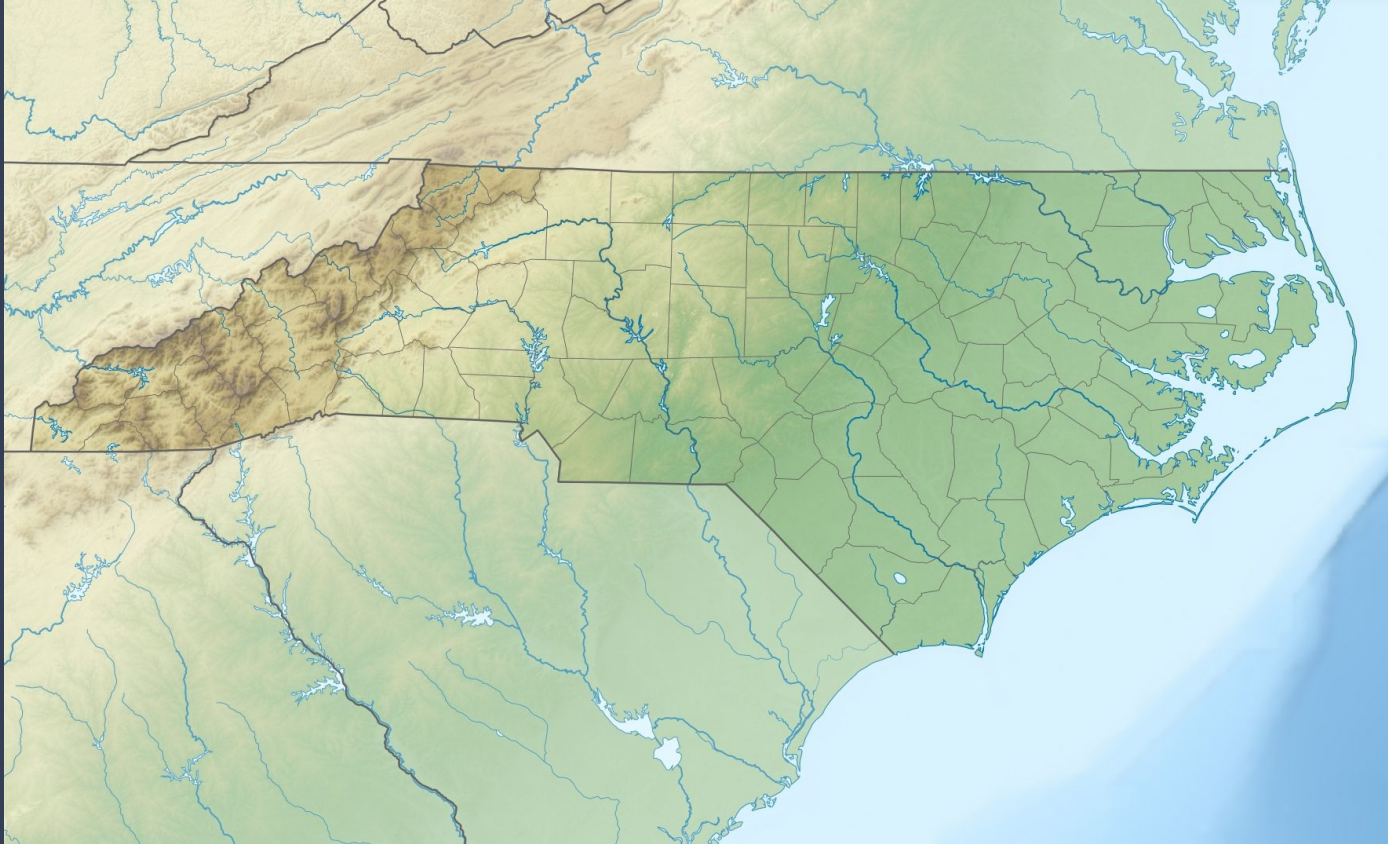


Photo Credit: Wikipedia

Mountainous



Rugged Terrain

Driving across the county

73 miles / 1 hour and 40 minutes

Example

US 129 traverses Deals Gap at NC/TN state line

318 curves in 11 miles (Tail of the Dragon)

Rural

337,728 Total Acres in Swain County

258,000 Federal Land- Great Smoky Mountains National Park and U.S. National Forest

30,000 Qualla Federal Land Trust- Eastern Band of Cherokee Indians

5,115 Tennessee Valley Authority (TVA)- Fontana Lake is 10,230 surface acres full

13% County Remaining

Population

	Population	Bachelor or Higher	Employed	Poverty	White	American Indian / Alaskan Native
North Carolina	10,439,388	36%	59%	13%	62%	1%
Swain County	14,117	21%	51%	20%	61%	30%
Almond	409	15%	40%	11%	87%	5%
Bryson City	1558	27%	55%	16%	82%	6%
Cherokee	2195	17%	46%	28%	10%	78%
Fontana Dam	66	10%	47%	20%	92%	3%

Source: U.S. Census Bureau

Overdose Data

				2022 Annual	2022 Annual	FY23-24
Source	Data Point	Age/Grade	Rate / Percent	NC	Swain	Swain
Injury Free NC- DPH	All intents Opioid overdose related ED visits	All	Rate Per 100,000	84.40	218.60	140.10
Opioid & Substance Use Action Plan Data Dashboard	Drug Overdose Deaths	All	Rate Per 100,000	41.40	98.10	
Opioid & Substance Use Action Plan Data Dashboard	Drug Overdose ED Visits	All	Rate Per 100,000	161.50	308.30	

Harm Reduction Considered

Mountain Projects is a Community Action Agency.

- Previous focus on reducing poverty
- Helping families fits the mission statement
- Progressive vision of our Executive Director and board supported this additional service

Mountain Strong is the Prevention Department.

- Previously focused efforts on Primary Prevention
- Moving folks toward Treatment & Recovery thereby reduces substance misuse, and reduces risky behaviors fitting our mission statement
- Gave serious consideration to whether or not we could have a viable impact in the harm reduction space, due to our lack of experience.

Our agency had no previous harm reduction work

Capacity

Assessed our own capacity

- Is it within our scope?
- Should we consider widening our scope?
- Can we learn / adapt / change to include this mindset?
- Can we implement the necessary strategies?
- Do we have enough staff?
- Does the grant include enough funding?
- What can we accomplish ourselves?

Capacity of Existing Partners

Assessed capacity of existing partners

- Who can work on this due to their mission or policies?
- Who shares this concern or is interested in these goals?
- Who is solid and reliable?
- Who is capable of the sustained effort?

What conditions make it possible to work together on this effort? (Win Win)

Which of these strategies, if any, is the partner already implementing?

Would the partner consider adding additional strategies?

Clear Memorandums of Agreement- Review these together for adjustment at least annually

Capacity of New Partners

Assessed the need for new partners

- Who is working in this space?
- Who has experience?
- Who can reach the intended audience?

What conditions make it possible to work together on this effort? (Win Win)

Which of these strategies, if any, is the partner already implementing?

Would the partner consider adding additional strategies?

Clear Memorandums of Agreement- Review these together for adjustment at least annually

Community Sectors

Diverse partners have different knowledge, experiences, and perceptions about both harm reduction and primary prevention.

Consider whether you need every sector to start this effort. Perhaps building a new task force is burdensome and time consuming.

Collaborate with

- Community leaders
- Groups advocating for similar goals
- Community-based organizations
- Those with lived experience

Diverse partners bring varying expertise and can help inform, advise, guide, and assist your efforts.

Partners

We work closely with our partners to reach the community. We could not do it without them.

Support that we provide

- Provide Medication Lockboxes
- Provide a Naloxone Vending Box
- Provide Naloxone Kits
- Consult and provide technical assistance on set up and implementation

Swain County Health Department

The NC Division of Public Health (NCDPH) Mission:
To make North Carolina the healthiest state in the nation.

-Distribute Naloxone Kits and Medication Lockboxes

Existing Partner

Vested in the same outcome

Community Leader

Primary Prevention but expanded Harm Reduction



Coalition for a Safe and Drug Free Swain County



Mission: Support a safe community by implementing prevention activities, promoting safe choices, and reducing unsafe conditions for our children and families.

-Distribute Naloxone Kits and Medication Lockboxes

Existing Partner

Overarching interest

Group advocating for similar goals

Primary Prevention but added Harm Reduction (Pursued SOR Grant)

Sunrise Community for Recovery and Wellness

Mission: Creating community wellness through shared lived experience.

Distribute Naloxone Kits and Medication Lockboxes

New Partner

Already doing the work, reach the intended audience

Lived experience

Harm Reduction but added Primary Prevention



Restoration House WNC



Mission: Empower the at risk population with sustainable solutions that foster long-term stability and self sufficiency by targeting the social determinants of health.

Distribute Naloxone Kits and Medication Lockboxes

New Partner

Reach the intended audience

Community Based Organization

Expanded Harm Reduction and added Primary Prevention

State of Franklin Health Council

Scope: Administers public transit. Coordinates part time work for seniors. Serves the interest of and meets the needs of the aging through services such as information and referral, advocacy, congregate nutrition, home-delivered meals, health promotion, Project CARE, Senior games, etc.

-Distribute Medication Lockboxes

New Partner

Reach the intended audience

Community based organization

Added Primary Prevention



Naloxone Training

For first responders, lay persons, and other community stakeholders
(harm reduction)

Preventing, Recognizing, and Responding to Opioid Overdose
4 Trainings with 107 Participants

Prescriber / Dispenser Training

On updated CDC prescribing guidelines to reduce Over-prescribing of opioid medications (primary prevention) and co-prescribing of Naloxone with opioid medications (harm reduction)

Contracted with Mountain Area Health Education Center (MAHEC)

3 Online Self Paced Modules each worth 1 CME credit

Treating Pain Safely, Treating Pain Safely 2, Prevention of Substance Use Disorders

Count toward both

-North Carolina Medical Board Controlled Substance Prescribing CME Requirement

-DEA Medication Access and Training Expansion (MATE) Act Training Requirement

45 registrations available

Funder approved across county lines-

Region A counties all qualify as Medically Underserved Areas by the Health Resources and Services Administration (HRSA)

Naloxone Distribution

To communities at increased risk of overdose including people who use drugs and their family members (harm reduction)

Dec 22-Feb 23	Y1 Q2	0	
Mar-May 23	Y1 Q3	120	
Jun-Aug 23	Y1 Q4	336	
		456	
Sep-Nov 23	Y2 Q1	264	
Dec 23-Feb 24	Y2 Q2	312	
Mar-May 24	Y2 Q3	432	
Jun-Aug 24	Y2 Q4	351	
		1359	
	Kits Dispensed	1815	
	Population	14,117	
	Saturation Rate	12.86%	

Medication Lockbox Distribution

To individuals with prescription opioids (primary prevention)

Dec 22-Feb 23	Y1 Q2	10	
Mar-May 23	Y1 Q3	201	
Jun-Aug 23	Y1 Q4	132	
		343	
Sep-Nov 23	Y2 Q1	54	
Dec 23-Feb 24	Y2 Q2	40	
Mar-May 24	Y2 Q3	66	
Jun-Aug 24	Y2 Q4	242	
		402	
	Boxes Distributed	745	
	Population	14,117	
	Saturation Rate	5.28%	

Lock Your Meds Campaign

To provide information about safe medication storage and proper medication disposal
(primary prevention)

Media Campaign

- Smoky Mountain Times Newspaper (Bryson City)
- Cherokee One Feather Newspaper (Cherokee)
- 94.1 FM Radio (Swain County)
- Facebook

Lock Your Meds Presentations

Incorporated into our Naloxone Presentations

4 Trainings with 107 Participants

Lessons Learned

Collective Impact doesn't require another Task Force or Coalition.
It can stem from a MOA with solid partners.

Recruit specific partners- Primary Prevention or Harm Reduction but expand on their capacity

- Seek those already doing the work
- Seek those vested in the same outcome
- Seek those who reach the intended audience
- Seek those with a similar overarching interest & possible experience

Keep regular open lines of communication. Ask if the partner needs anything from you.
Be clear about needs you may have.

Mark Pilon, Preventionist
Mountain Projects, Inc.
mpilon@mountainprojects.org

mountainstrongwnc.org



**MOUNTAIN
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Questions?

@impactcarolina

Thank You



@impactcarolina