Community Outreach and Education

Sara J Smith
Steve Mange
Tobi Gilbert
Cindy Murphy
Moderator: Patrice Roesler
Opioid Response Project
Webinar Series:
Communities Responding to the Opioid Crisis

- Expanding Treatment Options
  - Available on demand

- Outreach and Education
  - July 18, 2019 1:00-2:30 PM

- Syringe Exchange Programs
  - August 15, 2019 1:00-2:30 PM

https://www.sog.unc.edu/courses/communities-responding-opioid-crisis-webinar-series
In 2017, over 6 North Carolinians died each day from unintentional medication or drug overdose.
Unintentional overdose death involving illicit opioids* have drastically increased since 2013

A growing number of deaths involve multiple substances in combination (i.e., polysubstance use)

*Heroin and/or Other Synthetic Narcotics (mainly illicitly manufactured fentanyl and fentanyl analogues)

Technical Notes: These counts are not mutually exclusive; if the death involved multiple substances it can be counted on multiple lines; Unintentional medication, drug, alcohol poisoning: Y40-Y45 with any mention of specific T-codes by drug type; limited to N.C. residents
Analysis by Injury Epidemiology and Surveillance Unit

Community Outreach and Education
Statewide, the unintentional opioid overdose death rate is 12.1 per 100,000 residents from 2013-2017.
Number of hospitalizations associated with drug withdrawal in newborns increased 380% over last 10 years
# Phases of Collective Impact

<table>
<thead>
<tr>
<th>Components for Success</th>
<th>Phase I Initiate Action</th>
<th>Phase II Organize for Impact</th>
<th>Phase III Sustain Action and Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governance and Infrastructure</td>
<td>Identity champions and form cross-sector group</td>
<td>Create infrastructure (backbone and processes)</td>
<td>Facilitate and refine</td>
</tr>
<tr>
<td>Strategic Planning</td>
<td>Map the landscape and use data to make case</td>
<td>Create common agenda (goals and strategy)</td>
<td>Support implementation (alignment to goals and strategies)</td>
</tr>
<tr>
<td>Community Involvement</td>
<td>Facilitate community outreach</td>
<td>Engage community and build public will</td>
<td>Continue engagement and conduct advocacy</td>
</tr>
<tr>
<td>Evaluation and Improvement</td>
<td>Analyze baseline data to identify key issues and gaps</td>
<td>Establish shared metrics (indicators, measurement, and approach)</td>
<td>Collect, track, and report progress (process to learn and improve)</td>
</tr>
</tbody>
</table>

## YOU ARE HERE

### Phase III - Sustain Action and Impact

- Collect, track, and report progress (process to learn and improve)

### Phase II - Organize for Impact

- Create common agenda (goals and strategy)
- Continue engagement and conduct advocacy

### Phase I - Initiate Action

- Identity champions and form cross-sector group
- Map the landscape and use data to make case
- Facilitate community outreach
- Analyze baseline data to identify key issues and gaps
Speakers

• **Sara J Smith**  Communications Consultant, NC DPH, Injury & Violence Prevention Section

• **Steve Mange**  Senior Policy & Strategy Counsel, NC Department of Justice

• **Tobi Gilbert**  Psychologist with Jacksonville Police Department

• **Cindy Murphy**  Director of Prevention and Intervention Services
  Anuvia Prevention & Recovery Center
NC Department of Health and Human Services

State Efforts to Address North Carolina’s Opioid Epidemic

July 18, 2019

Sara J. Smith, MA, CHES®
Injury and Violence Prevention Branch
NC Division of Public Health
CDC Rx Awareness Campaign
**CDC R\textsubscript{x} Awareness Campaign Goals**

- Increase awareness and knowledge about the risk of opioids and discourage inappropriate use.

- Increase the number of individuals who avoid using opioids non-medically (recreationally) or who choose options other than opioids for safe and effective pain management.
Key Messaging

• Tagline: “It only takes a little to lose a lot.”

• Prescription opioids can be addictive and dangerous.

• Prescription opioid overdose can be prevented.
CDC Campaign Overview

• Developed and tested by CDC

• Evidence-driven

• Audience: Adults 25+

Rx Awareness Campaign Materials

• Digital
  • 30-second testimonial videos
  • Web banner ads
  • Online search ads
  • 5-second bumper digital video ads

• Radio
  • 30-second ads

• Out-of-home
  • Billboards
  • Newspaper ads
CDC Campaign Timeline

• Digital and TV
  • Digital ran June 4 – Aug. 19, 2018
    • Focused on downtown Raleigh while legislature in session (6/4 – 7/10)
  • TV ran June 11 – July 29, 2018 (Hiatus July 2-8)

• Statewide

• $400,000 budget
Results
Digital Campaign Results
June 4 – August 19

• Campaign performed better than national averages
• Overall impressions: 7 million
• Overall click through rate on ads: 0.25%
• Overall video completion rate: 70 percent
• Performed best in Raleigh, Charlotte, and Asheville
Digital Campaign Results: Facebook
June 4 – August 19

- Facebook portion performed better than national averages
- Video only (Drives higher engagement on Facebook.)
- Overall impressions: 943,492
- Facebook engagement rate: 1.14%
- Performed best in Charlotte, Raleigh, and NE NC/Outer Banks and Robeson/Brunswick Columbus counties
## Geofence Results

<table>
<thead>
<tr>
<th>Geo Fence</th>
<th>Performance Impressions</th>
<th>Performance Clicks</th>
<th>Performance CTR</th>
<th>Video Events Complete Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>A55+</td>
<td>1,054,146</td>
<td>2,127</td>
<td>0.20%</td>
<td>71.68%</td>
</tr>
<tr>
<td>Hospitals</td>
<td>1,000,049</td>
<td>1,947</td>
<td>0.19%</td>
<td>72.17%</td>
</tr>
<tr>
<td>Raleigh Legislature</td>
<td>266,031</td>
<td>448</td>
<td>0.17%</td>
<td>70%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,320,226</strong></td>
<td><strong>4,522</strong></td>
<td><strong>0.19%</strong></td>
<td><strong>71%</strong></td>
</tr>
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Raleigh Legislature geofence ran 6/4 – 7/10
Top Performing Zip Codes by Region
Network and Cable TV Results
June 11 – July 29

• Greater emphasis on 30-second videos

• Network TV: Focused on peak times when people are paying most attention (AM/PM news)

• Cable TV: Placed on networks popular with adults 25+

• 70-80% effective reach (People saw message at least three times)

• The overall average frequency of seeing the message was 9-12 times Some people saw it more, some less.
Guide for Messaging
Audience and Message Testing

Audience

• Diverse
• Representative of issue
• Multichannel dissemination

Message Testing

Formative research

• Focus groups
• In-depth interviews
• Environmental scan
• Social media assessment

Messages Tested for the Rx Awareness Campaign

<table>
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<tr>
<th>Messages That Tested Well</th>
<th>Messages That Did Not Test Well</th>
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<tbody>
<tr>
<td>Know more before you take more. Visit cdc.gov/drugoverdose.⁴</td>
<td>Is taking the risk worth losing everything?</td>
</tr>
<tr>
<td>Prescription opioid pain meds are addictive and dangerous.</td>
<td>Are they really worth the risks?</td>
</tr>
<tr>
<td>Prescription opioid pain meds. It only takes a little...to lose a lot.</td>
<td>Don’t take the risk.</td>
</tr>
<tr>
<td>Prescription opioid pain meds. It only takes a little...to lose a lot.</td>
<td>Just one prescription for opioid pain medication is enough to get addicted and overdose.</td>
</tr>
<tr>
<td>Prescription opioid pain meds. You're taking a risk each time you open the bottle.</td>
<td></td>
</tr>
<tr>
<td>Prescription opioid pain meds. It only takes a little...to lose everything.</td>
<td></td>
</tr>
<tr>
<td>Just one prescription can lead to addiction.</td>
<td></td>
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</tbody>
</table>
Addressing Stigma

• Avoid negative language
• Talk about substance use disorder in an accurate and humanizing way

Negative language and stigma regarding substance use disorder and addiction have shown to be a key barrier to seeking and receiving treatment for people who take drugs. Stigmatizing words such as “addict” reduce a person to only their drug use. Talking about substance use disorder in a more accurate and humanizing way can reduce stigma and help people receive appropriate treatment and support.
Reframing the Narrative

Instead of these words...Try using these!

- **Drug Abuse** instead of **Substance Abuse**
- **Substance Use Disorder** instead of **Drug Misuse**
- **Substance Misuse**
- **Person who uses drugs** instead of **Addict**
- **Person with a Substance Use Disorder** instead of **Abuser**
- **Person using drugs problematically/chaotically** instead of **Junkie/Druggie**
- **Sterile/Used Syringes** instead of **Clean/Dirty**
- **Positive/Negative Drug Test**
- **Person in recovery/person with problematic drug use**

Although the term “substance abuse” is widely used—including in the names of federal and state agencies—use of the term “abuse” in the context of substance use is no longer favored in the mental health community. The word “abuse” connotes violence and criminality and does not fit with a view of substance use disorder as a health condition. Substance use disorder is a diagnosable condition that refers to drug use that has become significantly problematic in a person’s life. This term is defined in the DSM-V.

Person-first language affirms people’s individuality and dignity. It promotes the message that a person is more than just their addiction.

NOTE: How a person chooses to self-identify is up to them, and they should not be corrected or admonished if they choose not to use person-first language.

The term “dirty” is often used to describe syringes that have been used or to describe positive drug screens. People who are no longer using drugs are often referred to as “clean.” However, the clean/dirty dichotomy creates a false narrative that people who use drugs are inherently unclean.
Questions?

Thank you!

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Injury and Violence Prevention Branch
North Carolina Division of Public Health

Community Outreach and Education
The More Powerful NC Opioid Awareness Campaign

Steven Mange
Senior Policy Counsel
North Carolina Department of Justice

Community Outreach and Education
Why A Statewide Media Campaign?

• Wide variation in awareness & understanding

• Desire to do something / uncertainty about what to do

• Sense of fragmentation, isolation, or hopelessness
Challenges

• Temptation to use fear (and reinforce stigma)

• Focus on pills, heroin, fentanyl . . . or all three?

• Funding an effective statewide campaign
TOGETHER, WE’RE STRONGER THAN THE OPIOID CRISIS.

MORE POWERFUL

MorePowerfulNC.org
Anthem video
Calls to Action

- Take back unneeded drugs
- Talk to your health care provider
- Talk to your family
Website Content

- Get help
- Get involved
- Get the facts
Take Action Now

• Take the pledge
• Become a partner
• Pass a resolution

TAKE ACTION NOW

There are so many things we can all do to take action on the opioid crisis. Right now, you can take a pledge to take action, become a partner, and pass a resolution in your community.
Metrics

• 20 coalitions members
• 105 partners
• 195 individual pledges
• 8 resolutions passed
• 44,000 website users
• 81,000 page views
Social Media

• 4.6 million impressions
• 250,000 views
• 35,000 clicks
Most Visited Web Pages

• Home page
• Good Samaritan law
• Pill disposal
• About the campaign

• Take action now / pledge
• Partners
• Finding treatment
• About opioids
Questions?

Steven Mange
smange@ncdoj.gov
Strategic Opioid Advanced Response

City of Jacksonville / Onslow County

Community Outreach and Education
Community Opioid Crisis

APRIL 2016

• Castlight Health released a report - The Opioid Crisis in America's Workforce - ranking Jacksonville NC as 12th in the nation for opioid abuse rates, with 8.2% of the population identified as receiving and abusing a prescription.

• Two 21-year old residents who had been prominent high school athletes from the same county high school died from opioid overdoses.

• 2016 Community Health Needs Assessment results showed that of those who responded, 23.4% listed drug abuse as an issue that most affects their quality of life.
Community Opioid Crisis

2017-2019

• 2017- County EMS dispensed Narcan 355 times

• 2017-City of Jacksonville Public Safety dispensed Narcan 18 times: JFD = 11 times dispensed and JPD = 7 times

January 1, 2019 – April 29, 2019

• EMS responded to 83 overdoses, 41 occurring within the City of Jacksonville; there were 8 total fatalities during these 4 months.

• NC DETECT indicated 21 opioid and 13 heroin overdose patients have checked in to the local emergency room, however, this number is an underestimate.

• According to the Jacksonville Department of Public Safety, since July of 2017, there has been a 136% increase in overdoses, a 7% increase in drug-related incidents, a 106% increase in crisis intervention calls, a 26% increase in attempted suicide, a 58% increase in child abuse and neglect with some cases due to opioids, and a 10% increase in reportable crimes, many due to property crimes tied to drug use.

• Of the 263 children in foster care, 65% of the cases have substance abuse as a contributing factor for placement into foster care.
Outreach Strategies Implemented

- Law Enforcement Assisted Diversion (LEAD)
- Quick Response Team (QRT)-24-72 hr response to OD
- Strategic Opioid Advance Response (SOAR)
- Community Paramedic Program (CP)
- Multi-disciplinary Teams (MDT)
- Mental Health First Aid (MHFA)
- Critical Intervention Training (CIT)
1. Law Enforcement
2. Community Paramedics
3. Mental Health
4. Peer Support
LEAD

Law Enforcement

Provider Agency

District Attorney Office

LEAD Case Manager

Community Treatment Providers

Community Outreach and Education
MHFA

Law Enforcement Agencies

Jacksonville Police Department

Coastal Carolina Community College
Outreach Strategies Con’t

• Development of the Dix Facility Based Crisis Center – MH and SA
• Behavioral Health Urgent Care Model in ED since 2015- Stabilize and link
• Gaps and Needs Assessments (Grant-TASC)
• Crisis Continuum Project (Grant)- Identify and address
• QRT Peer Support Specialists Grant- F/U and CM
Gaps
Identified Gaps

• Lack of formal processes in place for linking people with opioid use disorder (OUD) to ongoing treatment at the immediate point of release.

• Non-existent SUD treatment services such as Inpatient Withdrawal Management (detox), Inpatient Treatment, Residential Treatment, Partial Hospitalization Programs, and Methadone.

• Lacking cohesive accountability among community providers.

• Effective Communication
Resiliency Factors

- **Teamwork**

- Communication
- Honesty
- Time
- Risk
- Commitment
- Relationships
- Sharing
- Collaboration
- Leaders
- Willingness
- Doers
- Goals
- Planners
- Openness
- Success

Community Outreach and Education
Community Partners

City of Jacksonville City Counsel
City of Jacksonville Dept. Of Public Safety (JPD / JFD)
City of Jacksonville
Dix Facility Based Crisis Center
Integrated Family Services
Trillium Health Resources
Sneads Ferry HOPE
Brynn Marr Hospital
Camp Lejuene
Swansboro Police Department
Coastal Carolina Community College
PORT Human Services

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