

MAO Perspectives on Take Back, Educate and Inundate

Presenter

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August 13, 2021

Disclosure statement

I have nothing disclose.



Topic Objectives

- Discuss the impact of the opioid crisis in the United States and Alabama
- List innovative approaches to preventing opioid use disorders in Ryan White HIV/AIDS
 Program (RWHAP) Clinics and AIDS Service Organizations
- Explain the benefits of implementing multi-layered prevention and intervention strategies to reduce opioid misuse and abuse amongst patients/clients and service providers
- List national health observances months and days to launch substance abuse prevention campaigns

^{*} Bridging HIV, HCV, & SUD: Innovations in the Field Webinar Series



Opioid Crisis in the United States

- Access to prescription drugs that are being sold online or though social media
- Increase in the lethality and availability of fake or counterfeit prescription pills that contain fentanyl and methamphetamines
- Most common counterfeit pills that are made to look like prescription opioids include:
 - Oxycodone (Oxycontin and Percocet)
 - Hydocodone (Vicodin)
 - Alprazolam (Xanax)
 - Stimulants like amphetamines (Adderall)

https://www.alabamapublichealth.gov/news/2021/10/06.html



Opioid Crisis in the United States

- More than 9.5 million counterfeit pills have been seized this year
- The number of DEA seized counterfeit pills with fentanyl jumped nearly 430 percent since 2019.
- DEA lab testing reveals that 2 out of every five pills with fentanyl contain a potentially deadly dose
- There were 93,000 overdose deaths in 2020 during the COVID-19 pandemic resulting in a 29% increase from 72,000 overdose deaths in 2019

https://www.alabamapublichealth.gov/news/2021/10/06.html



Opioid Crisis in Alabama

- Opioid prescriptions have decreased by 38% since 2011
- Deaths from drug overdoses have shifted to more dangerous drugs such as heroin and fentanyl
- In 2020, an est. 980 people in Alabama died from drug overdoses which was a 27 percent increase from 2019
- Prescription drug overdoses declined as heroin and fentanyl overdoses increase
- Alabama is one of 25 states with the highest increase in drug overdoses



Addressing the Opioid Crisis in Alabama

- In 2017, Governor Ivey established the Alabama Opioid Overdose and Addiction Council.
- Development of a strategic plan with subcommittee's to explore the following problems:
 - 1. Community Engagement/Veterans
 - 2. Prescribing and Dispensing
 - 3. Rescue (Naloxone)
 - 4. Treatment/Recovery

- 5. Data
- 6. Law Enforcement
- 7. Prevention/Education
- 8. Workforce



Council Recommendations

- Prevention
- Intervention
- Treatment
- Community Response
- Workforce

* Bridging HIV, HCV, & SUD: Innovations in the Field Webinar Series



^{*} https://mh.alabama.gov/wp-content/uploads/2019/11/ALABAMA-OPIOID-OVERDOSE-AND-ADDICTION-COUNCIL-FINAL-.pdf

MAO SERVICES

all was

Medical Advocacy & Outreach

26% of MAO Personnel dedicated to support services including telemedicine and information technology support.

39 % of MAO Personnel

HIV Specialty & Primary

- PrEP
- nPEP
- Hepatitis C
- Dental
- Pharmacy

Medical

Behavioral

- Mental Health
- Substance Abuse
- Counseling
- Treatment Referral
- Drug Testing

9% of MAO Personnel

20 % of MAO Personnel

- Social Work
- Case Management
- Transportation
- Food Pantry
- House Assistance
- Consumer/Client Engagement

Social

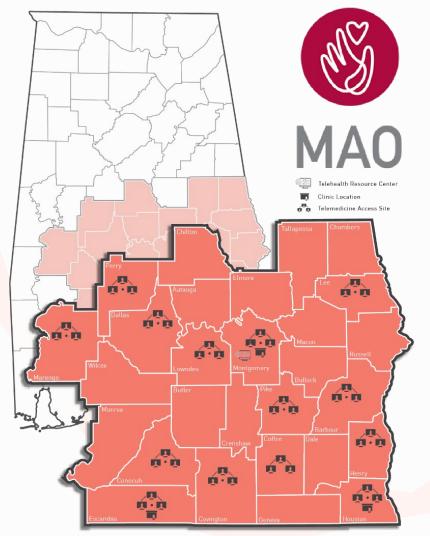
Educational

- HIV Testing
- Hepatitis C Testing
- School & Community Prevention Education
- Alabama AETC/ Professional Development
- Civic Health Advocacy

6% of MAO



GEOGRAPHY & REACH



18,675 square miles

- 4 Full-service Clinic, Testing & Education Hub Sites
 - Montgomery
 - Dothan
 - Atmore
 - Selma (Clinic Only)
- 11 Alabama e-Health Satellite Clinics
- Hub Sites & Satellite Clinics connect MAO team members using state-of-the-art encrypted telemedicine technology.
 Alabama Health



Why Opioid Prevention in RWHAP Medical Settings

- People living with HIV (PLWH) that have a history of injection drug use
- PLWH who are associated with an injection drug user either directly or through unprotected sexual contact
- PLWH who self identify a prior history of illicit drug use
- PLWH who are diagnosed with other co-morbid health conditions where controlled substances are prescribed for pain management



Take Back - Educate - Inundate



Collecting and disposing of expired and unused medications

(Annual Take Back Days)

April, October and Ongoing



Take Back - Educate - Inundate

- Individual encounters with agency patients/clients
- Training and continuing education with agency staff, community health care and behavioral health providers



Take Back - Educate - Inundate

Mass distribution of substance use prevention information using social media





Working with Law Enforcement







Documenting Prescriptions







A Collaborative Approach







Our First Year





Our Second Year







Still Collecting







Program Benefits & Outcomes

- Easy integration of program into existing RWHAP services
- Increased and expanded collaborations with non-RWHAP service providers
- Program replication in diverse and nontraditional human service and social settings
- Coordinated efforts with local law enforcement officials
- Convenience of onsite medication disposal for agency patients/clients
- Professional development training for behavioral health service providers



Supporting Council Recommendations

Alabama Opioid Overdose and Addiction Council

Supporting Council Recommendations:

- Preventing prescription medications from entering the wrong hands through Take Back efforts
- Intervening by providing education and conducting Screening, Brief Intervention and Referral to Treatment (SBIRT) screenings with agency constituents
- Facilitating Treatment opportunities by coordinating linkages and referrals to State certified substance abuse treatment programs and community mental health centers
- Supporting Community Response efforts by launching Take Back Educate Inundate initiatives with Ryan White clinic staff, patients, clients and family members of MAO
- Workforce Internal Media Relations, National Observance Days/Months, New Patient Intake, Information Sharing/Dissemination



2020 Project Expansion

The Amerisource Bergen® FOUNDATION



Selma AIR
Five Horizons









But Guess What Happened......

COVID-19 **UPDATES FROM THE CENTERS** FOR DISEASE CONTROL AND PREVENTION (CDC) C VID-19
Safer at Home Practice good hygiene: cover coughs and sneezes, don't touch your face, and Work remotely whenever possible



Use cloth face coverings

Impact of Twindemics on Recipients with Substance Use Disorders in RWHAP Care Settings

- Pandemic related stress influenced first time drug use
- Pre-existing problems intensified during the pandemic
- Lockdowns and different pandemic restrictions contributed to isolation and difficulties with coping and adjusting
- Limitations in accessing treatment and recovery virtually
- Increase use of fentanyl, methamphetamines and heroin

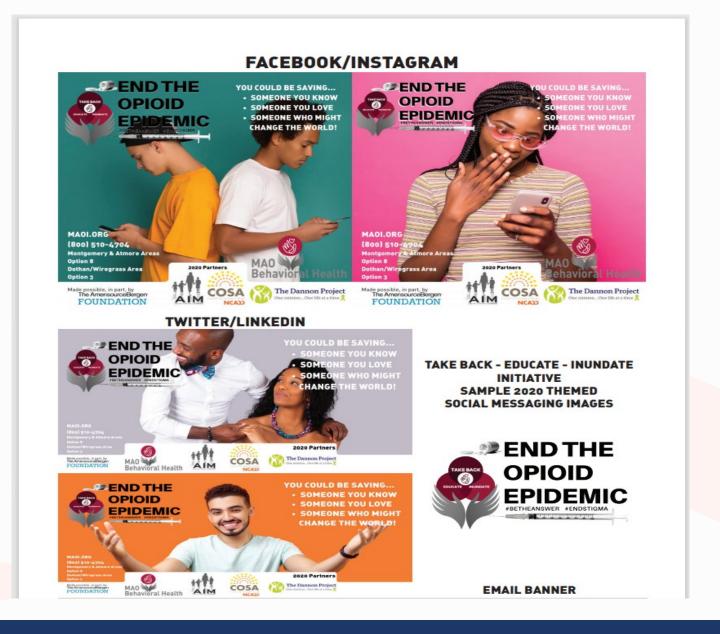


Getting Creative during the Twindemic





More Creativity during the Twindemic





Annual Health Observances



SEPTEMBER



RECOVERY MONTH 2021

RECOVERY IS FOR EVERYONE: Every Person, Every Family, Every Community

WWW.NATIONALRECOVERYMONTH.ORG

















Resources for Helping Professionals



Need Help? Want to Help?

Food, Shelter, Clothing & More 237 www.211ConnectsAlabama.org





Disaster Distress Helpline

1-800-985-5990

TEXT: "TalkWithUs" to 66746

DisasterDistress.samhsa.gov

SAMHSA HHS.gov





Information, Resources, Support Monday-Friday, 10:00 a.m. to 6:00 p.m. ET 800-950-NAMI (6264) info@nami.org



1-800-273-TALK (8255)

suicidepreventionlifeline.org



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- https://www.samhsa.gov/prevention-week







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