Substance Abuse Research:

⇒ Debi Elliott, PhD, Co-Investigator, RRI
  o Clinical Child Psychologist
  o Senior Research Associate, PSU Regional Research Institute for Human Services
  o Director, PSU Survey Research Lab
  o Research Interests: Mental health, trauma, addiction, measures, culturally specific supports to families and young adults struggling with addiction and trauma

⇒ Karen Cellarius, MPA, Co-Investigator, RRI
  o Senior Research Associate, PSU Regional Research Institute for Human Services
  o Research Interests: Same as above + systems supports for providers, education
   - Project Network*, IAM Cares, VocRehab, the Miracles Club, Multnomah County Mental Health and Addiction Services Division (MHASD) Family Involvement Team (FIT): 11 state, county, and non-profit partners, including Project Network

2. **Strengthening Minority Communities** (SAMHSA) (2001-2004)
   - Project Network* (now part of Lifeworks NW), TACS, MultCo DCJ African American Program (AAP), CCMH, Stay Clean, Albina Ministerial Alliance, Common Bond (VOA), VOA, CODA, Better People, IAM CARES

   - Multnomah County Mental Health and Addiction Services Division (MHASD)* FIT Team

   - Oregon Volunteers of America (VOA)*, MultCo DCJ, MFS, SE Works, Better People, Irvington Covenant CDC

5. **2nd Chance Act Youth Offender Reentry Initiative** (OJJDP) (2010-2013)
   - OYA*, Oregon Juvenile Department Directors Association (OJJDA), CEOJJC, Trauma Healing Project (Lane), Local transitional housing providers

6. **Services in Supported Housing** (SAMHSA) (2007-2013) (Cellarius)
   - Outside In*, DePaul Treatment Centers

   - VOA Oregon’s Family Recovery Support*, The Miracles Club, Oregon DHS, MHASD FIT Team
Interests/Knowledge Areas:

🗹 Methods
- Longitudinal in-person interviews with consumers
- Focus groups with consumers and providers
- Telephone interviews with providers
- Longitudinal analysis of state data (DOC, OYA, DHS)

🗹 Measures
- Addiction Severity Inventory/SAMHSA GPRA Cross-site interview
- Trauma Symptom Checklist
- Level of Services/Care Management Inventory (LS/CMI)
- Fidelity Scales (ACT/ IDDT)
- System level data: Criminal justice/Child welfare/health data

🗹 Topics
- Targeting treatment for specific populations
- Co-occurring Disorders
- How to define success & maintaining recovery (aka Relapse Prevention)
- SDH (incl intersection of Criminal Justice, Child Welfare, MH & Addiction)
LAKEESHA DUMAS
CERTIFIED RECOVERY MENTOR

SUBSTANCE ABUSE SUPPORT, ADVOCACY, COMMUNITY ENGAGEMENT, INDIVIDUAL SUPPORT, COMMUNITY RESOURCES FOR ADDICTION AND CHRONIC DISEASE MANAGEMENT, SIDE BY SIDE HEALTH COORDINATION, NALOXONE EDUCATION AND RESOURCES

LIVED LIFE EXPERIENCE
WOW PROJECT

Prescription Drug Overdose Prevention Work Group

Health Resiliency Project

HOPE TEAM

OLD, CURRENT & UPCOMING PROJECTS

DELTA
Developing Equity Leadership through Training and Action
LaKeesha Dumas Joins OPHI Board

The OPHI Board of Directors welcomed LaKeesha Dumas to the OPHI board at its March meeting. LaKeesha is a member of the Board of the Oregon Community Health Worker Association, chair of the Traditional Health Worker Commission, and member of several leadership groups including PFLAG, community advisory councils, and others. She is an advocate for reducing disparities in her community and brings a depth of knowledge and wealth of experience around the CHW movement. In 2014, OPHI staff nominated LaKeesha for the OPHA Emerging Leader Award, which she is shown receiving in this photo. LaKeesha says, "My commitment is to the health and wellness of my community in all aspects."

FUTURE GOALS, PLANS, HOPES & DREAMS

- Utilizing My DELTA Cohort to Improve Health
- Youth Prevention and Sustainable Career Paths
- Re-Entry Transitional Housing
Historical Traumas

- Relocation
- Sterilization
- Boarding Schools
- Misuse of Research
- Poverty
Cultivates Shared Values
Builds Community
Integrates Native Culture
Nurtures Relationships

A Trauma-Informed Process
The FGC’s Trauma-Informed Process

**Historical Trauma (HT)**
- Historical Trauma From Colonization
- Inequalities
- Values and Beliefs
- Discrimination

**Protective Factors**
- Native Protective Factors
- The Future Generations Collaborative

**Outcomes**
- Native Health, Social, Political, and Economic Outcomes
- Government Relationships with Native Communities

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**Key**
- The Intergenerational Transmission of HT
- The Systemic Transmission of HT
- Trauma-Informed Healing Process

Mercier, 2014
What LFL Brings to the Table

- Excellence in crisis de-escalation
  - 35,000 crisis calls fielded in 2014
- Leadership in prevention
  - School climate initiative in schools throughout Oregon
- Catalyst for good public policy
  - Independent advocacy
  - Credibility with local, state and federal policy and opinion leaders
  - Track record of policy development & implementation
Project #1: Ending the Opioid Epidemic

• The Problem:
  – Oregon #1 in Misuse of Opioids (SAMHSA 2011)
  – 100 million opioid pills in Oregon every 12 mos (oha)
  – >deaths than any illegal drug & car fatalities

• The Solution
  – Better prescribing: Rx guidelines, PDMP use, reimbursement strategies like paying for non-opioid therapies & pre-auth, EHR defaults, expanded availability of MAT
  – Better treatment: expanded use and access to MAT, reimbursement for MAT, better Naloxone distribution
  – Disposal of Unwanted meds
  – Prevention and education efforts
Project #2: Launch the Recovery Movement

• The Problem:
  – We don’t do provide real access to treatment
    • We tolerate waitlists, faux parity, “maintenance” use
  – We don’t reimburse for treatment
  – We not treat addiction as a chronic condition like diabetes

• The Opportunity:
  – 26 million people in long term recovery
    • Every single one of them has family and friends
  – Millions more in active addiction
    • Every single one of them has family and friend

• The Solution: Launch a Recovery Movement
  – 2019 Session should be the year we make Oregon The National Leader on Addiction and Recovery
Dwight Holton
Chief Executive Officer
Lines for Life
971.244.1371
DwightH@Linesforlife.org
Emily Lott, MSW

Doctoral Student, PSU School of Social Work, Regional Research Institute

- Research interests include: Adolescent mental health, substance abuse, juvenile justice, family impact, community organization

Past Experience in SA areas:

- Therapist, youth & families with mental health/substance abuse needs
  - Partnerships with juvenile drug court and juvenile court
  - Various clinical trainings related to SA for youth
- Women & families in re-entry from jail
  - Community orientation and collaboration for sobriety-mindful events and partnerships (at the request of the participants) for successful re-entry
- Collaboration with SA agencies for proposal writing for youth programs
What I Bring & Direction for SA

What I Bring...
- Interest and experience in the topic, particularly as it relates to youth and families
- Learning more about ways in which to connect with others about the issue
- Collaboration in creative thinking around the direction of SA for youth and families

Direction I hope to see...
- Education to youth about aspects of SA not often addressed (i.e. CJ involvement) with the goal of youth having skills to make informed decisions for themselves
- Normalization of SA conversation to youth to decrease shame, stigma, fear
Substance Abuse Policy and Research Center

Dennis McCarty
Traci Rieckmann
OHSU, Public Health
Major Projects

• Alcohol and Drug Treatment in Oregon’s CCOs
• Medication Research Partnership
• Methamphetamine Abuse Research Center
• NW Addiction Technology Transfer Center
  – OHSU/Health Share ECHO; Physician Behavioral Health Learning Lab (PBHall) intervention to increase use of MAT
• TES (Technology based) intervention with American Indian/Alaskan Natives
• Vietnam and other international projects
• VPP Hooper Detox Study
• Western States Node of the National Drug Abuse Treatment Clinical Trials Network
Partners

• Adapt, Coda, Hooper, NARA
• Aetna, Kaiser Permanente, CCOs
• Oregon Coalition for Responsible Use of Medication
• Oregon Research Institute, UCSF,
• INCAAS (International Center for Advanced Research and Applied Science)
Addictions and Mental Health Division - AMH

Jennifer Foley, Women’s Services and SAPT Block Coordinator
Dr. John McIlveen, State Opioid Treatment Authority (SOTA)/Health Professionals’ Service Program Manager
Nicole Corbin, LPC, Addiction Services Manager
How funding turns into services

Medicaid Funding → Oregon Health Plan → Coordinated Care Organizations

- Service Coordination Agreements
- Common Outcome Measures

Providers → Community Mental Health Programs

State & Federal Funds → Addictions & Mental Health

Behavioral Health Care for Oregonians
OHA/AMH – Strategic Plan 2015-2017/Goals and Policy Objectives

• Expand statewide access to Medication-Assisted Treatment
• Provide recovery support services to people transitioning out of substance use disorder and gambling disorder treatment
• Improve the existing recovery-oriented system of care
• Increase equitable access to behavioral health services in all regions of the state
• Engage clients in more direct peer delivered support services
Portland State School of Social Work
Regional Research Institute
Reclaiming Futures

Introduction for the:
Research to Action Symposium
Substance Abuse
the Reclaiming Futures approach

- More Treatment
  - Community Context
- Leadership & Leadership Team
- Better Treatment
- Beyond Treatment
  - Community Collaboration

www.reclaimingfutures.org
Model

INDIVIDUALIZED RESPONSE

1. Initial Screening
   Mental Health Substance Abuse

2. Initial Assessment
   Service Referral

3. Service Coordination
   Family Driven Community based

COMMUNITY DIRECTED ENGAGEMENT

4. Initiation
   Within 14 days

5. Engagement
   Three service contacts within 30 days

6. Transition
   Youth remains connected to the community

www.reclaimingfutures.org
Contact Information

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Reclaiming Futures, School of Social Work
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RACE AND BARRIERS TO TREATMENT IN THE JUSTICE SYSTEM

- Team Members
  - Melissa Thompson, Associate Professor, Sociology
  - Summer Newell, Doctoral Candidate, Sociology
  - Matt Carlson, Professor, Sociology

- The team is interested in identifying & addressing social determinants of substance use and mental health treatment within the criminal justice system.

- Available for collaboration on funding proposals, program/study design and evaluation, quantitative and qualitative data analysis, and more.
RACE AND ACCESS TO SUBSTANCE ABUSE & MENTAL HEALTH TREATMENT AS REPORTED BY PAROLE OFFICERS

- Interviews with racially diverse sample of Multnomah County Parole Officers (POs) to identify barriers, particularly associated with race, to accessing substance abuse & mental health treatment following incarceration.

- Findings:
  - Substance abuse treatment, while widely available to parolees, is rarely culturally tailored to meet the needs of people of color and/or non-English speakers.
  - Mental health treatment is almost entirely unavailable to parolees, despite reports of need for a majority of this population.
  - Stigmatization leads some groups (particularly African Americans) to be less likely to seek mental health treatment.
  - Race of PO impacts perceptions of how race shapes a parolee’s reentry experience.
NEXT STEPS

- Since POs are in a “gatekeeping” role for parolees accessing services, could intervention reduce disparities in access to treatment?

- How to shift the discussion from substance abuse and mental illness being separate entities (and thereby treated separately) when it is reported that these conditions are mutually dependent, particularly with those involved in the corrections system?

- Would culturally tailored services reduce stigma for minority groups in accessing substance use and mental health treatment?

- How do we develop culturally tailored treatment services?

- Does the Affordable Care Act provide an opportunity for improvement?
Christina Nicolaidis, MD, MPH
PSU School of Social Work/ OHSU Medicine

• Potential contributions / expertise
  • Research content areas: interpersonal violence, disability, chronic pain, depression, patient-centered care, health disparities, health services
  • Methodologies: mixed methods (qualitative/survey), instrument development and adaptation, community-based intervention development
  • Approaches: community based participatory research (CBPR) and other community-engaged scholarship
  • Clinical experience: chronic pain, internal medicine
  • Resources: Social Determinants of Health Initiative
  • Other experience: NIMH and PCORI peer reviewer
Interests in future collaborations

- Any CBPR projects
- Projects to increase the voice of patients / peers in the assessment or treatment of substance abuse
- Projects addressing substance abuse in communities of color and/or people with disabilities
- Projects to increase patient-centered approaches to the treatment of chronic pain / prevention of prescription opioid misuse.
- Projects to help link medical system (hospital / primary care) and substance abuse treatment
- Other projects to address social determinants of health
Coordinated Responses to Survivors of Violence with Substance Use Disorders

April 10th, 2015
Research to Action Symposium on Substance Abuse

Presented in partnership by the Multnomah County Department of Human Services Mental Health & Addictions Services Division and Domestic Violence Coordination Office
Coordinated Responses to Survivors of Violence with SUDs // Project Partners

Project Leads:
- Multnomah County Domestic Violence Coordination Office
  - Annie Neal, Program Director
  - Shannon Rose, Program Specialist
- Multnomah County Mental Health and Addictions Services
  - Andrea Quicksall, Addictions Services Manager
  - Alicia Bartz, Senior Program Specialist

Partner Agencies:
- Bradley Angle
- Central City Concern
- Lifeworks NW
- Raphael House
- VOA Home Free

Program partners bring:
- Content expertise in the intersections of intimate partner violence & substance use disorders & in serving survivors across systems
- Technical assistance from the National Center on Domestic Violence, Trauma, & Mental Health
- A history of informal partnerships and collaboration, including a 4-year Byrne Grant Project
Domestic Violence & Recovery Peer Mentors

Mentors will:
- Work 1-on-1 with survivors
- Travel to/from DV programs for outreach and services
- Cross-train across disciplines

Goals include:
- Increase capacity of systems
- Increase access to services for survivors with SUDs
- Reduce stigma and barriers for this population of clients

CCC
1 FTE

Lifeworks NW
1 FTE

Coordinated Responses to Survivors of Violence with SUDs // Current Project Status
Coming Up:
- Hiring is underway for two Peer Mentors
- Training plan will be established
- Creation of re-occurring advisory meetings for all program partners

Needs & Desired Outcomes:
- Plan and resources for program/project evaluation
- Be able to demonstrate a set of best practices for survivors with substance use disorders
- Answer: What does it truly take to strengthen alliances and partnerships across these disciplines?
Research to Action Symposium: Substance Abuse

David Ross, MPH
Oregon Pediatric Improvement Partnership

April 10th, 2015
OPIP Mission

OPIP is dedicated to building health and improving outcomes for children and youth by:

1) Collaborating in **quality measurement and improvement** activities across the state;
2) Supporting **evidence-guided quality activities** in clinical practices;
3) Incorporating the **patient and family voice** into quality efforts; and
4) Informing **policies that support optimal health** and development for all children and youth.
OPIP Interests and Observations Related to Substance Abuse & Trauma Informed Approaches

- **Global Approach We Value**
  - Child health = Family health
  - Social determinants = HUGE impact on child health trajectory
  - Trauma informed – life experiences are being found to have enormous impacts on health and also on how one parent's impacts can transfer to children
  - Community solutions and approaches to getting families and teens in for screening that inform policy-level improvements

- **Pressure Points for Practices Right Now: Important Levers**
  - Adolescent well-visits
  - Adolescent substance abuse screening and brief intervention
  - Adolescent depression screening and follow-up (Depression and mental health issues can be highly correlated with substance abuse issues)
  - Early childhood development – acknowledging the importance of identifying issues early
OPIP Interests and Observations Related to Substance Abuse & Trauma Informed Approaches

- **Current interest in projects that fit our niche and need**
  - Implementing screening processes in primary care
    - Differences between screening for adolescents vs. screening for adults given privacy & confidentiality issues, work flow issues
    - Population based approaches with community-based partners like SBHCs
  - Incorporating resilience-building into mental health and substance abuse screening and follow up plans
  - Incorporating trauma informed approaches to addressing substance abuse/mental health in primary care
  - Identifying and addressing the policy level barriers to doing the right thing

- **Observations**
  - New field- interested in trying and learning about implementation of novel and untested concepts
  - Importance of strength based approach – Not just “sex, drugs and rock and roll”
  - Difficult area- screening for ACES in teens crosses into interesting territory
    - Mandatory reporting
    - Violates trust
  - Addressing difficulties in legal and reporting requirements when screening parents, on behalf of the child, in a primary care setting
Research Priorities, Central City Concern

Rachel Solotaroff, MD, MCR
Chief Medical Officer
Central City Concern
Who We Are

- Continuum of care to end homelessness and achieve self-sufficiency including housing, employment, peer support services, primary care, specialty addictions and specialty psychiatric care
- HEARTH: CBPR project with CCC staff, clients and academic researchers for past 5 years
- Nationally recognized models in recovery housing, supported employment and healthcare for the homeless
Current Projects

- **HEARTH:**
  - Housing and Biomarkers
  - Social Network Analysis
  - Acupuncture for chronic pain and addiction
  - Housing and Recovery

- **Other projects:**
  - Evaluation of integrated chronic pain/addictions program in primary care
  - Group visits for buprenorphine treatment in primary care
  - Naloxone for comprehensive opioid safety in primary care
Future Work

- Evidence base for Recovery Housing (with services):
  - Housing outcomes (eviction prevention, transitions to permanent housing)
  - Additional metrics (employment/income attainment, retention in treatment, health outcomes)
  - HUD funding to support collaborative research via The Research and Evaluation, Demonstrations, and Data Analysis and Utilization program (referred to as "HUDRD")
For more information, please contact:

- Name
  Title
  Contact information

- Name
  Title
  Contact information
Adolescent and School Health Program, Oregon Public Health Division

Liz Thorne, MPH Adolescent Health Policy and Assessment Specialist

Stefanie Murray, MPH School Mental Health Specialist
Current work related to substance abuse prevention

- Access to services, screening and education
  - School based Health Centers (SBHCs)
  - Screening for substance use within context of quality adolescent well visit

- Partnering with and supporting Addictions and Mental Health Division
  - SAMSHA SPF-SIG grant: binge drinking and prescription drug misuse

- Surveillance

- Focus on building on youth strengths, positive youth development
A few interests for the future...

- Prevention efforts grounded in positive youth development, resiliency
- Authentic youth engagement in prevention strategies
- Supporting healthy youth choices in retail marijuana environment
MOTIVATIONAL INTERVIEWING (MI)

- MI training
- MI coaching/supervision
- MI intervention design
- MI coding

[Member of the International Motivational Interviewing Network Trainers (MINT) since 2000. See wahabtraining.com for more details]
Wakeland* Substance Abuse Research

- Systems model of diversion and abuse of pain medicines
  - Project #1 focused on medical use, diversion, and nonmedical use (funded by Purdue Pharma)
  - Project #2 focused on nonmedical use, informal sharing, and transition to heroin use (NIH funded)
- Evaluation of Oregon’s prescription drug monitoring program (NIH funded)
  - Collaboration with OHSU (PI: Rick Deyo)
- Modeling policy alternatives for increasing patient access to Buprenorphine treatment
  - Funded by SAMHSA

* Systems Science Program
Team members include Alexandra Nielsen and Peter Geissert
CODA Research Team

- **Goal:** Use research outcomes to shape clinical practices in real time.
- Strong Substance Use Disorder Research Skills
- Areas of expertise:
  - Design, Implementation, Analyses, Evaluation
  - Recruitment and Retention
- Staffing: PhD (Epidemiology), DO (Internal Medicine & Addictions Medicine), MPH (Epidemiology), MPH (Biostatistics), MSW, NP, CMA, and Research Associate.
- Participation in NIH & Industry Randomized Clinical Trials, Community partner projects & Internal program evaluation.
CODA Research Current Projects

- Evaluation of *Supported Employment* Model
- Counseling intervention project with University of WA
- Marijuana cessation (NIDA)
- Implementation & Evaluation of MAT (medication-assisted treatment) within different care systems
- Efficacy of selected medications in opioid use disorder participants (Industry)
- Evaluation of internal treatment processes
CODA Research - Next Steps

- Identify barriers to treatment engagement & retention to meet unmet needs internally & between community partners
- Develop treatment curriculum appropriate for different MAT patients (especially XR-NTX & BUP) to improve treatment engagement & retention
- Identify champions supporting MAT – < ½ of opioid-use patients are referred to MAT – while conveying: addiction treatment is more than a pill, injection, or dose
- Implement stronger data monitoring processes, information sharing & feedback loops between community partners
- Modify treatment practices as indicated by data-driven research outcomes

CODA™
health - recovery - community
What we bring

Experience in:

- Transforming medical settings to address substance use
- Curriculum development and evaluation
- Training clinical team members
- Measuring implementation
- Designing tools in the electronic medical record
- Widely known dissemination via sbirtoregon.org website

John Muench, MD, MPH
Director of Behavior Health, OHSU Family Medicine

Jim Winkle, MPH
Research Associate, OHSU Family Medicine
Current and recent projects

2008 – 2013: Residency training grant (SAMHSA)
- 364 primary care residents trained in SBIRT
- 7 clinics implemented SBIRT
- Tens of thousands of patients screened for substance use
- 3 papers published and 2-3 forthcoming

2014 – current: Medical professional training grant (SAMHSA)
- 625 residents, social work students, counseling students, others
- Collaboration with PSU SSW and OSU counseling program
Ideas for future directions

Areas to investigate:

• Tablet based clinic workflows
• Fidelity of the brief intervention
• Which type of team member delivers most effective BI
• How best to screen for marijuana
• Adolescent patient outcomes after SBI