

Dear Community Partners to Address the Opioid Crisis:

First of all, a heartfelt thank you for being one of the nearly 400 community members that shared your time and input to enable us to focus on preventive measures to thwart the growing opioid crisis in our region. Your voice and insights are important and appreciated. Opioid related overdose accounted for over 70,000 deaths last year nationwide – more than the entire decade of the Vietnam War. The consequences locally and nationally mandate that we aggressively address this problem and, thankfully, the Metro Drug Commission and our community are actively involved in policy, prevention and rehabilitation.

This email is to provide follow up information to all that were registered with a valid email for the November 14 event. Since that event, we have collated your input, met with the Trinity Health Foundation Board and developed three new initiatives for our 2019 grant cycle that will open at the end of January (www.trinityfound.org).

This email and its attachment contain:

- 1) A summary of the Delphi Study of 25 local experts responding to basic questions on the root cause of the opioid problem (who is most susceptible and what is the first encounter with opioids for most who are ultimately addicted).
- 2) A summary and the raw data in a spread sheet (attachment) of
 - a. The roundtable participants input on root causes (the voting prior to seating at the event on topics from the Delphi study.)
 - b. The summation of the ideas and voting on those for potential approaches to prevention that resulted from the roundtable discussion and voting process at the end of the gathering.
- 3) Introduction of the new Trinity 2019 Initiatives that will solicit proposed projects for 2019.

I. Summary of the Experts Delphi Study

This study asked two questions: 1) Who is susceptible? and 2) How do addicts first get exposed to opioids?

(Our purpose is prevention at the root cause, not rehabilitation – we simply do not have sufficient funds to impact the resulting calamity and its 92% recidivism rate, but are seeking to prevent it from happening in the first place.)

Who is susceptible?

According to the Delphi Experts, these are their responses in order of importance: 1-ACEs (Adverse Childhood Experiences), 2-Family history of addiction, 3-Addictive tendencies, 4-Chronic pain, 5-Mental illness, 6-Acute event, 7-Socio-economic conditions, 8-Lack of knowledge, 9-Chronic stress.

How are people first exposed and initiated into addiction?

According to the Delphi experts, these are their responses in order of importance:

1-Over prescription, 2-Abuse of prescribed opioid medications, 3-Availability of inexpensive street drugs, 4-Isolation, 5-Societal expectations of no pain, 6-Oxycontin formulation leading to overuse, 7-Leftover medications being accessed by others, 8-Peer pressure, 9-Cannabis legalization

2. Summary of the Opioid Roundtable participants input

Participants voted twice, first on root causes as the event began and then on ideas for projects to address the root causes at the end of the morning. The raw data is in the attached spreadsheet.

Root causes of opioid addiction (topics from Delphi group voted on by event participants:

1-ACEs, 2-Mental Illness, 3-Socio-economic conditions, 4-Addictive tendencies, 5-Family history, 6-Chronic pain, 7-Lack of Knowledge, 8-Chronic stress, 9-Acute events

Projects and topics to prevent the opioid problem (ideas from the roundtable and votes from the participants organized into broad topics and ranked by votes):

1-Education, 2-Social services, 3- ACEs prevention, 4- Community Building, 5- Faith-based initiatives, Others.

3. Resulting 2019 Trinity Grant Initiatives related to addiction prevention

As a result of your input, our desire to make an impact and our decision to seek preventive answers, Trinity will open up three new initiatives for our 2019 grant cycle.

An overview is listed below but finalized guidelines and grant submission instructions will be available on our website at the end of January at www.trinityfound.org.

1) Opioid Education/Awareness

Trinity seeks proposals that will raise the general understanding within the community of the hazards of using opioids for pain relief and recreation. Education about the hazards of opioids, alternative pain relief substances and emerging treatment alternatives would protect our community from this growing problem. Target audiences can range from the public at large to programs for elementary and secondary education and might range from a strategy of classroom education to PSAs (Public Service Announcements).

2) Neighborhood/Community Strengthening

Isolation - we are increasingly "bowling alone". Trinity seeks proposals that will encourage relationships to be grown in community (define community in the broadest sense that meets your organizations expertise – family, church, neighborhood, etc.) How do we connect people to people? Healthy relationships may be the greatest antidote to addiction. Ideas from green space enhancement, community clubs for purposeful neighborhood interaction, community school

family involvement and church neighborhood outreach are examples of the general areas that would be of interest under this initiative.

3) ACE Prevention

Trinity seeks proposals that will focus on reducing ACEs in our community and/or improve the resilience of our population. Successful projects would target one or more ACEs with specific measurement of metrics providing evidence of the effectiveness of the effort. Projects as wide ranging as improving parenting skills, community awareness of ACEs and their impact, early recognition and support of children experiencing ACEs, etc. will be encouraged.

Again, thank you for your participation and involvement in this process for the betterment of our community. If you have comments or questions, do not hesitate to call or email them to me for a considered response.

To your good health!

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TALLIES FROM ROUNDTABLE

TOPIC	GREEN (good idea)	RED (not so good idea)
BIRTH CONTROL		
Free Birth Control (particularly LARC)	27	18
Remove barriers, provide resources for birth control	28	16
Birth control van to give easier access to long acting contraception	27	45
TREATMENT		
Treatment including holistic treatment	81	0
Integrated Modalities for in-patient and out-patient pain management	90	0
Longer term treatment; in-patient & out-patient; wrap around services; community not isolated; family; once released - provide add'l support	64	4
EARLY EDUCATION		
Early childhood education and intervention through schools, community and organizations	91	2
Early education start earlier - 3rd grade	39	2
Interventions w/ youth: Begin young; Mobile platform to address social determinants of health; school-based intervention; behavioral intervention	37	3
Education of elementary children, parents, teachers of how ACES can impact a child's development & potential risk for addiction	53	0
School Program Reform starting in kindergarten, prevention, education	86	0
Expansion of community schools; after-school programs	83	5
EDUCATION		
Education for children and youth	75	0
High School, Early (age 6), D.A.R.E. Just Say No; treatment options; capacity/cost; doctor/patient	32	33
Expansion of community schools	46	13
Standard curriculum that can deal with ACES	41	1
Target evidence programs for children identified with high ACES scores	62	2
Intergenerational education	25	1
Use schools as community centers- expand on "Community School Strategy" to all 85 schools	97	0
Community Schools: wrap around services; screening to identify high-risk students; open to entire community; trauma counseling; mental health training	109	0
General education on overdoses and their risks: death (fundes, fundees, physicians, clinical providers, coaches, teachers, etc.)	19	3
ACES/TRAUMA		
Programs that are holistic in educating on the effects of trama in the shools with parents and children, while using consistent strategies to address trauma across all 3 groups	78	3
Trauma Informed Preschool Programs: 0-5 year olds; school age also; Address the needs of children with ACES	87	1
Implement (CBITS) Cognitive Behavioral Intervention groups in schools to help children with trauma; learn how to manage stress in high risk areas	75	0
Support for children with ACES history (school curriculum, peer support, mentorship, positive reinforcements)	78	0
Trauma Mentioring Institute (TMI): focus on ACES; mentoring; local school based; support/training for teachers	99	0
More community awareness around ACES and trauma informed care as well as research on best practices for treating those things	71	1
Trauma-Informed Therapeutic Preschool for children (ages 0-kindergarten) dealing with ACES; utilizing child-parent psychotherapy	73	5
Grief, loss, trauma	38	2
Identification, clinical help, positive social interaction, coping skills, intervention	235	0
ACES	37	2
ACES Training Hub- for all ages (birth to adult)	85	1
MEDICAL		
Standard Curriculum that can deal with ACES, University Medical provider training to set better standards of care for people	41	1
Educating parents at birth	62	2
Early education of parents through pediatrician	23	28
Treatment for addicted adults so children learn dangers	62	2

TALLIES FROM ROUNDTABLE

TOPIC	GREEN (good idea)	RED (not so good idea)
INSURANCE		
Insurance reform	88	0
Reimbursements; payment for alternatives; make opioids more expensive	90	0
Remove barriers for other options for pain mgmt.; Insurance Coverage: PT, Behavioral Health, etc.	96	0
LEGAL		
Integrate social work with justice system	83	1
Cut off supply; regulate prescriptions	6	10
Coordination between doctors and other medical personnel; fund education prevention programs; non profit child care with emphasis on children of addicted parents	70	0
A law to support/allow insurable companies to pay for pain management alternatives to opioids	85	5
FAITH-BASED INITIATIVES		
Faith-Based Communities	51	1
Fund faith-based initiatives to mobilize churches to implement programs; paid staff	72	4
Faith-Based Coalition for Prevention - Mentorships for children, adults; Parenting	61	0
Encourage church participation in "Celebrate Recovery" type programs to include community and increase awareness	85	0
PUBLIC DISPOSAL OF DRUGS		
Public: disposal of drugs; other options/reduce stigma	67	0
Educate about medication "take back"; disposal	33	6
Easily accessible; multiple locations	23	23
Issue lock boxes with scripts	10	42
MEDICAL EDUCATION		
Providers: understanding current state; patients: understanding pain is okay/expected - other options	67	0
Community based health and wellness programs offering on-site education, information, awareness	32	5
Community Building: Medical professionals- outreach, training, engagement	43	1
Education: genetic predisposition to addiction; need for community; safe use of opioids	45	9
Education on what pain is and isn't; Expectations around pain and pain associated with certain treatments	82	1
Education: prescribers, users, user support group	60	2
Funding and education for holistic/wellness/ alternative medicine or onopharmphological options; work w/ insurance companies to cover	139	0
Education Campaign on Cause of Pain	35	6
PARENTAL EDUCATION		
Address gateway drugs: vaping, marijuana, etc.	30	22
Family engagement; generational problem	73	0
Parental education and intervention through community and faith-based organizations	67	2
Collaborative effort to provide support to mothers of addicted infants	95	0
Early childhood development parent training because better parent/child relationships lead to better outcomes	49	3
Curriculum/Program for people raising elementary/middle-school aged children that includes community collaboration and education to allow kids to feel pain	62	0
PR/MARKETING/MEDIA		
Resource Directory-repository for available resources both to educate stakeholders and clients	20	13
PSA - Opioids are not long term solution to pain - alternative solutions-given recovery/counseling services with prescriptions	51	3
Mobilize local media to become part of solution (reducing fear in kids vs. increasing it)	12	16
PSA to decrease stigma social media campaign using locally recognizable people	48	2
Local promotion of connectivity because a closer, more connected community is a more resilient, healthier community	71	0
Marketing and promotional campaign to raise awareness and availability of resources	14	3
Community marketing awareness campaign to warn of dangers	24	13
Direct consumer advertisement	22	0
TV programs on early intervention/prevention with education		

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TOPIC	GREEN (good idea)	RED (not so good idea)
SOCIAL SERVICES/RESOURCES		
Harm reduction for those actively engaged in opioid use	29	11
Intensive in home intervention with families already identified to be a risk (DCS, incarceration, courts)	52	2
Housing to continue treatment for I.V. drug users to include medical support and case management	51	4
Housing - long-term, safe, affordable, sober living	91	7
Reduce stigma on commiunity level - education/community wide support with business, government, non-profit, - employment/empowerment	66	0
Limiting isolation of individuals, including seniors	36	6
Reinforce addiction recovery progress with housing, food stamps, peer support, etc.	70	7
Connect people post treatment to housing/employment/transportation and community opportunities - a community center	92	3
Coordinate a formalized system for community services that will complement and not duplicate services	68	4
Change the scope of who can help in mentoring programs to join with people in recovery	81	4
Fund social workers to interact with all kids at high-risk or isolated; connect with right agencies; Middle School- crucial time	88	0
In-Home visitations; programs funded such as: peer support groups "Mom Power"	62	2
Mental Health Screenings in schools	68	3
Support for disconnected individuals (mental health, loss of job, teenage pregnancy, etc.)	55	1
Fund Metro Drug Council to provide more outreach programs	116	2
Fund more behavioral health resources	73	5
Communication between service providers and allocation of resources	42	1
Marshall and connect community resources by creating and funding non-profit	28	7
COMMUNITY BUILDING		
Community-based education and collaboration (platforms for planning and action)	37	
Education: support for local community forums (i.e. addiction awareness/networks/online resources center)	35	1
Community building for youth - Engage: citizenship training in youth programs at school	74	2
Change Center, access/walk, parks, safe play areas for children, community for those in recovery	82	0
Build community through peer to peer training in elementary schools to bring awareness and develop relationships that will help to deter addictions	71	0
Fund workshops to build community amongst young adults and others to share common experiences, combat isolation and to bring awareness to show them they aren't alone (particularly high-risk groups)	72	0
Community engagement to teach about community and offering ways to teach kids to play again	37	1
Community Activities: development and funding for programs for kids and adults. Where the need is common interests, variety and events	46	0
Create an organization whose charge is to be the community conveners of ideas/model creation and drive initiatives	19	4
Community sports-based programs	22	0
Get community back: greenways/playgrounds/adult workout. Change laws about unsupervised kids	63	1
Community resource center to fill gaps, identify needs and combine resources	58	3
Community centers for kids and parents to connect throughout their community	99	0
Cultivate community	41	1
Create think tank group to develop ideas, poll the community, then fund ideas	5	34
Town hall meetings to create sense of community around issues and provide family education	27	19
Return to physical design of neighborhoods to enhance connection	82	4
Create cell-phone free initiative in restaurants to focus on communication building. Provide funding to incentivize restaurant to give discounts to customers observing phone-free dining	9	18
Community-sponsored program for the Arts for at-risk kids	54	6
Community collaboration	32	1
Community building for adults	90	0
Relationship mentoring and building community through personal connections, neighborhood groups. Utilize existing resource groups and be a catalyst to current groups/ministries	45	1
Provide peer-related support group to those on the journey	25	7