Data to Action

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Executive Summary

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Substance Use Assesment I 2022

CATALYST
AT THE UNIVERSITY OF WISCONSIN STOUT

ONEIDA COUNTY
— HEALTH DEPARTMENT —

Oneida County Community Assessment of Substance Use

Executive Summary

Prepared by:

CATALYST
AT THE UNIVERSITY OF WISCONSIN STOUT

Prepared for:

Oneida County Health Department

Survey created by:

Catalyst at UW-Stout

Report Distributed to:

Oneida County Health Department

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Introduction

The Oneida County Health Department (OCHD) in collaboration with the Northwoods Community, Outreach, Prevention, and Education Coalition (COPE), specifically the Oneida County Alcohol and Other Drug Subcommittee, and the Northwoods Tobacco Free Coalition (NWTFC), was awarded grant funding to complete this project. The Overdose Data to Action Community Prevention Grant (OD2A) is a cooperative agreement from the Centers of Disease Control and Prevention (CDC). The goal of this funding opportunity is to strengthen and enhance the capacity of communities to respond to substance use and abuse issues to prevent morbidity and mortality associated with opioid overdose, use disorder and other opioid-related harms. Secondary funding was secured through the Tobacco Prevention and Control Community Intervention Grant (TPCP) through the Wisconsin Department of Health Services (DHS). This funding is intended to support communities in Wisconsin to engage in tobacco prevention and control advocacy efforts that result in decreasing tobacco-related disparities through engagement and collaboration among populations impacted by tobacco-related disparities and organizations that work with these populations.

This project consisted of four phases. In phase one of this project, publicly available data was compiled and analyzed to define the scope of opioid, tobacco, alcohol and other substance concerns specific to Oneida County, Wisconsin. This data was then used to develop a set of survey questions to gather data directly from Oneida County residents to both further define substance concerns and to develop strategies to address issues. A Community Survey on Substance Use was developed and administered to Oneida County residents. Survey items focused on asking residents to define their perceptions of substance use prevalence within the community and to define causes and comorbidities of substance use. This data was then used to inform a set of focus group questions that were designed to further define the problem and to ultimately develop strategies to curb substance concerns.

The overall purpose of this project is to collect community-level data related to opioid and tobacco and other substance related use and misuse and to develop strategies to address these issues within the community by centering the voices of those most impacted in a participatory data collection process.

The authors believe the data support the following results.

To better understand this complex issue, public data on perceptions and attitudes towards substance use was collected. The results will help inform a strategic planning process for selecting targeted community prevention and response strategies. This report outlines the key findings from this assessment.

Mental Health and Substance Use Connection

Untreated mental health concerns are a risk factor for an increased likelihood of developing a substance use concern. In fact, many individuals who develop a substance use disorder are also diagnosed with a mental illness, and vice versa. Youth are particularly vulnerable. Although addiction can happen at any time during life, drug use typically starts in adolescence. This is also a time when the first signs of mental illness often appear.[*]

50%

of those who experience a mental illness during their lives will also experience a substance use disorder and vice versa.[*]

Assessment Participants Reported

EVIDENCE

- Mental health, stress, anxiety and depression as the top factors that contribute to substance use concerns.

- Most people with a substance use disorder started with, or have a mental health disorder.

- Stigma around getting treatment for a mental health disorder leads to self-medication with substances.

- Limited coping skills or substance use acts as a coping mechanism.

- Substance use and addiction can contribute to the development of mental illness.

Oneida County - 2019 Youth Risk Behavior Survey[**]

50% of middle and high school students reported having experienced significant problems with anxiety in the past 12 months.

49% of high school students reported having engaged in binge drinking.

21% of 8th graders reported currently using vaping products (past 30 days).

Top Substances of Concern in Oneida County

General Community

Methamphetamine
Alcohol Consumption
Binge Drinking
Prescription Opioids
Vaping/E-Cigarettes

People Under the Age of 21

Vaping/E-Cigarettes
Alcohol Consumption
Binge Drinking
Methamphetamine
Prescription Opioids

Treatment Services - The Human Service Center[***]

807
Residents received mental health services in Oneida County - 2021

471
Residents received substance use services in Oneida County - 2021

675
Of the 1,461 people provided mental health services, 675 received crisis assessment in Forest, Oneida and Vilas Counties - 2021

Mental Health and Substance Use Connection

Assessment Participants Identified Next Steps

Increase availability and access to mental health services

- Consider telehealth in rural communities.

- Explore opportunities to integrate mental health and substance use services within the criminal justice system, specifically jail based treatment.

- Implement or enhance recovery supports and housing.

Employ early interventions for mental health, anxiety, and depression to prevent substance use disorder

- Consider community-based programs that treat and support the entire family.

- Implement education programs related to mental health coping and resiliency skill development, especially in youth.

- Expand public safety and first responder diversion models that connect individuals experiencing mental health and/or substance use concern to treatment and recovery support services.

Reduce stigma around seeking treatment for mental health issues

- Implement a comprehensive community awareness campaign that focuses on mental health and substance use.

- Authentically engage youth in the development and implementation of prevention and intervention strategies.

- Authentically engage the recovery community in the development and implementation of prevention and intervention strategies.

- Integrate community and school-based strategies that normalize having conversations about mental health.

*NIH - Common Comorbidities with Substance Use Disorders Research Report: https://nida.nih.gov/publications/research-reports/common-comorbidities-substance-use-disorders/part-1-connection-between-substance-use-disorders-mental-illness
**WI Youth Risk Behavior Survey: https://dpi.wi.gov/sspw/yrbs
***WI DHS - County Services Dashboard: https://www.dhs.wisconsin.gov/mh/county-services-dashboard.htm

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Oneida County Substance Use Assessment | 2021

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Access to Care

Limited access to mental health and substance use services is a barrier for seeking treatment. Specific barriers to rural communities was cited in the assessment. For example, stigma for seeking services, financial constraints, distance between services, and varying knowledge of available resources. The assessment also identified barriers to increasing available resources, such as, inability to attract and retain treatment professionals and insufficient insurance reimbursement for individual or group recovery programs.
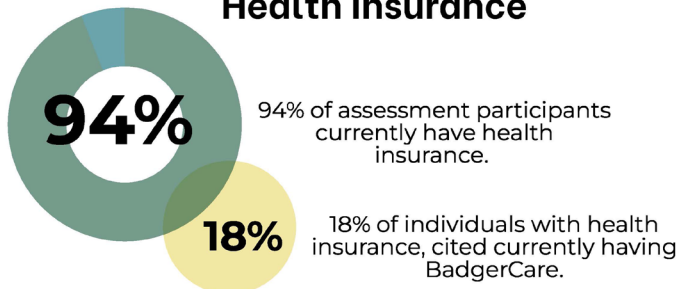
93%

of people aged 12 or older in 2020 who needed substance use treatment in the United States did not receive treatment at a specialty facility (approximately 38.4 million people)[**]

Common Reasons Nationally for Not Seeking Treatment[**]

- Having no health care coverage
- Not being able to afford the cost of treatment
- Not finding the type of treatment they wanted
- Being concerned that neighbors or community would have a negative opinion of them

Health Insurance

94%

94% of assessment participants currently have health insurance.

18%

18% of individuals with health insurance, cited currently having BadgerCare.

EVIDENCE

Assessment Participants Reported

- Varying communication and collaboration between intervention and response organizations impacts continuity of care.

- Limited access to recovery support groups for families.

- Limited availability of treatment and recovery resource options.

- Stigma was the number one cited reason preventing people from seeking treatment services.

- Limited financial resources was the second most cited reason preventing people from seeking treatment services.

- Long waitlists to get into available resources.

- Complicated and lengthy process of establishing with a provider.

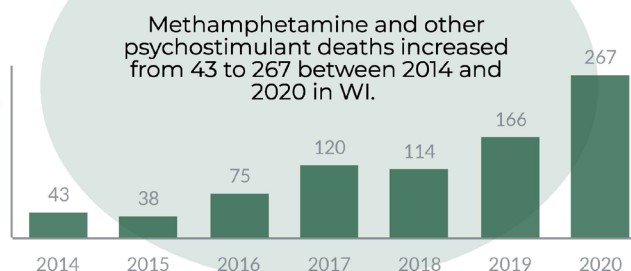- Lack of knowledge of the available resources and programs.

The Burden of Overdose and Suicide in Wisconsin

Supporting innovative ways to expand access to care, including technologies and non-clinical support services is one strategy that makes up a comprehensive approach to prevention.[***]

78%

The number of overdose deaths from all substances among Wisconsin residents increased 78%, 2014–2020[*]

WI Annual Methamphetamine and other Psychostimulants Deaths[*]

Methamphetamine and other psychostimulant deaths increased from 43 to 267 between 2014 and 2020 in WI.

2014	2015	2016	2017	2018	2019	2020
43	38	75	120	114	166	267

40%

The suicide rate among Wisconsin residents increased by 40%, 2000–2017 [***]

Access to Care

Assessment Participants Identified Next Steps

Expand access to mental health and substance use treatment services.

- Increase availability of telehealth and other virtual services.
- Improve family recovery support opportunities.
- Increase access to recovery services within the criminal justice system.
- Increase awareness and availability of harm reduction strategies.
- Support innovative ways to expand access to care, including peer-led and other non-clinical support services.

Increase awareness and coordination of linkages to care

- Improve consistent continuity of health care and social services among diverse community sectors.
- Form cooperative relationships between treatment providers, recovery resources, public safety and public health organizations to increase referrals and engagement in evidence-based treatment.
- Improve organizational procedures for collaborative transition planning.
- Employ peer support services within the treatment team.
- Provide recovery support for family members.
- Increase the public's knowledge of risk factors, recognition of warning signs, and preparedness to support and responds.

Provide social supports to help reduce individual barriers to care

- Increase access to transportation resources.
- Increase access to sober living and affordable housing.
- Improve access to affordable childcare.
- Increase access to internet and broadband services.
- Increase social supports through peer recovery services.

*WI Department of Health Services. Interactive Dashboards, https://www.dhs.wisconsin.gov/stats/aoda.htm
**2020 National Survey on Drug Use and Health https://www.samhsa.gov/data/sites/default/files/reports/rpt35325/NSDUHFFRPDFWHTMLFiles2020/2020NSDUHFFR1PDFW102121.pdf
***Suicide in WI-Impact and Response https://www.dhs.wisconsin.gov/publications/p02657.pdf
***Overdose Data to Action - CDC https://www.cdc.gov/drugoverdose/od2a/index.html

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Access to Recovery Resources within the Criminal Justice System

Providing access to treatment and recovery resources for those experiencing substance use concerns and co-occurring disorders within the criminal justice system was cited as a protective factor. In fact, strengthening partnerships between public health, public safety and behavioral health supports a continuum of care and has been shown to reduce recidivism and criminal justice costs.*

63% ----- 44%

of those in jail have a substance use disorder *****

of those in jail have a mental illness *****

Individuals experiencing substance use concerns and mental illness that are involved in the criminal justice system creates unique opportunity, as well as challenges, in addressing the dual concerns of public safety and public health.****

Barriers to successful reentry into the community jeopardize recovery

- Lack of healthcare
- Limited job skills
- Limited education
- Lack of stable housing
- Poor connection to community treatment and recovery resources

Treatment Court and Diversion Programs Help
Save Lives, Save Money, Reduce Crime, and Connect Individuals to Treatment **

81%

of Wisconsin Treatment Alternatives and Diversion Program (TAD) graduates did not have any new convictions after 3 years***

Treatment Courts and Diversion Programs are pre-charge or post-charge deferred prosecution agreements. They are designed to divert individuals outside of the traditional criminal justice process and provide the opportunity for treatment and case management.*

Assessment Participants Reported

EVIDENCE

- Limited treatment and recovery support services within the Oneida County criminal justice system.

- Limited general public knowledge of treatment programs and recovery services available to individuals involved in the criminal justice system.

- Lack of availability of alternative to incarceration and diversion programs for individuals experiencing substance use and mental health disorders.

- Lack of treatment and recovery resources within the jail.

- Limited reentry programs for those transitioning from jail back into the community.

$6,000

The average savings per drug court participant**

Access to Recovery Resources within the Criminal Justice System

Assessment Participants Identified Next Steps

Employ evidence-based strategies to address underlying substance use and/or co-occurring mental health disorder.

- Expand law enforcement diversions and first responder models that identify high-risk individuals and connect them to treatment and recovery support services.

- Offer alternative to incarceration and diversion programs for nonviolent drug convictions.

- Expand evidence-based treatment programs and recovery supports within the jail.

- Implement effective reentry programs to support successful transition.

Expand and strengthen partnerships between public safety, first responders, public health, and behavioral health organizations.
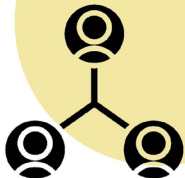
- Improve coordination of public health and public safety efforts to ensure continuity of care.

- Use shared data to inform prevention and intervention activities.

- Increase awareness of substance use and overdose concerns and evidence-based approaches by public safety and first responders.

Expand availability of peer recovery support services.

- Expand peer support services as a component of a comprehensive continuum of substance use services.

- Increase availability of sober living and recovery housing.

- Provide recovery support services for the entire family.

- Reduce barriers to care by providing social supports for individuals experiencing substance use disorder and their families. For example: transportation, housing, food, clothing.

*BJA's Comprehensive Opioid, Stimulant and Substance Abuse Program: https://www.cossapresources.org/
**National Association of Drug Court Professionals: https://www.nadcp.org/treatment-courts-work/
***WI TAD Programs: https://cjcc.doj.wi.gov/initiative/tad-0
****SAMHSA; U.S. Department of Justice: https://www.samhsa.gov/criminal-juvenile-justice/about
*****US Department of Justice: Substance Use - https://bjs.ojp.gov/content/pub/pdf/dudaspji0709.pdf; Mental Health - https://bjs.ojp.gov/content/pub/pdf/imhprpji1112.pdf

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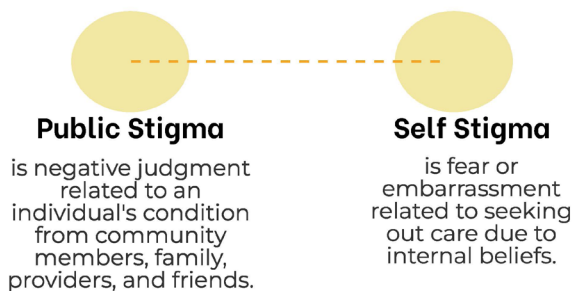
Stigma

The stigma and shame connected with substance use creates barriers for getting help for individuals and their families. Stigma refers to the mark of disgrace and negative ways in which society views behaviors that are seen as different and less desirable than what is considered the acceptable norm. It occurs when people are shamed, discredited, or treated differently because of a characteristic or condition. Specific stigma in rural communities was cited throughout the assessment. These include lack of anonymity and labels associated family history of substance and recidivism.

#1

Stigma was the number one reported factor preventing people from seeking mental health and substance use treatment in Oneida County

Two Principle Types of Stigma*

Public Stigma
is negative judgment related to an individual's condition from community members, family, providers, and friends.

Self Stigma
is fear or embarrassment related to seeking out care due to internal beliefs.

1 in 14

Americans report experiencing a substance use disorder. Addiction can happen to anyone. There are many factors that contribute to substance use concerns.**

Assessment Participants Reported

EVIDENCE

- Stigma around seeking treatment for mental health concerns is strong and can lead to self-medication with substance use.

- Lack of knowledge and understanding of harm reduction strategies including, medication assisted treatment and Naloxone.

- Limited general community and response agency knowledge of what recovery looks like.

- High levels of recidivism lead to compassion fatigue of response agencies.

- Lack of anonymity is prominent in rural communities.

- Varying engagement of recovery community in prevention, intervention and response strategies.

Top Factors Cited by Assessment Participants that Contribute to Substance Use Concerns

- Mental Health Disorder
- Depression, Stress, Anxiety
- Lack of Support
- Peer Pressure
- Family Cycle of Addiction
- Past Trauma

Recovery is Possible**

Substance use disorders (SUD) are chronic and treatable medical conditions. Individuals suffering from addiction have trouble controlling their substance use even though they know it is harmful. Recovery takes more than just willpower. There are safe and effective treatment options available.

Stigma

Assessment Participants Identified Next Steps

Authentically engage populations where the need and potential impact are the greatest.

- Grow partnership and collaboration among diverse organizations and agencies.
- Deliberately engage affected community members, including youth, in the identification, decision making, advocacy and systems change efforts to improve health outcomes.
- Build leadership within the recovery community and overall capacity for systems change.
- Center the voices of those most impacted by the issue by uplifting, trusting, and valuing lived experiences through storytelling.
- Increase availability of peer recovery support services.

Implement a community awareness campaign on substance use, mental health, and recovery.

- Share and celebrate stories of recovery in a variety of formats.
- Hold community events that facilitate positive interaction and connection between diverse groups of people.
- Provide educational trainings for students, general public and professionals that highlight a variety of substance use prevention and intervention topics.
- Grow awareness of recovery resources, treatment options and treatment formalities.

Words Matter: When Talking About Addiction[***]

Using person-first language helps reduce stigma and negative bias when discussing addiction. For example, stigma-reducing language means saying something like, "individual with a substance use disorder" instead of "addict". Using these terms helps focus on recovery by expressing that the individual experiencing a substance use concern "has" a problem, rather than "is" the problem.

*RHI Hub https://www.ruralhealthinfo.org/toolkits/mental-health/4/stigma
**Stigma Reduction - CDC https://www.cdc.gov/stopoverdose/stigma/index.html
***National Institute on Drug Use - Words Matter https://nida.nih.gov/drug-topics/addiction-science/words-matter-preferred-language-talking-about-addiction

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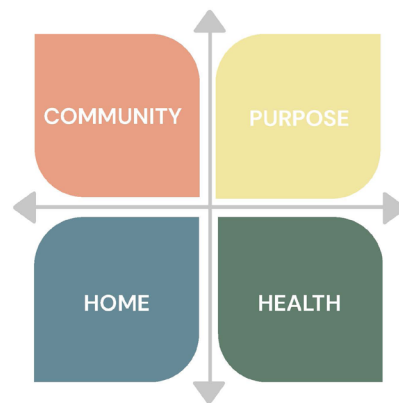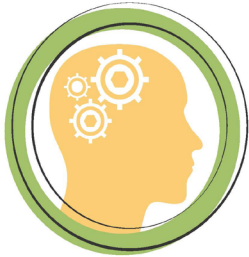
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Social and Community Connectedness

Social and community connectedness was identified as an effective community strategy for supporting individuals who are experiencing substance use concerns. Connectedness is a social determinant of health.* In fact, a strong sense of belonging and social connection is associated with improved physical health and mental well-being. It can lower levels of anxiety and depression and helps people recover from disease faster. On the other hand, social exclusion is associated with declines in physical and psychological health.**

Four Dimensions of Recovery

High Social Connections Lower Rates of Anxiety and Depression

COMMUNITY

PURPOSE

HOME

HEALTH

The process of recovery is supported through relationships and social networks that provide support, friendship, love and hope. This often involves family and peer support.***

Benefits of Peer Recovery Support Services*

- Improve relationship with treatment provider
- Increased treatment retention
- Improved access to social supports
- Decreased emergency service utilization
- Reduce substance use
- Greater housing stability

Assessment Participants Reported

EVIDENCE

Addiction is isolating.

Individuals experiencing substance use concerns...

- Feel disconnected from or not accepted by the general community.
- Experience barriers to connecting with friends and family.
- Addiction within the family structure and lack of family supports impacts youth social connectedness.

Misunderstanding of substance use, addiction and recovery.

- Varying or limited engagement of the recovery community in decision making processes and response efforts.

Varying or limited recovery supports and groups.

- Limited community and criminal justice based recovery resources impacts reentry planning and support.
- Varying collaboration among service organizations in community intervention and response initiatives.

Harmful social norms around substance use are a risk factor associated with a higher likelihood of developing a substance use concern.

- Substance use, like alcohol and tobacco, are socially acceptable at community events.
- Social access to a variety of substances from family and/or peers increases availability, initiation and makes it difficult to abstain.
- Environmental factors, like family history of substance use and addiction, impacts cycles of addition.

Social and Community Connectedness

Assessment Participants Identified Next Steps

Establish a recovery oriented system of care.

- Increase engagement and collaboration among the populations impacted by substance use and mental health concerns and organizations and agencies that work with these populations.

- Grow capacity within the recovery community to participate on the treatment team through peer recovery support services.

- Improve collaboration among public health, public safety/first responders and behavioral health to assure continuity of care.

- Increase awareness and availability of individual and family focused recovery supports and groups.

- Expand peer recovery and other social supports to help cope with life stressors (financial, social, emotional, etc.).

- Establish community recovery organizations.

Employ early interventions for high-risk groups.

- Implement systems for identification and early interventions with high-risk groups, specifically among LGBTQ youth and those involved with the criminal justice system.

- Establish adult and peer mentor programs for youth.

- Implement jail-based recovery support re-entry programs.

- Employ peer recovery support services.

Establish community events that promote helpful social norms.

- Expand community events that focus on building relationships among neighbors.

- Implement sober community events.

- Expand family and youth focused activities.

- Expand community enrichment activities that build resiliency skills.

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