The Opioid Epidemic: You Spoke, We Listened

In January 2022, we listened to Wisconsinites explain the profound impact of the opioid epidemic and potential strategies to save lives. Our goal was to gather big-picture input from a broad group of stakeholders to inform our use of future opioid settlement funds. Here's an overview of who we heard from and the powerful messages they shared.

How We Collected Input



518

Listening Sessions

Attendees

113 Speakers



Survey

326 Respondents

897 Comments

Participants*

269 Providers and stakeholders

Families/friends of individuals with substance use disorder

71 Individuals with lived experience

*Participants may have identified with more than one group, or no groups

Summary:

Invest across the continuum, from prevention to recovery.

ADDRESS ROOT CAUSES

Address the social determinants of health. Improve access to mental health services. Bolster family stability. Reduce trauma.

ENHANCE HARM REDUCTION

Maintain and expand harm reduction strategies, including needle exchange, safe use sites, increased access and use of naloxone/NARCAN®, and fentanyl test strips.

SUPPORT RECOVERY

Support individuals in recovery with targeted wraparound services. Provide direct support to families with a loved one with substance use disorder.

PREVENT PROACTIVELY

Provide evidence-based education, especially in K-12 schools, as well as in communities. Consider including the voices of those with lived experience to reduce stigma in communities.

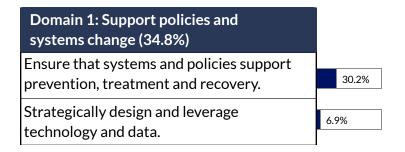
EXPAND TREATMENT OPTIONS

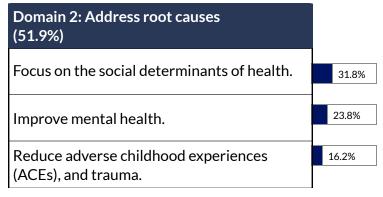
Increase the accessibility and availability of all forms of treatment that follow best practices. Ensure equity in the location and delivery of treatment options.

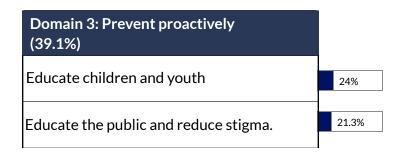
Essential: Support policies and systems change.

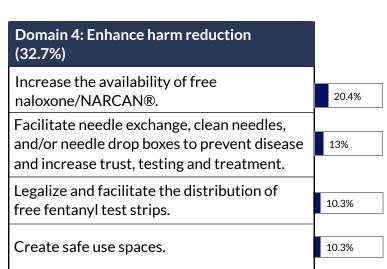
Opioid Settlement Dollars: Summary of Themes

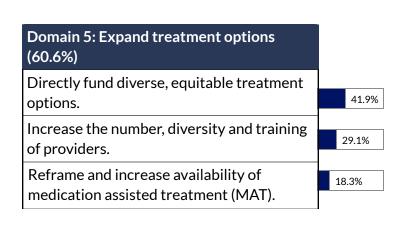
Percentages indicate the proportion of all participants (among both the listening sessions and survey) that gave a comment fitting that theme.

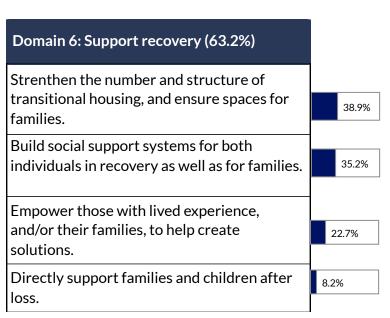










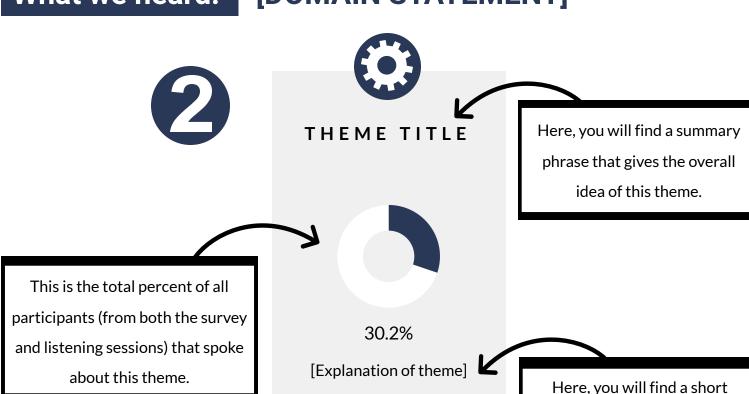


How to read and understand this document.



What we heard:

[DOMAIN STATEMENT]



3

HEAR from Wisconsinites

At the bottom of each page, you will find one or more quotes from participants related to themes presented on that page.

["QUOTE FROM PARTICIPANT HERE."]

explanation of the theme, that

gives more details and

includes specific things that

some participant(s) mentioned.

1. Support policies and systems change.



Ensure that Systems and Policies Support Prevention, Treatment and Recovery



30.2%

Prevention, treatment and recovery from substance use is a direct function of policies and systems. Wisconsinites recommend policy changes that would better facilitate these goals. Specific ideas shared include jail diversion, jail rehabilitation, legalizing fentanyl test strips, policing reform, sentencing reform, reparations, drug court, insurance reimbursement changes, and/or removing policy barriers that prevent post-incarceration employment and housing.



Strategically Design and Leverage Technology and Data



6.9%

Use technology (including data systems, communications systems, telehealth, and/or research practices) to prevent, diagnose, and treat substance use disorder more efficiently, reach more people with more high-quality services, and/or research best practices in the state that work for our people and specific circumstances.



"Please work towards decriminalize substance use to provide individuals with substance use disorder the ability to safely know what is in the substances they are using, access fentanyl test strips, safe injection sites, clean needles, and other needed supplies. Substance use disorder is a medical condition. Placing more stigma on substance use through felony convictions and incarcerations only serve to further punish individuals and push they away from resources and services that support individuals in accessing hard reduction and treatment."

"Diversion from incarceration is crucial in reducing repeat offenders and offering them treatment as an alternative to jail. Instead of bringing an addict to jail to detox, offer the choice of going to a facility and staff this facility with doctors and therapists etc. We do not have enough affordable places to go for help."

What we heard: 2. Address root causes.



Focus on the Social Determinants of Health



31.8%

Focus on the social determinants of health, including safe and affordable housing, access to affordable healthcare, a livable wage, an environment free from discrimination, etc., as they are critical to preventing, treating and recovering from substance use disorder.



Improve Mental



23.8%

Mental health and access to related services are inextricably linked to substance use. Increase the number and financial accessibility of mental health providers and services.



"It would be great if we could finally start to address the social determinants of health, using health/prevention funds to partner and support workforce development, child care, living wages, affordable medical care, etc. particularly in rural areas. Lets not make these dollars so specific to opioid misuse, that ignores that fact that the 'Deaths of Despair' are all interrelated and systemic improvements are the way we can impact them all."

"I also think there is a huge link between trauma, depression, anxiety and chronic pain... Behavioral health providers should be included because it is... about behavior change and individuals often need to make changes. More affordable training opportunities in Wisconsin for behavioral health providers to become certified."

"[My] son [was] diagnosed in [a] hospital treatment program for mental illness. Had been heroin user. [He had been] sober for 9 months... last three with mental illness. On discharging from [the] facility, [he] was told to get an outpatient provider to oversee mental illness drugs. He ha[d] no previous primary doctor; when he called, they said he needed to see a primary first and it would be 5 months to get in... They tried to get him in sooner, [but] he died 10 days before that appointment... Need to bridge that gap!"

What we heard: 2. Address root causes (cont'd).



Reduce ACEs and Trauma



16.2%

Reduce adverse childhood experiences (ACEs) and other forms of trauma. Trauma, in all its forms, is a significant underlying contributor to substance use behaviors. Preventing and healing from trauma must be part of any long-term solution frameworks.



"We know from research that substance abuse is very much rooted in mental health and experiencing trauma, adverse childhood experiences such as sexual abuse, domestic violence, and other trauma. We need to increase awareness of and access to mental health services... and scholarships for higher education in mental health."

"Prevention in the form of 'Just Say No' style educational campaigns doesn't make a big dent... To reduce maladaptive trauma-coping in adults we need less traumatized children and better supported families. This includes a lot of elements: child welfare reform, expanded access to parenting classes and child care, social/emotional wellness curricula in schools, too many things to list."

"Invest in proven evidence based programs such as Triple P- Positive Parenting Program and Home Visiting such as Healthy Families America, Parents as Teachers, Nurse Family Partnership. Putting funding in place early in a child lifespans to prevent traumatic events from ever occurring is the smartest way to invest in the future of Wisconsin families."

3. Prevent proactively: provide education and reduce stigma.



Educate Children and Youth



24.0%

Provide evidence-based education to K-12 school aged kids, either within their school, community and/or directly with families.

Include the voices of individuals with lived experience, empowering them and making it more "real" for students.



Educate the Public and Reduce Stigma



21.3%

Many people have misconceptions about the process and nature of addiction. Educate the community in evidence-based ways and directly target the stigma that often prevents people from seeking help. Involve those with lived experience and their families in that process.



"DEFINITELY NOT AN AD CAMPAIGN! Or trite educational programs written and implemented to cover school/program mandates verses real curriculum/community infused programs created with trauma informed care, factual information about drugs and neurobiology, and real world access to CURRENTLY OPEN prevention centers to get help when needed. Vetted and trained speakers/presentations. Decreased misogyny and increased awareness to create safety for all genders/sexualities is needed."

"I think an increase of trained (SUPST certified) prevention specialists are needed in rural counties... The state could fund an infrastructure for a regional position who could help investigate/assess prescribing practices...

We need to get to the bottom of prescribing practices and to educate patients at the time they are prescribed."

4. Enhance harm reduction.



Naloxone/ NARCAN®



20.4%

Increase the availability of medications such as naloxone and NARCAN® and training on how to use them.

Make them free and widely accessible.



Needle Exchange



13.0%

Facilitate needle
exchange, clean needles,
and needle drop boxes
to prevent disease and
increase trust, testing,
and treatment
awareness.



Safe Use



10.3%

Create safe spaces
where individuals can
use, while being
monitored, connected
to services (when
ready), and helped
quickly when needed.



Fentanyl Test Strips



10.3%

Make fentanyl test strips legal and widely available for free from locations that are accessible 24/7.



"If you want to make an immediate impact on saving lives, direct a large portion of this money to go to jails... [to] allow the treatment of opiate withdrawals... [with] suboxone and methadone..."

"Keep giving NARCAN® to those people who are still using or anyone who feels they can benefit from having NARCAN®... Keep funding needle exchanges... Fentanyl test strips for drugs... should be given with clean needles. I understand it's a lot but it would literally save lives."

5. Expand treatment options.



Directly Fund Equitable Treatment Options



41.9%

There are not enough treatment facilities. Existing facilities are unaffordable and only allow short-term stays. Directly fund treatment (in-patient and/or outpatient), healthcare, in-home care and/or mental healthcare for individuals struggling with substance use disorder who cannot afford treatment or have no/insufficient insurance. Establish facilities equitably, ensuring that some serve non-English speakers and establish a presence in rural counties.



Strengthen and Diversify the Workforce



29.1%

Increase the number and diversity of staff who work in substance use disorder and mental health. Provide training and education to existing providers (e.g. SUD providers, MH providers, primary care providers, etc.) to prevent SUD, ensure identification of SUD/MH disorders, and provide adequate training to treat both SUD and mental health.



"Rural Wisconsin communities need funding to expand treatment services. Distance between treatment providers, lack of transportation, waitlists, and limited resources create disparities in our communities."

"Treatment practitioners (specialized doctors and psychiatrists as well as counselors) are desperately needed to help those that struggle with addiction. Training incentives, bonus incentives to practitioners adding these services may help."

What we heard: 5. Expand treatment options (cont'd).



Reframe and Expand Medication Assisted Therapy (MAT)



18.3%

Reframe the way that MAT is discussed to reduce stigma. Increase access to MAT (e.g. buprenorphine, Suboxone, Sublocade, naltrexone, Vivitrol, methadone). May include funding mobile MAT units, and providing MAT in homeless shelters and jails. Empower current nonprofits to do some of this work.



"My son went to 15 different (mostly "high end" in patient) treatment centers and never stayed sober for more than a few months. It wasn't until he went to an outpatient long term treatment center... and was prescribed suboxone that he has been able to stay sober. He now has [#] months of sobriety and has a fulltime job, where he has received a promotion and a raise. MAT was the game changer, and it doesn't just keep that one person from using, it keeps them out of jail, out of (costly) treatment and makes them able to contribute to society."

"Each county also needs to have at least one MAT provider with high capacity to meet the demand... These provider groups need ample peer specialists as part of the team. Mobile MAT programs for rural areas, that provide full-service harm-reduction. Mobile MAT and harm reduction teams in major cities to travel to the county jails, homeless shelters,

homeless encampments."

6. Support recovery.



Long-term Transitional Housing



38.9%

Increase the number and financial accessibility of transitional housing, recovery housing, and/or sober living facilities. Ensure these facilities provide at least 6 -12 months or more of wraparound services/support and that they do NOT have overly stringent non-relapse policies. Ensure that some of those options facilitate housing for families.



Build Social Support Systems



35.2%

Social support is vital for successful treatment of individuals struggling with substance use, as well as their families. Build social support programs targeting both, (e.g. training family members, creating hotlines, programs like GRASP or GROUPS, peer counselors, homebased nurse-family partnership, treatment based in home communities, etc.).



"[We need] peer-support funding and programs. Overdose response teams with peer support services to go to the home after a nonfatal overdose to follow up with individual. Many states have implemented rapid response teams that are partnered with treatment providers."

"When I was going through my active addiction I felt like my secrets were too scary to share with anyone. So I think that for starters, I would've benefited from peer support... [because] when you're in active addiction you feel alone... it's just I felt like I had nowhere to go. Treatment was there but you can't always get into treatment, can't always afford to get into treatment. So if you take anything from what I just said people need somewhere to go that doesn't take money for help."

What we heard: 6. Support recovery (cont'd).



Empower Those with Lived Experience to Help Create Solutions



22.7%

Empower individuals in recovery as well as surviving family members to be a vital part of the solution. For example, employ more of them as recovery coaches or peer supports, and invest in their SUD-focused organizations.



Support Child Survivors



8.2%

Support child survivors who lost a primary caregiver to substance use disorder. Children who have lost a parent or primary caregiver to substance use are more likely to experience instability and substance use themselves. Support these children, both materially and financially.



"Recovering individuals can be empowered to advise and mentor folks finding themselves in addiction."

"Children that have suffered the tragic loss of parents and family members to addiction are in desperate need of education and counseling. These children are confused and hurt and their self esteem is damaged. They are the future in our fight against this epidemic. We need to use our resources to fund programs that will give them the tools they need to fight this head on."