FIGHTING TO END THE OPIOID OVERDOSE CRISIS

Each day more than 115 people in the United States die of opioid overdoses. Communities across the nation have been devastated by this escalating crisis, including the areas where Metro IAF organizes. Our affiliates in New York, Ohio and other states are developing strategies and taking action to save lives and help end this epidemic – and in doing so are challenging prevailing responses that have done more harm than good. We are urging far greater reliance on harm reduction, evidence-based treatment, and recovery support, and far less reliance on arrests, prosecution and incarceration of those with substance use disorders.

HIGHLIGHTS & VISION FOR EXPANSION


Long Island CAN (LI-CAN) expands campaign to engage leaders and institutions in every sector to respond effectively to the overdose crisis

Before taking action to hold others accountable, LI-CAN leaders began with their own member congregations. LI-CAN provided training and education for more than 300 clergy and lay leaders on opioid use disorder (OUD) and effective responses to OUD, held listening campaigns in which congregants and community members shared stories around addiction, trained congregational leaders in how to use naloxone (Narcan) to reverse opioid overdoses, and identified resources that congregations can make available to families dealing with addiction. LI-CAN's institutions are becoming places where families facing addiction can find not stigma and judgment but acceptance and practical help.

LI-CAN leaders then formed an Opioid Action Team to engage leaders in other sectors and encourage the most effective practices in each. The team met with and presented proposals for action to a wide variety of public and private sector leaders: Governor Cuomo and state agency heads, state legislative leaders and members of Congress, hospital executives, medical professionals, county executives, police commissioners, district attorneys, corrections officials, school superintendents and others. One theme ties this work together: the urgent need to seize every opportunity in the lives of drug users – emergency room or doctor visit, arrest, drug treatment, pastoral counseling and others – to help users get off the road to overdose and on a path to recovery.
REMOVING BARRIERS AND EXPANDING ACCESS TO LIFE-SAVING TREATMENT

LI-CAN Wins Expansion of Medication-Assisted Treatment

The 20,000 or more people on Long Island with opioid use disorder are at great risk of overdose. But while OUD can be lethal, it can also be effectively treated. The medical standard of care for OUD involves the use of one of three FDA-approved drugs proven to reduce cravings and allow users to lead productive lives and focus on recovery. This approach (medication-assisted treatment, or MAT) dramatically reduces relapse and overdose rates. Yet accessing MAT from qualified, caring providers on Long Island and in most of the country remains difficult. Instead of evidence-based treatment, most opioid users who do receive treatment go to “rehab” programs that rely primarily on abstinence counseling – an approach that results in relapse to opioid misuse for 90% of OUD patients. With the growing prevalence of ultra-potent synthetic opioids like fentanyl in the supply of street drugs, relapse is all too often fatal. LI-CAN’s highest priority since early 2018 has been removing barriers to MAT in the medical profession, the criminal justice system, insurer practices, the treatment system and elsewhere – a challenge LI-CAN is attacking from multiple angles:

- **Recruiting and training medical professionals**: 100+ medical leaders and practitioners attended LI-CAN’s March 2018 conference on MAT, which included training needed to receive a federal waiver to prescribe buprenorphine. The largest hospital network on Long Island held a similar event for 150 doctors after encouragement from LI-CAN. LI-CAN is partnering with doctors’ organizations to expand the recruitment of MAT-trained professionals in 2019.

- **Changing the way hospitals respond to opioid overdoses**: After discussions initiated by LI-CAN, Long Island’s two largest hospital chains began prescribing buprenorphine to OUD patients in hospital emergency departments, and linking patients to follow-up MAT care and recovery resources. All of Long Island’s major hospitals are now considering adoption of these life-saving practices.

- **Making MAT the standard of care for opioid addiction in prisons, jails and diversion programs**: LI-CAN’s team, including a key leader whose son died of an overdose after years of interaction with the criminal justice system, is taking action to change the way the system responds to addiction. One key demand: provide adequate medical care – namely MAT – to opioid users in prisons and jails and to those in court-mandated diversion programs. LI-CAN briefed policymakers on the medical, moral and legal standards for OUD treatment in these settings, and won commitments from Suffolk County officials to work with LI-CAN to meet these standards.

- **Making effective addiction treatment a priority in Governor Cuomo’s third term**: In an April 2018 meeting with Governor Andrew Cuomo, Metro IAF leaders won a commitment from the governor to work with LI-CAN to improve the state’s treatment system. Persistent, in-depth follow up by LI-CAN leaders has produced major breakthroughs: 1) A commitment by the state to require licensed drug treatment programs to provide MAT for OUD patients, rather than relying exclusively on abstinence counseling; 2) Commitment that the state will stop insurance companies from requiring OUD patients to obtain prior authorization for MAT services; and 3) Expanded state funding for MAT. LI-CAN seeks implementation of these and other measures by New York State in 2019.

REFORMING THE JUSTICE SYSTEM, DE-CRIMINALIZING ADDICTION

Building on major criminal justice reform victories, Greater Cleveland Congregations (GCC) pushes to expand & improve diversion programs for drug users in the justice system.

After an in-depth listening campaign in their communities, GCC leaders are focusing on diverting drug offenders from prison and jail and into effective drug and mental health treatment programs, and on ending racial disparities in drug courts and diversion programs. This is especially critical in Cuyahoga County, where seven people died in summer 2018 in the county jail, almost all of them from overdoses or suicides. A recent report by a team of U.S. Marshals highlighted the jail’s abysmal failure to provide even basic mental health and addiction care. In tackling these challenges, GCC will draw upon productive relationships built and commitments won from top power players in the justice system, including County Prosecutor Michael O’Malley and Administrative Judge John Russo. These relationships have already yielded significant victories, including creation of a new Civil Rights Division in the county prosecutors’ office. GCC’s growing multi-racial base of grassroots leaders, including many families directly affected by the opioid crisis, will drive this work forward.